



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0001135-00 - 2016/09

230.75

Surrey Place Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
110 SE LEE AVE	8/1/2014-7/31/2015	Number of Beds: 60	Superior: 0
LIVE OAK, FL 32060	Days in CR 365	Maximum: 21,900	Standard: 366
County: Suwannee [61]	First Used : 2016/09	Max Annualized: 21,900	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 19,952	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,079	Inflation
Current Class North Small	Initial CR? False	Medicaid: 11,144	FY Index: 1.36305434
Class at 1/94: North Small	Medicaid Utilization	55.85405%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.10502%	Cost: 1.05905862
Open Date: 01/21/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/21/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 01/21/1988	Low Occupancy Adjustment Factor:	115.21780%	DC Sem Index: 1.30450000
Med # Active Date: 06/01/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257109			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	618,321	763,515	642,180	430,381		2,454,397	
1a	Audit Adjustments							
2	Cost Per Diem	55.4847	68.5135	57.6256	38.6200		220.2438	
3	Cost Per Diem Inflated	58.7615	71.9614	61.0289				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	58.7615	71.9614	61.0289	38.6200		230.3718	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	62.5704		62.4156				
7	Provider Target Rate	66.0511		65.8877				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	58.7615	71.9614	61.0289	13.6500		205.4018	
12/13	Medicaid Adjustment Rate		0.4739	0.4019				
14	Prospective Per Diem 11	58.7615	72.4353	61.4308	13.6500		206.2776	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Surrey Place Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/21/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,820,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/01	Type:	Fixed	80% Capital(1):	2,498,342	16.7588
Indexed Asset Value	3,122,927	<60% of Base:	False	20% ROE(2):	624,585	0.6537
FRVS Base Asset:	1,765,380	Interest Rate:	12.0100%	Insurance Cost(3):	17,204	0.8623
Occup Adj Factor	0.9000	Chase Rate:	10.5000%	Taxes Cost(3):	40,292	2.0194
ROE Factor	0.020630	Amortization Rate:	12.0100%	Home Office(3):	13,629	0.6831
		Interest Only:	False	Replacement(3&4):	82,755	0.0000
		Yearly Payment:	330,316	Total FRVS PD:		20.9773

(1) 80% Capital (\$2,498,342) amortized at 12.0100 % for 20 years Principal & Interest of \$330,316 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$16.7588

(2) 20% ROE (\$624,585) times the ROE factor (0.020630) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.6537

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1987	Current RS PBS:	29,423
Comparison Bed	60	Effective PBS Limitation	54,155
			1,765,380

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7615	58.7615	2.6660	56.0955
Direct Care	72.4353	72.4353	3.2864	69.1489
Indirect Care	61.4308	61.4308	2.7871	58.6437
Property	13.6500	20.9773	0.9517	20.0256
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.6528
Supplemental Rate				8.1814
Totals	206.2776	213.6049	9.6912	230.7479

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/01	1,804,061	0.00	0.9007	0.9007		60	80.10	1,765,380	1,765,380	1
1988/07		0.10	0.5899	0.5899		60	80.10	1,766,422	1,778,760	
1989/01	7,955	0.10	0.5899	0.5899		60	80.10	1,775,419	1,789,260	
1989/07		0.20	0.5899	0.5899		60	80.44	1,777,514	1,801,380	
1990/01		0.20	0.5899	0.5899		60	80.44	1,779,611	1,810,440	
1990/07		0.30	0.5899	0.5899		60	80.44	1,782,761	1,821,120	
1991/01		0.30	0.5899	0.5899		60	80.44	1,785,916	1,831,800	
1991/07		0.40	1.4932	1.4932		60	80.44	1,796,583	1,859,160	
1992/01		0.40	2.0117	2.0117		60	80.44	1,811,040	1,896,540	
1992/07		0.50	1.8152	1.8152		60	78.19	1,827,477	1,930,980	
1993/01		0.50	1.7710	1.7710		60	78.19	1,843,659	1,965,180	
1993/07		0.60	1.5329	1.5329		60	76.45	1,860,615	1,995,300	
1994/01		0.60	1.6983	1.6983		60	76.45	1,879,575	2,029,200	
1994/07		0.70	1.5991	1.5991		60	76.65	1,900,615	2,061,660	
1995/01		0.70	1.5812	1.5812		60	76.65	1,921,651	2,094,240	
1995/07		0.80	1.5250	1.5250		60	74.78	1,945,095	2,126,160	
1996/01		0.80	1.7228	1.7228		60	74.78	1,971,902	2,162,820	
1996/07	9,869	0.90	1.3294	1.3294		60	77.87	2,005,365	2,191,560	
1997/01		0.90	1.4109	1.4109		60	77.87	2,030,829	2,222,460	
1997/07		1.00	1.0917	1.0917		60	70.86	2,053,000	2,246,700	
1998/01		1.00	1.1663	1.1663		60	70.86	2,076,944	2,272,920	
1998/07	18,414	1.00	1.0794	1.0794		60	66.24	2,117,777	2,297,460	
1999/01		1.00	1.4499	1.4499		60	66.24	2,148,483	2,330,760	
1999/07	45,615	1.00	1.2299	1.2299		60	71.85	2,220,522	2,359,440	
2000/01	9,841	1.00	1.3356	1.3356		60	71.85	2,260,020	2,390,940	
2000/07		1.00	1.1129	1.1129		60	71.85	2,285,172	2,417,520	
2001/01		1.00	1.2976	1.2976		60	71.85	2,314,824	2,448,900	
2001/07		1.00	0.9615	0.9615		60	71.85	2,337,081	2,472,420	
2002/01	10,224	1.00	1.0301	1.0301		60	72.13	2,371,379	2,497,860	
2002/07		1.00	0.8337	0.8337		60	72.13	2,391,149	2,518,680	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/01	11,630	1.00	1.3271	1.3271		60	75.17	2,434,512	2,552,100	
2003/07		1.00	1.1664	1.1664		60	75.17	2,462,908	2,581,860	
2004/01		1.00	1.1103	1.1103		60	75.17	2,490,254	2,610,540	
2004/07	71,024	1.00	0.8378	0.8378		60	75.92	2,582,141	2,632,440	
2005/01		1.00	0.8595	0.8595		60	75.92	2,604,335	2,655,060	
2005/07	17,647	1.00	0.7364	0.7364		60	74.00	2,641,160	2,674,620	
2006/01		1.00	0.9068	0.9068		60	74.00	2,665,110	2,698,860	
2006/07		1.00	0.8133	0.8133		60	72.08	2,686,785	2,720,820	
2007/01		1.00	1.0133	1.0133		60	72.08	2,714,010	2,748,360	
2007/07		1.00	1.1050	1.1050		60	75.91	2,744,000	2,778,720	
2008/01		1.00	0.8556	0.8556		60	75.91	2,767,478	2,802,480	
2008/07		0.95	0.6104	0.6104		60	70.06	2,783,527	2,819,580	
2009/01		0.95	1.3268	1.3268		60	68.65	2,818,613	2,857,020	
2009/07		0.90	0.6841	0.6841		60	68.65	2,835,967	2,876,580	
2010/01		0.90	0.8643	0.8643		60	68.65	2,858,028	2,901,420	
2010/07		0.85	0.7107	0.7107		60	60.74	2,875,293	2,922,060	
2011/01		0.85	0.9198	0.9198		60	61.34	2,897,772	2,948,940	
2011/07		0.80	0.9028	0.9028		60	61.34	2,918,700	2,975,580	
2012/01	9,050	0.80	0.3865	0.3865		60	62.56	2,936,775	2,987,100	
2012/07		0.75	0.9417	0.9417		60	62.56	2,957,517	3,015,240	
2013/01		0.75	0.4901	0.4901		60	62.56	2,968,389	3,030,000	
2013/07	21,669	0.70	0.6196	0.6196		60	55.87	3,002,932	3,048,780	
2014/01		0.70	0.8564	0.8564		60	55.87	3,020,935	3,074,880	
2014/07		0.65	1.2383	1.2383		60	58.35	3,045,251	3,112,980	
2015/01		0.65	0.7571	0.7571		60	63.65	3,060,237	3,136,560	
2015/09		0.60	1.5736	1.5736		60	63.65	3,089,132	3,185,940	
2016/09		0.55	1.9890	1.9890		60	55.85	3,122,927	3,249,300	

Message Code:

1 Per Bed Standard Limitation



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Signature HealthCARE of Palm Beach

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4405 LAKEWOOD ROAD	8/1/2014-7/31/2015	Number of Beds: 120	Superior: 0
LAKE WORTH, FL 33461	Days in CR 365	Maximum: 43,800	Standard: 366
County: Palm Beach [50]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 38,292	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 11,576	Inflation
Current Class South Large	Initial CR? False	Medicaid: 18,602	FY Index: 1.36305434
Class at 1/94: South Large	Medicaid Utilization	48.57934%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	87.42466%	Cost: 1.05905862
Open Date: 07/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 07/01/1984	Low Occupancy Adjustment Factor:	110.56336%	DC Sem Index: 1.30450000
Med # Active Date: 06/01/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257117			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	987,218	1,519,443	1,050,539	856,250		4,413,450	
1a	Audit Adjustments							
2	Cost Per Diem	53.0705	81.6817	56.4745	46.0300		237.2567	
3	Cost Per Diem Inflated	56.2048	85.7923	59.8098				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	56.2048	85.7923	59.8098	46.0300		247.8369	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.6817		61.4289				
7	Provider Target Rate	59.8348		64.8461				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	56.2048	85.7923	59.8098	13.6500		215.4569	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	56.2048	85.7923	59.8098	13.6500		215.4569	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Signature HealthCARE of Palm Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	None	80% Capital(1):	4,732,521	12.5176
Indexed Asset Value	5,915,651	<60% of Base:	True	20% ROE(2):	1,183,130	0.6192
FRVS Base Asset:	3,420,000	Interest Rate:	10.5000%	Insurance Cost(3):	28,093	0.7337
Occup Adj Factor	0.9000	Chase Rate:	10.5000%	Taxes Cost(3):	89,952	2.3491
ROE Factor	0.020630	Amortization Rate:	10.5000%	Home Office(3):	27,386	0.7152
		Interest Only:	True	Replacement(3&4):	26,851	0.0000
		Yearly Payment:	493,442	Total FRVS PD:		16.9348

(1) 80% Capital (\$4,732,521) amortized at 10.5000 % for 20 years Interest of \$493,442 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$12.5176

(2) 20% ROE (\$1,183,130) times the ROE factor (0.020630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6192

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.2048	56.2048	2.5500	53.6548
Direct Care	85.7923	85.7923	3.8924	81.8999
Indirect Care	59.8098	59.8098	2.7135	57.0963
Property	13.6500	16.9348	0.7683	16.1665
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.5647
Supplemental Rate				8.1814
Totals	215.4569	218.7417	9.9242	232.5636

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	3,502,123	0.00	1.9179	1.9179		120	21.37	3,502,123	3,352,680	
1985/01		0.10	1.1471	1.1471		120	21.37	3,502,123	3,391,080	
1985/10		0.10	0.8522	0.8522		120	21.37	3,420,000	3,420,000	1
1986/01		0.20	0.8299	0.8299		120	21.37	3,420,000	3,448,440	
1986/07		0.20	0.2974	0.2974		120	21.37	3,420,000	3,441,840	
1987/01		0.30	1.0091	1.0091		120	44.00	3,428,282	3,503,400	
1987/07		0.30	0.9007	0.9007		120	44.00	3,435,693	3,530,760	
1988/01		0.40	0.9007	0.9007		120	50.00	3,446,946	3,559,440	
1988/07		0.40	0.5899	0.5899		120	47.28	3,453,939	3,557,520	
1989/01		0.50	0.5899	0.5899		120	47.28	3,462,698	3,578,520	
1989/07		0.50	0.5899	0.5899		120	37.69	3,469,698	3,602,760	
1990/01		0.60	0.5899	0.5899		120	37.69	3,478,113	3,620,880	
1990/07		0.60	0.5899	0.5899		120	37.69	3,486,548	3,642,240	
1991/01		0.70	0.5899	0.5899		120	37.69	3,496,413	3,663,600	
1991/07		0.70	1.4932	1.4932		120	37.69	3,521,456	3,718,320	
1992/01		0.80	2.0117	2.0117		120	37.69	3,521,456	3,793,080	5
1992/07		0.80	1.8152	1.8152		120	39.28	3,560,293	3,861,960	5
1993/01		0.90	1.7710	1.7710		120	39.28	3,638,166	3,930,360	
1993/07		0.90	1.5329	1.5329		120	51.71	3,685,356	3,990,600	
1994/01		1.00	1.6983	1.6983		120	51.71	3,744,200	4,058,400	
1994/07		1.00	1.5991	1.5991		120	56.36	3,804,074	4,123,320	
1995/01		1.00	1.5812	1.5812		120	56.36	3,864,224	4,188,480	
1995/07		1.00	1.5250	1.5250		120	64.49	3,923,153	4,252,320	
1996/01		1.00	1.7228	1.7228		120	64.49	3,990,741	4,325,640	
1996/07		1.00	1.3294	1.3294		120	59.48	4,043,794	4,383,120	
1997/01		1.00	1.4109	1.4109		120	59.48	4,100,848	4,444,920	
1997/07		1.00	1.0917	1.0917		120	56.00	4,145,617	4,493,400	
1998/01		1.00	1.1663	1.1663		120	56.00	4,145,617	4,545,840	5
1998/07	30,039	1.00	1.0794	1.0794		120	51.62	4,266,494	4,594,920	
1999/01		1.00	1.4499	1.4499		120	51.62	4,266,494	4,661,520	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07	76,050	1.00	1.2299	1.2299		120	68.08	4,453,790	4,718,880	
2000/01	7,596	1.00	1.3356	1.3356		120	68.08	4,461,386	4,781,880	5
2000/07		1.00	1.1129	1.1129		120	68.08	4,571,184	4,835,040	
2001/01		1.00	1.2976	1.2976		120	68.08	4,630,500	4,897,800	
2001/07		1.00	0.9615	0.9615		120	68.08	4,675,022	4,944,840	
2002/01		1.00	1.0301	1.0301		120	68.08	4,723,179	4,995,720	
2002/07	32,011	1.00	0.8337	0.8337		120	68.75	4,794,567	5,037,360	
2003/01		1.00	1.3271	1.3271		120	65.01	4,858,196	5,104,200	
2003/07		1.00	1.1664	1.1664		120	65.01	4,914,862	5,163,720	
2004/01		1.00	1.1103	1.1103		120	65.01	4,969,432	5,221,080	
2004/07	34,266	1.00	0.8378	0.8378		120	61.88	5,045,332	5,264,880	
2005/01		0.95	0.8595	0.8595		120	61.88	5,086,527	5,310,120	
2005/07	75,222	0.95	0.7364	0.7364		120	59.82	5,197,334	5,349,240	
2006/01		0.90	0.9068	0.9068		120	59.82	5,239,749	5,397,720	
2006/07		0.90	0.8133	0.8133		120	55.44	5,278,104	5,441,640	
2007/01		0.85	1.0133	1.0133		120	55.44	5,323,564	5,496,720	
2007/07		0.85	1.1050	1.1050		120	58.34	5,373,568	5,557,440	
2008/01		0.80	0.8556	0.8556		120	58.34	5,410,350	5,604,960	
2008/07		0.80	0.6104	0.6104		120	59.26	5,410,350	5,639,160	5
2009/01		0.75	1.3268	1.3268		120	58.92	5,490,870	5,714,040	
2009/07		0.75	0.6841	0.6841		120	58.92	5,519,044	5,753,160	
2010/01		0.70	0.8643	0.8643		120	58.92	5,552,434	5,802,840	
2010/07		0.70	0.7107	0.7107		120	51.95	5,578,526	5,844,120	
2011/01		0.65	0.9198	0.9198		120	46.65	5,606,816	5,897,880	
2011/07		0.65	0.9028	0.9028		120	46.65	5,634,722	5,951,160	
2012/01		0.60	0.3865	0.3865		120	52.95	5,647,302	5,974,200	
2012/07		0.60	0.9417	0.9417		120	52.95	5,678,020	6,030,480	
2013/01		0.55	0.4901	0.4901		120	52.95	5,692,757	6,060,000	
2013/07	45,880	0.55	0.6196	0.6196		120	52.47	5,757,145	6,097,560	
2014/01		0.50	0.8564	0.8564		120	52.47	5,780,663	6,149,760	



Florida Agency for Health Care Administration
Office of Medicaid Cost Reimbursement Planning and Finance
Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 7/31/2015

0 001136-00 - 2016/09

232.56

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	56.96	5,816,457	6,225,960	
2015/01		0.45	0.7571	0.7571		120	52.10	5,835,229	6,273,120	
2015/09		0.45	1.5736	1.5736		120	52.10	5,874,370	6,371,880	
2016/09		0.40	1.9890	1.9890		120	48.58	5,915,651	6,498,600	

Message Code:

- | | |
|---|----------------------------------|
| 1 | Per Bed Standard Limitation |
| 5 | Uncorrected Licensure Deficiency |

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 001136073120150801201403142016113124



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0001416-00 - 2016/09

208.92

Florida Baptist Retirement Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : Church

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1006 33RD ST	1/1/2014-12/31/2014	Number of Beds: 24	Superior: 0
VERO BEACH, FL 32960	Days in CR 365	Maximum: 8,760	Standard: 366
County: Indian River [31]	First Used : 2016/09	Max Annualized: 8,760	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 8,354	Total: 366
Control: Nonprofit : Church	Unaudited	Medicare: 450	Inflation
Current Class South Small	Initial CR? False	Medicaid: 3,957	FY Index: 1.34193004
Class at 1/94: South Small	Medicaid Utilization	47.36653%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.36530%	Cost: 1.07573004
Open Date: 01/01/1955	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1955	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 07/30/2008	Low Occupancy Adjustment Factor:	120.60565%	DC Sem Index: 1.30450000
Med # Active Date: 07/30/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	205,179	317,801	241,049	18,519		782,548
1a	Audit Adjustments						
2	Cost Per Diem	51.8522	80.3136	60.9171	4.6801		197.7630
3	Cost Per Diem Inflated	55.7790	85.2474	65.5304			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	55.7790	85.2474	65.5304	4.6801		211.2369
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	64.2354		94.2892			
7	Provider Target Rate	67.8087		99.5343			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500		
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807			
10	Target Rate Class Ceiling	75.1765		88.3937			
10a	New Provider Target Limitation	81.3110		89.8897			
10b	Base for line 10a	77.0262		85.1528			
11	Lesser of 5,7,8,10, 10a	55.7790	85.2474	65.5304	4.6801		211.2369
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	55.7790	85.2474	65.5304	4.6801		211.2369
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Rate Semester 09/01/2016 through 08/31/2017

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208.92

Florida Baptist Retirement Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/30/2008		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	None	80% Capital(1):	214,610	1.6135
Indexed Asset Value	268,263	<60% of Base:	True	20% ROE(2):	53,653	0.1545
FRVS Base Asset:	0	Interest Rate:	0.0000%	Insurance Cost(3):	16,294	1.9504
Occup Adj Factor	0.9000	Chase Rate:	6.0000%	Taxes Cost(3):	0	0.0000
ROE Factor	0.022710	Amortization Rate:	6.0000%	Home Office(3):	0	0.0000
		Interest Only:	True	Replacement(3&4):	29,323	0.0000
		Yearly Payment:	12,721	Total FRVS PD:		3.7184

(1) 80% Capital (\$214,610) amortized at 6.0000 % for 20 years Interest of \$12,721 divided by annual available days (8760) divided by Occup. Adj. (0.90) = \$1.6135

(2) 20% ROE (\$53,653) times the ROE factor (0.022710) divided by annual available days (8760) divided by Occup. Adj. (0.90) = \$0.1545

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	10,669
Comparison Date: 01/01/1972	Current RS PBS:	54,155
Comparison Bed 24	Effective PBS Limitation	256,056

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.7790	55.7790	2.5307	53.2483
Direct Care	85.2474	85.2474	3.8676	81.3798
Indirect Care	65.5304	65.5304	2.9731	62.5573
Property	4.6801	3.7184	0.1687	3.5497
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	211.2369	210.2752	9.5401	208.9165

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 001416-00 - 2016/09
208.92

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2008/07	590,508	0.00	0.6104	0.6104		24	17.10	256,056	256,056	1
2009/01		0.10	1.3268	1.3268		24	17.10	256,056	1,142,808	
2009/07		0.10	0.6841	0.6841		24	17.10	256,056	1,150,632	
2010/01		0.20	0.8643	0.8643		24	17.10	256,056	1,160,568	
2010/07		0.20	0.7107	0.7107		24	17.10	256,056	1,168,824	
2011/01		0.30	0.9198	0.9198		24	17.10	256,056	1,179,576	
2011/07		0.30	0.9028	0.9028		24	17.10	256,056	1,190,232	
2012/01		0.40	0.3865	0.3865		24	27.48	256,254	1,194,840	
2012/07		0.40	0.9417	0.9417		24	27.48	256,736	1,206,096	
2013/01		0.50	0.4901	0.4901		24	35.47	257,142	1,212,000	
2013/07		0.50	0.6196	0.6196		24	35.47	257,656	1,219,512	
2014/01		0.60	0.8564	0.8564		24	46.04	258,764	1,229,952	
2014/07		0.60	1.2383	1.2383		24	46.04	260,373	1,245,192	
2015/01		0.70	0.7571	0.7571		24	63.22	261,753	1,254,624	
2015/09		0.70	1.5736	1.5736		24	63.22	264,636	1,274,376	
2016/09		0.80	1.9890	1.9890		24	47.37	268,263	1,299,720	

Message Code:

1 Per Bed Standard Limitation

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 001416123120140101201406262015110645



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0002400-00 - 2016/09

261.24

Village Place Health and Rehab Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2370 HARBOR BLVD	1/1/2014-8/31/2014	Number of Beds: 104	Superior: 0
PORT CHARLOTTE, FL 33952	Days in CR 243	Maximum: 25,272	Standard: 366
County: Charlotte [8]	First Used : 2015/01	Max Annualized: 37,960	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 23,784	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,767	Inflation
Current Class South Large	Initial CR? False	Medicaid: 11,611	FY Index: 1.33689974
Class at 1/94: South Large	Medicaid Utilization	48.81853%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.11206%	Cost: 1.07977764
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 09/22/1987	Low Occupancy Adjustment Factor:	119.02072%	DC Sem Index: 1.30450000
Med # Active Date: 09/30/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 317179			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	656,486	1,165,499	724,716	261,248	6,978	2,814,927	
1a	Audit Adjustments							
2	Cost Per Diem	56.5400	100.3789	62.4163	22.5000	0.6010	242.4362	
3	Cost Per Diem Inflated	61.0506	106.7481	67.3957				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	61.0506	106.7481	67.3957	22.5000	0.6010	258.2954	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	84.7724		81.4883				
7	Provider Target Rate	89.4881		86.0213				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	69.6245		78.5521				
10b	Base for line 10a	65.9555		74.4127				
11	Lesser of 5,7,8,10, 10a	58.7902	104.3884	67.3957	13.6500	0.6010	244.8253	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	58.7902	104.3884	67.3957	13.6500	0.6010	244.8253	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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261.24

Village Place Health and Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/22/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,200,000.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Fixed	80% Capital(1):	4,428,405	13.0105
Indexed Asset Value	5,535,506	<60% of Base:	False	20% ROE(2):	1,107,101	0.7544
FRVS Base Asset:	3,036,280	Interest Rate:	8.0000%	Insurance Cost(3):	48,670	2.0463
Occup Adj Factor	0.9000	Chase Rate:	5.0000%	Taxes Cost(3):	33,131	1.3930
ROE Factor	0.023280	Amortization Rate:	8.0000%	Home Office(3):	21,903	0.9209
		Interest Only:	False	Replacement(3&4):	325,706	0.0000
		Yearly Payment:	444,492	Total FRVS PD:		18.1251

(1) 80% Capital (\$4,428,405) amortized at 8.0000 % for 20 years Principal & Interest of \$444,492 divided by annual available days (37960) divided by Occup. Adj. (0.90) = \$13.0105

(2) 20% ROE (\$1,107,101) times the ROE factor (0.023280) divided by annual available days (37960) divided by Occup. Adj. (0.90) = \$0.7544

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1987	Current RS PBS:	29,195
Comparison Bed	104	Effective PBS Limitation	54,155
			3,036,280

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	104.3884	104.3884	4.7360	99.6524
Indirect Care	67.3957	67.3957	3.0577	64.3380
Property	13.6500	18.1251	0.8223	17.3028
ROE	0.6010	0.6010	0.0273	0.5737
ROE Adjustment	-0.6010	-0.6010	-0.0273	-0.5737
Quality Assess-Medicaid Share				15.6394
Supplemental Rate				8.1814
Totals	244.2243	248.6994	11.2833	261.2369

Medicaid Trend Adjustment



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0 002400-00 - 2016/09

261.24

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	3,658,213	0.00	0.9007	0.9007		104	31.87	3,036,280	3,036,280	1
1988/01		0.10	0.9007	0.9007		104	31.87	3,037,865	3,084,848	
1988/07		0.10	0.5899	0.5899		104	31.87	3,038,904	3,083,184	
1989/01		0.20	0.5899	0.5899		104	31.87	3,040,982	3,101,384	
1989/07		0.20	0.5899	0.5899		104	31.87	3,043,061	3,122,392	
1990/01		0.30	0.5899	0.5899		104	40.33	3,047,011	3,138,096	
1990/07	76,703	0.30	0.5899	0.5899		104	40.33	3,127,669	3,156,608	
1991/01		0.40	0.5899	0.5899		104	40.33	3,133,082	3,175,120	
1991/07	38,259	0.40	1.4932	1.4932		104	42.30	3,185,734	3,222,544	
1992/01		0.50	2.0117	2.0117		104	42.30	3,210,380	3,287,336	
1992/07		0.50	1.8152	1.8152		104	42.61	3,232,954	3,347,032	
1993/01		0.60	1.7710	1.7710		104	42.61	3,259,568	3,406,312	
1993/07	38,684	0.60	1.5329	1.5329		104	37.64	3,318,768	3,458,520	
1994/01		0.70	1.6983	1.6983		104	37.64	3,345,769	3,517,280	
1994/07	35,272	0.70	1.5991	1.5991		104	37.47	3,406,556	3,573,544	
1995/01		0.80	1.5812	1.5812		104	37.47	3,435,914	3,630,016	
1995/07	74,091	0.80	1.5250	1.5250		104	39.55	3,540,148	3,685,344	
1996/01		0.90	1.7228	1.7228		104	39.55	3,579,619	3,748,888	
1996/07	41,088	0.90	1.3294	1.3294		104	45.07	3,655,804	3,798,704	
1997/01		1.00	1.4109	1.4109		104	45.07	3,698,071	3,852,264	
1997/07		1.00	1.0917	1.0917		104	45.07	3,731,154	3,894,280	
1998/01		1.00	1.1663	1.1663		104	45.07	3,766,814	3,939,728	
1998/07	70,974	1.00	1.0794	1.0794		104	50.26	3,874,943	3,982,264	
1999/01		1.00	1.4499	1.4499		104	50.26	3,926,284	4,039,984	
1999/07	27,370	1.00	1.2299	1.2299		104	56.40	4,001,943	4,089,696	
2000/01		1.00	1.3356	1.3356		104	56.40	4,055,393	4,144,296	
2000/07		1.00	1.1129	1.1129		104	53.98	4,099,688	4,190,368	
2001/01		1.00	1.2976	1.2976		104	53.98	4,099,688	4,244,760	5
2001/07	26,358	1.00	0.9615	0.9615		104	48.51	4,213,467	4,285,528	
2002/01	59,423	1.00	1.0301	1.0301		104	49.60	4,312,032	4,329,624	



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261.24

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		104	49.60	4,344,452	4,365,712	
2003/01		1.00	1.3271	1.3271		104	49.60	4,396,447	4,423,640	
2003/07	16,855	1.00	1.1664	1.1664		104	47.48	4,457,571	4,475,224	
2004/01		1.00	1.1103	1.1103		104	47.48	4,500,296	4,524,936	
2004/07		1.00	0.8378	0.8378		104	45.86	4,531,734	4,562,896	
2005/01		1.00	0.8595	0.8595		104	62.60	4,570,684	4,602,104	
2005/07		1.00	0.7364	0.7364		104	62.60	4,604,343	4,636,008	
2006/01		1.00	0.9068	0.9068		104	62.60	4,646,095	4,678,024	11
2006/07		1.00	0.8133	0.8133		104	37.79	4,646,095	4,716,088	12
2007/01		1.00	1.0133	1.0133		104	37.79	4,678,442	4,763,824	
2007/07		1.00	1.1050	1.1050		104	37.79	4,713,962	4,816,448	
2008/01		1.00	0.8556	0.8556		104	37.79	4,741,674	4,857,632	
2008/07	20,868	0.95	0.6104	0.6104		104	42.16	4,783,620	4,887,272	
2009/01	43,674	0.95	1.3268	1.3268		104	42.16	4,873,515	4,952,168	
2009/07	10,885	0.90	0.6841	0.6841		104	42.16	4,907,401	4,986,072	
2010/01		0.90	0.8643	0.8643		104	42.16	4,936,664	5,029,128	
2010/07		0.85	0.7107	0.7107		104	42.16	4,959,524	5,064,904	
2011/01	75,427	0.85	0.9198	0.9198		104	42.16	5,064,673	5,111,496	
2011/07	39,825	0.80	0.9028	0.9028		104	42.47	5,132,742	5,157,672	
2012/01		0.80	0.3865	0.3865		104	42.47	5,144,997	5,177,640	
2012/07	73,656	0.75	0.9417	0.9417		104	40.39	5,226,416	5,226,416	8
2013/01		0.75	0.4901	0.4901		104	40.39	5,240,525	5,252,000	
2013/07		0.70	0.6196	0.6196		104	40.39	5,257,216	5,284,552	
2014/01	133,044	0.70	0.8564	0.8564		104	47.97	5,329,792	5,329,792	8
2014/07	74,103	0.65	1.2383	1.2383		104	46.74	5,395,832	5,395,832	8
2015/01	31,417	0.65	0.7571	0.7571		104	48.82	5,436,704	5,436,704	8
2015/09		0.60	1.5736	1.5736		104	48.82	5,482,269	5,522,296	
2016/09		0.55	1.9890	1.9890		104	48.82	5,535,506	5,632,120	

Message Code:

- | | |
|----|--|
| 1 | Per Bed Standard Limitation |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |
| 11 | Not in Medicaid |



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 09/01/2016 through 08/31/2017

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235.15

Osceola Health Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4201 W NEW NOLTE ROAD	7/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
SAINT CLOUD, FL 34772	Days in CR 184	Maximum: 22,080	Standard: 366
County: Osceola [49]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 19,493	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,233	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 12,396	FY Index: 1.35002422
Class at 1/94: North Large	Medicaid Utilization	63.59206%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	88.28351%	Cost: 1.06928041
Open Date: 06/11/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/11/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 10/28/1991	Low Occupancy Adjustment Factor:	111.64952%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 217859			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	620,645	995,634	684,806	340,642		2,641,727	
1a	Audit Adjustments							
2	Cost Per Diem	50.0682	80.3190	55.2441	27.4800		213.1113	
3	Cost Per Diem Inflated	53.5369	84.8390	59.0714				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.5369	84.8390	59.0714	27.4800		224.9273	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	63.5652		69.6541				
7	Provider Target Rate	67.1012		73.5288				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	59.4418		69.0710				
10b	Base for line 10a	56.3094		65.4312				
11	Lesser of 5,7,8,10, 10a	53.5369	84.8390	59.0714	13.6500		211.0973	
12/13	Medicaid Adjustment Rate		1.2973	0.9033				
14	Prospective Per Diem 11	53.5369	86.1363	59.9747	13.6500		213.2979	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Osceola Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/28/1991		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,200,000.00		Total Amount	Per Diem
RS to Start Calcs:	1991/01	Type:	Fixed	80% Capital(1):	4,690,174	14.7371
Indexed Asset Value	5,862,717	<60% of Base:	False	20% ROE(2):	1,172,543	0.6568
FRVS Base Asset:	3,642,240	Interest Rate:	12.0000%	Insurance Cost(3):	37,211	1.9089
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	23,736	1.2177
ROE Factor	0.022080	Amortization Rate:	11.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	580,937	Total FRVS PD:		18.5205

(1) 80% Capital (\$4,690,174) amortized at 11.0000 % for 20 years Principal & Interest of \$580,937 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$14.7371

(2) 20% ROE (\$1,172,543) times the ROE factor (0.022080) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6568

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,352
Comparison Date: 07/01/1990	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.5369	53.5369	2.4289	51.1080
Direct Care	86.1363	86.1363	3.9080	82.2283
Indirect Care	59.9747	59.9747	2.7210	57.2537
Property	13.6500	18.5205	0.8403	17.6802
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.7008
Supplemental Rate				8.1814
Totals	213.2979	218.1684	9.8982	235.1524

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

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235.15

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/01	4,933,879	0.00	0.5899	0.5899		120	70.00	3,642,240	3,642,240	1
1991/07		0.10	1.4932	1.4932		120	73.16	3,647,678	3,718,320	
1992/01		0.10	2.0117	2.0117		120	73.16	3,655,017	3,793,080	
1992/07		0.20	1.8152	1.8152		120	73.16	3,668,285	3,861,960	
1993/01		0.20	1.7710	1.7710		120	73.16	3,681,278	3,930,360	
1993/07		0.30	1.5329	1.5329		120	73.16	3,698,208	3,990,600	
1994/01	51,475	0.30	1.6983	1.6983		120	78.35	3,768,525	4,058,400	
1994/07		0.40	1.5991	1.5991		120	78.35	3,792,628	4,123,320	
1995/01	114,606	0.40	1.5812	1.5812		120	75.41	3,931,222	4,188,480	
1995/07		0.50	1.5250	1.5250		120	75.41	3,961,198	4,252,320	
1996/01		0.50	1.7228	1.7228		120	70.02	3,995,320	4,325,640	
1996/07		0.60	1.3294	1.3294		120	70.02	4,027,187	4,383,120	
1997/01	39,152	0.60	1.4109	1.4109		120	72.76	4,100,429	4,444,920	
1997/07		0.70	1.0917	1.0917		120	72.76	4,131,764	4,493,400	
1998/01		0.70	1.1663	1.1663		120	72.49	4,131,764	4,545,840	5
1998/07		0.80	1.0794	1.0794		120	72.49	4,201,465	4,594,920	
1999/01		0.80	1.4499	1.4499		120	66.74	4,250,198	4,661,520	
1999/07		0.90	1.2299	1.2299		120	66.74	4,297,243	4,718,880	
2000/01		0.90	1.3356	1.3356		120	66.74	4,348,896	4,781,880	
2000/07		1.00	1.1129	1.1129		120	66.74	4,397,295	4,835,040	
2001/01		1.00	1.2976	1.2976		120	66.74	4,454,354	4,897,800	
2001/07		1.00	0.9615	0.9615		120	66.74	4,497,183	4,944,840	
2002/01		1.00	1.0301	1.0301		120	71.41	4,543,508	4,995,720	
2002/07		1.00	0.8337	0.8337		120	71.41	4,581,387	5,037,360	
2003/01		1.00	1.3271	1.3271		120	66.70	4,642,187	5,104,200	
2003/07		1.00	1.1664	1.1664		120	66.70	4,696,333	5,163,720	
2004/01		1.00	1.1103	1.1103		120	66.02	4,748,476	5,221,080	
2004/07		1.00	0.8378	0.8378		120	66.02	4,788,259	5,264,880	
2005/01		1.00	0.8595	0.8595		120	63.32	4,829,414	5,310,120	
2005/07		1.00	0.7364	0.7364		120	63.32	4,864,978	5,349,240	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01		1.00	0.9068	0.9068		120	59.84	4,909,094	5,397,720	
2006/07		1.00	0.8133	0.8133		120	59.84	4,949,020	5,441,640	
2007/01		1.00	1.0133	1.0133		120	59.84	4,999,168	5,496,720	
2007/07		1.00	1.1050	1.1050		120	63.15	5,054,409	5,557,440	
2008/01		1.00	0.8556	0.8556		120	63.15	5,097,655	5,604,960	
2008/07		1.00	0.6104	0.6104		120	69.18	5,128,771	5,639,160	
2009/01		1.00	1.3268	1.3268		120	57.97	5,196,820	5,714,040	
2009/07		1.00	0.6841	0.6841		120	57.97	5,232,371	5,753,160	
2010/01		1.00	0.8643	0.8643		120	57.97	5,277,594	5,802,840	
2010/07		1.00	0.7107	0.7107		120	57.97	5,315,102	5,844,120	
2011/01		1.00	0.9198	0.9198		120	57.97	5,363,990	5,897,880	
2011/07		0.95	0.9028	0.9028		120	59.10	5,409,997	5,951,160	
2012/01		0.95	0.3865	0.3865		120	59.10	5,429,863	5,974,200	
2012/07		0.90	0.9417	0.9417		120	57.62	5,475,881	6,030,480	
2013/01		0.90	0.4901	0.4901		120	57.62	5,500,035	6,060,000	
2013/07	30,852	0.85	0.6196	0.6196		120	62.51	5,559,856	6,097,560	
2014/01		0.85	0.8564	0.8564		120	62.51	5,600,326	6,149,760	
2014/07		0.80	1.2383	1.2383		120	67.66	5,655,803	6,225,960	
2015/01		0.80	0.7571	0.7571		120	67.66	5,690,060	6,273,120	
2015/09	24,997	0.75	1.5736	1.5736		120	63.59	5,782,211	6,371,880	
2016/09		0.70	1.9890	1.9890		120	63.59	5,862,717	6,498,600	

Message Code:

- | | |
|---|----------------------------------|
| 1 | Per Bed Standard Limitation |
| 5 | Uncorrected Licensure Deficiency |

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 005219123120140701201404212015154724



Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

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235.53

Debary Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
60 N HWY 17/92	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 366
DEBARY, FL 32713	Days in CR 181	Maximum: 21,720	Standard: 0
County: Volusia [64]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 20,299	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,756	Inflation
Current Class North Large	Initial CR? False	Medicaid: 13,442	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	66.22001%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.45764%	Cost: 1.08180716
Open Date: 07/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 07/01/1983	Low Occupancy Adjustment Factor:	118.19309%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213551			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	656,004	1,147,776	766,970	354,869		2,925,619	
1a	Audit Adjustments							
2	Cost Per Diem	48.8026	85.3873	57.0577	26.4000		217.6476	
3	Cost Per Diem Inflated	52.7950	90.8917	61.7254				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.7950	90.8917	61.7254	26.4000		231.8121	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	47.1718		63.6052				
7	Provider Target Rate	49.7959		67.1434				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	56.5435		68.7672				
10b	Base for line 10a	53.5638		65.1434				
11	Lesser of 5,7,8,10, 10a	49.7959	90.8917	61.7254	13.6500		216.0630	
12/13	Medicaid Adjustment Rate		1.6585	1.1263				
14	Prospective Per Diem 11	49.7959	92.5502	62.8517	13.6500		218.8478	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Debary Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	02/01/1998	Amount:	5,008,973.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Variable	80% Capital(1):	4,071,891	10.6592
Indexed Asset Value	5,089,864	<60% of Base:	False	20% ROE(2):	1,017,973	0.6025
FRVS Base Asset:	1,460,322	Interest Rate:	8.3750%	Insurance Cost(3):	15,446	0.7609
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	21,350	1.0518
ROE Factor	0.023330	Amortization Rate:	8.3750%	Home Office(3):	19,587	0.9649
		Interest Only:	False	Replacement(3&4):	10,084	0.0000
		Yearly Payment:	420,184	Total FRVS PD:		14.0393

(1) 80% Capital (\$4,071,891) amortized at 8.3750 % for 20 years Principal & Interest of \$420,184 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.6592

(2) 20% ROE (\$1,017,973) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6025

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.7959	49.7959	2.2592	47.5367
Direct Care	92.5502	92.5502	4.1990	88.3512
Indirect Care	62.8517	62.8517	2.8516	60.0001
Property	13.6500	14.0393	0.6370	13.4023
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.0552
Supplemental Rate				8.1814
Totals	218.8478	219.2371	9.9468	235.5269

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/07	1,318,110	0.00	3.9578	3.0000	0.9578	93	56.58	1,318,110	2,516,766	
1984/01	130,637	0.10	2.2530	2.2530		93	56.58	1,451,717	2,549,409	
1984/07		0.10	1.9179	1.9179		93	56.58	1,454,501	2,598,327	
1985/01		0.20	1.1471	1.1471		93	56.58	1,457,838	2,628,087	
1985/10		0.20	0.8522	0.8522		93	100.00	1,460,322	2,650,500	
1986/01		0.30	0.8299	0.8299		93	54.62	1,463,933	2,672,541	
1986/07		0.30	0.2974	0.2974		93	56.04	1,465,239	2,667,426	
1987/01		0.40	1.0091	1.0091		93	54.20	1,471,067	2,715,135	
1987/07		0.40	0.9007	0.9007		93	54.20	1,476,290	2,736,339	
1988/01		0.50	0.9007	0.9007		93	54.20	1,482,842	2,758,566	
1988/07		0.50	0.5899	0.5899		93	61.10	1,487,216	2,757,078	
1989/01		0.60	0.5899	0.5899		93	58.58	1,492,479	2,773,353	
1989/07		0.60	0.5899	0.5899		93	58.58	1,497,761	2,792,139	
1990/01		0.70	0.5899	0.5899		93	58.58	1,503,945	2,806,182	
1990/07		0.70	0.5899	0.5899		93	57.14	1,510,155	2,822,736	
1991/01		0.80	0.5899	0.5899		93	53.46	1,517,082	2,839,290	
1991/07		0.80	1.4932	1.4932		93	53.46	1,534,698	2,881,698	
1992/01		0.90	2.0117	2.0117		93	52.46	1,561,201	2,939,637	
1992/07		0.90	1.8152	1.8152		93	52.46	1,585,528	2,993,019	
1993/01	17,423	1.00	1.7710	1.7710		93	48.61	1,627,768	3,046,029	
1993/07		1.00	1.5329	1.5329		93	48.61	1,649,821	3,092,715	
1994/01	854,043	1.00	1.6983	1.6983		120	48.46	2,528,551	4,058,400	
1994/07		1.00	1.5991	1.5991		120	48.46	2,564,177	4,123,320	
1995/01		1.00	1.5812	1.5812		120	51.07	2,601,825	4,188,480	
1995/07		1.00	1.5250	1.5250		120	51.07	2,638,668	4,252,320	
1996/01	933,436	1.00	1.7228	1.7228		120	50.86	3,614,141	4,325,640	
1996/07		1.00	1.3294	1.3294		120	50.86	3,658,571	4,383,120	
1997/01		1.00	1.4109	1.4109		120	56.84	3,710,190	4,444,920	
1997/07		1.00	1.0917	1.0917		120	56.84	3,750,694	4,493,400	
1998/01	10,801	1.00	1.1663	1.1663		120	66.32	3,805,239	4,545,840	



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235.53

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07	15,161	1.00	1.0794	1.0794		120	66.32	3,861,474	4,594,920	
1999/01		1.00	1.4499	1.4499		120	66.32	3,917,462	4,661,520	
1999/07		1.00	1.2299	1.2299		120	66.32	3,965,643	4,718,880	
2000/01		1.00	1.3356	1.3356		120	66.32	4,018,608	4,781,880	
2000/07		1.00	1.1129	1.1129		120	70.81	4,063,331	4,835,040	
2001/01		1.00	1.2976	1.2976		120	70.81	4,116,057	4,897,800	
2001/07		1.00	0.9615	0.9615		120	74.72	4,155,633	4,944,840	
2002/01		1.00	1.0301	1.0301		120	74.72	4,198,440	4,995,720	
2002/07		1.00	0.8337	0.8337		120	71.02	4,233,442	5,037,360	
2003/01		1.00	1.3271	1.3271		120	71.02	4,289,624	5,104,200	
2003/07		1.00	1.1664	1.1664		120	69.18	4,339,658	5,163,720	
2004/01		0.95	1.1103	1.1103		120	69.18	4,385,433	5,221,080	
2004/07		0.95	0.8378	0.8378		120	67.38	4,420,337	5,264,880	
2005/01		0.90	0.8595	0.8595		120	67.38	4,454,533	5,310,120	
2005/07		0.90	0.7364	0.7364		120	69.37	4,484,058	5,349,240	
2006/01		0.85	0.9068	0.9068		120	69.37	4,518,621	5,397,720	
2006/07		0.85	0.8133	0.8133		120	66.14	4,549,858	5,441,640	
2007/01		0.80	1.0133	1.0133		120	66.14	4,586,739	5,496,720	
2007/07	23,676	0.80	1.1050	1.1050		120	65.23	4,650,962	5,557,440	
2008/01		0.75	0.8556	0.8556		120	65.23	4,680,807	5,604,960	
2008/07		0.75	0.6104	0.6104		120	61.50	4,702,236	5,639,160	
2009/01		0.70	1.3268	1.3268		120	61.50	4,745,910	5,714,040	
2009/07		0.70	0.6841	0.6841		120	61.50	4,768,638	5,753,160	
2010/01		0.65	0.8643	0.8643		120	61.50	4,795,428	5,802,840	
2010/07		0.65	0.7107	0.7107		120	61.50	4,817,583	5,844,120	
2011/01		0.60	0.9198	0.9198		120	61.50	4,844,171	5,897,880	
2011/07		0.60	0.9028	0.9028		120	61.50	4,870,412	5,951,160	
2012/01		0.55	0.3865	0.3865		120	69.62	4,880,766	5,974,200	
2012/07	27,568	0.55	0.9417	0.9417		120	67.35	4,933,611	6,030,480	
2013/01		0.50	0.4901	0.4901		120	67.35	4,945,703	6,060,000	



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0 005372-00 - 2016/09

235.53

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		120	67.35	4,961,025	6,097,560	
2014/01		0.45	0.8564	0.8564		120	69.05	4,980,145	6,149,760	
2014/07		0.45	1.2383	1.2383		120	69.05	5,007,894	6,225,960	
2015/01		0.40	0.7571	0.7571		120	66.22	5,023,058	6,273,120	
2015/09		0.40	1.5736	1.5736		120	66.22	5,054,673	6,371,880	
2016/09		0.35	1.9890	1.9890		120	66.22	5,089,864	6,498,600	

Message Code:

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 005372063020140101201410122014133247



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0005374-00 - 2016/09

235.86

Flagler Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
300 DR CARTER BOULEVARD	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
BUNNELL, FL 32110	Days in CR 181	Maximum: 21,720	Standard: 366
County: Flagler [18]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 20,054	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,775	Inflation
Current Class North Large	Initial CR? False	Medicaid: 10,632	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	53.01685%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.32965%	Cost: 1.08180716
Open Date: 11/25/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/25/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 11/25/1985	Low Occupancy Adjustment Factor:	116.76655%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213519			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	482,817	926,820	634,362	269,734		2,313,733	
1a	Audit Adjustments							
2	Cost Per Diem	45.4117	87.1727	59.6653	25.3700		217.6197	
3	Cost Per Diem Inflated	49.1267	92.7922	64.5463				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.1267	92.7922	64.5463	25.3700		231.8352	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.8043		66.6558				
7	Provider Target Rate	49.4079		70.3637				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.9576		68.8295				
10b	Base for line 10a	52.0615		65.2024				
11	Lesser of 5,7,8,10, 10a	49.1267	92.7922	64.5463	13.6500		220.1152	
12/13	Medicaid Adjustment Rate		0.3149	0.2191				
14	Prospective Per Diem 11	49.1267	93.1071	64.7654	13.6500		220.6492	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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235.86

Flagler Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/2004		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,100,000.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Fixed	80% Capital(1):	3,401,624	11.0429
Indexed Asset Value	4,252,030	<60% of Base:	False	20% ROE(2):	850,406	0.5033
FRVS Base Asset:	2,444,854	Interest Rate:	11.5000%	Insurance Cost(3):	16,656	0.8306
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	16,644	0.8300
ROE Factor	0.023330	Amortization Rate:	11.5000%	Home Office(3):	19,909	0.9928
		Interest Only:	False	Replacement(3&4):	5,484	0.0000
		Yearly Payment:	435,311	Total FRVS PD:		14.1996

(1) 80% Capital (\$3,401,624) amortized at 11.5000 % for 20 years Principal & Interest of \$435,311 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.0429

(2) 20% ROE (\$850,406) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5033

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	100	Effective PBS Limitation	54,155
			2,850,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.1267	49.1267	2.2289	46.8978
Direct Care	93.1071	93.1071	4.2242	88.8829
Indirect Care	64.7654	64.7654	2.9384	61.8270
Property	13.6500	14.1996	0.6442	13.5554
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.5142
Supplemental Rate				8.1814
Totals	220.6492	221.1988	10.0357	235.8587

Medicaid Trend Adjustment



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235.86

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	2,444,854	0.00	0.8522	0.8522		100	57.78	2,444,854	2,850,000	
1986/01		0.10	0.8299	0.8299		100	57.78	2,446,883	2,873,700	
1986/07		0.10	0.2974	0.2974		100	57.78	2,447,610	2,868,200	
1987/01		0.20	1.0091	1.0091		100	57.78	2,452,549	2,919,500	
1987/07		0.20	0.9007	0.9007		100	57.78	2,456,966	2,942,300	
1988/01		0.30	0.9007	0.9007		100	57.78	2,463,605	2,966,200	
1988/07		0.30	0.5899	0.5899		100	73.05	2,467,966	2,964,600	
1989/01		0.40	0.5899	0.5899		100	73.05	2,473,790	2,982,100	
1989/07	34,275	0.40	0.5899	0.5899		100	73.05	2,513,903	3,002,300	
1990/01		0.50	0.5899	0.5899		100	73.05	2,521,319	3,017,400	
1990/07		0.50	0.5899	0.5899		100	73.05	2,528,757	3,035,200	
1991/01		0.60	0.5899	0.5899		100	73.05	2,537,706	3,053,000	
1991/07		0.60	1.4932	1.4932		100	69.71	2,560,441	3,098,600	
1992/01		0.70	2.0117	2.0117		100	69.71	2,596,497	3,160,900	
1992/07	22,106	0.70	1.8152	1.8152		100	70.29	2,651,594	3,218,300	
1993/01		0.80	1.7710	1.7710		100	70.29	2,689,162	3,275,300	
1993/07	28,410	0.80	1.5329	1.5329		120	72.52	2,750,549	3,990,600	
1994/01		0.90	1.6983	1.6983		120	72.52	2,792,591	4,058,400	
1994/07		0.90	1.5991	1.5991		120	78.96	2,832,782	4,123,320	
1995/01		1.00	1.5812	1.5812		120	78.96	2,877,574	4,188,480	
1995/07		1.00	1.5250	1.5250		120	80.15	2,921,457	4,252,320	
1996/01		1.00	1.7228	1.7228		120	80.15	2,971,788	4,325,640	
1996/07		1.00	1.3294	1.3294		120	83.25	3,011,295	4,383,120	
1997/01		1.00	1.4109	1.4109		120	83.25	3,053,781	4,444,920	
1997/07		1.00	1.0917	1.0917		120	87.33	3,087,119	4,493,400	
1998/01	18,277	1.00	1.1663	1.1663		120	83.55	3,141,401	4,545,840	
1998/07	16,700	1.00	1.0794	1.0794		120	83.55	3,192,009	4,594,920	
1999/01		1.00	1.4499	1.4499		120	83.55	3,238,290	4,661,520	
1999/07		1.00	1.2299	1.2299		120	83.55	3,278,118	4,718,880	
2000/01		1.00	1.3356	1.3356		120	83.55	3,321,901	4,781,880	



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235.86

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		120	83.55	3,358,870	4,835,040	
2001/01		1.00	1.2976	1.2976		120	82.46	3,402,455	4,897,800	
2001/07		1.00	0.9615	0.9615		120	82.46	3,402,455	4,944,840	5
2002/01		1.00	1.0301	1.0301		120	81.45	3,470,556	4,995,720	
2002/07		1.00	0.8337	0.8337		120	81.45	3,499,490	5,037,360	
2003/01		1.00	1.3271	1.3271		120	78.76	3,545,932	5,104,200	
2003/07		1.00	1.1664	1.1664		120	78.76	3,587,292	5,163,720	
2004/01		1.00	1.1103	1.1103		120	80.27	3,627,122	5,221,080	
2004/07		1.00	0.8378	0.8378		120	80.27	3,657,510	5,264,880	
2005/01		1.00	0.8595	0.8595		120	78.35	3,688,946	5,310,120	
2005/07		1.00	0.7364	0.7364		120	78.35	3,716,111	5,349,240	
2006/01		0.95	0.9068	0.9068		120	70.47	3,748,125	5,397,720	
2006/07		0.95	0.8133	0.8133		120	70.47	3,777,083	5,441,640	
2007/01		0.90	1.0133	1.0133		120	73.00	3,811,530	5,496,720	
2007/07		0.90	1.1050	1.1050		120	73.00	3,849,436	5,557,440	
2008/01		0.85	0.8556	0.8556		120	73.00	3,877,433	5,604,960	
2008/07		0.85	0.6104	0.6104		120	63.64	3,897,549	5,639,160	
2009/01		0.80	1.3268	1.3268		120	63.64	3,938,918	5,714,040	
2009/07		0.80	0.6841	0.6841		120	63.64	3,960,476	5,753,160	
2010/01		0.75	0.8643	0.8643		120	63.64	3,986,148	5,802,840	
2010/07		0.75	0.7107	0.7107		120	63.64	4,007,394	5,844,120	
2011/01		0.70	0.9198	0.9198		120	63.64	4,033,198	5,897,880	
2011/07		0.70	0.9028	0.9028		120	63.64	4,058,688	5,951,160	
2012/01		0.65	0.3865	0.3865		120	60.57	4,068,883	5,974,200	
2012/07		0.65	0.9417	0.9417		120	60.10	4,093,789	6,030,480	
2013/01		0.60	0.4901	0.4901		120	60.10	4,105,829	6,060,000	
2013/07		0.60	0.6196	0.6196		120	60.10	4,121,094	6,097,560	
2014/01		0.55	0.8564	0.8564		120	59.11	4,140,504	6,149,760	
2014/07		0.55	1.2383	1.2383		120	56.22	4,168,705	6,225,960	
2015/01		0.50	0.7571	0.7571		120	53.02	4,183,920	6,273,120	



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235.86

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		120	53.02	4,215,654	6,371,880	
2016/09		0.45	1.9890	1.9890		120	53.02	4,252,030	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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0005379-00 - 2016/09

238.21

Longwood Health And Rehabilitation Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1520 S GRANT ST	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
LONGWOOD, FL 32750	Days in CR 181	Maximum: 21,720	Standard: 366
County: Seminole [59]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 20,747	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,712	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 14,668	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	70.69938%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.52026%	Cost: 1.08180716
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	120.80162%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 214159	Interim Component Effective Date:	01/01/2016	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	659,149	1,148,666	912,085	377,848		3,097,748
1a	Audit Adjustments						
2	Cost Per Diem	44.9379	78.3110	62.1820	25.7600		211.1909
3	Cost Per Diem Inflated	48.6141	83.3592	67.2689			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.6141	83.3592	67.2689	25.7600		225.0022
5a	Interim Adjustment	4.9726					
5b	Interim Adjusted Per Diem	53.5867					
6	Prior Semester: Provider Target Base	50.0424		67.0209			
7	Provider Target Rate	52.8262		70.7491			
7a	Interim Adjustment	4.9726					
7b	Interim Adjusted Target Rate	57.7988					
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	63.7408		70.9609			
10b	Base for line 10a	55.6713		67.2215			
11	Lesser of 5,7,8,10, 10a	53.5867	83.3592	67.2689	13.6500		217.8648
12/13	Medicaid Adjustment Rate		1.9412	1.5665			
14	Prospective Per Diem 11	53.5867	85.3004	68.8354	13.6500		221.3725
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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238.21

Longwood Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/29/1998		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,285,679.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Variable	80% Capital(1):	3,398,893	8.4541
Indexed Asset Value	4,248,616	<60% of Base:	False	20% ROE(2):	849,723	0.5029
FRVS Base Asset:	2,415,321	Interest Rate:	7.6872%	Insurance Cost(3):	12,762	0.6151
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	26,694	1.2866
ROE Factor	0.023330	Amortization Rate:	7.6872%	Home Office(3):	19,385	0.9344
		Interest Only:	False	Replacement(3&4):	18,987	0.0000
		Yearly Payment:	333,260	Total FRVS PD:		11.7931

(1) 80% Capital (\$3,398,893) amortized at 7.6872 % for 20 years Principal & Interest of \$333,260 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.4541

(2) 20% ROE (\$849,723) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5029

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.5867	53.5867	2.4312	51.1555
Direct Care	85.3004	85.3004	3.8700	81.4304
Indirect Care	68.8354	68.8354	3.1230	65.7124
Property	13.6500	11.7931	0.5350	11.2581
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.4723
Supplemental Rate				8.1814
Totals	221.3725	219.5156	9.9592	238.2101

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2014

0 005379-00 - 2016/09

238.21

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/04	2,350,505	0.00	2.6288	2.6288		120	71.61	2,350,505	3,123,840	
1983/07	12,034	0.10	3.9578	3.0000	0.9578	120	71.61	2,369,591	3,247,440	
1984/01	1,029	0.10	2.2530	2.2530		120	78.35	2,375,959	3,289,560	
1984/07	8,922	0.20	1.9179	1.9179		120	78.35	2,393,995	3,352,680	
1985/01	8,411	0.20	1.1471	1.1471		120	78.35	2,407,898	3,391,080	
1985/10	1,266	0.30	0.8522	0.8522		120	78.35	2,415,321	3,420,000	
1986/01		0.30	0.8299	0.8299		120	84.97	2,421,335	3,448,440	
1986/07		0.40	0.2974	0.2974		120	84.97	2,424,216	3,441,840	
1987/01		0.40	1.0091	1.0091		120	85.74	2,434,000	3,503,400	
1987/07		0.50	0.9007	0.9007		120	85.74	2,444,963	3,530,760	
1988/01		0.50	0.9007	0.9007		120	85.04	2,455,975	3,559,440	
1988/07		0.60	0.5899	0.5899		120	85.04	2,464,667	3,557,520	
1989/01		0.60	0.5899	0.5899		120	78.85	2,473,389	3,578,520	
1989/07		0.70	0.5899	0.5899		120	78.85	2,483,602	3,602,760	
1990/01		0.70	0.5899	0.5899		120	76.77	2,493,857	3,620,880	
1990/07		0.80	0.5899	0.5899		120	76.77	2,505,626	3,642,240	
1991/01		0.80	0.5899	0.5899		120	75.18	2,505,626	3,663,600	5
1991/07		0.90	1.4932	1.4932		120	75.18	2,551,282	3,718,320	
1992/01		0.90	2.0117	2.0117		120	78.60	2,597,473	3,793,080	
1992/07		1.00	1.8152	1.8152		120	78.60	2,644,622	3,861,960	
1993/01	33,868	1.00	1.7710	1.7710		120	76.39	2,725,326	3,930,360	
1993/07		1.00	1.5329	1.5329		120	76.39	2,767,103	3,990,600	
1994/01		1.00	1.6983	1.6983		120	72.19	2,814,097	4,058,400	
1994/07		1.00	1.5991	1.5991		120	72.19	2,859,097	4,123,320	
1995/01		1.00	1.5812	1.5812		120	72.72	2,904,305	4,188,480	
1995/07		1.00	1.5250	1.5250		120	72.72	2,948,596	4,252,320	
1996/01	27,486	1.00	1.7228	1.7228		120	70.62	2,976,082	4,325,640	5
1996/07		1.00	1.3294	1.3294		120	70.62	3,026,880	4,383,120	5
1997/01		1.00	1.4109	1.4109		120	75.42	3,067,119	4,444,920	5
1997/07		1.00	1.0917	1.0917		120	75.42	3,144,349	4,493,400	



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1998/01		1.00	1.1663	1.1663		120	75.97	3,181,022	4,545,840	
1998/07		1.00	1.0794	1.0794		120	75.97	3,215,358	4,594,920	
1999/01	66,165	1.00	1.4499	1.4499		120	80.16	3,281,523	4,661,520	5
1999/07		1.00	1.2299	1.2299		120	80.16	3,369,075	4,718,880	
2000/01		1.00	1.3356	1.3356		120	80.16	3,414,072	4,781,880	
2000/07		1.00	1.1129	1.1129		120	80.16	3,452,067	4,835,040	
2001/01		1.00	1.2976	1.2976		120	80.16	3,496,861	4,897,800	
2001/07		1.00	0.9615	0.9615		120	76.48	3,530,483	4,944,840	
2002/01		1.00	1.0301	1.0301		120	76.48	3,566,851	4,995,720	
2002/07		1.00	0.8337	0.8337		120	70.69	3,596,588	5,037,360	
2003/01		1.00	1.3271	1.3271		120	70.69	3,644,318	5,104,200	
2003/07		0.95	1.1664	1.1664		120	60.52	3,644,318	5,163,720	5
2004/01		0.95	1.1103	1.1103		120	60.52	3,723,567	5,221,080	
2004/07		0.90	0.8378	0.8378		120	63.62	3,751,643	5,264,880	
2005/01		0.90	0.8595	0.8595		120	63.62	3,780,666	5,310,120	
2005/07		0.85	0.7364	0.7364		120	68.18	3,804,329	5,349,240	
2006/01		0.85	0.9068	0.9068		120	68.18	3,833,653	5,397,720	
2006/07		0.80	0.8133	0.8133		120	68.06	3,858,595	5,441,640	
2007/01		0.80	1.0133	1.0133		120	68.06	3,889,873	5,496,720	
2007/07		0.75	1.1050	1.1050		120	66.53	3,922,112	5,557,440	
2008/01		0.75	0.8556	0.8556		120	66.53	3,947,280	5,604,960	
2008/07		0.70	0.6104	0.6104		120	64.81	3,964,147	5,639,160	
2009/01		0.70	1.3268	1.3268		120	64.81	4,000,966	5,714,040	
2009/07		0.65	0.6841	0.6841		120	64.81	4,018,758	5,753,160	
2010/01		0.65	0.8643	0.8643		120	64.81	4,041,335	5,802,840	
2010/07		0.60	0.7107	0.7107		120	64.81	4,058,567	5,844,120	
2011/01		0.60	0.9198	0.9198		120	64.81	4,080,966	5,897,880	
2011/07		0.55	0.9028	0.9028		120	64.81	4,101,228	5,951,160	
2012/01		0.55	0.3865	0.3865		120	64.93	4,109,947	5,974,200	
2012/07		0.50	0.9417	0.9417		120	64.93	4,129,301	6,030,480	



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2013/01		0.50	0.4901	0.4901		120	70.70	4,139,422	6,060,000	
2013/07		0.45	0.6196	0.6196		120	66.61	4,150,963	6,097,560	
2014/01		0.45	0.8564	0.8564		120	66.61	4,166,961	6,149,760	
2014/07		0.40	1.2383	1.2383		120	66.61	4,187,600	6,225,960	
2015/01		0.40	0.7571	0.7571		120	70.70	4,200,280	6,273,120	
2015/09		0.35	1.5736	1.5736		120	70.70	4,223,415	6,371,880	
2016/09		0.30	1.9890	1.9890		120	70.70	4,248,616	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 005379063020140101201410132014132230



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 Rate Semester 09/01/2016 through 08/31/2017

0005380-00 - 2016/09

246.71

The Rehabilitation Center of Winter Park

Type of Cost Report: **Prospective with Interim Component** Type of Cost: **Actual with Interim Component** Type of Rate: **Prospective**

Type of Ownership: **Proprietary : Corporation**

CHOW Status based on this Cost Report: **No Change**

Provider Information	Cost Report	Patient Days	Ratings Days
1700 MONROE AVE	1/1/2014-6/30/2014	Number of Beds: 180	Superior: 0
MAITLAND, FL 32751	Days in CR 181	Maximum: 32,580	Standard: 366
County: Orange [48]	First Used : 2015/01	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 25,434	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,208	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 17,177	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	67.53558%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	78.06630%	Cost: 1.08180716
Open Date: 03/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 03/01/1983	Low Occupancy Adjustment Factor:	98.72812%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 214167	Interim Component Effective Date:	06/01/2015	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	835,297	1,403,273	1,089,603	394,899		3,723,072
1a	Audit Adjustments						
2	Cost Per Diem	48.6288	81.6949	63.4338	22.9900		216.7475
3	Cost Per Diem Inflated	52.6070	86.9612	68.6231			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	52.6070	86.9612	68.6231	22.9900		231.1813
5a	Interim Adjustment	2.6335					
5b	Interim Adjusted Per Diem	55.2405					
6	Prior Semester: Provider Target Base	59.4171		69.2343			
7	Provider Target Rate	62.7224		73.0857			
7a	Interim Adjustment	2.6335					
7b	Interim Adjusted Target Rate	65.3559					
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	66.7939		72.8083			
10b	Base for line 10a	60.7794		68.9715			
11	Lesser of 5,7,8,10, 10a	55.2405	86.9612	68.1848	13.6500		224.0365
12/13	Medicaid Adjustment Rate		1.7155	1.3451			
14	Prospective Per Diem 11	55.2405	88.6767	69.5299	13.6500		227.0971
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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The Rehabilitation Center of Winter Park

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/01/1985		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,800,000.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	4,991,686	13.1273
Indexed Asset Value	6,239,607	<60% of Base:	False	20% ROE(2):	1,247,921	0.4924
FRVS Base Asset:	3,384,742	Interest Rate:	14.7160%	Insurance Cost(3):	18,901	0.7431
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	31,858	1.2526
ROE Factor	0.023330	Amortization Rate:	14.7160%	Home Office(3):	21,531	0.8465
		Interest Only:	False	Replacement(3&4):	9,398	0.0000
		Yearly Payment:	776,220	Total FRVS PD:		16.4619

(1) 80% Capital (\$4,991,686) amortized at 14.7160 % for 20 years Principal & Interest of \$776,220 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$13.1273

(2) 20% ROE (\$1,247,921) times the ROE factor (0.023330) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.4924

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	180	Effective PBS Limitation	54,155
			5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.2405	55.2405	2.5062	52.7343
Direct Care	88.6767	88.6767	4.0232	84.6535
Indirect Care	69.5299	69.5299	3.1545	66.3754
Property	13.6500	16.4619	0.7469	15.7150
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.0476
Supplemental Rate				8.1814
Totals	227.0971	229.9090	10.4308	246.7072

Medicaid Trend Adjustment



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1983/04	3,276,345	0.00	2.6288	2.6288		170	79.78	3,276,345	4,425,440	
1983/07		0.10	3.9578	3.0000	0.9578	170	79.78	3,286,174	4,600,540	
1984/01	45,459	0.10	2.2530	2.2530		170	79.78	3,339,037	4,660,210	
1984/07		0.20	1.9179	1.9179		170	79.78	3,351,846	4,749,630	
1985/01	16,574	0.20	1.1471	1.1471		170	79.78	3,376,109	4,804,030	
1985/10		0.30	0.8522	0.8522		170	79.78	3,384,742	4,845,000	
1986/01		0.30	0.8299	0.8299		170	83.31	3,393,170	4,885,290	
1986/07		0.40	0.2974	0.2974		170	83.31	3,397,208	4,875,940	
1987/01		0.40	1.0091	1.0091		170	81.03	3,410,919	4,963,150	
1987/07		0.50	0.9007	0.9007		170	81.03	3,426,282	5,001,910	
1988/01		0.50	0.9007	0.9007		180	82.84	3,441,714	5,339,160	
1988/07		0.60	0.5899	0.5899		180	82.84	3,453,894	5,336,280	
1989/01		0.60	0.5899	0.5899		180	82.10	3,466,117	5,367,780	
1989/07		0.70	0.5899	0.5899		180	82.10	3,480,429	5,404,140	
1990/01		0.70	0.5899	0.5899		180	78.48	3,494,800	5,431,320	
1990/07		0.80	0.5899	0.5899		180	78.48	3,511,292	5,463,360	
1991/01		0.80	0.5899	0.5899		180	79.62	3,527,862	5,495,400	
1991/07		0.90	1.4932	1.4932		180	79.62	3,575,273	5,577,480	
1992/01	55,847	0.90	2.0117	2.0117		180	82.96	3,695,850	5,689,620	
1992/07		1.00	1.8152	1.8152		180	82.96	3,762,937	5,792,940	
1993/01	87,872	1.00	1.7710	1.7710		180	75.67	3,917,451	5,895,540	
1993/07		1.00	1.5329	1.5329		180	75.67	3,977,502	5,985,900	
1994/01	43,990	1.00	1.6983	1.6983		180	65.04	4,089,042	6,087,600	
1994/07		1.00	1.5991	1.5991		180	65.04	4,154,430	6,184,980	
1995/01	34,140	1.00	1.5812	1.5812		180	68.80	4,254,260	6,282,720	
1995/07		1.00	1.5250	1.5250		180	68.80	4,319,137	6,378,480	
1996/01	42,604	1.00	1.7228	1.7228		180	75.15	4,436,151	6,488,460	
1996/07		1.00	1.3294	1.3294		180	75.15	4,495,125	6,574,680	
1997/01	36,815	1.00	1.4109	1.4109		180	74.35	4,531,940	6,667,380	5
1997/07		1.00	1.0917	1.0917		180	74.35	4,595,362	6,740,100	5



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1998/01		1.00	1.1663	1.1663		180	77.95	4,645,530	6,818,760	5
1998/07		1.00	1.0794	1.0794		180	77.95	4,750,440	6,892,380	
1999/01	36,178	1.00	1.4499	1.4499		180	87.34	4,786,618	6,992,280	5
1999/07		1.00	1.2299	1.2299		180	87.34	4,915,213	7,078,320	
2000/01		1.00	1.3356	1.3356		180	87.34	4,980,861	7,172,820	
2000/07		1.00	1.1129	1.1129		180	87.34	5,036,293	7,252,560	
2001/01		1.00	1.2976	1.2976		180	87.34	5,101,644	7,346,700	
2001/07		1.00	0.9615	0.9615		180	85.88	5,150,696	7,417,260	
2002/01		1.00	1.0301	1.0301		180	83.27	5,203,753	7,493,580	
2002/07		1.00	0.8337	0.8337		180	83.27	5,247,137	7,556,040	
2003/01		1.00	1.3271	1.3271		180	86.59	5,316,772	7,656,300	
2003/07		0.95	1.1664	1.1664		180	86.59	5,375,687	7,745,580	
2004/01		0.95	1.1103	1.1103		180	85.05	5,432,390	7,831,620	
2004/07		0.90	0.8378	0.8378		180	85.05	5,473,350	7,897,320	
2005/01		0.90	0.8595	0.8595		180	81.75	5,515,692	7,965,180	
2005/07		0.85	0.7364	0.7364		180	81.75	5,550,215	8,023,860	
2006/01		0.85	0.9068	0.9068		180	80.27	5,592,996	8,096,580	
2006/07		0.80	0.8133	0.8133		180	80.27	5,629,384	8,162,460	
2007/01		0.80	1.0133	1.0133		180	72.23	5,675,016	8,245,080	
2007/07		0.75	1.1050	1.1050		180	72.23	5,675,016	8,336,160	5
2008/01		0.75	0.8556	0.8556		180	72.23	5,758,769	8,407,440	
2008/07		0.70	0.6104	0.6104		180	67.55	5,783,376	8,458,740	
2009/01		0.70	1.3268	1.3268		180	67.55	5,837,092	8,571,060	
2009/07		0.65	0.6841	0.6841		180	67.55	5,863,050	8,629,740	
2010/01		0.65	0.8643	0.8643		180	67.55	5,895,989	8,704,260	
2010/07		0.60	0.7107	0.7107		180	67.55	5,921,129	8,766,180	
2011/01		0.60	0.9198	0.9198		180	67.55	5,953,808	8,846,820	
2011/07		0.55	0.9028	0.9028		180	67.55	5,983,369	8,926,740	
2012/01	39,865	0.55	0.3865	0.3865		180	66.73	6,035,955	8,961,300	
2012/07		0.50	0.9417	0.9417		180	66.73	6,064,378	9,045,720	



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2013/01		0.50	0.4901	0.4901		180	68.56	6,079,242	9,090,000	
2013/07		0.45	0.6196	0.6196		180	68.56	6,096,191	9,146,340	
2014/01		0.45	0.8564	0.8564		180	69.82	6,119,686	9,224,640	
2014/07		0.40	1.2383	1.2383		180	69.82	6,149,997	9,338,940	
2015/01		0.40	0.7571	0.7571		180	67.54	6,168,619	9,409,680	
2015/09		0.35	1.5736	1.5736		180	67.54	6,202,596	9,557,820	
2016/09		0.30	1.9890	1.9890		180	67.54	6,239,607	9,747,900	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
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Brynwood Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1656 SOUTH JEFFERSON STRE	1/1/2014-6/30/2014	Number of Beds: 97	Superior: 0
MONTICELLO, FL 32344	Days in CR 181	Maximum: 17,557	Standard: 366
County: Jefferson [33]	First Used : 2015/01	Max Annualized: 35,405	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 15,721	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,059	Inflation
Current Class North Small	Initial CR? False	Medicaid: 11,798	FY Index: 1.33439166
Class at 1/94: North Small	Medicaid Utilization	75.04612%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.54263%	Cost: 1.08180716
Open Date: 04/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 04/01/1987	Low Occupancy Adjustment Factor:	113.24189%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 253855			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	581,598	1,033,960	671,436	290,231		2,577,225	
1a	Audit Adjustments							
2	Cost Per Diem	49.2963	87.6386	56.9110	24.6000		218.4459	
3	Cost Per Diem Inflated	53.3291	93.2881	61.5667				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.3291	93.2881	61.5667	24.6000		232.7839	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.6150		62.4156				
7	Provider Target Rate	53.4306		65.8877				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	57.0523		71.4825				
10b	Base for line 10a	54.0458		67.7156				
11	Lesser of 5,7,8,10, 10a	53.3291	93.2881	61.5667	13.6500		221.8339	
12/13	Medicaid Adjustment Rate		2.6286	1.7348				
14	Prospective Per Diem 11	53.3291	95.9167	63.3015	13.6500		226.1973	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Brynwood Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	01/01/2002	Amount:	1,684,000.00		Total Amount	Per Diem
RS to Start Calcs:	1987/01	Type:	Fixed	80% Capital(1):	2,975,963	11.1515
Indexed Asset Value	3,719,954	<60% of Base:	False	20% ROE(2):	743,991	0.5447
FRVS Base Asset:	1,720,920	Interest Rate:	10.4500%	Insurance Cost(3):	10,783	0.6859
Occup Adj Factor	0.9000	Chase Rate:	10.0000%	Taxes Cost(3):	18,202	1.1578
ROE Factor	0.023330	Amortization Rate:	10.4500%	Home Office(3):	17,891	1.1380
		Interest Only:	False	Replacement(3&4):	4,850	0.0000
		Yearly Payment:	355,338	Total FRVS PD:		14.6779

(1) 80% Capital (\$2,975,963) amortized at 10.4500 % for 20 years Principal & Interest of \$355,338 divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$11.1515

(2) 20% ROE (\$743,991) times the ROE factor (0.023330) divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$0.5447

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1986	Current RS PBS:	28,682
Comparison Bed	60	Effective PBS Limitation	54,155
			1,720,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3291	53.3291	2.4195	50.9096
Direct Care	95.9167	95.9167	4.3517	91.5650
Indirect Care	63.3015	63.3015	2.8720	60.4295
Property	13.6500	14.6779	0.6659	14.0120
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4680
Supplemental Rate				8.1814
Totals	226.1973	227.2252	10.3091	247.5655

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/01	1,825,295	0.00	1.0091	1.0091		60	81.94	1,720,920	1,720,920	1
1987/07		0.10	0.9007	0.9007		60	81.94	1,722,471	1,765,380	
1988/01		0.10	0.9007	0.9007		60	81.94	1,724,023	1,779,720	
1988/07		0.20	0.5899	0.5899		97	91.11	1,726,057	2,875,662	
1989/01		0.20	0.5899	0.5899		97	91.11	1,728,094	2,892,637	
1989/07		0.30	0.5899	0.5899		97	91.11	1,731,153	2,912,231	
1990/01	528,216	0.30	0.5899	0.5899		97	91.11	2,262,433	2,926,878	
1990/07		0.40	0.5899	0.5899		97	91.11	2,267,772	2,944,144	
1991/01		0.40	0.5899	0.5899		97	91.11	2,273,124	2,961,410	
1991/07		0.50	1.4932	1.4932		97	91.11	2,290,095	3,005,642	
1992/01		0.50	2.0117	2.0117		97	91.11	2,313,131	3,066,073	
1992/07		0.60	1.8152	1.8152		97	85.27	2,338,323	3,121,751	
1993/01		0.60	1.7710	1.7710		97	85.27	2,363,170	3,177,041	
1993/07		0.70	1.5329	1.5329		97	86.12	2,388,527	3,225,735	
1994/01		0.70	1.6983	1.6983		97	86.12	2,416,922	3,280,540	
1994/07		0.80	1.5991	1.5991		97	86.14	2,447,842	3,333,017	
1995/01		0.80	1.5812	1.5812		97	88.82	2,478,807	3,385,688	
1995/07		0.90	1.5250	1.5250		97	88.82	2,512,829	3,437,292	
1996/01		0.90	1.7228	1.7228		97	89.89	2,551,790	3,496,559	
1996/07		1.00	1.3294	1.3294		97	89.89	2,585,713	3,543,022	
1997/01	26,942	1.00	1.4109	1.4109		97	86.82	2,649,137	3,592,977	
1997/07		1.00	1.0917	1.0917		97	86.82	2,678,058	3,632,165	
1998/01	14,632	1.00	1.1663	1.1663		97	88.14	2,723,924	3,674,554	
1998/07		1.00	1.0794	1.0794		97	88.14	2,753,326	3,714,227	
1999/01		1.00	1.4499	1.4499		97	83.32	2,793,246	3,768,062	
1999/07		1.00	1.2299	1.2299		97	83.32	2,827,600	3,814,428	
2000/01		1.00	1.3356	1.3356		97	83.32	2,865,365	3,865,353	
2000/07		1.00	1.1129	1.1129		97	86.64	2,897,254	3,908,324	
2001/01		1.00	1.2976	1.2976		97	86.64	2,934,849	3,959,055	
2001/07		1.00	0.9615	0.9615		97	86.64	2,963,068	3,997,079	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/01		1.00	1.0301	1.0301		97	90.70	2,993,591	4,038,207	
2002/07		1.00	0.8337	0.8337		97	90.70	3,018,549	4,071,866	
2003/01		1.00	1.3271	1.3271		97	90.70	3,058,608	4,125,895	
2003/07		1.00	1.1664	1.1664		97	90.70	3,094,284	4,174,007	
2004/01		1.00	1.1103	1.1103		97	84.98	3,128,640	4,220,373	
2004/07		1.00	0.8378	0.8378		97	84.98	3,154,852	4,255,778	
2005/01		1.00	0.8595	0.8595		97	76.64	3,181,968	4,292,347	
2005/07		1.00	0.7364	0.7364		97	76.64	3,205,400	4,323,969	
2006/01		1.00	0.9068	0.9068		97	78.06	3,234,467	4,363,157	
2006/07		1.00	0.8133	0.8133		97	78.06	3,260,773	4,398,659	
2007/01		1.00	1.0133	1.0133		97	77.16	3,293,814	4,443,182	
2007/07		0.95	1.1050	1.1050		97	77.16	3,328,392	4,492,264	
2008/01		0.95	0.8556	0.8556		97	77.16	3,355,445	4,530,676	
2008/07		0.90	0.6104	0.6104		97	77.17	3,373,880	4,558,321	
2009/01		0.90	1.3268	1.3268		97	77.17	3,414,168	4,618,849	
2009/07		0.85	0.6841	0.6841		97	77.17	3,434,021	4,650,471	
2010/01		0.85	0.8643	0.8643		97	77.17	3,459,251	4,690,629	
2010/07		0.80	0.7107	0.7107		97	77.17	3,478,920	4,723,997	
2011/01		0.80	0.9198	0.9198		97	77.17	3,504,518	4,767,453	
2011/07		0.75	0.9028	0.9028		97	77.17	3,528,247	4,810,521	
2012/01		0.75	0.3865	0.3865		97	73.61	3,538,475	4,829,145	
2012/07		0.70	0.9417	0.9417		97	73.52	3,561,801	4,874,638	
2013/01		0.70	0.4901	0.4901		97	73.52	3,574,022	4,898,500	
2013/07		0.65	0.6196	0.6196		97	73.52	3,588,415	4,928,861	
2014/01		0.65	0.8564	0.8564		97	71.04	3,608,392	4,971,056	
2014/07		0.60	1.2383	1.2383		97	71.04	3,635,202	5,032,651	
2015/01		0.60	0.7571	0.7571		97	75.05	3,651,717	5,070,772	
2015/09		0.55	1.5736	1.5736		97	75.05	3,683,323	5,150,603	
2016/09		0.50	1.9890	1.9890		97	75.05	3,719,954	5,253,035	

Message Code:

1 Per Bed Standard Limitation



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Chipola Health And Rehabilitation Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4294 3RD AVENUE	1/1/2014-6/30/2014	Number of Beds: 60	Superior: 0
MARIANNA, FL 32446	Days in CR 181	Maximum: 10,860	Standard: 366
County: Jackson [32]	First Used : 2015/01	Max Annualized: 21,900	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 9,969	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,063	Inflation
Current Class North Small	Initial CR? False	Medicaid: 6,285	FY Index: 1.33439166
Class at 1/94: North Small	Medicaid Utilization	63.04544%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.79558%	Cost: 1.08180716
Open Date: 05/07/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/07/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 05/07/1991	Low Occupancy Adjustment Factor:	116.09113%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 212237	Interim Component Effective Date:	02/01/2016	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	280,783	471,870	367,402	166,615		1,286,670	
1a	Audit Adjustments							
2	Cost Per Diem	44.6751	75.0788	58.4570	26.5099		204.7208	
3	Cost Per Diem Inflated	48.3298	79.9186	63.2392				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.3298	79.9186	63.2392	26.5099		217.9975	
5a	Interim Adjustment	10.3478						
5b	Interim Adjusted Per Diem	58.6776						
6	Prior Semester: Provider Target Base	50.6150		70.7966				
7	Provider Target Rate	53.4306		74.7349				
7a	Interim Adjustment	10.3478						
7b	Interim Adjusted Target Rate	63.7784						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	69.8811		71.7523				
10b	Base for line 10a	56.3961		67.9712				
11	Lesser of 5,7,8,10, 10a	58.6776	79.9186	63.2392	13.6500		215.4854	
12/13	Medicaid Adjustment Rate		1.1729	0.9281				
14	Prospective Per Diem 11	58.6776	81.0915	64.1673	13.6500		217.5864	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Chipola Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/07/1991		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,600,000.00		Total Amount	Per Diem
RS to Start Calcs:	1991/01	Type:	Fixed	80% Capital(1):	2,156,830	13.3314
Indexed Asset Value	2,696,038	<60% of Base:	False	20% ROE(2):	539,208	0.6382
FRVS Base Asset:	1,711,770	Interest Rate:	10.7500%	Insurance Cost(3):	6,090	0.6109
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	4,597	0.4611
ROE Factor	0.023330	Amortization Rate:	10.7500%	Home Office(3):	13,844	1.3887
		Interest Only:	False	Replacement(3&4):	10,382	0.0000
		Yearly Payment:	262,761	Total FRVS PD:		16.4303

(1) 80% Capital (\$2,156,830) amortized at 10.7500 % for 20 years Principal & Interest of \$262,761 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$13.3314

(2) 20% ROE (\$539,208) times the ROE factor (0.023330) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.6382

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1990	Current RS PBS:	30,352
Comparison Bed	60	Effective PBS Limitation	54,155
			1,821,120

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.6776	58.6776	2.6622	56.0154
Direct Care	81.0915	81.0915	3.6791	77.4124
Indirect Care	64.1673	64.1673	2.9112	61.2561
Property	13.6500	16.4303	0.7454	15.6849
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1310
Supplemental Rate				8.1814
Totals	217.5864	220.3667	9.9979	237.6812

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/01	1,711,770	0.00	0.5899	0.5899		60	85.84	1,711,770	1,831,800	
1991/07		0.10	1.4932	1.4932		60	85.84	1,714,326	1,859,160	
1992/01		0.10	2.0117	2.0117		60	85.84	1,717,775	1,896,540	
1992/07		0.20	1.8152	1.8152		60	85.84	1,724,011	1,930,980	
1993/01		0.20	1.7710	1.7710		60	85.84	1,730,117	1,965,180	
1993/07		0.30	1.5329	1.5329		60	85.84	1,738,074	1,995,300	
1994/01		0.30	1.6983	1.6983		60	90.00	1,746,929	2,029,200	
1994/07		0.40	1.5991	1.5991		60	90.00	1,758,102	2,061,660	
1995/01		0.40	1.5812	1.5812		60	87.23	1,769,222	2,094,240	
1995/07		0.50	1.5250	1.5250		60	87.23	1,782,712	2,126,160	
1996/01	35,493	0.50	1.7228	1.7228		60	79.22	1,833,561	2,162,820	
1996/07		0.60	1.3294	1.3294		60	79.22	1,848,185	2,191,560	
1997/01		0.60	1.4109	1.4109		60	79.22	1,863,830	2,222,460	
1997/07		0.70	1.0917	1.0917		60	79.22	1,878,073	2,246,700	
1998/01		0.70	1.1663	1.1663		60	79.22	1,893,406	2,272,920	
1998/07		0.80	1.0794	1.0794		60	79.22	1,909,756	2,297,460	
1999/01		0.80	1.4499	1.4499		60	67.27	1,931,907	2,330,760	
1999/07		0.90	1.2299	1.2299		60	67.27	1,953,291	2,359,440	
2000/01		0.90	1.3356	1.3356		60	64.05	1,976,770	2,390,940	
2000/07		1.00	1.1129	1.1129		60	71.06	1,998,769	2,417,520	
2001/01		1.00	1.2976	1.2976		60	71.06	2,024,705	2,448,900	
2001/07		1.00	0.9615	0.9615		60	72.97	2,044,173	2,472,420	
2002/01		1.00	1.0301	1.0301		60	66.93	2,065,230	2,497,860	
2002/07		1.00	0.8337	0.8337		60	66.93	2,082,448	2,518,680	
2003/01		1.00	1.3271	1.3271		60	65.12	2,110,084	2,552,100	
2003/07		1.00	1.1664	1.1664		60	65.12	2,134,696	2,581,860	
2004/01		1.00	1.1103	1.1103		60	69.94	2,158,398	2,610,540	
2004/07		1.00	0.8378	0.8378		60	69.94	2,176,481	2,632,440	
2005/01		1.00	0.8595	0.8595		60	66.68	2,195,188	2,655,060	
2005/07		1.00	0.7364	0.7364		60	66.68	2,211,353	2,674,620	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01	48,554	1.00	0.9068	0.9068		60	68.21	2,279,960	2,698,860	
2006/07		1.00	0.8133	0.8133		60	68.21	2,298,503	2,720,820	
2007/01		1.00	1.0133	1.0133		60	71.57	2,321,794	2,748,360	
2007/07		1.00	1.1050	1.1050		60	71.57	2,347,450	2,778,720	
2008/01		1.00	0.8556	0.8556		60	71.57	2,367,535	2,802,480	
2008/07		1.00	0.6104	0.6104		60	67.44	2,381,986	2,819,580	
2009/01		1.00	1.3268	1.3268		60	67.44	2,413,590	2,857,020	
2009/07		1.00	0.6841	0.6841		60	67.44	2,430,101	2,876,580	
2010/01		1.00	0.8643	0.8643		60	67.44	2,451,104	2,901,420	
2010/07		1.00	0.7107	0.7107		60	67.44	2,468,524	2,922,060	
2011/01		1.00	0.9198	0.9198		60	67.44	2,491,229	2,948,940	
2011/07		0.95	0.9028	0.9028		60	67.44	2,512,596	2,975,580	
2012/01		0.95	0.3865	0.3865		60	72.28	2,521,822	2,987,100	
2012/07		0.90	0.9417	0.9417		60	72.28	2,543,194	3,015,240	
2013/01		0.90	0.4901	0.4901		60	74.84	2,554,412	3,030,000	
2013/07		0.85	0.6196	0.6196		60	74.84	2,567,866	3,048,780	
2014/01		0.85	0.8564	0.8564		60	59.85	2,586,557	3,074,880	
2014/07		0.80	1.2383	1.2383		60	59.78	2,612,179	3,112,980	
2015/01		0.80	0.7571	0.7571		60	63.05	2,628,001	3,136,560	
2015/09		0.75	1.5736	1.5736		60	63.05	2,659,017	3,185,940	
2016/09		0.70	1.9890	1.9890		60	63.05	2,696,038	3,249,300	

Message Code:

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0005384-00 - 2016/09

241.52

Glencove Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1027 E HWY 98	1/1/2014-6/30/2014	Number of Beds: 115	Superior: 0
PANAMA CITY, FL 32401	Days in CR 181	Maximum: 20,815	Standard: 366
County: Bay [3]	First Used : 2015/01	Max Annualized: 41,975	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 19,871	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,250	Inflation
Current Class North Large	Initial CR? False	Medicaid: 11,804	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	59.40315%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.46481%	Cost: 1.08180716
Open Date: 09/01/1992	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1992	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 09/01/1992	Low Occupancy Adjustment Factor:	120.73150%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 212181			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	536,327	1,013,704	758,170	237,733		2,545,934	
1a	Audit Adjustments							
2	Cost Per Diem	45.4360	85.8780	64.2299	20.1400		215.6839	
3	Cost Per Diem Inflated	49.1530	91.4140	69.4844				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.1530	91.4140	69.4844	20.1400		230.1914	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.0561		68.3286				
7	Provider Target Rate	52.8406		72.1296				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	57.2017		71.6084				
10b	Base for line 10a	54.1874		67.8349				
11	Lesser of 5,7,8,10, 10a	49.1530	91.4140	66.1467	13.6500		220.3637	
12/13	Medicaid Adjustment Rate		0.9670	0.6997				
14	Prospective Per Diem 11	49.1530	92.3810	66.8464	13.6500		222.0304	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Glencove Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/01/1992		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,600,000.00		Total Amount	Per Diem
RS to Start Calcs:	1992/07	Type:	Fixed	80% Capital(1):	4,279,482	13.8008
Indexed Asset Value	5,349,353	<60% of Base:	False	20% ROE(2):	1,069,871	0.6607
FRVS Base Asset:	3,635,035	Interest Rate:	10.7500%	Insurance Cost(3):	19,503	0.9815
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	34,937	1.7582
ROE Factor	0.023330	Amortization Rate:	10.7500%	Home Office(3):	20,003	1.0066
		Interest Only:	False	Replacement(3&4):	10,264	0.0000
		Yearly Payment:	521,359	Total FRVS PD:		18.2078

(1) 80% Capital (\$4,279,482) amortized at 10.7500 % for 20 years Principal & Interest of \$521,359 divided by annual available days (41975) divided by Occup. Adj. (0.90) = \$13.8008

(2) 20% ROE (\$1,069,871) times the ROE factor (0.023330) divided by annual available days (41975) divided by Occup. Adj. (0.90) = \$0.6607

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	31,609
Comparison Date: 01/01/1992	Current RS PBS:	54,155
Comparison Bed 115	Effective PBS Limitation	3,635,035

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.1530	49.1530	2.2300	46.9230
Direct Care	92.3810	92.3810	4.1913	88.1897
Indirect Care	66.8464	66.8464	3.0328	63.8136
Property	13.6500	18.2078	0.8261	17.3817
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.0293
Supplemental Rate				8.1814
Totals	222.0304	226.5882	10.2802	241.5187

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1992/07	4,789,600	0.00	1.8152	1.8152		115	71.49	3,635,035	3,635,035	1
1993/01		0.10	1.7710	1.7710		115	71.49	3,641,473	3,766,595	
1993/07		0.10	1.5329	1.5329		115	71.49	3,647,055	3,824,325	
1994/01		0.20	1.6983	1.6983		115	71.49	3,659,444	3,889,300	
1994/07		0.20	1.5991	1.5991		115	71.49	3,671,147	3,951,515	
1995/01		0.30	1.5812	1.5812		115	71.49	3,688,563	4,013,960	
1995/07		0.30	1.5250	1.5250		115	71.49	3,705,438	4,075,140	
1996/01		0.40	1.7228	1.7228		115	66.10	3,730,972	4,145,405	
1996/07		0.40	1.3294	1.3294		115	66.10	3,750,813	4,200,490	
1997/01		0.50	1.4109	1.4109		115	66.10	3,777,275	4,259,715	
1997/07		0.50	1.0917	1.0917		115	66.10	3,797,895	4,306,175	
1998/01		0.60	1.1663	1.1663		115	66.10	3,824,473	4,356,430	
1998/07		0.60	1.0794	1.0794		115	66.10	3,849,240	4,403,465	
1999/01		0.70	1.4499	1.4499		115	63.32	3,888,306	4,467,290	
1999/07		0.70	1.2299	1.2299		115	63.32	3,921,780	4,522,260	
2000/01		0.80	1.3356	1.3356		115	58.87	3,963,684	4,582,635	
2000/07		0.80	1.1129	1.1129		115	61.55	3,998,973	4,633,580	
2001/01		0.90	1.2976	1.2976		115	61.55	4,045,673	4,693,725	
2001/07		0.90	0.9615	0.9615		115	60.00	4,080,684	4,738,805	
2002/01		1.00	1.0301	1.0301		115	61.38	4,122,719	4,787,565	
2002/07		1.00	0.8337	0.8337		115	61.38	4,157,090	4,827,470	
2003/01		1.00	1.3271	1.3271		115	59.76	4,212,259	4,891,525	
2003/07		1.00	1.1664	1.1664		115	59.76	4,261,391	4,948,565	
2004/01		1.00	1.1103	1.1103		115	59.05	4,308,705	5,003,535	
2004/07		1.00	0.8378	0.8378		115	59.05	4,344,803	5,045,510	
2005/01		1.00	0.8595	0.8595		115	58.83	4,382,147	5,088,865	
2005/07		1.00	0.7364	0.7364		115	58.83	4,414,417	5,126,355	
2006/01	33,406	1.00	0.9068	0.9068		115	56.95	4,487,853	5,172,815	
2006/07		1.00	0.8133	0.8133		115	56.95	4,524,353	5,214,905	
2007/01		1.00	1.0133	1.0133		115	59.86	4,570,198	5,267,690	



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241.52

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/07		1.00	1.1050	1.1050		115	59.86	4,620,699	5,325,880	
2008/01		1.00	0.8556	0.8556		115	59.86	4,660,234	5,371,420	
2008/07		1.00	0.6104	0.6104		115	62.26	4,688,680	5,404,195	
2009/01		1.00	1.3268	1.3268		115	62.26	4,750,889	5,475,955	
2009/07		1.00	0.6841	0.6841		115	62.26	4,783,390	5,513,445	
2010/01		1.00	0.8643	0.8643		115	62.26	4,824,733	5,561,055	
2010/07		1.00	0.7107	0.7107		115	62.26	4,859,022	5,600,615	
2011/01		1.00	0.9198	0.9198		115	62.26	4,903,715	5,652,135	
2011/07		1.00	0.9028	0.9028		115	62.26	4,947,986	5,703,195	
2012/01		1.00	0.3865	0.3865		115	58.08	4,967,110	5,725,275	
2012/07		1.00	0.9417	0.9417		115	57.01	5,013,885	5,779,210	
2013/01		0.95	0.4901	0.4901		115	57.01	5,037,230	5,807,500	
2013/07		0.95	0.6196	0.6196		115	57.01	5,066,879	5,843,495	
2014/01		0.90	0.8564	0.8564		115	66.25	5,105,935	5,893,520	
2014/07		0.90	1.2383	1.2383		115	66.25	5,162,841	5,966,545	
2015/01		0.85	0.7571	0.7571		115	59.40	5,196,064	6,011,740	
2015/09		0.85	1.5736	1.5736		115	59.40	5,265,567	6,106,385	
2016/09		0.80	1.9890	1.9890		115	59.40	5,349,353	6,227,825	

Message Code:

1 Per Bed Standard Limitation

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Florida Agency for Health Care Administration
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233.51

Panama City Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
924 W 13TH ST	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
PANAMA CITY, FL 32401	Days in CR 181	Maximum: 21,720	Standard: 366
County: Bay [3]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 21,152	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,043	Inflation
Current Class North Large	Initial CR? False	Medicaid: 15,922	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	75.27421%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.38490%	Cost: 1.08180716
Open Date: 08/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 08/01/1984	Low Occupancy Adjustment Factor:	123.15978%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 211851			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	632,865	1,374,923	946,288	323,853		3,277,929	
1a	Audit Adjustments							
2	Cost Per Diem	39.7478	86.3537	59.4327	20.3400		205.8742	
3	Cost Per Diem Inflated	42.9995	91.9204	64.2947				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.9995	91.9204	64.2947	20.3400		219.5546	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.5369		67.1735				
7	Provider Target Rate	51.2369		70.9102				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	55.0892		69.3487				
10b	Base for line 10a	52.1862		65.6943				
11	Lesser of 5,7,8,10, 10a	42.9995	91.9204	64.2947	13.6500		212.8646	
12/13	Medicaid Adjustment Rate		2.6136	1.8281				
14	Prospective Per Diem 11	42.9995	94.5340	66.1228	13.6500		217.3063	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



Florida Agency for Health Care Administration

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Panama City Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/01/2004		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	600,000.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Variable	80% Capital(1):	2,042,616	6.4422
Indexed Asset Value	2,553,270	<60% of Base:	True	20% ROE(2):	510,654	0.3022
FRVS Base Asset:	1,395,468	Interest Rate:	12.5000%	Insurance Cost(3):	11,514	0.5443
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	11,374	0.5377
ROE Factor	0.023330	Amortization Rate:	12.5000%	Home Office(3):	19,334	0.9141
		Interest Only:	True	Replacement(3&4):	10,806	0.0000
		Yearly Payment:	253,953	Total FRVS PD:		8.7405

(1) 80% Capital (\$2,042,616) amortized at 12.5000 % for 20 years Interest of \$253,953 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$6.4422

(2) 20% ROE (\$510,654) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3022

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.9995	42.9995	1.9509	41.0486
Direct Care	94.5340	94.5340	4.2890	90.2450
Indirect Care	66.1228	66.1228	3.0000	63.1228
Property	13.6500	8.7405	0.3966	8.3439
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.5641
Supplemental Rate				8.1814
Totals	217.3063	212.3968	9.6365	233.5058

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	1,392,683	0.00	1.9179	1.9179		120	64.28	1,392,683	3,352,680	
1985/01		0.10	1.1471	1.1471		120	64.28	1,394,280	3,391,080	
1985/10		0.10	0.8522	0.8522		120	64.28	1,395,468	3,420,000	
1986/01		0.20	0.8299	0.8299		120	64.28	1,397,784	3,448,440	
1986/07		0.20	0.2974	0.2974		120	64.28	1,398,616	3,441,840	
1987/01		0.30	1.0091	1.0091		120	64.28	1,402,850	3,503,400	
1987/07		0.30	0.9007	0.9007		120	76.98	1,406,641	3,530,760	
1988/01		0.40	0.9007	0.9007		120	76.98	1,411,709	3,559,440	
1988/07		0.40	0.5899	0.5899		120	78.87	1,415,041	3,557,520	
1989/01		0.50	0.5899	0.5899		120	78.87	1,419,215	3,578,520	
1989/07		0.50	0.5899	0.5899		120	73.76	1,423,402	3,602,760	
1990/01		0.60	0.5899	0.5899		120	73.76	1,428,439	3,620,880	
1990/07		0.60	0.5899	0.5899		120	73.12	1,433,494	3,642,240	
1991/01		0.70	0.5899	0.5899		120	73.12	1,439,413	3,663,600	
1991/07		0.70	1.4932	1.4932		120	84.34	1,454,458	3,718,320	
1992/01		0.80	2.0117	2.0117		120	84.34	1,477,866	3,793,080	
1992/07	17,984	0.80	1.8152	1.8152		120	85.12	1,517,312	3,861,960	
1993/01		0.90	1.7710	1.7710		120	85.12	1,541,496	3,930,360	
1993/07		0.90	1.5329	1.5329		120	86.89	1,562,762	3,990,600	
1994/01		1.00	1.6983	1.6983		120	86.89	1,589,302	4,058,400	
1994/07		1.00	1.5991	1.5991		120	82.26	1,614,717	4,123,320	
1995/01	34,122	1.00	1.5812	1.5812		120	77.02	1,674,371	4,188,480	
1995/07	46,957	1.00	1.5250	1.5250		120	77.02	1,746,862	4,252,320	
1996/01		1.00	1.7228	1.7228		120	77.02	1,776,957	4,325,640	
1996/07		1.00	1.3294	1.3294		120	77.02	1,800,580	4,383,120	
1997/01		1.00	1.4109	1.4109		120	77.02	1,825,984	4,444,920	
1997/07		1.00	1.0917	1.0917		120	77.02	1,845,918	4,493,400	
1998/01		1.00	1.1663	1.1663		120	72.35	1,867,447	4,545,840	
1998/07		1.00	1.0794	1.0794		120	72.35	1,887,604	4,594,920	
1999/01		1.00	1.4499	1.4499		120	68.24	1,914,972	4,661,520	



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233.51

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		120	68.24	1,938,524	4,718,880	
2000/01		1.00	1.3356	1.3356		120	74.66	1,964,415	4,781,880	
2000/07		1.00	1.1129	1.1129		120	76.16	1,986,277	4,835,040	
2001/01		1.00	1.2976	1.2976		120	76.16	2,012,051	4,897,800	
2001/07		1.00	0.9615	0.9615		120	71.76	2,031,397	4,944,840	
2002/01		1.00	1.0301	1.0301		120	68.71	2,052,322	4,995,720	
2002/07		1.00	0.8337	0.8337		120	68.71	2,069,432	5,037,360	
2003/01		1.00	1.3271	1.3271		120	71.01	2,096,895	5,104,200	
2003/07		1.00	1.1664	1.1664		120	71.01	2,121,353	5,163,720	
2004/01		1.00	1.1103	1.1103		120	70.06	2,144,906	5,221,080	
2004/07		1.00	0.8378	0.8378		120	70.06	2,162,876	5,264,880	
2005/01		0.95	0.8595	0.8595		120	69.15	2,180,536	5,310,120	
2005/07		0.95	0.7364	0.7364		120	69.15	2,195,791	5,349,240	
2006/01	38,897	0.90	0.9068	0.9068		120	76.68	2,252,608	5,397,720	
2006/07		0.90	0.8133	0.8133		120	76.68	2,269,097	5,441,640	
2007/01		0.85	1.0133	1.0133		120	73.24	2,288,641	5,496,720	
2007/07		0.85	1.1050	1.1050		120	73.24	2,310,138	5,557,440	
2008/01		0.80	0.8556	0.8556		120	73.24	2,325,951	5,604,960	
2008/07		0.80	0.6104	0.6104		120	68.49	2,337,309	5,639,160	
2009/01		0.75	1.3268	1.3268		120	68.49	2,360,568	5,714,040	
2009/07		0.75	0.6841	0.6841		120	68.49	2,372,680	5,753,160	
2010/01		0.70	0.8643	0.8643		120	68.49	2,387,035	5,802,840	
2010/07		0.70	0.7107	0.7107		120	68.49	2,398,910	5,844,120	
2011/01		0.65	0.9198	0.9198		120	68.49	2,413,253	5,897,880	
2011/07		0.65	0.9028	0.9028		120	68.49	2,427,414	5,951,160	
2012/01		0.60	0.3865	0.3865		120	67.75	2,433,043	5,974,200	
2012/07		0.60	0.9417	0.9417		120	67.75	2,446,790	6,030,480	
2013/01	18,904	0.55	0.4901	0.4901		120	69.26	2,472,291	6,060,000	
2013/07		0.55	0.6196	0.6196		120	69.26	2,480,717	6,097,560	
2014/01		0.50	0.8564	0.8564		120	68.73	2,491,339	6,149,760	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	68.73	2,506,765	6,225,960	
2015/01		0.45	0.7571	0.7571		120	75.27	2,515,306	6,273,120	
2015/09		0.45	1.5736	1.5736		120	75.27	2,533,117	6,371,880	
2016/09		0.40	1.9890	1.9890		120	75.27	2,553,270	6,498,600	

Message Code:

2Z0S4

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235.16

Riverchase Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1017 STRONG RD	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
QUINCY, FL 32351	Days in CR 181	Maximum: 21,720	Standard: 366
County: Gadsden [20]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 20,394	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,235	Inflation
Current Class North Large	Initial CR? False	Medicaid: 16,888	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	82.80867%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.89503%	Cost: 1.08180716
Open Date: 11/19/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/19/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 11/19/1985	Low Occupancy Adjustment Factor:	118.74624%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 253413			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	831,575	1,276,343	932,689	387,580		3,428,187	
1a	Audit Adjustments							
2	Cost Per Diem	49.2406	75.5769	55.2279	22.9500		202.9954	
3	Cost Per Diem Inflated	53.2688	80.4488	59.7459				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.2688	80.4488	59.7459	22.9500		216.4135	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	49.5210		62.5421				
7	Provider Target Rate	52.2758		66.0212				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.9685		65.0977				
10b	Base for line 10a	52.0718		61.6673				
11	Lesser of 5,7,8,10, 10a	52.2758	80.4488	59.7459	13.6500		206.1205	
12/13	Medicaid Adjustment Rate		2.9693	2.2052				
14	Prospective Per Diem 11	52.2758	83.4181	61.9511	13.6500		211.2950	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Riverchase Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	01/01/1994	Amount:	2,900,000.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Fixed	80% Capital(1):	4,703,945	14.2482
Indexed Asset Value	5,879,931	<60% of Base:	False	20% ROE(2):	1,175,986	0.6960
FRVS Base Asset:	3,420,000	Interest Rate:	10.4500%	Insurance Cost(3):	13,942	0.6836
Occup Adj Factor	0.9000	Chase Rate:	11.5000%	Taxes Cost(3):	20,430	1.0018
ROE Factor	0.023330	Amortization Rate:	10.4500%	Home Office(3):	19,031	0.9332
		Interest Only:	False	Replacement(3&4):	8,657	0.0000
		Yearly Payment:	561,664	Total FRVS PD:		17.5628

(1) 80% Capital (\$4,703,945) amortized at 10.4500 % for 20 years Principal & Interest of \$561,664 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$14.2482

(2) 20% ROE (\$1,175,986) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6960

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.2758	52.2758	2.3717	49.9041
Direct Care	83.4181	83.4181	3.7846	79.6335
Indirect Care	61.9511	61.9511	2.8107	59.1404
Property	13.6500	17.5628	0.7968	16.7660
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5373
Supplemental Rate				8.1814
Totals	211.2950	215.2078	9.7638	235.1627

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	3,532,798	0.00	0.8522	0.8522		120	86.06	3,420,000	3,420,000	1
1986/01		0.10	0.8299	0.8299		120	86.06	3,422,839	3,448,440	
1986/07		0.10	0.2974	0.2974		120	86.06	3,423,856	3,441,840	
1987/01		0.20	1.0091	1.0091		120	86.06	3,430,765	3,503,400	
1987/07		0.20	0.9007	0.9007		120	82.20	3,436,944	3,530,760	
1988/01		0.30	0.9007	0.9007		120	82.20	3,446,231	3,559,440	
1988/07		0.30	0.5899	0.5899		120	92.35	3,452,331	3,557,520	
1989/01		0.40	0.5899	0.5899		120	92.35	3,460,479	3,578,520	
1989/07		0.40	0.5899	0.5899		120	92.35	3,468,646	3,602,760	
1990/01		0.50	0.5899	0.5899		120	92.35	3,478,879	3,620,880	
1990/07		0.50	0.5899	0.5899		120	92.35	3,489,142	3,642,240	
1991/01		0.60	0.5899	0.5899		120	92.35	3,501,490	3,663,600	
1991/07		0.60	1.4932	1.4932		120	92.35	3,532,860	3,718,320	
1992/01		0.70	2.0117	2.0117		120	92.35	3,582,610	3,793,080	
1992/07		0.70	1.8152	1.8152		120	94.89	3,628,131	3,861,960	
1993/01		0.80	1.7710	1.7710		120	94.89	3,679,534	3,930,360	
1993/07		0.80	1.5329	1.5329		120	93.66	3,724,656	3,990,600	
1994/01		0.90	1.6983	1.6983		120	93.66	3,781,587	4,058,400	
1994/07		0.90	1.5991	1.5991		120	92.17	3,836,012	4,123,320	
1995/01		1.00	1.5812	1.5812		120	89.56	3,896,667	4,188,480	
1995/07		1.00	1.5250	1.5250		120	89.56	3,956,091	4,252,320	
1996/01		1.00	1.7228	1.7228		120	91.77	4,024,247	4,325,640	
1996/07		1.00	1.3294	1.3294		120	91.77	4,077,745	4,383,120	
1997/01	47,153	1.00	1.4109	1.4109		120	91.90	4,182,431	4,444,920	
1997/07		1.00	1.0917	1.0917		120	91.90	4,228,091	4,493,400	
1998/01	21,014	1.00	1.1663	1.1663		120	89.92	4,298,417	4,545,840	
1998/07		1.00	1.0794	1.0794		120	89.92	4,344,814	4,594,920	
1999/01		1.00	1.4499	1.4499		120	87.71	4,407,809	4,661,520	
1999/07		1.00	1.2299	1.2299		120	87.71	4,462,021	4,718,880	
2000/01		1.00	1.3356	1.3356		120	89.05	4,521,616	4,781,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		120	89.05	4,571,937	4,835,040	
2001/01		1.00	1.2976	1.2976		120	89.05	4,631,262	4,897,800	
2001/07		1.00	0.9615	0.9615		120	89.05	4,675,792	4,944,840	
2002/01		1.00	1.0301	1.0301		120	98.10	4,723,957	4,995,720	
2002/07		1.00	0.8337	0.8337		120	98.10	4,763,341	5,037,360	
2003/01		1.00	1.3271	1.3271		120	98.10	4,826,555	5,104,200	
2003/07		1.00	1.1664	1.1664		120	98.10	4,882,852	5,163,720	
2004/01		1.00	1.1103	1.1103		120	89.15	4,937,066	5,221,080	
2004/07		1.00	0.8378	0.8378		120	89.15	4,978,429	5,264,880	
2005/01		1.00	0.8595	0.8595		120	87.78	5,021,219	5,310,120	
2005/07		1.00	0.7364	0.7364		120	87.78	5,058,195	5,349,240	
2006/01		0.95	0.9068	0.9068		120	85.46	5,101,771	5,397,720	
2006/07		0.95	0.8133	0.8133		120	85.46	5,141,187	5,441,640	
2007/01		0.90	1.0133	1.0133		120	85.45	5,188,075	5,496,720	
2007/07		0.90	1.1050	1.1050		120	85.45	5,239,670	5,557,440	
2008/01		0.85	0.8556	0.8556		120	85.45	5,277,778	5,604,960	
2008/07		0.85	0.6104	0.6104		120	85.59	5,305,159	5,639,160	
2009/01		0.80	1.3268	1.3268		120	85.59	5,361,468	5,714,040	
2009/07		0.80	0.6841	0.6841		120	85.59	5,390,811	5,753,160	
2010/01		0.75	0.8643	0.8643		120	85.59	5,425,754	5,802,840	
2010/07		0.75	0.7107	0.7107		120	85.59	5,454,673	5,844,120	
2011/01		0.70	0.9198	0.9198		120	85.59	5,489,796	5,897,880	
2011/07		0.70	0.9028	0.9028		120	85.59	5,524,492	5,951,160	
2012/01	35,430	0.65	0.3865	0.3865		120	84.81	5,573,800	5,974,200	
2012/07		0.65	0.9417	0.9417		120	84.81	5,607,917	6,030,480	
2013/01	49,168	0.60	0.4901	0.4901		120	84.13	5,673,578	6,060,000	
2013/07		0.60	0.6196	0.6196		120	84.13	5,694,672	6,097,560	
2014/01		0.55	0.8564	0.8564		120	81.75	5,721,494	6,149,760	
2014/07		0.55	1.2383	1.2383		120	82.71	5,760,463	6,225,960	
2015/01		0.50	0.7571	0.7571		120	82.81	5,782,272	6,273,120	



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235.16

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		120	82.81	5,827,767	6,371,880	
2016/09		0.45	1.9890	1.9890		120	82.81	5,879,931	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

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246.03

Suwannee Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1620 HELVENSTON ST SE	1/1/2014-6/30/2014	Number of Beds: 180	Superior: 0
LIVE OAK, FL 32064-3474	Days in CR 181	Maximum: 32,580	Standard: 366
County: Suwannee [61]	First Used : 2015/01	Max Annualized: 65,700	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 30,253	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,304	Inflation
Current Class North Large	Initial CR? False	Medicaid: 23,287	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	76.97418%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.85758%	Cost: 1.08180716
Open Date: 04/01/1982	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/01/1982	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 09/01/1983	Low Occupancy Adjustment Factor:	117.43421%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 223719			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,072,045	1,971,396	1,384,115	705,363		5,132,919	
1a	Audit Adjustments							
2	Cost Per Diem	46.0362	84.6565	59.4372	30.2900		220.4199	
3	Cost Per Diem Inflated	49.8023	90.1138	64.2996				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.8023	90.1138	64.2996	30.2900		234.5057	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.7646		66.3887				
7	Provider Target Rate	53.5885		70.0818				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	59.5833		70.9172				
10b	Base for line 10a	56.4435		67.1801				
11	Lesser of 5,7,8,10, 10a	49.8023	90.1138	64.2996	13.6500		217.8657	
12/13	Medicaid Adjustment Rate		2.7346	1.9512				
14	Prospective Per Diem 11	49.8023	92.8484	66.2508	13.6500		222.5515	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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246.03

Suwannee Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	09/01/1988	Amount:	2,800,000.00		Total Amount	Per Diem
RS to Start Calcs:	1982/01	Type:	Fixed	80% Capital(1):	7,013,675	15.4746
Indexed Asset Value	8,767,094	<60% of Base:	False	20% ROE(2):	1,753,419	0.6918
FRVS Base Asset:	3,332,561	Interest Rate:	11.8000%	Insurance Cost(3):	23,326	0.7710
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	41,084	1.3580
ROE Factor	0.023330	Amortization Rate:	11.8000%	Home Office(3):	21,737	0.7185
		Interest Only:	False	Replacement(3&4):	4,290	0.0000
		Yearly Payment:	915,011	Total FRVS PD:		19.0139

(1) 80% Capital (\$7,013,675) amortized at 11.8000 % for 20 years Principal & Interest of \$915,011 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$15.4746

(2) 20% ROE (\$1,753,419) times the ROE factor (0.023330) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.6918

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.8023	49.8023	2.2595	47.5428
Direct Care	92.8484	92.8484	4.2125	88.6359
Indirect Care	66.2508	66.2508	3.0058	63.2450
Property	13.6500	19.0139	0.8627	18.1512
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.2687
Supplemental Rate				8.1814
Totals	222.5515	227.9154	10.3405	246.0250

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1982/01	109,896	0.00	2.6760	2.6760		120		109,896	2,975,520	
1982/07		0.10	2.2977	2.2977		120		109,896	3,043,800	
1983/04		0.10	2.6288	2.6288		120		109,896	3,123,840	
1983/07	3,084,908	0.20	3.9578	3.0000	0.9578	120	55.00	3,195,463	3,247,440	
1984/01	79,132	0.20	2.2530	2.2530		120	87.13	3,288,994	3,289,560	
1984/07	1,931	0.30	1.9179	1.9179		120	87.13	3,309,850	3,352,680	
1985/01		0.30	1.1471	1.1471		120	87.13	3,321,239	3,391,080	
1985/10		0.40	0.8522	0.8522		120	87.13	3,332,561	3,420,000	
1986/01		0.40	0.8299	0.8299		120	93.23	3,343,625	3,448,440	
1986/07		0.50	0.2974	0.2974		120	93.23	3,348,597	3,441,840	
1987/01		0.50	1.0091	1.0091		120	93.95	3,365,494	3,503,400	
1987/07		0.60	0.9007	0.9007		120	93.95	3,383,681	3,530,760	
1988/01		0.60	0.9007	0.9007		120	92.37	3,401,966	3,559,440	
1988/07		0.70	0.5899	0.5899		120	92.37	3,416,013	3,557,520	
1989/01		0.70	0.5899	0.5899		120	89.99	3,430,118	3,578,520	
1989/07		0.80	0.5899	0.5899		120	89.99	3,446,305	3,602,760	
1990/01		0.80	0.5899	0.5899		120	89.99	3,462,568	3,620,880	
1990/07		0.90	0.5899	0.5899		120	83.25	3,480,951	3,642,240	
1991/01		0.90	0.5899	0.5899		120	79.76	3,499,431	3,663,600	
1991/07		1.00	1.4932	1.4932		120	79.76	3,551,685	3,718,320	
1992/01		1.00	2.0117	2.0117		120	87.53	3,623,134	3,793,080	
1992/07		1.00	1.8152	1.8152		120	87.53	3,688,901	3,861,960	
1993/01		1.00	1.7710	1.7710		120	75.96	3,754,231	3,930,360	
1993/07		1.00	1.5329	1.5329		120	75.96	3,811,780	3,990,600	
1994/01	1,896,540	1.00	1.6983	1.6983		180	77.25	5,773,055	6,087,600	
1994/07		1.00	1.5991	1.5991		180	77.25	5,865,372	6,184,980	
1995/01	45,394	1.00	1.5812	1.5812		180	80.37	6,003,509	6,282,720	
1995/07		1.00	1.5250	1.5250		180	80.37	6,095,063	6,378,480	
1996/01	38,837	1.00	1.7228	1.7228		180	80.76	6,238,906	6,488,460	
1996/07		1.00	1.3294	1.3294		180	80.76	6,321,846	6,574,680	



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1997/01	29,407	1.00	1.4109	1.4109		180	82.43	6,440,448	6,667,380	
1997/07		1.00	1.0917	1.0917		180	82.43	6,510,758	6,740,100	
1998/01	27,990	1.00	1.1663	1.1663		180	81.51	6,614,683	6,818,760	
1998/07		1.00	1.0794	1.0794		180	81.51	6,686,082	6,892,380	
1999/01		1.00	1.4499	1.4499		180	80.53	6,783,024	6,992,280	
1999/07		1.00	1.2299	1.2299		180	80.53	6,866,448	7,078,320	
2000/01	74,728	1.00	1.3356	1.3356		180	84.15	7,032,884	7,172,820	
2000/07	21,589	1.00	1.1129	1.1129		180	82.76	7,132,742	7,252,560	
2001/01		1.00	1.2976	1.2976		180	82.76	7,225,296	7,346,700	
2001/07		1.00	0.9615	0.9615		180	82.76	7,294,767	7,417,260	
2002/01		1.00	1.0301	1.0301		180	82.76	7,369,910	7,493,580	
2002/07		0.95	0.8337	0.8337		180	81.99	7,428,280	7,556,040	
2003/01		0.95	1.3271	1.3271		180	81.99	7,521,928	7,656,300	
2003/07		0.90	1.1664	1.1664		180	80.33	7,600,893	7,745,580	
2004/01		0.90	1.1103	1.1103		180	80.33	7,676,849	7,831,620	
2004/07		0.85	0.8378	0.8378		180	75.92	7,731,516	7,897,320	
2005/01		0.85	0.8595	0.8595		180	75.92	7,788,002	7,965,180	
2005/07		0.80	0.7364	0.7364		180	77.21	7,833,881	8,023,860	
2006/01		0.80	0.9068	0.9068		180	77.21	7,890,708	8,096,580	
2006/07		0.75	0.8133	0.8133		180	77.85	7,938,841	8,162,460	
2007/01		0.75	1.0133	1.0133		180	77.85	7,999,176	8,245,080	
2007/07		0.70	1.1050	1.1050		180	72.67	8,061,050	8,336,160	
2008/01		0.70	0.8556	0.8556		180	72.67	8,109,328	8,407,440	
2008/07		0.65	0.6104	0.6104		180	78.07	8,141,506	8,458,740	
2009/01		0.65	1.3268	1.3268		180	78.07	8,211,718	8,571,060	
2009/07		0.60	0.6841	0.6841		180	78.07	8,245,427	8,629,740	
2010/01		0.60	0.8643	0.8643		180	78.07	8,288,188	8,704,260	
2010/07		0.55	0.7107	0.7107		180	78.07	8,320,587	8,766,180	
2011/01		0.55	0.9198	0.9198		180	78.07	8,362,681	8,846,820	
2011/07		0.50	0.9028	0.9028		180	78.07	8,400,430	8,926,740	



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2012/01	100,102	0.50	0.3865	0.3865		180	77.64	8,516,770	8,961,300	
2012/07		0.45	0.9417	0.9417		180	77.64	8,552,864	9,045,720	
2013/01		0.45	0.4901	0.4901		180	77.14	8,571,723	9,090,000	
2013/07		0.40	0.6196	0.6196		180	77.14	8,592,964	9,146,340	
2014/01		0.40	0.8564	0.8564		180	78.22	8,622,403	9,224,640	
2014/07		0.35	1.2383	1.2383		180	78.22	8,659,772	9,338,940	
2015/01		0.35	0.7571	0.7571		180	76.97	8,682,720	9,409,680	
2015/09		0.30	1.5736	1.5736		180	76.97	8,723,711	9,557,820	
2016/09		0.25	1.9890	1.9890		180	76.97	8,767,094	9,747,900	

Message Code:

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 005387063020140101201410132014155217



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Wave Crest Health and Rehabilitation Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1415 S HICKORY ST	1/1/2014-6/30/2014	Number of Beds: 138	Superior: 0
MELBOURNE, FL 32901	Days in CR 181	Maximum: 24,978	Standard: 366
County: Brevard [5]	First Used : 2015/01	Max Annualized: 50,370	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 20,946	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,341	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 15,522	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	74.10484%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	83.85779%	Cost: 1.08180716
Open Date: 08/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 08/01/1983	Low Occupancy Adjustment Factor:	106.05245%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 212008	Interim Component Effective Date:	03/30/2015	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	740,061	1,351,720	913,297	422,354		3,427,432	
1a	Audit Adjustments							
2	Cost Per Diem	47.6782	87.0841	58.8389	27.2100		220.8112	
3	Cost Per Diem Inflated	51.5786	92.6978	63.6523				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.5786	92.6978	63.6523	27.2100		235.1387	
5a	Interim Adjustment	6.6395						
5b	Interim Adjusted Per Diem	58.2181						
6	Prior Semester: Provider Target Base	54.1628		64.7985				
7	Provider Target Rate	57.1758		68.4031				
7a	Interim Adjustment	6.6395						
7b	Interim Adjusted Target Rate	63.8153						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	64.6964		67.7635				
10b	Base for line 10a	54.9975		64.1926				
11	Lesser of 5,7,8,10, 10a	56.8063	92.6978	63.6523	13.6500		226.8064	
12/13	Medicaid Adjustment Rate		2.5138	1.7261				
14	Prospective Per Diem 11	56.8063	95.2116	65.3784	13.6500		231.0463	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Wave Crest Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,595,040.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Fixed	80% Capital(1):	5,522,637	10.8719
Indexed Asset Value	6,903,296	<60% of Base:	False	20% ROE(2):	1,380,659	0.7105
FRVS Base Asset:	3,933,000	Interest Rate:	6.4680%	Insurance Cost(3):	15,450	0.7376
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	22,894	1.0930
ROE Factor	0.023330	Amortization Rate:	6.4680%	Home Office(3):	19,593	0.9354
		Interest Only:	False	Replacement(3&4):	39,450	0.0000
		Yearly Payment:	492,856	Total FRVS PD:		14.3484

(1) 80% Capital (\$5,522,637) amortized at 6.4680 % for 20 years Principal & Interest of \$492,856 divided by annual available days (50370) divided by Occup. Adj. (0.90) = \$10.8719

(2) 20% ROE (\$1,380,659) times the ROE factor (0.023330) divided by annual available days (50370) divided by Occup. Adj. (0.90) = \$0.7105

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 138	Effective PBS Limitation	3,933,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	95.2116	95.2116	4.3197	90.8919
Indirect Care	65.3784	65.3784	2.9662	62.4122
Property	13.6500	14.3484	0.6510	13.6974
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4848
Supplemental Rate				8.1814
Totals	231.0463	231.7447	10.5142	251.8967

Medicaid Trend Adjustment



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1983/07	4,273,223	0.00	3.9578	3.0000	0.9578	138	55.00	4,273,223	3,734,556	
1984/01	20,555	0.10	2.2530	2.2530		138	64.09	4,303,406	3,782,994	
1984/07		0.10	1.9179	1.9179		138	64.09	4,311,660	3,855,582	
1985/01		0.20	1.1471	1.1471		138	55.14	4,321,551	3,899,742	
1985/10		0.20	0.8522	0.8522		138	71.36	3,933,000	3,933,000	1
1986/01		0.30	0.8299	0.8299		138	71.36	3,942,793	3,965,706	
1986/07		0.30	0.2974	0.2974		138	71.36	3,946,310	3,958,116	
1987/01		0.40	1.0091	1.0091		138	71.36	3,962,237	4,028,910	
1987/07		0.40	0.9007	0.9007		138	66.95	3,976,513	4,060,374	
1988/01		0.50	0.9007	0.9007		138	66.95	3,994,423	4,093,356	
1988/07		0.50	0.5899	0.5899		138	70.48	4,006,207	4,091,148	
1989/01		0.60	0.5899	0.5899		138	70.48	4,020,385	4,115,298	
1989/07		0.60	0.5899	0.5899		138	71.22	4,034,613	4,143,174	
1990/01		0.70	0.5899	0.5899		138	71.22	4,051,272	4,164,012	
1990/07		0.70	0.5899	0.5899		138	72.34	4,068,000	4,188,576	
1991/01		0.80	0.5899	0.5899		138	72.34	4,087,197	4,213,140	
1991/07		0.80	1.4932	1.4932		138	74.14	4,136,023	4,276,068	
1992/01		0.90	2.0117	2.0117		138	74.14	4,210,906	4,362,042	
1992/07		0.90	1.8152	1.8152		138	81.15	4,279,700	4,441,254	
1993/01		1.00	1.7710	1.7710		138	81.15	4,355,493	4,519,914	
1993/07		1.00	1.5329	1.5329		138	84.19	4,422,258	4,589,190	
1994/01		1.00	1.6983	1.6983		138	84.19	4,497,361	4,667,160	
1994/07		1.00	1.5991	1.5991		138	86.69	4,569,278	4,741,818	
1995/01	26,418	1.00	1.5812	1.5812		138	84.20	4,667,945	4,816,752	
1995/07	8,852	1.00	1.5250	1.5250		138	84.20	4,747,983	4,890,168	
1996/01		1.00	1.7228	1.7228		138	84.20	4,829,781	4,974,486	
1996/07		1.00	1.3294	1.3294		138	84.20	4,893,988	5,040,588	
1997/01		1.00	1.4109	1.4109		138	84.20	4,963,037	5,111,658	
1997/07		1.00	1.0917	1.0917		138	84.20	5,017,218	5,167,410	
1998/01		1.00	1.1663	1.1663		138	81.61	5,075,734	5,227,716	



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1998/07		1.00	1.0794	1.0794		138	81.61	5,130,521	5,284,158	
1999/01		1.00	1.4499	1.4499		138	74.74	5,204,908	5,360,748	
1999/07		1.00	1.2299	1.2299		138	74.74	5,268,923	5,426,712	
2000/01		1.00	1.3356	1.3356		138	77.65	5,339,295	5,499,162	
2000/07		1.00	1.1129	1.1129		138	74.08	5,398,716	5,560,296	
2001/01		1.00	1.2976	1.2976		138	74.08	5,468,770	5,632,470	
2001/07	25,084	1.00	0.9615	0.9615		138	72.89	5,546,436	5,686,566	
2002/01	258,373	1.00	1.0301	1.0301		138	71.80	5,745,078	5,745,078	8
2002/07		1.00	0.8337	0.8337		138	71.80	5,792,964	5,792,964	8
2003/01		1.00	1.3271	1.3271		138	68.39	5,869,830	5,869,830	8
2003/07		1.00	1.1664	1.1664		138	68.39	5,938,278	5,938,278	8
2004/01	113,299	0.95	1.1103	1.1103		138	70.32	6,004,242	6,004,242	8
2004/07		0.95	0.8378	0.8378		138	70.32	6,052,030	6,054,612	
2005/01	72,296	0.90	0.8595	0.8595		138	68.44	6,106,638	6,106,638	8
2005/07		0.90	0.7364	0.7364		138	68.44	6,147,113	6,151,626	
2006/01		0.85	0.9068	0.9068		138	65.75	6,194,495	6,207,378	
2006/07		0.85	0.8133	0.8133		138	65.75	6,237,318	6,257,886	
2007/01		0.80	1.0133	1.0133		138	71.06	6,287,878	6,321,228	
2007/07		0.80	1.1050	1.1050		138	71.06	6,343,463	6,391,056	
2008/01		0.75	0.8556	0.8556		138	71.06	6,384,169	6,445,704	
2008/07		0.75	0.6104	0.6104		138	66.35	6,413,396	6,485,034	
2009/01		0.70	1.3268	1.3268		138	66.35	6,472,964	6,571,146	
2009/07		0.70	0.6841	0.6841		138	66.35	6,503,963	6,616,134	
2010/01		0.65	0.8643	0.8643		138	66.35	6,540,502	6,673,266	
2010/07		0.65	0.7107	0.7107		138	66.35	6,570,719	6,720,738	
2011/01		0.60	0.9198	0.9198		138	66.35	6,606,983	6,782,562	
2011/07		0.60	0.9028	0.9028		138	66.35	6,642,773	6,843,834	
2012/01		0.55	0.3865	0.3865		138	65.96	6,656,896	6,870,330	
2012/07		0.55	0.9417	0.9417		138	66.46	6,691,372	6,935,052	
2013/01		0.50	0.4901	0.4901		138	66.46	6,707,773	6,969,000	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		138	74.26	6,728,554	7,012,194	
2014/01		0.45	0.8564	0.8564		138	74.26	6,754,486	7,072,224	
2014/07		0.45	1.2383	1.2383		138	74.26	6,792,122	7,159,854	
2015/01		0.40	0.7571	0.7571		138	74.10	6,812,689	7,214,088	
2015/09		0.40	1.5736	1.5736		138	74.10	6,855,568	7,327,662	
2016/09		0.35	1.9890	1.9890		138	74.10	6,903,296	7,473,390	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
8 Limited to Current RS Per Bed Standard |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

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ID: 005519063020140101201410112014160654



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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241.55

Seaside Health And Rehabilitation Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
324 WILDER BLVD	1/1/2014-6/30/2014	Number of Beds: 192	Superior: 0
DAYTONA BEACH, FL 32114	Days in CR 181	Maximum: 34,752	Standard: 366
County: Volusia [64]	First Used : 2015/01	Max Annualized: 70,080	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 24,281	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,561	Inflation
Current Class North Large	Initial CR? False	Medicaid: 20,846	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	85.85314%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	69.86936%	Cost: 1.08180716
Open Date: 08/01/1981	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1981	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 08/01/1981	Low Occupancy Adjustment Factor:	88.36170%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213527	Interim Component Effective Date:	08/01/2015	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	967,041	1,647,688	1,249,115	344,376		4,208,220	
1a	Audit Adjustments							
2	Cost Per Diem	46.3898	79.0410	59.9211	16.5200		201.8719	
3	Cost Per Diem Inflated	50.1848	84.1363	64.8231				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.1848	84.1363	64.8231	16.5200		215.6642	
5a	Interim Adjustment	11.3342						
5b	Interim Adjusted Per Diem	61.5190						
6	Prior Semester: Provider Target Base	55.3325		72.5650				
7	Provider Target Rate	58.4105		76.6017				
7a	Interim Adjustment	11.3342						
7b	Interim Adjusted Target Rate	69.7447						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	68.7280		70.8849				
10b	Base for line 10a	54.3693		67.1495				
11	Lesser of 5,7,8,10, 10a	54.8223	84.1363	64.8231	13.6500		217.4317	
12/13	Medicaid Adjustment Rate		3.3936	2.6146				
14	Prospective Per Diem 11	54.8223	87.5299	67.4377	13.6500		223.4399	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Seaside Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/19/2004		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,495,865.00		Total Amount	Per Diem
RS to Start Calcs:	1981/07	Type:	Variable	80% Capital(1):	5,116,203	8.3706
Indexed Asset Value	6,395,254	<60% of Base:	False	20% ROE(2):	1,279,051	0.4731
FRVS Base Asset:	3,805,956	Interest Rate:	8.3750%	Insurance Cost(3):	13,848	0.5703
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	22,450	0.9246
ROE Factor	0.023330	Amortization Rate:	8.3750%	Home Office(3):	19,906	0.8198
		Interest Only:	False	Replacement(3&4):	19,150	0.0000
		Yearly Payment:	527,948	Total FRVS PD:		11.1584

(1) 80% Capital (\$5,116,203) amortized at 8.3750 % for 20 years Principal & Interest of \$527,948 divided by annual available days (70080) divided by Occup. Adj. (0.90) = \$8.3706

(2) 20% ROE (\$1,279,051) times the ROE factor (0.023330) divided by annual available days (70080) divided by Occup. Adj. (0.90) = \$0.4731

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	192	Effective PBS Limitation	54,155
			5,472,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	87.5299	87.5299	3.9712	83.5587
Indirect Care	67.4377	67.4377	3.0596	64.3781
Property	13.6500	11.1584	0.5063	10.6521
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4409
Supplemental Rate				8.1814
Totals	223.4399	220.9483	10.0244	241.5462

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1981/07	2,977,213	0.00	2.5888	2.5888		192	60.95	2,977,213	4,636,608	
1982/01	693,636	0.10	2.6760	2.6760		192	60.95	3,678,816	4,760,832	
1982/07		0.10	2.2977	2.2977		192	60.95	3,687,270	4,870,080	
1983/04		0.20	2.6288	2.6288		192	67.03	3,706,658	4,998,144	
1983/07		0.20	3.9578	3.0000	0.9578	192	67.03	3,728,898	5,195,904	
1984/01		0.30	2.2530	2.2530		192	75.68	3,754,102	5,263,296	
1984/07		0.30	1.9179	1.9179		192	75.68	3,775,703	5,364,288	
1985/01		0.40	1.1471	1.1471		192	55.00	3,793,026	5,425,728	
1985/10		0.40	0.8522	0.8522		192	55.00	3,805,956	5,472,000	
1986/01		0.50	0.8299	0.8299		192	55.00	3,821,751	5,517,504	
1986/07		0.50	0.2974	0.2974		192	75.68	3,827,434	5,506,944	
1987/01		0.60	1.0091	1.0091		192	82.00	3,850,609	5,605,440	
1987/07		0.60	0.9007	0.9007		192	83.99	3,871,418	5,649,216	
1988/01		0.70	0.9007	0.9007		192	83.08	3,895,827	5,695,104	
1988/07		0.70	0.5899	0.5899		192	89.02	3,911,913	5,692,032	
1989/01		0.80	0.5899	0.5899		192	89.02	3,930,373	5,725,632	
1989/07		0.80	0.5899	0.5899		192	83.90	3,948,920	5,764,416	
1990/01		0.90	0.5899	0.5899		192	83.90	3,969,885	5,793,408	
1990/07		0.90	0.5899	0.5899		192	83.90	3,990,961	5,827,584	
1991/01		1.00	0.5899	0.5899		192	83.90	4,014,504	5,861,760	
1991/07		1.00	1.4932	1.4932		192	83.90	4,074,449	5,949,312	
1992/01		1.00	2.0117	2.0117		192	83.90	4,156,415	6,068,928	
1992/07		1.00	1.8152	1.8152		192	83.77	4,231,862	6,179,136	
1993/01		1.00	1.7710	1.7710		192	83.77	4,306,808	6,288,576	
1993/07		1.00	1.5329	1.5329		192	86.06	4,372,827	6,384,960	
1994/01		1.00	1.6983	1.6983		192	86.06	4,447,091	6,493,440	
1994/07		1.00	1.5991	1.5991		192	87.64	4,518,204	6,597,312	
1995/01		1.00	1.5812	1.5812		192	89.48	4,589,646	6,701,568	
1995/07		1.00	1.5250	1.5250		192	89.48	4,659,638	6,803,712	
1996/01		1.00	1.7228	1.7228		192	89.02	4,739,914	6,921,024	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/07		1.00	1.3294	1.3294		192	89.02	4,802,926	7,012,992	
1997/01		1.00	1.4109	1.4109		192	91.63	4,870,690	7,111,872	
1997/07		1.00	1.0917	1.0917		192	91.63	4,923,863	7,189,440	
1998/01		1.00	1.1663	1.1663		192	93.57	4,923,863	7,273,344	5
1998/07		1.00	1.0794	1.0794		192	93.57	5,035,058	7,351,872	
1999/01		1.00	1.4499	1.4499		192	93.57	5,108,061	7,458,432	
1999/07		1.00	1.2299	1.2299		192	93.57	5,170,885	7,550,208	
2000/01		1.00	1.3356	1.3356		192	93.57	5,239,947	7,651,008	
2000/07		1.00	1.1129	1.1129		192	93.57	5,298,262	7,736,064	
2001/01		1.00	1.2976	1.2976		192	88.86	5,367,012	7,836,480	
2001/07		1.00	0.9615	0.9615		192	88.86	5,418,616	7,911,744	
2002/01		0.95	1.0301	1.0301		192	84.75	5,471,643	7,993,152	
2002/07		0.95	0.8337	0.8337		192	84.75	5,514,978	8,059,776	
2003/01		0.90	1.3271	1.3271		192	83.32	5,580,849	8,166,720	
2003/07		0.90	1.1664	1.1664		192	83.32	5,639,437	8,261,952	
2004/01		0.85	1.1103	1.1103		192	77.42	5,692,662	8,353,728	
2004/07		0.85	0.8378	0.8378		192	77.42	5,733,199	8,423,808	
2005/01		0.80	0.8595	0.8595		192	72.54	5,772,620	8,496,192	
2005/07		0.80	0.7364	0.7364		192	72.54	5,806,627	8,558,784	
2006/01		0.75	0.9068	0.9068		192	69.60	5,846,118	8,636,352	
2006/07		0.75	0.8133	0.8133		192	69.60	5,881,779	8,706,624	
2007/01		0.70	1.0133	1.0133		192	69.97	5,923,498	8,794,752	
2007/07		0.70	1.1050	1.1050		192	69.97	5,969,316	8,891,904	
2008/01		0.65	0.8556	0.8556		192	69.97	6,002,511	8,967,936	
2008/07		0.65	0.6104	0.6104		192	73.77	6,026,329	9,022,656	
2009/01		0.60	1.3268	1.3268		192	73.77	6,074,305	9,142,464	
2009/07		0.60	0.6841	0.6841		192	73.77	6,099,240	9,205,056	
2010/01		0.55	0.8643	0.8643		192	73.77	6,128,236	9,284,544	
2010/07		0.55	0.7107	0.7107		192	73.77	6,152,191	9,350,592	
2011/01		0.50	0.9198	0.9198		192	73.77	6,180,485	9,436,608	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07		0.50	0.9028	0.9028		192	73.77	6,208,384	9,521,856	
2012/01		0.45	0.3865	0.3865		192	82.28	6,219,180	9,558,720	
2012/07		0.45	0.9417	0.9417		192	82.28	6,245,537	9,648,768	
2013/01		0.40	0.4901	0.4901		192	84.23	6,257,778	9,696,000	
2013/07		0.40	0.6196	0.6196		192	84.23	6,273,285	9,756,096	
2014/01		0.35	0.8564	0.8564		192	82.92	6,292,086	9,839,616	
2014/07		0.35	1.2383	1.2383		192	82.92	6,319,356	9,961,536	
2015/01		0.30	0.7571	0.7571		192	85.85	6,333,707	10,036,992	
2015/09		0.30	1.5736	1.5736		192	85.85	6,363,608	10,195,008	
2016/09		0.25	1.9890	1.9890		192	85.85	6,395,254	10,397,760	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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232.00

Parkside Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
451 S AMELIA AVE	1/1/2014-6/30/2014	Number of Beds: 122	Superior: 0
DELAND, FL 32724	Days in CR 181	Maximum: 22,082	Standard: 366
County: Volusia [64]	First Used : 2015/01	Max Annualized: 44,530	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 19,952	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,905	Inflation
Current Class North Large	Initial CR? False	Medicaid: 16,426	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	82.32759%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	90.35413%	Cost: 1.08180716
Open Date: 01/01/1978	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1978	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 01/01/1978	Low Occupancy Adjustment Factor:	114.26817%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213543			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	847,065	1,156,017	1,010,287	330,491		3,343,860	
1a	Audit Adjustments							
2	Cost Per Diem	51.5685	70.3773	61.5054	20.1200		203.5712	
3	Cost Per Diem Inflated	55.7872	74.9141	66.5370				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.7872	74.9141	66.5370	20.1200		217.3583	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.2666		67.1570				
7	Provider Target Rate	58.3410		70.8928				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	62.5822		72.9245				
10b	Base for line 10a	59.2843		69.0816				
11	Lesser of 5,7,8,10, 10a	54.8223	74.9141	66.1467	13.6500		209.5331	
12/13	Medicaid Adjustment Rate		2.7245	2.4057				
14	Prospective Per Diem 11	54.8223	77.6386	68.5524	13.6500		214.6633	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Parkside Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	3,586,938.00		Total Amount	Per Diem
RS to Start Calcs:	1978/01	Type:	Variable	80% Capital(1):	2,862,717	7.3710
Indexed Asset Value	3,578,396	<60% of Base:	False	20% ROE(2):	715,679	0.4166
FRVS Base Asset:	2,076,193	Interest Rate:	8.3750%	Insurance Cost(3):	14,775	0.7405
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	18,494	0.9269
ROE Factor	0.023330	Amortization Rate:	8.3750%	Home Office(3):	19,006	0.9526
		Interest Only:	False	Replacement(3&4):	5,214	0.0000
		Yearly Payment:	295,408	Total FRVS PD:		10.4076

(1) 80% Capital (\$2,862,717) amortized at 8.3750 % for 20 years Principal & Interest of \$295,408 divided by annual available days (44530) divided by Occup. Adj. (0.90) = \$7.3710

(2) 20% ROE (\$715,679) times the ROE factor (0.023330) divided by annual available days (44530) divided by Occup. Adj. (0.90) = \$0.4166

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	122	Effective PBS Limitation	54,155
			3,477,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	77.6386	77.6386	3.5224	74.1162
Indirect Care	68.5524	68.5524	3.1102	65.4422
Property	13.6500	10.4076	0.4722	9.9354
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.9883
Supplemental Rate				8.1814
Totals	214.6633	211.4209	9.5921	231.9985

Medicaid Trend Adjustment



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232.00

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1978/01	228,624	0.00	4.7397	3.0000	1.7397	122	100.00	228,624	2,170,990	
1978/07		0.10	7.2791	3.0000	4.2791	122	100.00	229,310	2,291,160	
1979/01		0.10	9.4064	3.0000	6.4064	122	100.00	229,998	2,408,646	
1979/07		0.20	10.6046	3.0000	7.6046	122	100.00	231,378	2,509,784	
1980/01		0.20	13.7703	3.0000	10.7703	122	29.12	232,113	2,664,602	
1980/07		0.30	14.5810	3.0000	11.5810	122	29.12	233,219	2,766,106	
1981/01		0.30	15.4050	3.0000	12.4050	122	31.91	234,437	2,871,880	
1981/07		0.40	14.9938	3.0000	11.9938	122	31.91	236,069	2,946,178	
1982/01		0.40	14.6698	3.0000	11.6698	122	29.09	237,567	3,025,112	
1982/07		0.50	13.9675	3.0000	10.9675	122	29.09	239,452	3,094,530	
1983/04	101,750	0.50	13.5963	3.0000	10.5963	122	26.42	342,927	3,175,904	
1983/07		0.60	14.5541	3.0000	11.5541	122	26.42	345,892	3,301,564	
1984/01		0.60	12.8493	3.0000	9.8493	122	31.79	349,491	3,344,386	
1984/07	1,552,741	0.70	11.7672	3.0000	8.7672	122	31.79	1,906,474	3,408,558	
1985/01	113,459	0.70	9.9143	3.0000	6.9143	122	34.72	2,045,207	3,447,598	
1985/10		0.80	7.7665	3.0000	4.7665	122	34.72	2,076,193	3,477,000	
1986/01		0.80	5.5964	3.0000	2.5964	122	34.43	2,107,386	3,505,914	
1986/07		0.90	2.8938	2.8938		122	34.43	2,141,744	3,499,204	
1987/01		0.90	1.0091	1.0091		122	43.23	2,157,033	3,561,790	
1987/07		1.00	0.9007	0.9007		122	43.23	2,172,304	3,589,606	
1988/01		1.00	0.9007	0.9007		122	47.51	2,189,205	3,618,764	
1988/07		1.00	0.5899	0.5899		122	47.51	2,200,360	3,616,812	
1989/01		1.00	0.5899	0.5899		122	56.40	2,213,340	3,638,162	
1989/07		1.00	0.5899	0.5899		122	56.40	2,226,396	3,662,806	
1990/01		1.00	0.5899	0.5899		122	56.40	2,239,530	3,681,228	
1990/07		1.00	0.5899	0.5899		122	67.42	2,252,741	3,702,944	
1991/01	20,860	1.00	0.5899	0.5899		122	70.83	2,286,890	3,724,660	
1991/07		1.00	1.4932	1.4932		122	70.83	2,321,038	3,780,292	
1992/01		1.00	2.0117	2.0117		122	72.51	2,367,730	3,856,298	
1992/07		1.00	1.8152	1.8152		122	72.51	2,410,709	3,926,326	



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232.00

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1993/01		1.00	1.7710	1.7710		122	72.11	2,453,403	3,995,866	
1993/07		1.00	1.5329	1.5329		122	72.11	2,491,011	4,057,110	
1994/01		1.00	1.6983	1.6983		122	78.61	2,533,316	4,126,040	
1994/07		1.00	1.5991	1.5991		122	78.61	2,573,826	4,192,042	
1995/01		1.00	1.5812	1.5812		122	79.26	2,614,523	4,258,288	
1995/07		1.00	1.5250	1.5250		122	79.26	2,654,394	4,323,192	
1996/01	49,730	1.00	1.7228	1.7228		122	81.43	2,749,854	4,397,734	
1996/07		1.00	1.3294	1.3294		122	81.43	2,786,411	4,456,172	
1997/01	30,236	1.00	1.4109	1.4109		122	82.13	2,855,960	4,519,002	
1997/07		1.00	1.0917	1.0917		122	82.13	2,887,139	4,568,290	
1998/01	31,679	1.00	1.1663	1.1663		122	86.42	2,952,491	4,621,604	
1998/07		0.95	1.0794	1.0794		122	86.42	2,982,766	4,671,502	
1999/01		0.95	1.4499	1.4499		122	86.42	3,023,851	4,739,212	
1999/07		0.90	1.2299	1.2299		122	86.42	3,057,322	4,797,528	
2000/01		0.90	1.3356	1.3356		122	86.42	3,094,071	4,861,578	
2000/07		0.85	1.1129	1.1129		122	90.04	3,123,341	4,915,624	
2001/01		0.85	1.2976	1.2976		122	90.04	3,157,791	4,979,430	
2001/07		0.80	0.9615	0.9615		122	80.94	3,182,081	5,027,254	
2002/01		0.80	1.0301	1.0301		122	76.19	3,208,305	5,078,982	
2002/07		0.75	0.8337	0.8337		122	76.19	3,228,367	5,121,316	
2003/01		0.75	1.3271	1.3271		122	73.90	3,260,499	5,189,270	
2003/07		0.70	1.1664	1.1664		122	73.90	3,287,121	5,249,782	
2004/01		0.70	1.1103	1.1103		122	67.92	3,312,669	5,308,098	
2004/07		0.65	0.8378	0.8378		122	67.92	3,330,710	5,352,628	
2005/01		0.65	0.8595	0.8595		122	69.72	3,349,319	5,398,622	
2005/07		0.60	0.7364	0.7364		122	69.72	3,364,116	5,438,394	
2006/01		0.60	0.9068	0.9068		122	74.91	3,382,420	5,487,682	
2006/07		0.55	0.8133	0.8133		122	74.91	3,397,550	5,532,334	
2007/01		0.55	1.0133	1.0133		122	70.98	3,416,485	5,588,332	
2007/07		0.50	1.1050	1.1050		122	70.98	3,435,361	5,650,064	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2008/01		0.50	0.8556	0.8556		122	70.98	3,450,057	5,698,376	
2008/07		0.45	0.6104	0.6104		122	74.40	3,459,534	5,733,146	
2009/01		0.45	1.3268	1.3268		122	74.40	3,480,191	5,809,274	
2009/07		0.40	0.6841	0.6841		122	74.40	3,489,713	5,849,046	
2010/01		0.40	0.8643	0.8643		122	74.40	3,501,777	5,899,554	
2010/07		0.35	0.7107	0.7107		122	74.40	3,510,486	5,941,522	
2011/01		0.35	0.9198	0.9198		122	74.40	3,521,786	5,996,178	
2011/07		0.30	0.9028	0.9028		122	74.40	3,531,323	6,050,346	
2012/01		0.30	0.3865	0.3865		122	72.60	3,535,419	6,073,770	
2012/07		0.25	0.9417	0.9417		122	72.60	3,543,741	6,130,988	
2013/01		0.25	0.4901	0.4901		122	73.94	3,548,082	6,161,000	
2013/07		0.20	0.6196	0.6196		122	73.94	3,552,478	6,199,186	
2014/01		0.20	0.8564	0.8564		122	78.94	3,558,563	6,252,256	
2014/07		0.15	1.2383	1.2383		122	78.94	3,565,171	6,329,726	
2015/01		0.15	0.7571	0.7571		122	82.33	3,569,221	6,377,672	
2015/09		0.10	1.5736	1.5736		122	82.33	3,574,839	6,478,078	
2016/09		0.05	1.9890	1.9890		122	82.33	3,578,396	6,606,910	

Message Code:

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 005547063020140101201410122014135946



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249.25

Oaks of Kissimmee

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
320 N MITCHELL ST	1/1/2014-6/30/2014	Number of Beds: 59	Superior: 0
KISSIMMEE, FL 34741	Days in CR 181	Maximum: 10,679	Standard: 366
County: Osceola [49]	First Used : 2015/01	Max Annualized: 21,535	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 9,869	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,294	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 5,682	FY Index: 1.33439166
Class at 1/94: North Small	Medicaid Utilization	57.57422%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.41502%	Cost: 1.08180716
Open Date: 11/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 11/01/1985	Low Occupancy Adjustment Factor:	116.87452%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213501			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	334,086	423,101	394,365	103,697		1,255,249	
1a	Audit Adjustments							
2	Cost Per Diem	58.7973	74.4634	69.4060	18.2501		220.9168	
3	Cost Per Diem Inflated	63.6073	79.2636	75.0839				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	63.6073	79.2636	75.0839	18.2501		236.2049	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.8445		73.6028				
7	Provider Target Rate	65.2848		77.6972				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500			
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674				
10	Target Rate Class Ceiling	67.5182		79.7567				
10a	New Provider Target Limitation	68.6001		75.9745				
10b	Base for line 10a	64.9851		71.9709				
11	Lesser of 5,7,8,10, 10a	63.6073	79.2636	75.0839	13.6500		231.6048	
12/13	Medicaid Adjustment Rate		0.6754	0.6398				
14	Prospective Per Diem 11	63.6073	79.9390	75.7237	13.6500		232.9200	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Oaks of Kissimmee

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/2004		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,500,000.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Variable	80% Capital(1):	1,451,650	7.5879
Indexed Asset Value	1,814,563	<60% of Base:	False	20% ROE(2):	362,913	0.4368
FRVS Base Asset:	923,314	Interest Rate:	8.1250%	Insurance Cost(3):	5,737	0.5813
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	12,400	1.2565
ROE Factor	0.023330	Amortization Rate:	8.1250%	Home Office(3):	17,011	1.7237
		Interest Only:	False	Replacement(3&4):	20,175	0.0000
		Yearly Payment:	147,064	Total FRVS PD:		11.5862

(1) 80% Capital (\$1,451,650) amortized at 8.1250 % for 20 years Principal & Interest of \$147,064 divided by annual available days (21535) divided by Occup. Adj. (0.90) = \$7.5879

(2) 20% ROE (\$362,913) times the ROE factor (0.023330) divided by annual available days (21535) divided by Occup. Adj. (0.90) = \$0.4368

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	59	Effective PBS Limitation	54,155
			1,681,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	63.6073	63.6073	2.8858	60.7215
Direct Care	79.9390	79.9390	3.6268	76.3122
Indirect Care	75.7237	75.7237	3.4355	72.2882
Property	13.6500	11.5862	0.5257	11.0605
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.6899
Supplemental Rate				8.1814
Totals	232.9200	230.8562	10.4738	249.2537

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	923,314	0.00	0.8522	0.8522		59	55.63	923,314	1,681,500	
1986/01		0.10	0.8299	0.8299		59	55.63	924,080	1,695,483	
1986/07		0.10	0.2974	0.2974		59	55.63	924,354	1,692,238	
1987/01		0.20	1.0091	1.0091		59	55.63	926,219	1,722,505	
1987/07		0.20	0.9007	0.9007		59	55.63	927,887	1,735,957	
1988/01		0.30	0.9007	0.9007		59	67.00	930,394	1,750,058	
1988/07		0.30	0.5899	0.5899		59	67.00	932,041	1,749,114	
1989/01		0.40	0.5899	0.5899		59	70.05	934,241	1,759,439	
1989/07		0.40	0.5899	0.5899		59	70.05	936,446	1,771,357	
1990/01		0.50	0.5899	0.5899		59	70.05	939,209	1,780,266	
1990/07		0.50	0.5899	0.5899		59	70.05	941,980	1,790,768	
1991/01		0.60	0.5899	0.5899		59	84.78	945,314	1,801,270	
1991/07	88,826	0.60	1.4932	1.4932		59	84.78	1,042,609	1,828,174	
1992/01		0.70	2.0117	2.0117		59	84.78	1,057,291	1,864,931	
1992/07		0.70	1.8152	1.8152		59	84.78	1,070,725	1,898,797	
1993/01		0.80	1.7710	1.7710		59	84.78	1,085,895	1,932,427	
1993/07	17,172	0.80	1.5329	1.5329		59	88.37	1,116,383	1,962,045	
1994/01		0.90	1.6983	1.6983		59	88.37	1,133,447	1,995,380	
1994/07	8,672	0.90	1.5991	1.5991		59	90.16	1,158,432	2,027,299	
1995/01		1.00	1.5812	1.5812		59	90.16	1,176,749	2,059,336	
1995/07	18,921	1.00	1.5250	1.5250		59	92.43	1,213,615	2,090,724	
1996/01		1.00	1.7228	1.7228		59	92.43	1,234,523	2,126,773	
1996/07	13,950	1.00	1.3294	1.3294		59	90.84	1,264,885	2,155,034	
1997/01		1.00	1.4109	1.4109		59	90.84	1,282,731	2,185,419	
1997/07	8,741	1.00	1.0917	1.0917		59	96.68	1,305,476	2,209,255	
1998/01	1,860	1.00	1.1663	1.1663		59	94.09	1,322,562	2,235,038	
1998/07	15,174	1.00	1.0794	1.0794		59	94.09	1,352,012	2,259,169	
1999/01		1.00	1.4499	1.4499		59	94.09	1,371,615	2,291,914	
1999/07		1.00	1.2299	1.2299		59	94.09	1,388,484	2,320,116	
2000/01		1.00	1.3356	1.3356		59	94.09	1,388,484	2,351,091	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		59	92.36	1,422,688	2,377,228	
2001/01		1.00	1.2976	1.2976		59	92.36	1,441,149	2,408,085	
2001/07		1.00	0.9615	0.9615		59	89.34	1,455,006	2,431,213	
2002/01		1.00	1.0301	1.0301		59	89.34	1,469,994	2,456,229	
2002/07		1.00	0.8337	0.8337		59	86.21	1,482,249	2,476,702	
2003/01		1.00	1.3271	1.3271		59	86.21	1,501,920	2,509,565	
2003/07	10,320	1.00	1.1664	1.1664		59	86.99	1,529,758	2,538,829	
2004/01		1.00	1.1103	1.1103		59	86.99	1,546,743	2,567,031	
2004/07		1.00	0.8378	0.8378		59	84.99	1,559,702	2,588,566	
2005/01		1.00	0.8595	0.8595		59	84.99	1,573,108	2,610,809	
2005/07		1.00	0.7364	0.7364		59	84.40	1,584,692	2,630,043	
2006/01		0.95	0.9068	0.9068		59	84.40	1,598,344	2,653,879	
2006/07		0.95	0.8133	0.8133		59	80.76	1,610,693	2,675,473	
2007/01		0.90	1.0133	1.0133		59	80.76	1,625,383	2,702,554	
2007/07		0.90	1.1050	1.1050		59	81.75	1,641,547	2,732,408	
2008/01		0.85	0.8556	0.8556		59	81.75	1,653,486	2,755,772	
2008/07		0.85	0.6104	0.6104		59	77.85	1,662,064	2,772,587	
2009/01		0.80	1.3268	1.3268		59	77.85	1,679,705	2,809,403	
2009/07		0.80	0.6841	0.6841		59	77.85	1,688,898	2,828,637	
2010/01		0.75	0.8643	0.8643		59	77.85	1,699,845	2,853,063	
2010/07		0.75	0.7107	0.7107		59	77.85	1,708,905	2,873,359	
2011/01		0.70	0.9198	0.9198		59	77.85	1,719,909	2,899,791	
2011/07		0.70	0.9028	0.9028		59	77.85	1,730,779	2,925,987	
2012/01		0.65	0.3865	0.3865		59	75.88	1,735,127	2,937,315	
2012/07		0.65	0.9417	0.9417		59	70.68	1,745,748	2,964,986	
2013/01		0.60	0.4901	0.4901		59	70.68	1,750,882	2,979,500	
2013/07		0.60	0.6196	0.6196		59	70.68	1,757,392	2,997,967	
2014/01		0.55	0.8564	0.8564		59	66.02	1,765,669	3,023,632	
2014/07		0.55	1.2383	1.2383		59	66.02	1,777,695	3,061,097	
2015/01		0.50	0.7571	0.7571		59	57.57	1,784,425	3,084,284	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		59	57.57	1,798,465	3,132,841	
2016/09		0.45	1.9890	1.9890		59	57.57	1,814,563	3,195,145	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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229.06

Avante at Ocala

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2021 SW 1ST AVE	6/1/2014-12/31/2014	Number of Beds: 133	Superior: 0
OCALA, FL 34471	Days in CR 214	Maximum: 28,462	Standard: 366
County: Marion [42]	First Used : 2016/09	Max Annualized: 48,545	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 23,494	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,795	Inflation
Current Class North Large	Initial CR? False	Medicaid: 12,799	FY Index: 1.35002422
Class at 1/94: North Large	Medicaid Utilization	54.47774%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	82.54515%	Cost: 1.06928041
Open Date: 09/01/1968	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1968	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 11/01/1980	Low Occupancy Adjustment Factor:	104.39239%	DC Sem Index: 1.30450000
Med # Active Date: 11/15/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 228699			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	524,607	1,149,638	871,769	263,147		2,809,161	
1a	Audit Adjustments							
2	Cost Per Diem	40.9881	89.8225	68.1123	20.5600		219.4829	
3	Cost Per Diem Inflated	43.8278	94.8773	72.8311				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.8278	94.8773	72.8311	20.5600		232.0962	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	81.8841		89.7908				
7	Provider Target Rate	86.4392		94.7857				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	51.7979		59.8640				
10b	Base for line 10a	49.0683		56.7094				
11	Lesser of 5,7,8,10, 10a	43.8278	94.8773	59.8640	13.6500		212.2191	
12/13	Medicaid Adjustment Rate		0.4779	0.3016				
14	Prospective Per Diem 11	43.8278	95.3552	60.1656	13.6500		212.9986	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Avante at Ocala

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	04/01/1992	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	None	80% Capital(1):	4,049,260	11.5227
Indexed Asset Value	5,061,575	<60% of Base:	True	20% ROE(2):	1,012,315	0.5130
FRVS Base Asset:	1,786,469	Interest Rate:	12.5000%	Insurance Cost(3):	23,873	1.0161
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	33,467	1.4245
ROE Factor	0.022140	Amortization Rate:	12.5000%	Home Office(3):	18,912	0.8050
		Interest Only:	True	Replacement(3&4):	13,477	0.0000
		Yearly Payment:	503,434	Total FRVS PD:		15.2813

(1) 80% Capital (\$4,049,260) amortized at 12.5000 % for 20 years Interest of \$503,434 divided by annual available days (48545) divided by Occup. Adj. (0.90) = \$11.5227

(2) 20% ROE (\$1,012,315) times the ROE factor (0.022140) divided by annual available days (48545) divided by Occup. Adj. (0.90) = \$0.5130

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 133	Effective PBS Limitation	3,790,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.8278	43.8278	1.9884	41.8394
Direct Care	95.3552	95.3552	4.3262	91.0290
Indirect Care	60.1656	60.1656	2.7297	57.4359
Property	13.6500	15.2813	0.6933	14.5880
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.9884
Supplemental Rate				8.1814
Totals	212.9986	214.6299	9.7376	229.0621

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	931,365	0.00				133	100.00	931,365	1,364,713	
1972/01		0.10	3.9787	3.0000	0.9787	133	100.00	934,159	1,418,977	
1972/07		0.10	5.9113	3.0000	2.9113	133	100.00	936,961	1,488,935	
1973/01		0.20	8.0622	3.0000	5.0622	133	100.00	942,583	1,565,676	
1973/07		0.20	10.7186	3.0000	7.7186	133	100.00	948,238	1,654,254	
1974/01		0.30	12.9457	3.0000	9.9457	133	100.00	956,772	1,740,704	
1974/07		0.30	13.0494	3.0000	10.0494	133	100.00	965,383	1,794,702	
1975/01		0.40	13.1399	3.0000	10.1399	133	100.00	976,968	1,850,163	
1975/07		0.40	14.2033	3.0000	11.2033	133	100.00	988,692	1,925,441	
1976/01		0.50	15.2478	3.0000	12.2478	133	100.00	1,003,522	2,003,246	
1976/07		0.50	15.7330	3.0000	12.7330	133	100.00	1,018,575	2,073,071	
1977/01		0.60	16.4836	3.0000	13.4836	133	100.00	1,036,909	2,150,876	
1977/07		0.60	18.5412	3.0000	15.5412	133	100.00	1,055,573	2,259,537	
1978/01		0.70	20.2809	3.0000	17.2809	133	100.00	1,077,740	2,366,735	
1978/07		0.70	22.8203	3.0000	19.8203	133	100.00	1,100,373	2,497,740	
1979/01		0.80	24.9476	3.0000	21.9476	133	100.00	1,126,782	2,625,819	
1979/07		0.80	26.1458	3.0000	23.1458	133	100.00	1,153,825	2,736,076	
1980/01	39,611	0.90	29.3115	3.0000	26.3115	133	80.27	1,224,589	2,904,853	
1980/07		0.90	30.1222	3.0000	27.1222	133	80.27	1,257,653	3,015,509	
1981/01	26,608	1.00	30.9462	3.0000	27.9462	133	80.98	1,321,991	3,130,820	
1981/07		1.00	30.5350	3.0000	27.5350	133	80.98	1,361,651	3,211,817	
1982/01	1,499	1.00	30.2110	3.0000	27.2110	133	78.80	1,404,000	3,297,868	
1982/07		1.00	29.5087	3.0000	26.5087	133	78.80	1,446,120	3,373,545	
1983/04		1.00	29.1375	3.0000	26.1375	133	81.52	1,489,504	3,462,256	
1983/07	9,849	1.00	30.0953	3.0000	27.0953	133	81.52	1,544,038	3,599,246	
1984/01		1.00	28.3905	3.0000	25.3905	133	80.62	1,590,359	3,645,929	
1984/07	23,346	1.00	27.3084	3.0000	24.3084	133	80.62	1,661,416	3,715,887	
1985/01		1.00	25.4555	3.0000	22.4555	133	80.62	1,711,258	3,758,447	
1985/10	23,873	1.00	23.3077	3.0000	20.3077	133	80.62	1,786,469	3,790,500	
1986/01		1.00	21.1376	3.0000	18.1376	133	79.45	1,840,063	3,822,021	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07		1.00	18.4350	3.0000	15.4350	133	79.45	1,895,265	3,814,706	
1987/01	16,913	1.00	16.4441	3.0000	13.4441	133	78.95	1,969,036	3,882,935	
1987/07		1.00	14.3448	3.0000	11.3448	133	78.95	2,028,107	3,913,259	
1988/01		1.00	12.2455	3.0000	9.2455	133	75.47	2,088,950	3,945,046	
1988/07		1.00	9.8354	3.0000	6.8354	133	75.47	2,151,619	3,942,918	
1989/01		1.00	7.4253	3.0000	4.4253	133	78.73	2,216,168	3,966,193	
1989/07		1.00	5.0152	3.0000	2.0152	133	78.73	2,282,653	3,993,059	
1990/01		1.00	2.6051	2.6051		133	73.21	2,342,118	4,013,142	
1990/07		1.00	0.5899	0.5899		133	73.21	2,355,934	4,036,816	
1991/01		1.00	0.5899	0.5899		133	75.33	2,369,832	4,060,490	
1991/07		1.00	1.4932	1.4932		133	75.33	2,405,218	4,121,138	
1992/01	28,817	0.95	2.0117	2.0117		133	79.83	2,480,001	4,203,997	
1992/07		0.95	1.8152	1.8152		133	79.83	2,522,766	4,280,339	
1993/01	28,771	0.90	1.7710	1.7710		133	80.57	2,591,747	4,356,149	
1993/07		0.90	1.5329	1.5329		133	80.57	2,627,503	4,422,915	
1994/01		0.85	1.6983	1.6983		133	75.10	2,665,434	4,498,060	
1994/07		0.85	1.5991	1.5991		133	75.10	2,701,663	4,570,013	
1995/01		0.80	1.5812	1.5812		133	75.14	2,735,839	4,642,232	
1995/07		0.80	1.5250	1.5250		133	75.14	2,735,839	4,712,988	5
1996/01		0.75	1.7228	1.7228		133	75.90	2,769,216	4,794,251	5
1996/07		0.75	1.3294	1.3294		133	75.90	2,804,997	4,857,958	5
1997/01		0.70	1.4109	1.4109		133	78.41	2,832,966	4,926,453	5
1997/07		0.70	1.0917	1.0917		133	78.41	2,882,807	4,980,185	
1998/01		0.65	1.1663	1.1663		133	78.41	2,904,662	5,038,306	
1998/07		0.65	1.0794	1.0794		133	78.41	2,925,041	5,092,703	
1999/01		0.60	1.4499	1.4499		133	78.41	2,950,486	5,166,518	
1999/07		0.60	1.2299	1.2299		133	78.41	2,972,258	5,230,092	
2000/01	84,823	0.55	1.3356	1.3356		133	82.66	3,078,915	5,299,917	
2000/07		0.55	1.1129	1.1129		133	82.66	3,097,761	5,358,836	
2001/01		0.50	1.2976	1.2976		133	84.72	3,117,859	5,428,395	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		0.50	0.9615	0.9615		133	84.72	3,132,850	5,480,531	
2002/01		0.45	1.0301	1.0301		133	84.72	3,147,371	5,536,923	
2002/07		0.45	0.8337	0.8337		133	84.72	3,159,180	5,583,074	
2003/01		0.40	1.3271	1.3271		133	84.72	3,159,180	5,657,155	5
2003/07		0.40	1.1664	1.1664		133	84.72	3,190,768	5,723,123	
2004/01		0.35	1.1103	1.1103		133	84.72	3,203,167	5,786,697	
2004/07		0.35	0.8378	0.8378		133	84.26	3,212,559	5,835,242	
2005/01		0.30	0.8595	0.8595		133	84.26	3,220,844	5,885,383	
2005/07		0.30	0.7364	0.7364		133	84.26	3,227,959	5,928,741	
2006/01		0.25	0.9068	0.9068		133	84.26	3,235,277	5,982,473	
2006/07		0.25	0.8133	0.8133		133	84.26	3,241,854	6,031,151	
2007/01		0.20	1.0133	1.0133		133	84.41	3,248,425	6,092,198	
2007/07		0.20	1.1050	1.1050		133	84.41	3,248,425	6,159,496	5
2008/01		0.15	0.8556	0.8556		133	84.41	3,259,781	6,212,164	
2008/07		0.15	0.6104	0.6104		133	43.63	3,262,150	6,250,069	
2009/01		0.10	1.3268	1.3268		133	43.63	3,265,584	6,333,061	
2009/07		0.10	0.6841	0.6841		133	43.63	3,267,356	6,376,419	
2010/01		0.05	0.8643	0.8643		133	43.63	3,268,476	6,431,481	
2010/07		0.05	0.7107	0.7107		133	43.63	3,269,396	6,477,233	
2011/01		0.00	0.9198	0.9198		133	43.63	3,269,396	6,536,817	
2011/07		0.00	0.9028	0.9028		133	43.63	3,269,396	6,595,869	
2012/01		0.00	0.3865	0.3865		133	43.63	3,269,396	6,621,405	
2012/07		0.00	0.9417	0.9417		133	43.63	3,269,396	6,683,782	
2013/01	20,712	0.00	0.4901	0.4901		133	54.41	3,290,108	6,716,500	
2013/07		0.00	0.6196	0.6196		133	54.41	3,290,108	6,758,129	
2014/01	1,678,225	0.00	0.8564	0.8564		133	55.88	4,968,333	6,815,984	
2014/07		0.00	1.2383	1.2383		133	55.88	4,968,333	6,900,439	
2015/01		0.00	0.7571	0.7571		133	61.46	4,968,333	6,952,708	
2015/09		0.00	1.5736	1.5736		133	61.46	4,968,333	7,062,167	
2016/09	93,242	0.00	1.9890	1.9890		133	54.48	5,061,575	7,202,615	

Message Code:

5 Uncorrected Licensure Deficiency



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Palatka Health Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
110 KAY LARKIN DR	7/1/2014-12/31/2014	Number of Beds: 180	Superior: 0
PALATKA, FL 32177	Days in CR 184	Maximum: 33,120	Standard: 366
County: Putnam [54]	First Used : 2015/09	Max Annualized: 65,700	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 32,086	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,225	Inflation
Current Class North Large	Initial CR? False	Medicaid: 21,668	FY Index: 1.35002422
Class at 1/94: North Large	Medicaid Utilization	67.53101%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.87802%	Cost: 1.06928041
Open Date: 05/26/1989	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/26/1989	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 05/26/1989	Low Occupancy Adjustment Factor:	122.51874%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 226025			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,122,481	1,909,135	1,364,098	761,847		5,157,561
1a	Audit Adjustments						
2	Cost Per Diem	51.8036	88.1085	62.9545	35.1600		238.0266
3	Cost Per Diem Inflated	55.3926	93.0668	67.3160			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	55.3926	93.0668	67.3160	35.1600		250.9354
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	60.8978		70.9166			
7	Provider Target Rate	64.2854		74.8616			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	55.5414		66.6930			
10b	Base for line 10a	52.6146		63.1785			
11	Lesser of 5,7,8,10, 10a	54.8223	93.0668	66.1467	13.6500		227.6858
12/13	Medicaid Adjustment Rate		1.8355	1.3046			
14	Prospective Per Diem 11	54.8223	94.9023	67.4513	13.6500		230.8259
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.				0.00



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Palatka Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/26/1986		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	8,164,874.00		Total Amount	Per Diem
RS to Start Calcs:	1989/01	Type:	Variable	80% Capital(1):	6,764,602	12.9515
Indexed Asset Value	8,455,752	<60% of Base:	False	20% ROE(2):	1,691,150	0.6315
FRVS Base Asset:	1,778,760	Interest Rate:	9.6724%	Insurance Cost(3):	61,213	1.9078
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	68,226	2.1263
ROE Factor	0.022080	Amortization Rate:	9.6724%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	765,822	Total FRVS PD:		17.6171

(1) 80% Capital (\$6,764,602) amortized at 9.6724 % for 20 years Principal & Interest of \$765,822 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$12.9515

(2) 20% ROE (\$1,691,150) times the ROE factor (0.022080) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.6315

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,646
Comparison Date: 07/01/1988	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,778,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	94.9023	94.9023	4.3057	90.5966
Indirect Care	67.4513	67.4513	3.0602	64.3911
Property	13.6500	17.6171	0.7993	16.8178
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.8917
Supplemental Rate				8.1814
Totals	230.8259	234.7930	10.6525	250.2136

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1989/01	2,500,000	0.00	0.5899	0.5899		60	72.37	1,778,760	1,778,760	1
1989/07		0.10	0.5899	0.5899		60	72.37	1,779,809	1,801,380	
1990/01		0.10	0.5899	0.5899		60	72.37	1,780,859	1,810,440	
1990/07	1,079,702	0.20	0.5899	0.5899		120	72.37	2,862,662	3,642,240	
1991/01		0.20	0.5899	0.5899		120	72.37	2,866,040	3,663,600	
1991/07		0.30	1.4932	1.4932		120	72.37	2,878,880	3,718,320	
1992/01		0.30	2.0117	2.0117		120	72.37	2,896,254	3,793,080	
1992/07		0.40	1.8152	1.8152		120	72.37	2,917,284	3,861,960	
1993/01	51,007	0.40	1.7710	1.7710		120	77.24	2,988,957	3,930,360	
1993/07	40,615	0.50	1.5329	1.5329		120	75.82	3,052,482	3,990,600	
1994/01		0.50	1.6983	1.6983		120	75.82	3,078,404	4,058,400	
1994/07		0.60	1.5991	1.5991		120	75.82	3,107,941	4,123,320	
1995/01	33,696	0.60	1.5812	1.5812		120	82.19	3,171,122	4,188,480	
1995/07		0.70	1.5250	1.5250		120	82.19	3,204,974	4,252,320	
1996/01		0.70	1.7228	1.7228		120	81.25	3,243,626	4,325,640	
1996/07		0.80	1.3294	1.3294		120	81.25	3,278,122	4,383,120	
1997/01	34,975	0.80	1.4109	1.4109		120	81.16	3,350,097	4,444,920	
1997/07		0.90	1.0917	1.0917		120	81.16	3,383,012	4,493,400	
1998/01	49,530	0.90	1.1663	1.1663		120	81.56	3,468,053	4,545,840	
1998/07	2,588,704	1.00	1.0794	1.0794		180	81.54	6,094,191	6,892,380	
1999/01		1.00	1.4499	1.4499		180	81.54	6,182,551	6,992,280	
1999/07		1.00	1.2299	1.2299		180	81.54	6,258,590	7,078,320	
2000/01		1.00	1.3356	1.3356		180	80.04	6,342,180	7,172,820	
2000/07		1.00	1.1129	1.1129		180	80.04	6,412,762	7,252,560	
2001/01		1.00	1.2976	1.2976		180	75.32	6,495,974	7,346,700	
2001/07		1.00	0.9615	0.9615		180	75.32	6,558,433	7,417,260	
2002/01		1.00	1.0301	1.0301		180	75.32	6,625,991	7,493,580	
2002/07		1.00	0.8337	0.8337		180	75.32	6,681,232	7,556,040	
2003/01		1.00	1.3271	1.3271		180	77.00	6,769,899	7,656,300	
2003/07		1.00	1.1664	1.1664		180	77.00	6,848,863	7,745,580	



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0 005811-00 - 2016/09

250.21

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2004/01		1.00	1.1103	1.1103		180	78.42	6,924,906	7,831,620	
2004/07		1.00	0.8378	0.8378		180	78.42	6,982,923	7,897,320	
2005/01		1.00	0.8595	0.8595		180	76.95	7,042,941	7,965,180	
2005/07		1.00	0.7364	0.7364		180	76.95	7,094,805	8,023,860	
2006/01		1.00	0.9068	0.9068		180	76.09	7,159,141	8,096,580	
2006/07		1.00	0.8133	0.8133		180	76.09	7,217,366	8,162,460	
2007/01		1.00	1.0133	1.0133		180	76.09	7,290,500	8,245,080	
2007/07		1.00	1.1050	1.1050		180	78.19	7,371,060	8,336,160	
2008/01		1.00	0.8556	0.8556		180	72.43	7,434,127	8,407,440	
2008/07		1.00	0.6104	0.6104		180	72.43	7,479,505	8,458,740	
2009/01		1.00	1.3268	1.3268		180	65.32	7,578,743	8,571,060	
2009/07		0.95	0.6841	0.6841		180	65.32	7,627,997	8,629,740	
2010/01		0.95	0.8643	0.8643		180	65.32	7,690,630	8,704,260	
2010/07		0.90	0.7107	0.7107		180	65.32	7,739,819	8,766,180	
2011/01		0.90	0.9198	0.9198		180	65.32	7,803,889	8,846,820	
2011/07		0.85	0.9028	0.9028		180	65.81	7,863,776	8,926,740	
2012/01		0.85	0.3865	0.3865		180	63.80	7,889,609	8,961,300	
2012/07		0.80	0.9417	0.9417		180	63.80	7,949,049	9,045,720	
2013/01		0.80	0.4901	0.4901		180	63.80	7,980,217	9,090,000	
2013/07	87,758	0.75	0.6196	0.6196		180	61.87	8,105,059	9,146,340	
2014/01		0.75	0.8564	0.8564		180	61.87	8,157,118	9,224,640	
2014/07		0.70	1.2383	1.2383		180	65.57	8,227,824	9,338,940	
2015/01		0.70	0.7571	0.7571		180	65.57	8,271,431	9,409,680	
2015/09		0.65	1.5736	1.5736		180	67.53	8,356,031	9,557,820	
2016/09		0.60	1.9890	1.9890		180	67.53	8,455,752	9,747,900	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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0005814-00 - 2016/09

264.77

Boynton Health Care Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
7900 VENTURE CENTER WAY	1/1/2014-6/30/2014	Number of Beds: 81	Superior: 0
BOYNTON BEACH, FL 33437-74	Days in CR 181	Maximum: 14,661	Standard: 366
County: Palm Beach [50]	First Used : 2015/01	Max Annualized: 29,565	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 12,717	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,961	Inflation
Current Class South Small	Initial CR? False	Medicaid: 5,202	FY Index: 1.33439166
Class at 1/94: South Small	Medicaid Utilization	40.90587%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	86.74033%	Cost: 1.08180716
Open Date: 09/14/1999	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 09/14/1999	Low Occupancy Adjustment Factor:	109.69791%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 218952	Interim Component Effective Date:	07/01/2015	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	282,207	469,622	381,766	216,819		1,350,414
1a	Audit Adjustments						
2	Cost Per Diem	54.2497	90.2772	73.3883	41.6799		259.5951
3	Cost Per Diem Inflated	58.6877	96.0968	79.3920			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	58.6877	96.0968	79.3920	41.6799		275.8564
5a	Interim Adjustment	2.8026					
5b	Interim Adjusted Per Diem	61.4903					
6	Prior Semester: Provider Target Base	58.3708		80.1741			
7	Provider Target Rate	61.6179		84.6340			
7a	Interim Adjustment	2.8026					
7b	Interim Adjusted Target Rate	64.4205					
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500		
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807			
10	Target Rate Class Ceiling	75.1765		88.3937			
10a	New Provider Target Limitation	75.3934		83.8422			
10b	Base for line 10a	68.7655		79.4240			
11	Lesser of 5,7,8,10, 10a	61.4903	96.0968	79.3920	13.6500		250.6291
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	61.4903	96.0968	79.3920	13.6500		250.6291
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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264.77

Boynton Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/14/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,280,000.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Variable	80% Capital(1):	2,672,041	10.9118
Indexed Asset Value	3,340,051	<60% of Base:	False	20% ROE(2):	668,010	0.5857
FRVS Base Asset:	0	Interest Rate:	9.0898%	Insurance Cost(3):	12,580	0.9892
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	37,361	2.9379
ROE Factor	0.023330	Amortization Rate:	9.0898%	Home Office(3):	18,547	1.4584
		Interest Only:	False	Replacement(3&4):	26,317	0.0000
		Yearly Payment:	290,347	Total FRVS PD:		16.8830

(1) 80% Capital (\$2,672,041) amortized at 9.0898 % for 20 years Principal & Interest of \$290,347 divided by annual available days (29565) divided by Occup. Adj. (0.90) = \$10.9118

(2) 20% ROE (\$668,010) times the ROE factor (0.023330) divided by annual available days (29565) divided by Occup. Adj. (0.90) = \$0.5857

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	38,846
Comparison Date: 01/01/1999	Current RS PBS:	54,155
Comparison Bed 71	Effective PBS Limitation	2,758,066

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	61.4903	61.4903	2.7898	58.7005
Direct Care	96.0968	96.0968	4.3599	91.7369
Indirect Care	79.3920	79.3920	3.6020	75.7900
Property	13.6500	16.8830	0.7660	16.1170
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				14.2475
Supplemental Rate				8.1814
Totals	250.6291	253.8621	11.5177	264.7733

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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264.77

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07	3,957,679	0.00	1.2299	1.2299		71	82.21	2,758,066	2,758,066	1
2000/01	9,912	0.10	1.3356	1.3356		71	82.21	2,771,663	2,829,279	
2000/07	1,689	0.10	1.1129	1.1129		71	82.21	2,776,437	2,860,732	
2001/01		0.20	1.2976	1.2976		71	82.21	2,783,642	2,897,865	
2001/07		0.20	0.9615	0.9615		71	82.21	2,788,995	2,925,697	
2002/01		0.30	1.0301	1.0301		71	68.18	2,797,613	2,955,801	
2002/07		0.30	0.8337	0.8337		71	68.18	2,804,610	2,980,438	
2003/01	14,770	0.40	1.3271	1.3271		81	60.60	2,834,267	3,445,335	
2003/07		0.40	1.1664	1.1664		81	60.60	2,847,492	3,485,511	
2004/01		0.50	1.1103	1.1103		81	58.12	2,863,301	3,524,229	
2004/07		0.50	0.8378	0.8378		81	58.12	2,875,295	3,553,794	
2005/01		0.60	0.8595	0.8595		81	56.64	2,890,123	3,584,331	
2005/07		0.60	0.7364	0.7364		81	56.64	2,902,892	3,610,737	
2006/01		0.70	0.9068	0.9068		81	57.26	2,921,320	3,643,461	
2006/07		0.70	0.8133	0.8133		81	57.26	2,937,951	3,673,107	
2007/01		0.80	1.0133	1.0133		81	51.51	2,960,255	3,710,286	
2007/07		0.80	1.1050	1.1050		81	51.51	2,984,763	3,751,272	
2008/01		0.90	0.8556	0.8556		81	51.51	3,006,287	3,783,348	
2008/07		0.90	0.6104	0.6104		81	38.40	3,017,819	3,806,433	
2009/01		1.00	1.3268	1.3268		81	38.40	3,045,774	3,856,977	
2009/07		1.00	0.6841	0.6841		81	38.40	3,060,321	3,883,383	
2010/01		1.00	0.8643	0.8643		81	38.40	3,078,788	3,916,917	
2010/07		1.00	0.7107	0.7107		81	38.40	3,094,065	3,944,781	
2011/01		1.00	0.9198	0.9198		81	38.40	3,113,935	3,981,069	
2011/07		1.00	0.9028	0.9028		81	38.40	3,133,563	4,017,033	
2012/01		1.00	0.3865	0.3865		81	34.26	3,141,107	4,032,585	
2012/07		1.00	0.9417	0.9417		81	34.26	3,159,533	4,070,574	
2013/01		1.00	0.4901	0.4901		81	34.24	3,169,173	4,090,500	
2013/07		1.00	0.6196	0.6196		81	41.85	3,184,114	4,115,853	
2014/01		1.00	0.8564	0.8564		81	41.85	3,204,863	4,151,088	



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264.77

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		1.00	1.2383	1.2383		81	41.85	3,235,060	4,202,523	
2015/01		1.00	0.7571	0.7571		81	40.91	3,253,278	4,234,356	
2015/09		1.00	1.5736	1.5736		81	40.91	3,291,357	4,301,019	
2016/09		1.00	1.9890	1.9890		81	40.91	3,340,051	4,386,555	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0005826-00 - 2016/09

236.26

Accentia Health & Rehab. Center of Tampa

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1818 E FLETCHER AVE	1/1/2014-6/30/2014	Number of Beds: 266	Superior: 0
TAMPA, FL 33612-3770	Days in CR 181	Maximum: 48,146	Standard: 366
County: Hillsborough [29]	First Used : 2015/01	Max Annualized: 97,090	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 40,465	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,050	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 30,809	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	76.13740%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	84.04644%	Cost: 1.08180716
Open Date: 01/01/1975	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1975	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 08/01/1981	Low Occupancy Adjustment Factor:	106.29103%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213039	Interim Component Effective Date:	01/01/2016	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,492,287	2,791,779	1,868,998	729,865		6,882,929
1a	Audit Adjustments						
2	Cost Per Diem	48.4367	90.6157	60.6640	23.6900		223.4064
3	Cost Per Diem Inflated	52.3992	96.4571	65.6267			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	52.3992	96.4571	65.6267	23.6900		238.1730
5a	Interim Adjustment	17.6938					
5b	Interim Adjusted Per Diem	70.0930					
6	Prior Semester: Provider Target Base	53.1496		64.7401			
7	Provider Target Rate	56.1062		68.3415			
7a	Interim Adjustment	17.6938					
7b	Interim Adjusted Target Rate	73.8000					
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	75.7507		68.4701			
10b	Base for line 10a	54.9975		64.8620			
11	Lesser of 5,7,8,10, 10a	56.8063	96.4571	65.6267	13.6500		232.5401
12/13	Medicaid Adjustment Rate		2.8363	1.9297			
14	Prospective Per Diem 11	56.8063	99.2934	67.5564	13.6500		237.3061
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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236.26

Accentia Health & Rehab. Center of Tampa

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	09/01/1991	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,371,412.00		Total Amount	Per Diem
RS to Start Calcs:	1975/01	Type:	Fixed	80% Capital(1):	5,661,374	8.0551
Indexed Asset Value	7,076,717	<60% of Base:	True	20% ROE(2):	1,415,343	0.3779
FRVS Base Asset:	3,288,408	Interest Rate:	9.5000%	Insurance Cost(3):	28,011	0.6922
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	49,364	1.2199
ROE Factor	0.023330	Amortization Rate:	12.5000%	Home Office(3):	38,908	0.9615
		Interest Only:	True	Replacement(3&4):	18,343	0.0000
		Yearly Payment:	703,864	Total FRVS PD:		11.3066

(1) 80% Capital (\$5,661,374) amortized at 12.5000 % for 20 years Interest of \$703,864 divided by annual available days (97090) divided by Occup. Adj. (0.90) = \$8.0551

(2) 20% ROE (\$1,415,343) times the ROE factor (0.023330) divided by annual available days (97090) divided by Occup. Adj. (0.90) = \$0.3779

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 266	Effective PBS Limitation	7,581,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	99.2934	99.2934	4.5049	94.7885
Indirect Care	67.5564	67.5564	3.0650	64.4914
Property	13.6500	11.3066	0.5130	10.7936
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				3.7716
Supplemental Rate				8.1814
Totals	237.3061	234.9627	10.6602	236.2555

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 005826-00 - 2016/09

236.26

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1975/01	2,196,060	0.00	3.0905	3.0000	0.0905	266	100.00	2,196,060	3,700,326	
1975/07		0.10	4.1539	3.0000	1.1539	266	100.00	2,202,648	3,850,882	
1976/01	10,259	0.10	5.1984	3.0000	2.1984	266	100.00	2,219,515	4,006,492	
1976/07	3,234	0.20	5.6836	3.0000	2.6836	266	100.00	2,236,066	4,146,142	
1977/01	1,996	0.20	6.4342	3.0000	3.4342	266	100.00	2,251,478	4,301,752	
1977/07	53,153	0.30	8.4918	3.0000	5.4918	266	100.00	2,324,894	4,519,074	
1978/01		0.30	10.2315	3.0000	7.2315	266	100.00	2,345,818	4,733,470	
1978/07		0.40	12.7709	3.0000	9.7709	266	100.00	2,373,968	4,995,480	
1979/01		0.40	14.8982	3.0000	11.8982	266	100.00	2,402,456	5,251,638	
1979/07		0.50	16.0964	3.0000	13.0964	266	100.00	2,438,493	5,472,152	
1980/01		0.50	19.2621	3.0000	16.2621	266	63.51	2,475,070	5,809,706	
1980/07		0.60	20.0727	3.0000	17.0727	266	63.51	2,519,621	6,031,018	
1981/01		0.60	20.8968	3.0000	17.8968	266	64.51	2,564,974	6,261,640	
1981/07		0.70	20.4856	3.0000	17.4856	266	64.51	2,618,838	6,423,634	
1982/01	20,456	0.70	20.1616	3.0000	17.1616	266	62.87	2,694,290	6,595,736	
1982/07	756	0.80	19.4593	3.0000	16.4593	266	62.87	2,759,709	6,747,090	
1983/04	2,750	0.80	19.0881	3.0000	16.0881	266	90.86	2,828,692	6,924,512	
1983/07	17,765	0.90	20.0459	3.0000	17.0459	266	90.86	2,922,832	7,198,492	
1984/01		0.90	18.3411	3.0000	15.3411	266	63.69	3,001,748	7,291,858	
1984/07		1.00	17.2590	3.0000	14.2590	266	63.69	3,091,800	7,431,774	
1985/01	3,011	1.00	15.4061	3.0000	12.4061	266	63.69	3,187,565	7,516,894	
1985/10	5,216	1.00	13.2583	3.0000	10.2583	266	63.69	3,288,408	7,581,000	
1986/01		1.00	11.0882	3.0000	8.0882	266	62.73	3,387,060	7,644,042	
1986/07		1.00	8.3856	3.0000	5.3856	266	62.73	3,488,672	7,629,412	
1987/01		1.00	6.3947	3.0000	3.3947	266	65.03	3,593,332	7,765,870	
1987/07		1.00	4.2954	3.0000	1.2954	266	65.03	3,701,132	7,826,518	
1988/01		1.00	2.1961	2.1961		266	69.23	3,782,413	7,890,092	
1988/07		1.00	0.5899	0.5899		266	69.23	3,804,725	7,885,836	
1989/01		1.00	0.5899	0.5899		266	73.72	3,827,169	7,932,386	
1989/07		1.00	0.5899	0.5899		266	73.72	3,849,745	7,986,118	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1990/01		1.00	0.5899	0.5899		266	75.91	3,872,455	8,026,284	
1990/07		1.00	0.5899	0.5899		266	75.91	3,895,299	8,073,632	
1991/01	165,452	1.00	0.5899	0.5899		266	73.83	4,083,729	8,120,980	
1991/07		1.00	1.4932	1.4932		266	73.83	4,144,707	8,242,276	
1992/01	60,328	1.00	2.0117	2.0117		266	76.69	4,288,414	8,407,994	
1992/07		1.00	1.8152	1.8152		266	76.69	4,366,257	8,560,678	
1993/01		1.00	1.7710	1.7710		266	81.42	4,443,583	8,712,298	
1993/07		1.00	1.5329	1.5329		266	81.42	4,511,699	8,845,830	
1994/01	49,264	1.00	1.6983	1.6983		266	84.71	4,637,585	8,996,120	
1994/07		1.00	1.5991	1.5991		266	84.71	4,637,585	9,140,026	5
1995/01	67,851	1.00	1.5812	1.5812		266	86.19	4,854,098	9,284,464	
1995/07		0.95	1.5250	1.5250		266	90.47	4,854,098	9,425,976	5
1996/01		0.95	1.7228	1.7228		266	90.47	5,005,022	9,588,502	
1996/07		0.90	1.3294	1.3294		266	90.47	5,064,907	9,715,916	
1997/01	84,858	0.90	1.4109	1.4109		266	88.52	5,214,079	9,852,906	
1997/07	207,576	0.85	1.0917	1.0917		266	88.52	5,470,036	9,960,370	
1998/01	716	0.85	1.1663	1.1663		266	88.52	5,524,982	10,076,612	
1998/07	3,399	0.80	1.0794	1.0794		266	88.52	5,576,089	10,185,406	
1999/01		0.80	1.4499	1.4499		266	88.52	5,640,766	10,333,036	
1999/07		0.75	1.2299	1.2299		266	88.52	5,692,796	10,460,184	
2000/01		0.75	1.3356	1.3356		266	88.52	5,749,821	10,599,834	
2000/07	45,285	0.70	1.1129	1.1129		266	90.42	5,839,897	10,717,672	
2001/01		0.70	1.2976	1.2976		266	89.53	5,892,941	10,856,790	
2001/07		0.65	0.9615	0.9615		266	89.53	5,929,772	10,961,062	
2002/01		0.65	1.0301	1.0301		266	86.05	5,969,478	11,073,846	
2002/07		0.60	0.8337	0.8337		266	86.05	5,999,337	11,166,148	
2003/01	203,101	0.60	1.3271	1.3271		266	82.46	6,250,211	11,314,310	
2003/07		0.55	1.1664	1.1664		266	82.46	6,290,306	11,446,246	
2004/01	353,994	0.55	1.1103	1.1103		266	80.67	6,682,715	11,573,394	
2004/07		0.50	0.8378	0.8378		266	80.67	6,710,709	11,670,484	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2005/01		0.50	0.8595	0.8595		266	82.20	6,739,552	11,770,766	
2005/07		0.45	0.7364	0.7364		266	82.20	6,761,887	11,857,482	
2006/01		0.45	0.9068	0.9068		266	80.25	6,789,482	11,964,946	
2006/07		0.40	0.8133	0.8133		266	80.25	6,811,568	12,062,302	
2007/01		0.40	1.0133	1.0133		266	81.35	6,839,175	12,184,396	
2007/07		0.35	1.1050	1.1050		266	81.35	6,865,629	12,318,992	
2008/01		0.35	0.8556	0.8556		266	81.35	6,886,192	12,424,328	
2008/07		0.30	0.6104	0.6104		266	83.99	6,898,801	12,500,138	
2009/01		0.30	1.3268	1.3268		266	83.99	6,926,258	12,666,122	
2009/07		0.25	0.6841	0.6841		266	83.99	6,938,102	12,752,838	
2010/01		0.25	0.8643	0.8643		266	83.99	6,953,095	12,862,962	
2010/07		0.20	0.7107	0.7107		266	83.99	6,962,975	12,954,466	
2011/01		0.20	0.9198	0.9198		266	83.99	6,975,787	13,073,634	
2011/07		0.15	0.9028	0.9028		266	83.99	6,985,232	13,191,738	
2012/01	72,099	0.15	0.3865	0.3865		266	81.67	7,061,382	13,242,810	
2012/07		0.10	0.9417	0.9417		266	81.67	7,068,034	13,367,564	
2013/01		0.10	0.4901	0.4901		266	78.04	7,071,497	13,433,000	
2013/07		0.05	0.6196	0.6196		266	78.04	7,073,689	13,516,258	
2014/01		0.05	0.8564	0.8564		266	79.08	7,076,717	13,631,968	
2014/07		0.00	1.2383	1.2383		266	79.08	7,076,717	13,800,878	
2015/01		0.00	0.7571	0.7571		266	76.14	7,076,717	13,905,416	
2015/09		0.00	1.5736	1.5736		266	76.14	7,076,717	14,124,334	
2016/09		0.00	1.9890	1.9890		266	76.14	7,076,717	14,405,230	

Message Code:

5 Uncorrected Licensure Deficiency

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 005826063020140101201410122014123932



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Glen Oaks Health Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1100 N PINE ST	1/1/2014-6/30/2014	Number of Beds: 76	Superior: 0
CLEARWATER, FL 33756-4104	Days in CR 181	Maximum: 13,756	Standard: 366
County: Pinellas [52]	First Used : 2015/01	Max Annualized: 27,740	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 12,572	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,185	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 11,094	FY Index: 1.33439166
Class at 1/94: North Small	Medicaid Utilization	88.24372%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.39285%	Cost: 1.08180716
Open Date: 02/06/1989	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/06/1989	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 02/06/1989	Low Occupancy Adjustment Factor:	115.58181%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 255840			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	626,137	979,040	760,378	251,834		2,617,389
1a	Audit Adjustments						
2	Cost Per Diem	56.4392	88.2495	68.5396	22.7000		235.9283
3	Cost Per Diem Inflated	61.0563	93.9384	74.1466			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	61.0563	93.9384	74.1466	22.7000		251.8413
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	60.1901		76.6592			
7	Provider Target Rate	63.5384		80.9236			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500		
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674			
10	Target Rate Class Ceiling	67.5182		79.7567			
10a	New Provider Target Limitation	69.5878		82.5918			
10b	Base for line 10a	65.9208		78.2395			
11	Lesser of 5,7,8,10, 10a	61.0563	93.9384	74.1466	13.6500		242.7913
12/13	Medicaid Adjustment Rate		4.0416	3.1901			
14	Prospective Per Diem 11	61.0563	97.9800	77.3367	13.6500		250.0230
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Glen Oaks Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/06/1989		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,715,349.00		Total Amount	Per Diem
RS to Start Calcs:	1989/01	Type:	Fixed	80% Capital(1):	2,978,483	14.2449
Indexed Asset Value	3,723,104	<60% of Base:	False	20% ROE(2):	744,621	0.6958
FRVS Base Asset:	2,253,096	Interest Rate:	10.4500%	Insurance Cost(3):	10,338	0.8223
Occup Adj Factor	0.9000	Chase Rate:	11.0000%	Taxes Cost(3):	12,433	0.9889
ROE Factor	0.023330	Amortization Rate:	10.4500%	Home Office(3):	17,460	1.3888
		Interest Only:	False	Replacement(3&4):	3,777	0.0000
		Yearly Payment:	355,639	Total FRVS PD:		18.1407

(1) 80% Capital (\$2,978,483) amortized at 10.4500 % for 20 years Principal & Interest of \$355,639 divided by annual available days (27740) divided by Occup. Adj. (0.90) = \$14.2449

(2) 20% ROE (\$744,621) times the ROE factor (0.023330) divided by annual available days (27740) divided by Occup. Adj. (0.90) = \$0.6958

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1988	Current RS PBS:	29,646
Comparison Bed	76	Effective PBS Limitation	54,155
			2,253,096

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	61.0563	61.0563	2.7701	58.2862
Direct Care	97.9800	97.9800	4.4453	93.5347
Indirect Care	77.3367	77.3367	3.5087	73.8280
Property	13.6500	18.1407	0.8230	17.3177
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.0037
Supplemental Rate				8.1814
Totals	250.0230	254.5137	11.5471	274.1517

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1989/01	2,729,494	0.00	0.5899	0.5899		76	33.92	2,253,096	2,253,096	1
1989/07		0.10	0.5899	0.5899		76	33.92	2,253,916	2,281,748	
1990/01		0.10	0.5899	0.5899		76	33.92	2,254,736	2,293,224	
1990/07		0.20	0.5899	0.5899		76	33.92	2,256,377	2,306,752	
1991/01		0.20	0.5899	0.5899		76	33.92	2,258,019	2,320,280	
1991/07		0.30	1.4932	1.4932		76	33.92	2,264,258	2,354,936	
1992/01		0.30	2.0117	2.0117		76	33.92	2,272,685	2,402,284	
1992/07		0.40	1.8152	1.8152		76	33.92	2,272,685	2,445,908	5
1993/01		0.40	1.7710	1.7710		76	52.56	2,298,316	2,489,228	
1993/07		0.50	1.5329	1.5329		76	52.56	2,315,151	2,527,380	
1994/01		0.50	1.6983	1.6983		76	65.55	2,334,811	2,570,320	
1994/07		0.60	1.5991	1.5991		76	65.70	2,357,214	2,611,436	
1995/01		0.60	1.5812	1.5812		76	65.70	2,379,577	2,652,704	
1995/07		0.70	1.5250	1.5250		76	65.70	2,404,979	2,693,136	
1996/01		0.70	1.7228	1.7228		76	76.58	2,433,983	2,739,572	
1996/07		0.80	1.3294	1.3294		76	76.58	2,459,868	2,775,976	
1997/01	33,170	0.80	1.4109	1.4109		76	76.60	2,520,803	2,815,116	
1997/07		0.90	1.0917	1.0917		76	76.60	2,545,570	2,845,820	
1998/01		0.90	1.1663	1.1663		76	70.59	2,572,291	2,879,032	
1998/07		1.00	1.0794	1.0794		76	70.59	2,600,056	2,910,116	
1999/01		1.00	1.4499	1.4499		76	68.76	2,637,754	2,952,296	
1999/07		1.00	1.2299	1.2299		76	68.76	2,670,196	2,988,624	
2000/01	17,096	1.00	1.3356	1.3356		76	73.15	2,722,955	3,028,524	
2000/07		1.00	1.1129	1.1129		76	73.15	2,753,259	3,062,192	
2001/01		1.00	1.2976	1.2976		76	73.15	2,788,985	3,101,940	
2001/07		1.00	0.9615	0.9615		76	73.15	2,815,801	3,131,732	
2002/01		1.00	1.0301	1.0301		76	85.99	2,844,807	3,163,956	
2002/07		1.00	0.8337	0.8337		76	85.99	2,868,524	3,190,328	
2003/01		1.00	1.3271	1.3271		76	85.99	2,906,592	3,232,660	
2003/07		1.00	1.1664	1.1664		76	85.99	2,940,494	3,270,356	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2004/01		1.00	1.1103	1.1103		76	76.84	2,973,142	3,306,684	
2004/07		1.00	0.8378	0.8378		76	76.84	2,998,051	3,334,424	
2005/01	12,998	1.00	0.8595	0.8595		76	78.24	3,036,817	3,363,076	
2005/07		1.00	0.7364	0.7364		76	78.24	3,059,180	3,387,852	
2006/01		1.00	0.9068	0.9068		76	81.96	3,086,921	3,418,556	
2006/07		1.00	0.8133	0.8133		76	81.96	3,112,027	3,446,372	
2007/01		1.00	1.0133	1.0133		76	74.89	3,143,561	3,481,256	
2007/07		1.00	1.1050	1.1050		76	74.89	3,178,297	3,519,712	
2008/01		1.00	0.8556	0.8556		76	74.89	3,205,491	3,549,808	
2008/07		1.00	0.6104	0.6104		76	82.78	3,225,057	3,571,468	
2009/01		1.00	1.3268	1.3268		76	82.78	3,267,847	3,618,892	
2009/07		0.95	0.6841	0.6841		76	82.78	3,289,085	3,643,668	
2010/01		0.95	0.8643	0.8643		76	82.78	3,316,092	3,675,132	
2010/07		0.90	0.7107	0.7107		76	82.78	3,337,302	3,701,276	
2011/01		0.90	0.9198	0.9198		76	82.78	3,364,928	3,735,324	
2011/07		0.85	0.9028	0.9028		76	82.78	3,390,750	3,769,068	
2012/01	93,141	0.85	0.3865	0.3865		76	78.05	3,495,030	3,783,660	
2012/07		0.80	0.9417	0.9417		76	78.05	3,521,362	3,819,304	
2013/01	17,015	0.80	0.4901	0.4901		76	85.32	3,552,184	3,838,000	
2013/07		0.75	0.6196	0.6196		76	85.32	3,568,691	3,861,788	
2014/01		0.75	0.8564	0.8564		76	85.46	3,591,613	3,894,848	
2014/07		0.70	1.2383	1.2383		76	85.46	3,622,745	3,943,108	
2015/01		0.70	0.7571	0.7571		76	88.24	3,641,946	3,972,976	
2015/09		0.65	1.5736	1.5736		76	88.24	3,679,196	4,035,524	
2016/09		0.60	1.9890	1.9890		76	88.24	3,723,104	4,115,780	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



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232.26

Heritage Park

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
37135 COLEMAN AVE	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
DADE CITY, FL 33525-4526	Days in CR 181	Maximum: 21,720	Standard: 366
County: Pasco [51]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 21,021	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,071	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 15,318	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	72.86999%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.78177%	Cost: 1.08180716
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	122.39702%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 214132			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	673,933	1,271,522	900,692	405,467		3,251,614
1a	Audit Adjustments						
2	Cost Per Diem	43.9961	83.0084	58.7996	26.4700		212.2741
3	Cost Per Diem Inflated	47.5953	88.3594	63.6098			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	47.5953	88.3594	63.6098	26.4700		226.0345
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	51.5779		63.9388			
7	Provider Target Rate	54.4471		67.4956			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	58.4935		68.2385			
10b	Base for line 10a	55.4111		64.6426			
11	Lesser of 5,7,8,10, 10a	47.5953	88.3594	63.6098	13.6500		213.2145
12/13	Medicaid Adjustment Rate		2.2734	1.6366			
14	Prospective Per Diem 11	47.5953	90.6328	65.2464	13.6500		217.1245
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Heritage Park

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/01/1997		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,455,094.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Variable	80% Capital(1):	3,138,911	7.8074
Indexed Asset Value	3,923,639	<60% of Base:	False	20% ROE(2):	784,728	0.4644
FRVS Base Asset:	2,122,271	Interest Rate:	7.6872%	Insurance Cost(3):	13,495	0.6420
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	29,195	1.3888
ROE Factor	0.023330	Amortization Rate:	7.6872%	Home Office(3):	19,512	0.9282
		Interest Only:	False	Replacement(3&4):	24,855	0.0000
		Yearly Payment:	307,768	Total FRVS PD:		11.2308

(1) 80% Capital (\$3,138,911) amortized at 7.6872 % for 20 years Principal & Interest of \$307,768 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.8074

(2) 20% ROE (\$784,728) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4644

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.5953	47.5953	2.1594	45.4359
Direct Care	90.6328	90.6328	4.1120	86.5208
Indirect Care	65.2464	65.2464	2.9602	62.2862
Property	13.6500	11.2308	0.5095	10.7213
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1123
Supplemental Rate				8.1814
Totals	217.1245	214.7053	9.7411	232.2579

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/04	2,084,878	0.00	2.6288	2.6288		120	85.06	2,084,878	3,123,840	
1983/07	4,903	0.10	3.9578	3.0000	0.9578	120	85.06	2,096,036	3,247,440	
1984/01	3,184	0.10	2.2530	2.2530		120	78.68	2,103,942	3,289,560	
1984/07		0.20	1.9179	1.9179		120	78.68	2,112,013	3,352,680	
1985/01		0.20	1.1471	1.1471		120	78.68	2,116,858	3,391,080	
1985/10		0.30	0.8522	0.8522		120	78.68	2,122,271	3,420,000	
1986/01	22,154	0.30	0.8299	0.8299		120	81.08	2,149,709	3,448,440	
1986/07		0.40	0.2974	0.2974		120	81.08	2,152,267	3,441,840	
1987/01		0.40	1.0091	1.0091		120	81.91	2,160,954	3,503,400	
1987/07		0.50	0.9007	0.9007		120	81.91	2,170,687	3,530,760	
1988/01		0.50	0.9007	0.9007		120	79.68	2,180,464	3,559,440	
1988/07		0.60	0.5899	0.5899		120	79.68	2,188,181	3,557,520	
1989/01		0.60	0.5899	0.5899		120	79.76	2,195,925	3,578,520	
1989/07		0.70	0.5899	0.5899		120	79.76	2,204,992	3,602,760	
1990/01		0.70	0.5899	0.5899		120	72.79	2,214,096	3,620,880	
1990/07		0.80	0.5899	0.5899		120	72.79	2,224,544	3,642,240	
1991/01		0.80	0.5899	0.5899		120	69.66	2,235,042	3,663,600	
1991/07		0.90	1.4932	1.4932		120	69.66	2,265,079	3,718,320	
1992/01		0.90	2.0117	2.0117		120	77.86	2,306,088	3,793,080	
1992/07		1.00	1.8152	1.8152		120	77.86	2,347,948	3,861,960	
1993/01		1.00	1.7710	1.7710		120	69.67	2,389,530	3,930,360	
1993/07		1.00	1.5329	1.5329		120	69.67	2,426,159	3,990,600	
1994/01		1.00	1.6983	1.6983		120	65.95	2,467,362	4,058,400	
1994/07		1.00	1.5991	1.5991		120	65.95	2,506,818	4,123,320	
1995/01		1.00	1.5812	1.5812		120	68.91	2,546,456	4,188,480	
1995/07		1.00	1.5250	1.5250		120	68.91	2,585,289	4,252,320	
1996/01	41,084	1.00	1.7228	1.7228		120	67.62	2,670,912	4,325,640	
1996/07		1.00	1.3294	1.3294		120	67.62	2,706,419	4,383,120	
1997/01	23,395	1.00	1.4109	1.4109		120	70.96	2,767,999	4,444,920	
1997/07		1.00	1.0917	1.0917		120	70.96	2,798,217	4,493,400	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01		1.00	1.1663	1.1663		120	70.93	2,830,853	4,545,840	
1998/07		1.00	1.0794	1.0794		120	70.93	2,861,409	4,594,920	
1999/01	57,823	1.00	1.4499	1.4499		120	72.20	2,960,720	4,661,520	
1999/07		1.00	1.2299	1.2299		120	72.20	2,997,134	4,718,880	
2000/01		1.00	1.3356	1.3356		120	72.20	3,037,164	4,781,880	
2000/07		1.00	1.1129	1.1129		120	72.20	3,070,965	4,835,040	
2001/01		1.00	1.2976	1.2976		120	72.20	3,110,814	4,897,800	
2001/07		1.00	0.9615	0.9615		120	72.20	3,140,724	4,944,840	
2002/01		1.00	1.0301	1.0301		120	74.24	3,173,077	4,995,720	
2002/07		1.00	0.8337	0.8337		120	77.44	3,199,531	5,037,360	
2003/01		1.00	1.3271	1.3271		120	77.44	3,241,992	5,104,200	
2003/07		0.95	1.1664	1.1664		120	71.15	3,277,917	5,163,720	
2004/01		0.95	1.1103	1.1103		120	71.15	3,312,492	5,221,080	
2004/07		0.90	0.8378	0.8378		120	66.55	3,337,468	5,264,880	
2005/01		0.90	0.8595	0.8595		120	66.55	3,363,287	5,310,120	
2005/07		0.85	0.7364	0.7364		120	71.81	3,384,338	5,349,240	
2006/01		0.85	0.9068	0.9068		120	71.81	3,410,424	5,397,720	
2006/07		0.80	0.8133	0.8133		120	65.68	3,432,612	5,441,640	
2007/01		0.80	1.0133	1.0133		120	65.68	3,460,437	5,496,720	
2007/07	121,822	0.75	1.1050	1.1050		120	67.11	3,610,939	5,557,440	
2008/01		0.75	0.8556	0.8556		120	67.11	3,634,110	5,604,960	
2008/07		0.70	0.6104	0.6104		120	66.28	3,649,639	5,639,160	
2009/01	11,396	0.70	1.3268	1.3268		120	66.28	3,694,933	5,714,040	
2009/07		0.65	0.6841	0.6841		120	66.28	3,711,364	5,753,160	
2010/01		0.65	0.8643	0.8643		120	66.28	3,732,214	5,802,840	
2010/07		0.60	0.7107	0.7107		120	66.28	3,748,128	5,844,120	
2011/01		0.60	0.9198	0.9198		120	66.28	3,768,814	5,897,880	
2011/07		0.55	0.9028	0.9028		120	66.28	3,787,526	5,951,160	
2012/01		0.55	0.3865	0.3865		120	63.42	3,795,578	5,974,200	
2012/07		0.50	0.9417	0.9417		120	63.42	3,813,451	6,030,480	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		0.50	0.4901	0.4901		120	66.68	3,822,798	6,060,000	
2013/07		0.45	0.6196	0.6196		120	66.68	3,833,456	6,097,560	
2014/01		0.45	0.8564	0.8564		120	65.81	3,848,230	6,149,760	
2014/07		0.40	1.2383	1.2383		120	69.11	3,867,290	6,225,960	
2015/01		0.40	0.7571	0.7571		120	72.87	3,879,000	6,273,120	
2015/09		0.35	1.5736	1.5736		120	72.87	3,900,366	6,371,880	
2016/09		0.30	1.9890	1.9890		120	72.87	3,923,639	6,498,600	

Message Code:

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 005850063020140101201410132014132816



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Lake Eustis Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
411 W WOODWARD AVE	1/1/2014-6/30/2014	Number of Beds: 90	Superior: 0
EUSTIS, FL 32726	Days in CR 181	Maximum: 16,290	Standard: 366
County: Lake [35]	First Used : 2015/01	Max Annualized: 32,850	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 15,380	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,239	Inflation
Current Class North Small	Initial CR? False	Medicaid: 8,459	FY Index: 1.33439166
Class at 1/94: North Small	Medicaid Utilization	55.00000%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.41375%	Cost: 1.08180716
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 02/01/1982	Low Occupancy Adjustment Factor:	119.40225%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213870			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	399,737	653,566	575,640	231,438		1,860,381
1a	Audit Adjustments						
2	Cost Per Diem	47.2558	77.2628	68.0506	27.3600		219.9292
3	Cost Per Diem Inflated	51.1217	82.2434	73.6176			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	51.1217	82.2434	73.6176	27.3600		234.3427
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	50.6150		75.0925			
7	Provider Target Rate	53.4306		79.2698			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500		
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507			
10	Target Rate Class Ceiling	59.8766		72.7784			
10a	New Provider Target Limitation	59.7978		79.2989			
10b	Base for line 10a	56.6467		75.1201			
11	Lesser of 5,7,8,10, 10a	51.1217	82.2434	72.7784	13.6500		219.7935
12/13	Medicaid Adjustment Rate		0.4626	0.4094			
14	Prospective Per Diem 11	51.1217	82.7060	73.1878	13.6500		220.6655
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Lake Eustis Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/01/1998		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,624,895.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Variable	80% Capital(1):	2,587,393	9.6183
Indexed Asset Value	3,234,241	<60% of Base:	False	20% ROE(2):	646,848	0.5104
FRVS Base Asset:	1,010,008	Interest Rate:	9.5350%	Insurance Cost(3):	11,246	0.7312
Occup Adj Factor	0.9000	Chase Rate:	7.2500%	Taxes Cost(3):	16,804	1.0926
ROE Factor	0.023330	Amortization Rate:	9.2500%	Home Office(3):	18,622	1.2108
		Interest Only:	False	Replacement(3&4):	1,740	0.0000
		Yearly Payment:	284,365	Total FRVS PD:		13.1633

(1) 80% Capital (\$2,587,393) amortized at 9.2500 % for 20 years Principal & Interest of \$284,365 divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$9.6183

(2) 20% ROE (\$646,848) times the ROE factor (0.023330) divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$0.5104

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.1217	51.1217	2.3194	48.8023
Direct Care	82.7060	82.7060	3.7523	78.9537
Indirect Care	73.1878	73.1878	3.3205	69.8673
Property	13.6500	13.1633	0.5972	12.5661
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.2371
Supplemental Rate				8.1814
Totals	220.6655	220.1788	9.9894	236.6079

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/04	420,671	0.00	2.6288	2.6288		60	69.36	420,671	1,561,920	
1983/07		0.10	3.9578	3.0000	0.9578	60	69.36	421,933	1,623,720	
1984/01		0.10	2.2530	2.2530		60	71.10	422,884	1,644,780	
1984/07	566,741	0.20	1.9179	1.9179		60	71.10	991,247	1,676,340	
1985/01	13,911	0.20	1.1471	1.1471		60	71.10	1,007,432	1,695,540	
1985/10		0.30	0.8522	0.8522		60	71.10	1,010,008	1,710,000	
1986/01		0.30	0.8299	0.8299		60	71.10	1,012,523	1,724,220	
1986/07		0.40	0.2974	0.2974		60	71.10	1,013,728	1,720,920	
1987/01		0.40	1.0091	1.0091		60	53.00	1,017,671	1,751,700	
1987/07		0.50	0.9007	0.9007		60	52.94	1,022,083	1,765,380	
1988/01		0.50	0.9007	0.9007		60	59.00	1,026,686	1,779,720	
1988/07		0.60	0.5899	0.5899		60	59.33	1,030,319	1,778,760	
1989/01		0.60	0.5899	0.5899		60	59.33	1,033,965	1,789,260	
1989/07		0.70	0.5899	0.5899		60	56.96	1,038,234	1,801,380	
1990/01		0.70	0.5899	0.5899		60	64.75	1,042,521	1,810,440	
1990/07		0.80	0.5899	0.5899		60	64.75	1,042,521	1,821,120	5
1991/01		0.80	0.5899	0.5899		90	70.64	1,047,441	2,747,700	5
1991/07		0.90	1.4932	1.4932		90	70.64	1,066,527	2,788,740	
1992/01	875,009	0.90	2.0117	2.0117		90	73.18	1,960,845	2,844,810	
1992/07		1.00	1.8152	1.8152		90	73.18	1,996,438	2,896,470	
1993/01		1.00	1.7710	1.7710		90	74.61	2,031,795	2,947,770	
1993/07		1.00	1.5329	1.5329		90	74.61	2,062,940	2,992,950	
1994/01	44,212	1.00	1.6983	1.6983		90	75.81	2,142,187	3,043,800	
1994/07		1.00	1.5991	1.5991		90	75.81	2,176,443	3,092,490	
1995/01		1.00	1.5812	1.5812		90	75.81	2,210,857	3,141,360	
1995/07		1.00	1.5250	1.5250		90	75.81	2,244,573	3,189,240	
1996/01		1.00	1.7228	1.7228		90	75.81	2,244,573	3,244,230	5
1996/07		1.00	1.3294	1.3294		90	75.81	2,283,243	3,287,340	5
1997/01		1.00	1.4109	1.4109		90	83.53	2,313,596	3,333,690	5
1997/07	15,946	1.00	1.0917	1.0917		90	83.53	2,362,185	3,370,050	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01		1.00	1.1663	1.1663		90	83.53	2,415,648	3,409,380	
1998/07		1.00	1.0794	1.0794		90	79.57	2,441,723	3,446,190	
1999/01		1.00	1.4499	1.4499		90	79.57	2,477,126	3,496,140	
1999/07		1.00	1.2299	1.2299		90	79.57	2,507,592	3,539,160	
2000/01		1.00	1.3356	1.3356		90	79.57	2,541,083	3,586,410	
2000/07		1.00	1.1129	1.1129		90	79.57	2,569,363	3,626,280	
2001/01		1.00	1.2976	1.2976		90	79.57	2,602,703	3,673,350	
2001/07		1.00	0.9615	0.9615		90	67.02	2,627,728	3,708,630	
2002/01		1.00	1.0301	1.0301		90	67.02	2,654,796	3,746,790	
2002/07		1.00	0.8337	0.8337		90	62.29	2,654,796	3,778,020	5
2003/01		1.00	1.3271	1.3271		90	62.29	2,712,455	3,828,150	
2003/07		0.95	1.1664	1.1664		90	67.93	2,742,512	3,872,790	
2004/01		0.95	1.1103	1.1103		90	67.93	2,771,440	3,915,810	
2004/07		0.90	0.8378	0.8378		90	69.09	2,792,337	3,948,660	
2005/01		0.90	0.8595	0.8595		90	69.09	2,813,939	3,982,590	
2005/07		0.85	0.7364	0.7364		90	68.92	2,831,551	4,011,930	
2006/01		0.85	0.9068	0.9068		90	68.92	2,853,377	4,048,290	
2006/07		0.80	0.8133	0.8133		90	66.88	2,871,941	4,081,230	
2007/01		0.80	1.0133	1.0133		90	66.88	2,895,221	4,122,540	
2007/07	22,876	0.75	1.1050	1.1050		90	59.70	2,942,093	4,168,080	
2008/01		0.75	0.8556	0.8556		90	59.70	2,960,972	4,203,720	
2008/07		0.70	0.6104	0.6104		90	64.27	2,973,624	4,229,370	
2009/01		0.70	1.3268	1.3268		90	64.27	3,001,243	4,285,530	
2009/07		0.65	0.6841	0.6841		90	64.27	3,014,590	4,314,870	
2010/01		0.65	0.8643	0.8643		90	64.27	3,031,526	4,352,130	
2010/07		0.60	0.7107	0.7107		90	64.27	3,044,452	4,383,090	
2011/01		0.60	0.9198	0.9198		90	64.27	3,061,254	4,423,410	
2011/07		0.55	0.9028	0.9028		90	64.27	3,076,453	4,463,370	
2012/01	32,130	0.55	0.3865	0.3865		90	64.92	3,115,124	4,480,650	
2012/07		0.50	0.9417	0.9417		90	64.92	3,129,793	4,522,860	



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0 005851-00 - 2016/09

236.61

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01	13,654	0.50	0.4901	0.4901		90	62.35	3,151,118	4,545,000	
2013/07		0.45	0.6196	0.6196		90	62.35	3,159,903	4,573,170	
2014/01		0.45	0.8564	0.8564		90	64.20	3,172,081	4,612,320	
2014/07		0.40	1.2383	1.2383		90	60.74	3,187,792	4,669,470	
2015/01		0.40	0.7571	0.7571		90	55.00	3,197,445	4,704,840	
2015/09		0.35	1.5736	1.5736		90	55.00	3,215,057	4,778,910	
2016/09		0.30	1.9890	1.9890		90	55.00	3,234,241	4,873,950	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0006339-00 - 2016/09

244.59

Lake Placid Health And Rehabilitation Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
125 TOMOKA BLVD S	1/1/2014-6/30/2014	Number of Beds: 180	Superior: 0
LAKE PLACID, FL 33852-8123	Days in CR 181	Maximum: 32,580	Standard: 356
County: Highlands [28]	First Used : 2015/01	Max Annualized: 65,700	Conditional: 10
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 30,366	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,519	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 20,151	FY Index: 1.33439166
Class at 1/94: South Large	Medicaid Utilization	66.36040%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.20442%	Cost: 1.08180716
Open Date: 01/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 01/01/1984	Low Occupancy Adjustment Factor:	117.87285%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 214124	Interim Component Effective Date:	10/01/2015	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	925,817	1,688,900	1,224,877	604,328		4,443,922
1a	Audit Adjustments						
2	Cost Per Diem	45.9440	83.8122	60.7849	29.9900		220.5311
3	Cost Per Diem Inflated	49.7025	89.2150	65.7575			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	49.7025	89.2150	65.7575	29.9900		234.6650
5a	Interim Adjustment	12.3698					
5b	Interim Adjusted Per Diem	62.0723					
6	Prior Semester: Provider Target Base	47.8162		67.1302			
7	Provider Target Rate	50.4761		70.8645			
7a	Interim Adjustment	12.3698					
7b	Interim Adjusted Target Rate	62.8459					
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	69.8560		67.7635			
10b	Base for line 10a	54.4569		64.1926			
11	Lesser of 5,7,8,10, 10a	56.8063	89.2150	65.7575	13.6500		225.4288
12/13	Medicaid Adjustment Rate		1.5972	1.1772			
14	Prospective Per Diem 11	56.8063	90.8122	66.9347	13.6500		228.2032
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Rate Semester 09/01/2016 through 08/31/2017

0 006339-00 - 2016/09

244.59

Lake Placid Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/01/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	8,129,560.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Variable	80% Capital(1):	6,609,595	10.9600
Indexed Asset Value	8,261,994	<60% of Base:	False	20% ROE(2):	1,652,399	0.6520
FRVS Base Asset:	2,984,578	Interest Rate:	7.6872%	Insurance Cost(3):	21,833	0.7190
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	47,407	1.5612
ROE Factor	0.023330	Amortization Rate:	7.6872%	Home Office(3):	22,419	0.7383
		Interest Only:	False	Replacement(3&4):	1,110	0.0000
		Yearly Payment:	648,067	Total FRVS PD:		14.6305

(1) 80% Capital (\$6,609,595) amortized at 7.6872 % for 20 years Principal & Interest of \$648,067 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$10.9600

(2) 20% ROE (\$1,652,399) times the ROE factor (0.023330) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.6520

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	90.8122	90.8122	4.1201	86.6921
Indirect Care	66.9347	66.9347	3.0368	63.8979
Property	13.6500	14.6305	0.6638	13.9667
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.6252
Supplemental Rate				8.1814
Totals	228.2032	229.1837	10.3980	244.5923

Medicaid Trend Adjustment



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244.59

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	2,967,031	0.00	1.2952	1.2952		120	84.30	2,967,031	3,289,560	
1984/07		0.10	1.9179	1.9179		120	84.30	2,972,722	3,352,680	
1985/01	3,369	0.10	1.1471	1.1471		120	84.30	2,979,501	3,391,080	
1985/10		0.20	0.8522	0.8522		120	84.30	2,984,578	3,420,000	
1986/01		0.20	0.8299	0.8299		120	84.30	2,989,532	3,448,440	
1986/07		0.30	0.2974	0.2974		120	84.30	2,992,199	3,441,840	
1987/01		0.30	1.0091	1.0091		120	79.41	3,001,256	3,503,400	
1987/07		0.40	0.9007	0.9007		120	79.41	3,012,070	3,530,760	
1988/01		0.40	0.9007	0.9007		120	82.71	3,022,922	3,559,440	
1988/07		0.50	0.5899	0.5899		120	82.71	3,031,840	3,557,520	
1989/01		0.50	0.5899	0.5899		120	85.10	3,040,784	3,578,520	
1989/07		0.60	0.5899	0.5899		120	85.10	3,040,784	3,602,760	5
1990/01		0.60	0.5899	0.5899		120	73.98	3,051,545	3,620,880	5
1990/07		0.70	0.5899	0.5899		120	73.98	3,062,344	3,642,240	5
1991/01		0.70	0.5899	0.5899		120	70.03	3,074,988	3,663,600	5
1991/07		0.80	1.4932	1.4932		120	70.03	3,124,570	3,718,320	
1992/01		0.80	2.0117	2.0117		120	72.15	3,174,857	3,793,080	
1992/07		0.90	1.8152	1.8152		120	72.15	3,226,725	3,861,960	
1993/01		0.90	1.7710	1.7710		120	68.77	3,278,156	3,930,360	
1993/07		1.00	1.5329	1.5329		120	68.77	3,328,407	3,990,600	
1994/01		1.00	1.6983	1.6983		120	67.13	3,384,933	4,058,400	
1994/07		1.00	1.5991	1.5991		120	67.13	3,439,061	4,123,320	
1995/01		1.00	1.5812	1.5812		120	67.76	3,493,439	4,188,480	
1995/07		1.00	1.5250	1.5250		120	67.76	3,546,714	4,252,320	
1996/01	31,581	1.00	1.7228	1.7228		120	69.15	3,639,398	4,325,640	
1996/07		1.00	1.3294	1.3294		120	69.15	3,687,780	4,383,120	
1997/01	19,982	1.00	1.4109	1.4109		120	65.84	3,759,793	4,444,920	
1997/07		1.00	1.0917	1.0917		120	65.84	3,800,839	4,493,400	
1998/01	2,208,526	1.00	1.1663	1.1663		180	62.14	6,053,694	6,818,760	
1998/07		1.00	1.0794	1.0794		180	62.14	6,119,038	6,892,380	



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0 006339-00 - 2016/09

244.59

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01	39,706	1.00	1.4499	1.4499		180	62.42	6,247,464	6,992,280	
1999/07	1,442	1.00	1.2299	1.2299		180	62.42	6,325,744	7,078,320	
2000/01		1.00	1.3356	1.3356		180	62.42	6,410,231	7,172,820	
2000/07		1.00	1.1129	1.1129		180	62.42	6,481,570	7,252,560	
2001/01		1.00	1.2976	1.2976		180	62.42	6,565,675	7,346,700	
2001/07		1.00	0.9615	0.9615		180	62.42	6,628,804	7,417,260	
2002/01		1.00	1.0301	1.0301		180	64.45	6,697,087	7,493,580	
2002/07		1.00	0.8337	0.8337		180	64.33	6,752,921	7,556,040	
2003/01		1.00	1.3271	1.3271		180	64.33	6,842,539	7,656,300	
2003/07		1.00	1.1664	1.1664		180	62.47	6,922,350	7,745,580	
2004/01		1.00	1.1103	1.1103		180	62.47	6,999,209	7,831,620	
2004/07		0.95	0.8378	0.8378		180	63.40	7,054,916	7,897,320	
2005/01		0.95	0.8595	0.8595		180	63.40	7,112,519	7,965,180	
2005/07	45,245	0.90	0.7364	0.7364		180	64.96	7,204,906	8,023,860	
2006/01		0.90	0.9068	0.9068		180	64.96	7,263,705	8,096,580	
2006/07		0.85	0.8133	0.8133		180	68.94	7,313,919	8,162,460	
2007/01		0.85	1.0133	1.0133		180	68.94	7,376,914	8,245,080	
2007/07		0.80	1.1050	1.1050		180	69.37	7,442,126	8,336,160	
2008/01		0.80	0.8556	0.8556		180	69.37	7,493,067	8,407,440	
2008/07		0.75	0.6104	0.6104		180	66.61	7,527,370	8,458,740	
2009/01		0.75	1.3268	1.3268		180	66.61	7,602,275	8,571,060	
2009/07		0.70	0.6841	0.6841		180	66.61	7,638,682	8,629,740	
2010/01		0.70	0.8643	0.8643		180	66.61	7,684,896	8,704,260	
2010/07		0.65	0.7107	0.7107		180	66.61	7,720,400	8,766,180	
2011/01		0.65	0.9198	0.9198		180	66.61	7,766,560	8,846,820	
2011/07		0.60	0.9028	0.9028		180	66.61	7,808,631	8,926,740	
2012/01	132,012	0.60	0.3865	0.3865		180	69.09	7,958,751	8,961,300	
2012/07		0.55	0.9417	0.9417		180	69.09	7,999,969	9,045,720	
2013/01		0.55	0.4901	0.4901		180	63.22	8,021,537	9,090,000	
2013/07		0.50	0.6196	0.6196		180	63.22	8,046,388	9,146,340	



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244.59

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.50	0.8564	0.8564		180	66.82	8,080,843	9,224,640	
2014/07		0.45	1.2383	1.2383		180	66.82	8,125,869	9,338,940	
2015/01		0.45	0.7571	0.7571		180	66.36	8,153,554	9,409,680	
2015/09		0.40	1.5736	1.5736		180	66.36	8,204,872	9,557,820	
2016/09		0.35	1.9890	1.9890		180	66.36	8,261,994	9,747,900	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

0006340-00 - 2016/09

235.81

Windsor Health And Rehabilitation Center

Type of Cost Report: **Prospective with Interim Component** Type of Cost: **Actual with Interim Component** Type of Rate: **Prospective**

Type of Ownership: **Proprietary : Corporation** CHOW Status based on this Cost Report: **No Change**

Provider Information	Cost Report	Patient Days	Ratings Days
602 E LAURA ST	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
STARKE, FL 32091	Days in CR 181	Maximum: 21,720	Standard: 366
County: Bradford [4]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 20,024	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,521	Inflation
Current Class North Large	Initial CR? False	Medicaid: 13,121	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	65.52637%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.19153%	Cost: 1.08180716
Open Date: 06/25/1990	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/25/1990	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 07/02/1990	Low Occupancy Adjustment Factor:	116.59188%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213888	Interim Component Effective Date:	02/01/2016	PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	615,725	988,528	744,281	366,863		2,715,397	
1a	Audit Adjustments							
2	Cost Per Diem	46.9267	75.3394	56.7244	27.9600		206.9505	
3	Cost Per Diem Inflated	50.7656	80.1960	61.3649				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.7656	80.1960	61.3649	27.9600		220.2865	
5a	Interim Adjustment	11.6298						
5b	Interim Adjusted Per Diem	62.3954						
6	Prior Semester: Provider Target Base	49.0882		63.6608				
7	Provider Target Rate	51.8189		67.2021				
7a	Interim Adjustment	11.6298						
7b	Interim Adjusted Target Rate	63.4487						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	66.5874		67.3187				
10b	Base for line 10a	52.0615		63.7712				
11	Lesser of 5,7,8,10, 10a	54.8223	80.1960	61.3649	13.6500		210.0332	
12/13	Medicaid Adjustment Rate		1.4008	1.0719				
14	Prospective Per Diem 11	54.8223	81.5968	62.4368	13.6500		212.5059	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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235.81

Windsor Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	07/02/1990	Amount:	2,618,667.00		Total Amount	Per Diem
RS to Start Calcs:	1990/01	Type:	Fixed	80% Capital(1):	4,595,481	14.9186
Indexed Asset Value	5,744,351	<60% of Base:	False	20% ROE(2):	1,148,870	0.6799
FRVS Base Asset:	3,595,587	Interest Rate:	11.5000%	Insurance Cost(3):	17,021	0.8500
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	20,587	1.0281
ROE Factor	0.023330	Amortization Rate:	11.5000%	Home Office(3):	19,264	0.9620
		Interest Only:	False	Replacement(3&4):	1,110	0.0000
		Yearly Payment:	588,091	Total FRVS PD:		18.4386

(1) 80% Capital (\$4,595,481) amortized at 11.5000 % for 20 years Principal & Interest of \$588,091 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$14.9186

(2) 20% ROE (\$1,148,870) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6799

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1989	Current RS PBS:	30,023
Comparison Bed	120	Effective PBS Limitation	54,155
			3,602,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	81.5968	81.5968	3.7020	77.8948
Indirect Care	62.4368	62.4368	2.8327	59.6041
Property	13.6500	18.4386	0.8366	17.6020
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.1898
Supplemental Rate				8.1814
Totals	212.5059	217.2945	9.8586	235.8071

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2014

0 006340-00 - 2016/09

235.81

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1990/01	3,595,587	0.00	0.5899	0.5899		120		3,595,587	3,620,880	
1990/07		0.10	0.5899	0.5899		120	85.50	3,597,708	3,642,240	
1991/01		0.10	0.5899	0.5899		120	85.50	3,599,831	3,663,600	
1991/07		0.20	1.4932	1.4932		120	85.50	3,610,580	3,718,320	
1992/01		0.20	2.0117	2.0117		120	85.50	3,625,105	3,793,080	
1992/07		0.30	1.8152	1.8152		120	85.50	3,644,847	3,861,960	
1993/01		0.30	1.7710	1.7710		120	85.50	3,664,212	3,930,360	
1993/07		0.40	1.5329	1.5329		120	87.41	3,686,681	3,990,600	
1994/01		0.40	1.6983	1.6983		120	89.74	3,711,725	4,058,400	
1994/07	65,426	0.50	1.5991	1.5991		120	89.74	3,806,830	4,123,320	
1995/01		0.50	1.5812	1.5812		120	89.74	3,836,927	4,188,480	
1995/07		0.60	1.5250	1.5250		120	89.74	3,872,035	4,252,320	
1996/01		0.60	1.7228	1.7228		120	89.74	3,912,060	4,325,640	
1996/07		0.70	1.3294	1.3294		120	89.74	3,948,466	4,383,120	
1997/01	29,703	0.70	1.4109	1.4109		120	88.00	4,017,164	4,444,920	
1997/07		0.80	1.0917	1.0917		120	88.00	4,052,250	4,493,400	
1998/01		0.80	1.1663	1.1663		120	85.12	4,090,057	4,545,840	
1998/07	34,762	0.90	1.0794	1.0794		120	78.74	4,164,554	4,594,920	
1999/01		0.90	1.4499	1.4499		120	78.74	4,218,897	4,661,520	
1999/07		1.00	1.2299	1.2299		120	78.74	4,270,785	4,718,880	
2000/01		1.00	1.3356	1.3356		120	78.74	4,327,826	4,781,880	
2000/07		1.00	1.1129	1.1129		120	78.74	4,375,990	4,835,040	
2001/01		1.00	1.2976	1.2976		120	82.73	4,432,773	4,897,800	
2001/07		1.00	0.9615	0.9615		120	82.73	4,475,394	4,944,840	
2002/01		1.00	1.0301	1.0301		120	78.89	4,521,495	4,995,720	
2002/07		1.00	0.8337	0.8337		120	78.89	4,559,191	5,037,360	
2003/01		1.00	1.3271	1.3271		120	74.58	4,619,696	5,104,200	
2003/07		1.00	1.1664	1.1664		120	74.58	4,673,580	5,163,720	
2004/01		1.00	1.1103	1.1103		120	70.99	4,725,471	5,221,080	
2004/07		1.00	0.8378	0.8378		120	70.99	4,765,061	5,264,880	



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235.81

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2005/01		1.00	0.8595	0.8595		120	70.98	4,806,017	5,310,120	
2005/07		1.00	0.7364	0.7364		120	70.98	4,841,409	5,349,240	
2006/01		1.00	0.9068	0.9068		120	71.98	4,885,311	5,397,720	
2006/07		1.00	0.8133	0.8133		120	71.98	4,925,043	5,441,640	
2007/01		1.00	1.0133	1.0133		120	68.25	4,974,948	5,496,720	
2007/07		1.00	1.1050	1.1050		120	68.25	5,029,921	5,557,440	
2008/01		1.00	0.8556	0.8556		120	68.25	5,072,957	5,604,960	
2008/07		1.00	0.6104	0.6104		120	67.54	5,103,922	5,639,160	
2009/01		1.00	1.3268	1.3268		120	67.54	5,171,641	5,714,040	
2009/07		1.00	0.6841	0.6841		120	67.54	5,207,020	5,753,160	
2010/01		1.00	0.8643	0.8643		120	67.54	5,252,024	5,802,840	
2010/07		0.95	0.7107	0.7107		120	67.54	5,287,486	5,844,120	
2011/01		0.95	0.9198	0.9198		120	67.54	5,333,688	5,897,880	
2011/07		0.90	0.9028	0.9028		120	67.54	5,377,024	5,951,160	
2012/01		0.90	0.3865	0.3865		120	67.54	5,395,731	5,974,200	
2012/07		0.85	0.9417	0.9417		120	67.54	5,438,918	6,030,480	
2013/01		0.85	0.4901	0.4901		120	68.77	5,461,577	6,060,000	
2013/07		0.80	0.6196	0.6196		120	68.77	5,488,650	6,097,560	
2014/01		0.80	0.8564	0.8564		120	67.44	5,526,253	6,149,760	
2014/07		0.75	1.2383	1.2383		120	67.44	5,577,575	6,225,960	
2015/01		0.75	0.7571	0.7571		120	65.53	5,609,244	6,273,120	
2015/09		0.70	1.5736	1.5736		120	65.53	5,671,030	6,371,880	
2016/09		0.65	1.9890	1.9890		120	65.53	5,744,351	6,498,600	

Message Code:

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0006483-00 - 2016/09

243.76

Salerno Bay Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4801 SE COVE RD	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
STUART, FL 34997-1602	Days in CR 181	Maximum: 21,720	Standard: 366
County: Martin [43]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 19,981	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,403	Inflation
Current Class South Large	Initial CR? False	Medicaid: 13,003	FY Index: 1.33439166
Class at 1/94: South Large	Medicaid Utilization	65.07682%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.99355%	Cost: 1.08180716
Open Date: 06/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 07/01/1985	Low Occupancy Adjustment Factor:	116.34150%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 214141			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	583,973	1,081,737	848,577	310,642		2,824,929	
1a	Audit Adjustments							
2	Cost Per Diem	44.9106	83.1913	65.2601	23.8900		217.2520	
3	Cost Per Diem Inflated	48.5846	88.5541	70.5988				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.5846	88.5541	70.5988	23.8900		231.6275	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.7884		71.9918				
7	Provider Target Rate	56.7805		75.9966				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	62.3078		77.4067				
10b	Base for line 10a	59.0244		73.3276				
11	Lesser of 5,7,8,10, 10a	48.5846	88.5541	70.3550	13.6500		221.1437	
12/13	Medicaid Adjustment Rate		1.5020	1.1933				
14	Prospective Per Diem 11	48.5846	90.0561	71.5483	13.6500		223.8390	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Salerno Bay Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/01/1999	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,162,740.00		Total Amount	Per Diem
RS to Start Calcs:	1985/01	Type:	Variable	80% Capital(1):	4,417,710	10.9882
Indexed Asset Value	5,522,138	<60% of Base:	False	20% ROE(2):	1,104,428	0.6536
FRVS Base Asset:	3,321,973	Interest Rate:	7.6872%	Insurance Cost(3):	18,272	0.9145
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	55,292	2.7672
ROE Factor	0.023330	Amortization Rate:	7.6872%	Home Office(3):	19,519	0.9769
		Interest Only:	False	Replacement(3&4):	5,564	0.0000
		Yearly Payment:	433,154	Total FRVS PD:		16.3004

(1) 80% Capital (\$4,417,710) amortized at 7.6872 % for 20 years Principal & Interest of \$433,154 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.9882

(2) 20% ROE (\$1,104,428) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6536

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.5846	48.5846	2.2043	46.3803
Direct Care	90.0561	90.0561	4.0858	85.9703
Indirect Care	71.5483	71.5483	3.2461	68.3022
Property	13.6500	16.3004	0.7395	15.5609
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.3659
Supplemental Rate				8.1814
Totals	223.8390	226.4894	10.2757	243.7610

Medicaid Trend Adjustment



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243.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/01	3,321,973	0.00	1.1471	1.1471		120	21.38	3,321,973	3,391,080	
1985/10		0.10	0.8522	0.8522		120	21.38	3,321,973	3,420,000	
1986/01		0.10	0.8299	0.8299		120	21.38	3,321,973	3,448,440	
1986/07		0.20	0.2974	0.2974		120	21.38	3,321,973	3,441,840	
1987/01		0.20	1.0091	1.0091		120	21.38	3,321,973	3,503,400	
1987/07		0.30	0.9007	0.9007		120	21.38	3,321,973	3,530,760	
1988/01		0.30	0.9007	0.9007		120	30.09	3,326,884	3,559,440	
1988/07		0.40	0.5899	0.5899		120	30.09	3,331,179	3,557,520	
1989/01		0.40	0.5899	0.5899		120	39.88	3,336,879	3,578,520	
1989/07		0.50	0.5899	0.5899		120	39.88	3,344,017	3,602,760	
1990/01		0.50	0.5899	0.5899		120	35.79	3,350,436	3,620,880	
1990/07		0.60	0.5899	0.5899		120	35.79	3,358,152	3,642,240	
1991/01		0.60	0.5899	0.5899		120	42.50	3,367,335	3,663,600	
1991/07		0.70	1.4932	1.4932		120	42.50	3,394,531	3,718,320	
1992/01		0.70	2.0117	2.0117		120	59.24	3,442,333	3,793,080	
1992/07		0.80	1.8152	1.8152		120	59.24	3,492,323	3,861,960	
1993/01		0.80	1.7710	1.7710		120	54.13	3,541,020	3,930,360	
1993/07		0.90	1.5329	1.5329		120	54.13	3,589,099	3,990,600	
1994/01		0.90	1.6983	1.6983		120	52.98	3,641,944	4,058,400	
1994/07		1.00	1.5991	1.5991		120	52.98	3,641,944	4,123,320	5
1995/01		1.00	1.5812	1.5812		120	56.05	3,756,516	4,188,480	
1995/07		1.00	1.5250	1.5250		120	56.05	3,813,803	4,252,320	
1996/01		1.00	1.7228	1.7228		120	67.94	3,879,507	4,325,640	
1996/07		1.00	1.3294	1.3294		120	67.94	3,931,081	4,383,120	
1997/01		1.00	1.4109	1.4109		120	68.72	3,986,545	4,444,920	
1997/07		1.00	1.0917	1.0917		120	68.72	4,030,066	4,493,400	
1998/01	19,298	1.00	1.1663	1.1663		120	68.42	4,096,367	4,545,840	
1998/07		1.00	1.0794	1.0794		120	68.42	4,096,367	4,594,920	5
1999/01	22,092	1.00	1.4499	1.4499		120	80.25	4,222,709	4,661,520	
1999/07	4,800	1.00	1.2299	1.2299		120	80.25	4,279,444	4,718,880	



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243.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/01		1.00	1.3356	1.3356		120	80.25	4,336,600	4,781,880	
2000/07		1.00	1.1129	1.1129		120	80.25	4,384,862	4,835,040	
2001/01		1.00	1.2976	1.2976		120	80.25	4,441,760	4,897,800	
2001/07		1.00	0.9615	0.9615		120	75.90	4,484,468	4,944,840	
2002/01		1.00	1.0301	1.0301		120	75.90	4,530,663	4,995,720	
2002/07		1.00	0.8337	0.8337		120	73.94	4,568,435	5,037,360	
2003/01		1.00	1.3271	1.3271		120	73.94	4,629,063	5,104,200	
2003/07		1.00	1.1664	1.1664		120	69.66	4,683,056	5,163,720	
2004/01		1.00	1.1103	1.1103		120	69.66	4,735,052	5,221,080	
2004/07		1.00	0.8378	0.8378		120	73.07	4,774,722	5,264,880	
2005/01		1.00	0.8595	0.8595		120	73.07	4,815,761	5,310,120	
2005/07		0.95	0.7364	0.7364		120	74.01	4,849,452	5,349,240	
2006/01		0.95	0.9068	0.9068		120	74.01	4,891,230	5,397,720	
2006/07		0.90	0.8133	0.8133		120	74.72	4,927,034	5,441,640	
2007/01		0.90	1.0133	1.0133		120	74.72	4,971,969	5,496,720	
2007/07		0.85	1.1050	1.1050		120	68.80	5,018,671	5,557,440	
2008/01		0.85	0.8556	0.8556		120	68.80	5,055,172	5,604,960	
2008/07		0.80	0.6104	0.6104		120	63.64	5,079,856	5,639,160	
2009/01		0.80	1.3268	1.3268		120	63.64	5,133,774	5,714,040	
2009/07		0.75	0.6841	0.6841		120	63.64	5,160,115	5,753,160	
2010/01		0.75	0.8643	0.8643		120	63.64	5,193,563	5,802,840	
2010/07		0.70	0.7107	0.7107		120	63.64	5,219,401	5,844,120	
2011/01		0.70	0.9198	0.9198		120	63.64	5,253,009	5,897,880	
2011/07		0.65	0.9028	0.9028		120	63.64	5,283,834	5,951,160	
2012/01		0.65	0.3865	0.3865		120	68.90	5,297,107	5,974,200	
2012/07		0.60	0.9417	0.9417		120	67.84	5,327,036	6,030,480	
2013/01		0.60	0.4901	0.4901		120	67.84	5,342,703	6,060,000	
2013/07		0.55	0.6196	0.6196		120	67.84	5,360,911	6,097,560	
2014/01		0.55	0.8564	0.8564		120	65.19	5,386,161	6,149,760	
2014/07		0.50	1.2383	1.2383		120	65.19	5,419,512	6,225,960	



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243.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/01		0.50	0.7571	0.7571		120	65.08	5,440,030	6,273,120	
2015/09		0.45	1.5736	1.5736		120	65.08	5,478,551	6,371,880	
2016/09		0.40	1.9890	1.9890		120	65.08	5,522,138	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0006489-00 - 2016/09

245.72

Royal Palm Beach Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
600 BUSINESS PARK WAY	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
ROYAL PALM BEACH, FL 3341	Days in CR 181	Maximum: 21,720	Standard: 366
County: Palm Beach [50]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 21,217	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,836	Inflation
Current Class South Large	Initial CR? False	Medicaid: 13,907	FY Index: 1.33439166
Class at 1/94: South Large	Medicaid Utilization	65.54650%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.68416%	Cost: 1.08180716
Open Date: 02/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 02/01/1985	Low Occupancy Adjustment Factor:	123.53824%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 214108			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	668,495	1,208,896	832,374	337,384		3,047,149	
1a	Audit Adjustments							
2	Cost Per Diem	48.0690	86.9272	59.8529	24.2600		219.1091	
3	Cost Per Diem Inflated	52.0014	92.5308	64.7493				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.0014	92.5308	64.7493	24.2600		233.5415	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.0941		70.9384				
7	Provider Target Rate	59.2145		74.8846				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	62.6296		73.2992				
10b	Base for line 10a	59.3292		69.4366				
11	Lesser of 5,7,8,10, 10a	52.0014	92.5308	64.7493	13.6500		222.9315	
12/13	Medicaid Adjustment Rate		1.6183	1.1325				
14	Prospective Per Diem 11	52.0014	94.1491	65.8818	13.6500		225.6823	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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245.72

Royal Palm Beach Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/01/1999	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,446,928.00		Total Amount	Per Diem
RS to Start Calcs:	1985/01	Type:	Variable	80% Capital(1):	4,871,138	12.1160
Indexed Asset Value	6,088,923	<60% of Base:	False	20% ROE(2):	1,217,785	0.7207
FRVS Base Asset:	3,420,000	Interest Rate:	7.6872%	Insurance Cost(3):	15,047	0.7092
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	60,481	2.8506
ROE Factor	0.023330	Amortization Rate:	7.6872%	Home Office(3):	19,884	0.9372
		Interest Only:	False	Replacement(3&4):	16,106	0.0000
		Yearly Payment:	477,612	Total FRVS PD:		17.3337

(1) 80% Capital (\$4,871,138) amortized at 7.6872 % for 20 years Principal & Interest of \$477,612 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$12.1160

(2) 20% ROE (\$1,217,785) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7207

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.0014	52.0014	2.3593	49.6421
Direct Care	94.1491	94.1491	4.2715	89.8776
Indirect Care	65.8818	65.8818	2.9890	62.8928
Property	13.6500	17.3337	0.7864	16.5473
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.5752
Supplemental Rate				8.1814
Totals	225.6823	229.3660	10.4062	245.7164

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/01	3,909,471	0.00	1.1471	1.1471		120	70.00	3,909,471	3,391,080	
1985/10		0.10	0.8522	0.8522		120	70.00	3,420,000	3,420,000	1
1986/01		0.10	0.8299	0.8299		120	72.13	3,422,839	3,448,440	
1986/07		0.20	0.2974	0.2974		120	72.13	3,424,876	3,441,840	
1987/01	99,969	0.20	1.0091	1.0091		120	72.13	3,531,756	3,503,400	
1987/07		0.30	0.9007	0.9007		120	72.13	3,541,299	3,530,760	
1988/01		0.30	0.9007	0.9007		120	76.89	3,550,868	3,559,440	
1988/07		0.40	0.5899	0.5899		120	76.89	3,559,248	3,557,520	
1989/01		0.40	0.5899	0.5899		120	77.46	3,567,648	3,578,520	
1989/07		0.50	0.5899	0.5899		120	77.46	3,578,173	3,602,760	
1990/01		0.50	0.5899	0.5899		120	70.82	3,588,729	3,620,880	
1990/07		0.60	0.5899	0.5899		120	70.82	3,601,430	3,642,240	
1991/01		0.60	0.5899	0.5899		120	72.11	3,614,175	3,663,600	
1991/07		0.70	1.4932	1.4932		120	72.11	3,614,175	3,718,320	5
1992/01		0.70	2.0117	2.0117		120	80.43	3,703,377	3,793,080	
1992/07		0.80	1.8152	1.8152		120	80.43	3,757,157	3,861,960	
1993/01		0.80	1.7710	1.7710		120	77.31	3,810,388	3,930,360	
1993/07		0.90	1.5329	1.5329		120	77.31	3,862,956	3,990,600	
1994/01	19,882	0.90	1.6983	1.6983		120	71.02	3,941,883	4,058,400	
1994/07		1.00	1.5991	1.5991		120	71.02	4,004,918	4,123,320	
1995/01		1.00	1.5812	1.5812		120	65.56	4,068,244	4,188,480	
1995/07		1.00	1.5250	1.5250		120	65.56	4,130,285	4,252,320	
1996/01		1.00	1.7228	1.7228		120	65.48	4,201,442	4,325,640	
1996/07		1.00	1.3294	1.3294		120	65.48	4,257,296	4,383,120	
1997/01	1,546,717	1.00	1.4109	1.4109		120	67.23	4,444,920	4,444,920	8
1997/07		1.00	1.0917	1.0917		120	67.23	4,493,400	4,493,400	8
1998/01	19,044	1.00	1.1663	1.1663		120	68.06	4,545,840	4,545,840	8
1998/07		1.00	1.0794	1.0794		120	68.06	4,594,908	4,594,920	
1999/01	20,469	1.00	1.4499	1.4499		120	77.13	4,661,520	4,661,520	8
1999/07		1.00	1.2299	1.2299		120	77.13	4,718,852	4,718,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/01		1.00	1.3356	1.3356		120	77.13	4,781,877	4,781,880	
2000/07		1.00	1.1129	1.1129		120	77.13	4,835,040	4,835,040	8
2001/01		1.00	1.2976	1.2976		120	77.13	4,897,779	4,897,800	
2001/07		1.00	0.9615	0.9615		120	66.12	4,944,840	4,944,840	8
2002/01		1.00	1.0301	1.0301		120	66.12	4,995,720	4,995,720	8
2002/07		1.00	0.8337	0.8337		120	71.48	5,037,360	5,037,360	8
2003/01		1.00	1.3271	1.3271		120	71.48	5,104,200	5,104,200	8
2003/07		1.00	1.1664	1.1664		120	70.27	5,163,720	5,163,720	8
2004/01		1.00	1.1103	1.1103		120	70.27	5,221,053	5,221,080	
2004/07		1.00	0.8378	0.8378		120	70.55	5,264,795	5,264,880	
2005/01		1.00	0.8595	0.8595		120	70.55	5,310,046	5,310,120	
2005/07		0.95	0.7364	0.7364		120	66.49	5,347,195	5,349,240	
2006/01		0.95	0.9068	0.9068		120	66.49	5,393,261	5,397,720	
2006/07		0.90	0.8133	0.8133		120	66.71	5,432,740	5,441,640	
2007/01		0.90	1.0133	1.0133		120	66.71	5,482,287	5,496,720	
2007/07		0.85	1.1050	1.1050		120	66.80	5,533,782	5,557,440	
2008/01		0.85	0.8556	0.8556		120	66.80	5,574,029	5,604,960	
2008/07		0.80	0.6104	0.6104		120	58.68	5,601,247	5,639,160	
2009/01		0.80	1.3268	1.3268		120	58.68	5,660,699	5,714,040	
2009/07		0.75	0.6841	0.6841		120	58.68	5,689,744	5,753,160	
2010/01		0.75	0.8643	0.8643		120	58.68	5,726,625	5,802,840	
2010/07		0.70	0.7107	0.7107		120	58.68	5,755,115	5,844,120	
2011/01		0.70	0.9198	0.9198		120	58.68	5,792,172	5,897,880	
2011/07		0.65	0.9028	0.9028		120	58.68	5,826,160	5,951,160	
2012/01		0.65	0.3865	0.3865		120	59.99	5,840,795	5,974,200	
2012/07		0.60	0.9417	0.9417		120	61.65	5,873,795	6,030,480	
2013/01		0.60	0.4901	0.4901		120	61.65	5,891,070	6,060,000	
2013/07		0.55	0.6196	0.6196		120	61.65	5,911,147	6,097,560	
2014/01		0.55	0.8564	0.8564		120	65.64	5,938,989	6,149,760	
2014/07		0.50	1.2383	1.2383		120	65.64	5,975,763	6,225,960	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/01		0.50	0.7571	0.7571		120	65.55	5,998,387	6,273,120	
2015/09		0.45	1.5736	1.5736		120	65.55	6,040,862	6,371,880	
2016/09		0.40	1.9890	1.9890		120	65.55	6,088,923	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency
8 Limited to Current RS Per Bed Standard |
|---|

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 006489063020140101201410132014111430



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253.04

Oakbrook Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
250 BROWARD AVE	1/1/2014-6/30/2014	Number of Beds: 93	Superior: 0
LABELLE, FL 33935	Days in CR 181	Maximum: 16,833	Standard: 366
County: Hendry [26]	First Used : 2015/01	Max Annualized: 33,945	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 15,015	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,122	Inflation
Current Class South Small	Initial CR? False	Medicaid: 9,840	FY Index: 1.33439166
Class at 1/94: South Small	Medicaid Utilization	65.53447%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.19979%	Cost: 1.08180716
Open Date: 11/01/1986	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1986	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 11/25/1986	Low Occupancy Adjustment Factor:	112.80831%	DC Sem Index: 1.30450000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213497			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	442,804	840,521	687,987	261,842		2,233,154
1a	Audit Adjustments						
2	Cost Per Diem	45.0004	85.4188	69.9174	26.6100		226.9466
3	Cost Per Diem Inflated	48.6818	90.9252	75.6371			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.6818	90.9252	75.6371	26.6100		241.8541
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	57.1834		75.0306			
7	Provider Target Rate	60.3644		79.2044			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500		
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807			
10	Target Rate Class Ceiling	75.1765		88.3937			
10a	New Provider Target Limitation	68.4668		79.2044			
10b	Base for line 10a	64.8588		75.0306			
11	Lesser of 5,7,8,10, 10a	48.6818	90.9252	75.6371	13.6500		228.8941
12/13	Medicaid Adjustment Rate		1.5890	1.3219			
14	Prospective Per Diem 11	48.6818	92.5142	76.9590	13.6500		231.8050
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Oakbrook Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/01/2001	Amount:	4,700,000.00		Total Amount	Per Diem
RS to Start Calcs:	1986/07	Type:	Fixed	80% Capital(1):	3,254,772	13.6338
Indexed Asset Value	4,068,465	<60% of Base:	False	20% ROE(2):	813,693	0.6214
FRVS Base Asset:	1,397,653	Interest Rate:	11.5000%	Insurance Cost(3):	12,470	0.8305
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	20,927	1.3937
ROE Factor	0.023330	Amortization Rate:	11.5000%	Home Office(3):	18,424	1.2270
		Interest Only:	False	Replacement(3&4):	110,876	0.0000
		Yearly Payment:	416,518	Total FRVS PD:		17.7064

(1) 80% Capital (\$3,254,772) amortized at 11.5000 % for 20 years Principal & Interest of \$416,518 divided by annual available days (33945) divided by Occup. Adj. (0.90) = \$13.6338

(2) 20% ROE (\$813,693) times the ROE factor (0.023330) divided by annual available days (33945) divided by Occup. Adj. (0.90) = \$0.6214

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1986	Current RS PBS:	28,737
Comparison Bed	60	Effective PBS Limitation	54,155
			1,724,220

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.6818	48.6818	2.2087	46.4731
Direct Care	92.5142	92.5142	4.1973	88.3169
Indirect Care	76.9590	76.9590	3.4916	73.4674
Property	13.6500	17.7064	0.8033	16.9031
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.6973
Supplemental Rate				8.1814
Totals	231.8050	235.8614	10.7009	253.0392

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07	1,397,653	0.00	0.2974	0.2974		60	82.68	1,397,653	1,720,920	
1987/01		0.10	1.0091	1.0091		60	82.68	1,399,063	1,751,700	
1987/07	11,999	0.10	0.9007	0.9007		60	82.68	1,412,323	1,765,380	
1988/01		0.20	0.9007	0.9007		60	82.68	1,414,867	1,779,720	
1988/07		0.20	0.5899	0.5899		60	87.80	1,416,537	1,778,760	
1989/01		0.30	0.5899	0.5899		60	87.80	1,419,044	1,789,260	
1989/07		0.30	0.5899	0.5899		60	87.80	1,421,556	1,801,380	
1990/01		0.40	0.5899	0.5899		60	87.80	1,424,911	1,810,440	
1990/07		0.40	0.5899	0.5899		60	87.80	1,428,274	1,821,120	
1991/01		0.50	0.5899	0.5899		60	87.80	1,432,487	1,831,800	
1991/07		0.50	1.4932	1.4932		60	90.74	1,443,182	1,859,160	
1992/01		0.60	2.0117	2.0117		60	90.74	1,460,601	1,896,540	
1992/07	11,728	0.60	1.8152	1.8152		60	88.02	1,472,329	1,930,980	5
1993/01		0.70	1.7710	1.7710		93	88.02	1,506,686	3,046,029	
1993/07	1,019,186	0.70	1.5329	1.5329		93	84.35	2,542,039	3,092,715	
1994/01		0.80	1.6983	1.6983		93	84.35	2,576,575	3,145,260	
1994/07		0.80	1.5991	1.5991		93	86.22	2,609,537	3,195,573	
1995/01		0.90	1.5812	1.5812		93	86.22	2,646,673	3,246,072	
1995/07	17,606	0.90	1.5250	1.5250		93	85.60	2,700,605	3,295,548	
1996/01		1.00	1.7228	1.7228		93	85.60	2,747,131	3,352,371	
1996/07		1.00	1.3294	1.3294		93	89.68	2,783,651	3,396,918	
1997/01		1.00	1.4109	1.4109		93	89.68	2,822,926	3,444,813	
1997/07		1.00	1.0917	1.0917		93	88.57	2,853,744	3,482,385	
1998/01	25,799	1.00	1.1663	1.1663		93	89.37	2,912,826	3,523,026	
1998/07		1.00	1.0794	1.0794		93	89.37	2,944,267	3,561,063	
1999/01		1.00	1.4499	1.4499		93	89.37	2,986,956	3,612,678	
1999/07		1.00	1.2299	1.2299		93	89.37	3,023,693	3,657,132	
2000/01		1.00	1.3356	1.3356		93	89.37	3,064,077	3,705,957	
2000/07		1.00	1.1129	1.1129		93	91.85	3,098,177	3,747,156	
2001/01		1.00	1.2976	1.2976		93	91.85	3,138,379	3,795,795	



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253.04

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		1.00	0.9615	0.9615		93	88.23	3,168,555	3,832,251	
2002/01		1.00	1.0301	1.0301		93	88.23	3,201,194	3,871,683	
2002/07		1.00	0.8337	0.8337		93	91.06	3,227,882	3,903,954	
2003/01		1.00	1.3271	1.3271		93	91.06	3,270,719	3,955,755	
2003/07	23,137	1.00	1.1664	1.1664		93	88.80	3,332,006	4,001,883	
2004/01		1.00	1.1103	1.1103		93	88.80	3,369,001	4,046,337	
2004/07		1.00	0.8378	0.8378		93	88.42	3,397,226	4,080,282	
2005/01		1.00	0.8595	0.8595		93	88.42	3,426,425	4,115,343	
2005/07		1.00	0.7364	0.7364		93	81.21	3,451,657	4,145,661	
2006/01		1.00	0.9068	0.9068		93	81.21	3,482,957	4,183,233	
2006/07		1.00	0.8133	0.8133		93	78.20	3,511,284	4,217,271	
2007/01		0.95	1.0133	1.0133		93	78.20	3,545,084	4,259,958	
2007/07	38,754	0.95	1.1050	1.1050		93	78.56	3,621,054	4,307,016	
2008/01		0.90	0.8556	0.8556		93	78.56	3,648,936	4,343,844	
2008/07		0.90	0.6104	0.6104		93	60.65	3,668,983	4,370,349	
2009/01		0.85	1.3268	1.3268		93	60.65	3,710,362	4,428,381	
2009/07		0.85	0.6841	0.6841		93	60.65	3,731,938	4,458,699	
2010/01		0.80	0.8643	0.8643		93	60.65	3,757,741	4,497,201	
2010/07		0.80	0.7107	0.7107		93	60.65	3,779,108	4,529,193	
2011/01		0.75	0.9198	0.9198		93	60.65	3,805,180	4,570,857	
2011/07		0.75	0.9028	0.9028		93	60.65	3,830,945	4,612,149	
2012/01		0.70	0.3865	0.3865		93	64.83	3,841,312	4,630,005	
2012/07		0.70	0.9417	0.9417		93	64.83	3,866,634	4,673,622	
2013/01	33,054	0.65	0.4901	0.4901		93	61.61	3,912,007	4,696,500	
2013/07		0.65	0.6196	0.6196		93	61.61	3,927,761	4,725,609	
2014/01		0.60	0.8564	0.8564		93	62.64	3,947,942	4,766,064	
2014/07		0.60	1.2383	1.2383		93	62.64	3,977,275	4,825,119	
2015/01		0.55	0.7571	0.7571		93	65.53	3,993,836	4,861,668	
2015/09		0.55	1.5736	1.5736		93	65.53	4,028,403	4,938,207	
2016/09		0.50	1.9890	1.9890		93	65.53	4,068,465	5,036,415	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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Woods of Manatee Springs

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5627 9TH ST E	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
BRADENTON, FL 34203	Days in CR 365	Maximum: 43,800	Standard: 334
County: Manatee [41]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 32
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 37,419	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,363	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,809	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	74.31786%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	85.43151%	Cost: 1.07573004
Open Date: 08/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 08/01/1985	Low Occupancy Adjustment Factor:	108.04268%	DC Sem Index: 1.30450000
Med # Active Date: 07/01/2007	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 316610			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,295,614	2,432,978	992,932	610,129		5,331,653
1a	Audit Adjustments						
2	Cost Per Diem	46.5897	87.4889	35.7054	21.9400		191.7240
3	Cost Per Diem Inflated	50.1179	92.8635	38.4094			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.1179	92.8635	38.4094	21.9400		203.3308
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	53.0596		61.4707			
7	Provider Target Rate	56.0112		64.8902			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	66.8058		73.2919			
10b	Base for line 10a	63.2854		69.4297			
11	Lesser of 5,7,8,10, 10a	50.1179	92.8635	38.4094	13.6500		195.0408
12/13	Medicaid Adjustment Rate		2.3184	0.9589			
14	Prospective Per Diem 11	50.1179	95.1819	39.3683	13.6500		198.3181
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Woods of Manatee Springs

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,800,000.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Fixed	80% Capital(1):	5,653,868	20.4653
Indexed Asset Value	7,067,335	<60% of Base:	False	20% ROE(2):	1,413,467	0.8143
FRVS Base Asset:	3,420,000	Interest Rate:	13.2450%	Insurance Cost(3):	45,684	1.2209
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	88,126	2.3551
ROE Factor	0.022710	Amortization Rate:	13.2450%	Home Office(3):	17,657	0.4719
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	806,743	Total FRVS PD:		25.3275

(1) 80% Capital (\$5,653,868) amortized at 13.2450 % for 20 years Principal & Interest of \$806,743 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$20.4653

(2) 20% ROE (\$1,413,467) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.8143

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.1179	50.1179	2.2738	47.8441
Direct Care	95.1819	95.1819	4.3184	90.8635
Indirect Care	39.3683	39.3683	1.7861	37.5822
Property	13.6500	25.3275	1.1491	24.1784
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.6313
Supplemental Rate				8.1814
Totals	198.3181	209.9956	9.5274	229.2809

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	3,480,000	0.00	0.8522	0.8522		120	36.73	3,420,000	3,420,000	1
1986/01		0.10	0.8299	0.8299		120	36.73	3,421,896	3,448,440	
1986/07		0.10	0.2974	0.2974		120	36.73	3,422,575	3,441,840	
1987/01		0.20	1.0091	1.0091		120	36.76	3,427,191	3,503,400	
1987/07		0.20	0.9007	0.9007		120	14.94	3,427,191	3,530,760	
1988/01		0.30	0.9007	0.9007		120	14.94	3,427,191	3,559,440	
1988/07		0.30	0.5899	0.5899		120	14.94	3,427,191	3,557,520	
1989/01	243,535	0.40	0.5899	0.5899		120	23.65	3,670,726	3,578,520	
1989/07		0.40	0.5899	0.5899		120	23.65	3,670,726	3,602,760	
1990/01	279,779	0.50	0.5899	0.5899		120	11.29	3,950,505	3,620,880	
1990/07		0.50	0.5899	0.5899		120	11.29	3,950,505	3,642,240	
1991/01	253,842	0.60	0.5899	0.5899		120	7.05	4,204,347	3,663,600	
1991/07		0.60	1.4932	1.4932		120	7.05	4,204,347	3,718,320	
1992/01		0.70	2.0117	2.0117		120	7.05	4,204,347	3,793,080	
1992/07	52,597	0.70	1.8152	1.8152		120	9.16	4,256,944	3,861,960	
1993/01		0.80	1.7710	1.7710		120	9.16	4,256,944	3,930,360	
1993/07		0.80	1.5329	1.5329		120	9.86	4,256,944	3,990,600	
1994/01		0.90	1.6983	1.6983		120	9.86	4,256,944	4,058,400	
1994/07	293,403	0.90	1.5991	1.5991		120	9.84	4,550,347	4,123,320	
1995/01		1.00	1.5812	1.5812		120	9.84	4,550,347	4,188,480	
1995/07		1.00	1.5250	1.5250		120	22.31	4,550,347	4,252,320	
1996/01		1.00	1.7228	1.7228		120	22.31	4,550,347	4,325,640	
1996/07	2,487,567	1.00	1.3294	1.3294		120	26.75	7,067,335	4,383,120	6
1997/01		1.00	1.4109	1.4109		120	26.75	7,067,335	4,444,920	3
1997/07	134,520	1.00	1.0917	1.0917		120	26.40	7,067,335	4,493,400	3
1998/01		1.00	1.1663	1.1663		120	26.40	7,067,335	4,545,840	3
1998/07		1.00	1.0794	1.0794		120	26.40	7,067,335	4,594,920	3
1999/01		1.00	1.4499	1.4499		120	26.40	7,067,335	4,661,520	3
1999/07		1.00	1.2299	1.2299		120	27.87	7,067,335	4,718,880	3
2000/01	62,572	1.00	1.3356	1.3356		120	25.19	7,067,335	4,781,880	3



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		120	27.61	7,067,335	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	27.61	7,067,335	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	29.45	7,067,335	4,944,840	3
2002/01		1.00	1.0301	1.0301		120	29.45	7,067,335	4,995,720	3
2002/07		1.00	0.8337	0.8337		120	34.43	7,067,335	5,037,360	3
2003/01		1.00	1.3271	1.3271		120	39.35	7,067,335	5,104,200	3
2003/07	68,236	1.00	1.1664	1.1664		120	39.35	7,067,335	5,163,720	3
2004/01		1.00	1.1103	1.1103		120	39.35	7,067,335	5,221,080	3
2004/07		1.00	0.8378	0.8378		120	39.35	7,067,335	5,264,880	3
2005/01		1.00	0.8595	0.8595		120	39.35	7,067,335	5,310,120	3
2005/07		1.00	0.7364	0.7364		120	30.84	7,067,335	5,349,240	3
2006/01		0.95	0.9068	0.9068		120	30.84	7,067,335	5,397,720	3
2006/07		0.95	0.8133	0.8133		120	30.84	7,067,335	5,441,640	3
2007/01		0.90	1.0133	1.0133		120	30.84	7,067,335	5,496,720	3
2007/07		0.90	1.1050	1.1050		120	49.33	7,067,335	5,557,440	3
2008/01		0.85	0.8556	0.8556		120	49.33	7,067,335	5,604,960	3
2008/07		0.85	0.6104	0.6104		120	49.33	7,067,335	5,639,160	3
2009/01		0.80	1.3268	1.3268		120	49.33	7,067,335	5,714,040	3
2009/07		0.80	0.6841	0.6841		120	49.33	7,067,335	5,753,160	3
2010/01		0.75	0.8643	0.8643		120	49.27	7,067,335	5,802,840	3
2010/07		0.75	0.7107	0.7107		120	56.16	7,067,335	5,844,120	3
2011/01		0.70	0.9198	0.9198		120	56.16	7,067,335	5,897,880	3
2011/07		0.70	0.9028	0.9028		120	62.14	7,067,335	5,951,160	3
2012/01		0.65	0.3865	0.3865		120	62.14	7,067,335	5,974,200	3
2012/07		0.65	0.9417	0.9417		120	62.14	7,067,335	6,030,480	3
2013/01		0.60	0.4901	0.4901		120	63.50	7,067,335	6,060,000	3
2013/07		0.60	0.6196	0.6196		120	63.50	7,067,335	6,097,560	3
2014/01		0.55	0.8564	0.8564		120	67.63	7,067,335	6,149,760	3
2014/07		0.55	1.2383	1.2383		120	69.38	7,067,335	6,225,960	3
2015/01		0.50	0.7571	0.7571		120	69.38	7,067,335	6,273,120	3



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		120	69.38	7,067,335	6,371,880	3
2016/09		0.45	1.9890	1.9890		120	74.32	7,067,335	6,498,600	3

Message Code:

- 1 Per Bed Standard Limitation
- 3 Index Cost Limitation - January 1996
- 6 Not Limited to Current Per Bed Standard

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 008793123120140101201407172015084321



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225.34

Courtyard Gardens Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
17781 THELMA AVE	7/1/2013-6/30/2014	Number of Beds: 120	Superior: 0
JUPITER, FL 33458	Days in CR 365	Maximum: 43,800	Standard: 366
County: Palm Beach [50]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 39,125	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,611	Inflation
Current Class South Large	Initial CR? False	Medicaid: 24,268	FY Index: 1.32215372
Class at 1/94: South Large	Medicaid Utilization	62.02684%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.32648%	Cost: 1.09182044
Open Date: 10/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22300000
Entered Medicaid 07/08/1986	Low Occupancy Adjustment Factor:	112.96854%	DC Sem Index: 1.30450000
Med # Active Date: 06/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06663941
Previous Med # 224928			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,140,913	1,936,291	1,222,396	392,414		4,692,014	
1a	Audit Adjustments							
2	Cost Per Diem	47.0131	79.7878	50.3707	16.1700		193.3416	
3	Cost Per Diem Inflated	51.3299	85.1048	54.9958				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.3299	85.1048	54.9958	16.1700		207.6005	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	58.9932		74.3552				
7	Provider Target Rate	62.2749		78.4914				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	61.7291		71.4496				
10b	Base for line 10a	58.4762		67.6844				
11	Lesser of 5,7,8,10, 10a	51.3299	85.1048	54.9958	13.6500		205.0805	
12/13	Medicaid Adjustment Rate		1.1515	0.7441				
14	Prospective Per Diem 11	51.3299	86.2563	55.7399	13.6500		206.9761	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Courtyard Gardens Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/08/1996		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,580,000.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Variable	80% Capital(1):	4,580,387	9.2020
Indexed Asset Value	5,725,484	<60% of Base:	False	20% ROE(2):	1,145,097	0.6597
FRVS Base Asset:	3,289,560	Interest Rate:	5.0000%	Insurance Cost(3):	78,619	2.0094
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	83,100	2.1240
ROE Factor	0.022710	Amortization Rate:	5.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	75,229	0.0000
		Yearly Payment:	362,742	Total FRVS PD:		13.9951

(1) 80% Capital (\$4,580,387) amortized at 5.0000 % for 20 years Principal & Interest of \$362,742 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.2020

(2) 20% ROE (\$1,145,097) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6597

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	27,413
Comparison Date: 01/01/1984	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,289,560

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.3299	51.3299	2.3288	49.0011
Direct Care	86.2563	86.2563	3.9134	82.3429
Indirect Care	55.7399	55.7399	2.5289	53.2110
Property	13.6500	13.9951	0.6350	13.3601
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.2407
Supplemental Rate				8.1814
Totals	206.9761	207.3212	9.4061	225.3372

Medicaid Trend Adjustment



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225.34

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	3,590,000	0.00	1.9179	1.9179		120		3,289,560	3,289,560	1
1985/01		0.10	1.1471	1.1471		120		3,289,560	3,391,080	
1985/10		0.10	0.8522	0.8522		120		3,289,560	3,420,000	
1986/01		0.20	0.8299	0.8299		120		3,289,560	3,448,440	
1986/07		0.20	0.2974	0.2974		120	64.32	3,291,517	3,441,840	
1987/01		0.30	1.0091	1.0091		120	64.32	3,301,480	3,503,400	
1987/07		0.30	0.9007	0.9007		120	64.32	3,310,401	3,530,760	
1988/01		0.40	0.9007	0.9007		120	64.32	3,322,328	3,559,440	
1988/07		0.40	0.5899	0.5899		120	64.32	3,330,169	3,557,520	
1989/01		0.50	0.5899	0.5899		120	64.32	3,339,993	3,578,520	
1989/07		0.50	0.5899	0.5899		120	67.54	3,349,846	3,602,760	
1990/01		0.60	0.5899	0.5899		120	67.54	3,361,701	3,620,880	
1990/07		0.60	0.5899	0.5899		120	62.92	3,373,598	3,642,240	
1991/01		0.70	0.5899	0.5899		120	62.92	3,373,598	3,663,600	5
1991/07		0.70	1.4932	1.4932		120	65.09	3,387,528	3,718,320	5
1992/01	19,337	0.80	2.0117	2.0117		120	68.55	3,497,360	3,793,080	
1992/07		0.80	1.8152	1.8152		120	68.55	3,548,149	3,861,960	
1993/01		0.90	1.7710	1.7710		120	66.85	3,604,703	3,930,360	
1993/07		0.90	1.5329	1.5329		120	66.85	3,654,433	3,990,600	
1994/01		1.00	1.6983	1.6983		120	67.96	3,716,496	4,058,400	
1994/07		1.00	1.5991	1.5991		120	67.96	3,775,926	4,123,320	
1995/01		1.00	1.5812	1.5812		120	65.92	3,835,631	4,188,480	
1995/07		1.00	1.5250	1.5250		120	65.92	3,894,124	4,252,320	
1996/01	43,969	1.00	1.7228	1.7228		120	58.45	4,005,181	4,325,640	
1996/07		1.00	1.3294	1.3294		120	58.45	4,058,426	4,383,120	
1997/01	37,574	1.00	1.4109	1.4109		120	60.84	4,153,260	4,444,920	
1997/07		1.00	1.0917	1.0917		120	60.84	4,153,260	4,493,400	5
1998/01		1.00	1.1663	1.1663		120	60.84	4,247,569	4,545,840	
1998/07		1.00	1.0794	1.0794		120	77.54	4,293,417	4,594,920	
1999/01		1.00	1.4499	1.4499		120	77.54	4,293,417	4,661,520	5



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2014

0 010082-00 - 2016/09

225.34

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		120	77.54	4,409,237	4,718,880	
2000/01	9,503	1.00	1.3356	1.3356		120	73.25	4,477,630	4,781,880	
2000/07		1.00	1.1129	1.1129		120	73.25	4,527,462	4,835,040	
2001/01		1.00	1.2976	1.2976		120	73.25	4,586,210	4,897,800	
2001/07		1.00	0.9615	0.9615		120	73.25	4,630,306	4,944,840	
2002/01		1.00	1.0301	1.0301		120	73.25	4,678,003	4,995,720	
2002/07		1.00	0.8337	0.8337		120	68.34	4,717,004	5,037,360	
2003/01		1.00	1.3271	1.3271		120	68.34	4,779,603	5,104,200	
2003/07		1.00	1.1664	1.1664		120	74.02	4,835,352	5,163,720	
2004/01		1.00	1.1103	1.1103		120	74.02	4,889,039	5,221,080	
2004/07		1.00	0.8378	0.8378		120	74.54	4,929,999	5,264,880	
2005/01		0.95	0.8595	0.8595		120	74.54	4,970,252	5,310,120	
2005/07		0.95	0.7364	0.7364		120	77.97	5,005,024	5,349,240	
2006/01		0.90	0.9068	0.9068		120	77.97	5,045,870	5,397,720	
2006/07		0.90	0.8133	0.8133		120	77.52	5,082,806	5,441,640	
2007/01		0.85	1.0133	1.0133		120	77.52	5,126,584	5,496,720	
2007/07		0.85	1.1050	1.1050		120	65.30	5,174,738	5,557,440	
2008/01		0.80	0.8556	0.8556		120	63.26	5,210,159	5,604,960	
2008/07		0.80	0.6104	0.6104		120	63.26	5,235,600	5,639,160	
2009/01		0.75	1.3268	1.3268		120	59.53	5,287,699	5,714,040	
2009/07		0.75	0.6841	0.6841		120	59.53	5,314,830	5,753,160	
2010/01		0.70	0.8643	0.8643		120	59.53	5,346,985	5,802,840	
2010/07		0.70	0.7107	0.7107		120	59.53	5,373,586	5,844,120	
2011/01		0.65	0.9198	0.9198		120	59.53	5,405,715	5,897,880	
2011/07		0.65	0.9028	0.9028		120	59.53	5,437,436	5,951,160	
2012/01	54,878	0.60	0.3865	0.3865		120	52.41	5,504,330	5,974,200	
2012/07		0.60	0.9417	0.9417		120	52.41	5,533,965	6,030,480	
2013/01		0.55	0.4901	0.4901		120	52.41	5,548,182	6,060,000	
2013/07		0.55	0.6196	0.6196		120	56.12	5,567,090	6,097,560	
2014/01		0.50	0.8564	0.8564		120	56.12	5,590,928	6,149,760	



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225.34

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	50.55	5,622,746	6,225,960	
2015/01		0.45	0.7571	0.7571		120	50.55	5,640,353	6,273,120	
2015/09		0.45	1.5736	1.5736		120	62.03	5,680,292	6,371,880	
2016/09		0.40	1.9890	1.9890		120	62.03	5,725,484	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 010082063020140701201304272015113542



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0010453-00 - 2016/09

249.59

Heartland Health Care & Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5401 SAWYER RD	1/1/2014-12/31/2014	Number of Beds: 140	Superior: 0
SARASOTA, FL 34233	Days in CR 365	Maximum: 51,100	Standard: 366
County: Sarasota [58]	First Used : 2016/09	Max Annualized: 51,100	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 31,711	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 14,791	Inflation
Current Class South Large	Initial CR? False	Medicaid: 7,676	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	24.20611%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	62.05675%	Cost: 1.07573004
Open Date: 10/01/1994	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1994	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 07/10/2009	Low Occupancy Adjustment Factor:	78.48132%	DC Sem Index: 1.30450000
Med # Active Date: 07/10/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	629,410	753,583	493,472	181,768		2,058,233	
1a	Audit Adjustments							
2	Cost Per Diem	81.9971	98.1739	64.2876	23.6800		268.1386	
3	Cost Per Diem Inflated	88.2067	104.2049	69.1561				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	88.2067	104.2049	69.1561	23.6800		285.2477	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	100.1653		87.3076				
7	Provider Target Rate	105.7373		92.1644				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	62.8542		71.7592				
10b	Base for line 10a	59.5420		67.9777				
11	Lesser of 5,7,8,10, 10a	58.7902	104.2049	69.1561	13.6500		245.8012	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	58.7902	104.2049	69.1561	13.6500		245.8012	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 010453-00 - 2016/09

249.59

Heartland Health Care & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/10/2009		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	7,959,885.00		Total Amount	Per Diem
RS to Start Calcs:	1994/07	Type:	Variable	80% Capital(1):	3,918,575	5.5485
Indexed Asset Value	4,898,219	<60% of Base:	False	20% ROE(2):	979,644	0.4838
FRVS Base Asset:	0	Interest Rate:	2.7600%	Insurance Cost(3):	37,217	1.1736
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	95,792	3.0208
ROE Factor	0.022710	Amortization Rate:	2.7600%	Home Office(3):	17,100	0.5392
		Interest Only:	False	Replacement(3&4):	260,742	0.0000
		Yearly Payment:	255,175	Total FRVS PD:		10.7659

(1) 80% Capital (\$3,918,575) amortized at 2.7600 % for 20 years Principal & Interest of \$255,175 divided by annual available days (51100) divided by Occup. Adj. (0.90) = \$5.5485

(2) 20% ROE (\$979,644) times the ROE factor (0.022710) divided by annual available days (51100) divided by Occup. Adj. (0.90) = \$0.4838

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1994	Current RS PBS:	54,155
Comparison Bed	140	Effective PBS Limitation	4,734,800

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	104.2049	104.2049	4.7277	99.4772
Indirect Care	69.1561	69.1561	3.1376	66.0185
Property	13.6500	10.7659	0.4884	10.2775
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				9.5103
Supplemental Rate				8.1814
Totals	245.8012	242.9171	11.0210	249.5878

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 010453-00 - 2016/09

249.59

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07	11,845,758	0.00	0.6841	0.6841		140	1.07	4,734,800	4,734,800	1
2010/01	129,853	0.10	0.8643	0.8643		140	1.07	4,864,653	6,769,980	
2010/07	2,459	0.10	0.7107	0.7107		140	1.07	4,867,112	6,818,140	
2011/01		0.20	0.9198	0.9198		140	1.07	4,867,112	6,880,860	
2011/07		0.20	0.9028	0.9028		140	1.07	4,867,112	6,943,020	
2012/01		0.30	0.3865	0.3865		140	1.07	4,867,112	6,969,900	
2012/07		0.30	0.9417	0.9417		140	1.07	4,867,112	7,035,560	
2013/01		0.40	0.4901	0.4901		140	7.71	4,867,112	7,070,000	
2013/07		0.40	0.6196	0.6196		140	7.71	4,867,112	7,113,820	
2014/01		0.50	0.8564	0.8564		140	14.49	4,867,112	7,174,720	
2014/07		0.50	1.2383	1.2383		140	14.49	4,867,112	7,263,620	
2015/01		0.60	0.7571	0.7571		140	25.10	4,877,203	7,318,640	
2015/09		0.60	1.5736	1.5736		140	25.10	4,898,219	7,433,860	
2016/09		0.70	1.9890	1.9890		140	24.21	4,898,219	7,581,700	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0011997-00 - 2016/09

243.36

Heartland Health Care And Rehabilitation Center Of Boca Raton

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
7225 BOCA DEL MAR DRIVE	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
BOCA RATON, FL 33433	Days in CR 365	Maximum: 43,800	Standard: 366
County: Palm Beach [50]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 27,305	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 12,263	Inflation
Current Class South Large	Initial CR? False	Medicaid: 4,353	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	15.94214%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	62.34018%	Cost: 1.07573004
Open Date: 12/01/1994	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/01/1994	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 08/05/2009	Low Occupancy Adjustment Factor:	78.83977%	DC Sem Index: 1.30450000
Med # Active Date: 08/05/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	303,688	388,568	311,853	149,308		1,153,417	
1a	Audit Adjustments							
2	Cost Per Diem	69.7652	89.2644	71.6409	34.3000		264.9705	
3	Cost Per Diem Inflated	75.0485	94.7481	77.0663				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	75.0485	94.7481	77.0663	34.3000		281.1629	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	94.5415		95.1425				
7	Provider Target Rate	99.8007		100.4351				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	63.8040		71.2919				
10b	Base for line 10a	60.4417		67.5351				
11	Lesser of 5,7,8,10, 10a	58.7902	94.7481	70.3550	13.6500		237.5433	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	58.7902	94.7481	70.3550	13.6500		237.5433	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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243.36

Heartland Health Care And Rehabilitation Center Of Boca Raton

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/05/2009		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	12,580,755.00		Total Amount	Per Diem
RS to Start Calcs:	1994/07	Type:	Variable	80% Capital(1):	3,331,178	5.5029
Indexed Asset Value	4,163,972	<60% of Base:	False	20% ROE(2):	832,794	0.4798
FRVS Base Asset:	0	Interest Rate:	2.7600%	Insurance Cost(3):	33,464	1.2256
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	116,610	4.2706
ROE Factor	0.022710	Amortization Rate:	2.7600%	Home Office(3):	15,960	0.5845
		Interest Only:	False	Replacement(3&4):	138,848	0.0000
		Yearly Payment:	216,924	Total FRVS PD:		12.0634

(1) 80% Capital (\$3,331,178) amortized at 2.7600 % for 20 years Principal & Interest of \$216,924 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$5.5029

(2) 20% ROE (\$832,794) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4798

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1994	Current RS PBS:	33,820
Comparison Bed	120	Effective PBS Limitation	54,155
			4,058,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	94.7481	94.7481	4.2987	90.4494
Indirect Care	70.3550	70.3550	3.1920	67.1630
Property	13.6500	12.0634	0.5473	11.5161
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				9.9224
Supplemental Rate				8.1814
Totals	237.5433	235.9567	10.7053	243.3552

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 011997-00 - 2016/09

243.36

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07	10,051,235	0.00	0.6841	0.6841		120	2.65	4,058,400	4,058,400	1
2010/01	70,965	0.10	0.8643	0.8643		120	2.65	4,129,365	5,802,840	
2010/07	34,607	0.10	0.7107	0.7107		120	2.65	4,163,972	5,844,120	
2011/01		0.20	0.9198	0.9198		120	2.65	4,163,972	5,897,880	
2011/07		0.20	0.9028	0.9028		120	2.65	4,163,972	5,951,160	
2012/01		0.30	0.3865	0.3865		120	2.65	4,163,972	5,974,200	
2012/07		0.30	0.9417	0.9417		120	2.65	4,163,972	6,030,480	
2013/01		0.40	0.4901	0.4901		120	15.89	4,163,972	6,060,000	
2013/07		0.40	0.6196	0.6196		120	15.89	4,163,972	6,097,560	
2014/01		0.50	0.8564	0.8564		120	16.27	4,163,972	6,149,760	
2014/07		0.50	1.2383	1.2383		120	16.27	4,163,972	6,225,960	
2015/01		0.60	0.7571	0.7571		120	16.99	4,163,972	6,273,120	
2015/09		0.60	1.5736	1.5736		120	16.99	4,163,972	6,371,880	
2016/09		0.70	1.9890	1.9890		120	15.94	4,163,972	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0011998-00 - 2016/09

242.38

Grace Rehabilitation Center Of Vero Beach

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2180 10TH AVENUE	1/1/2015-12/31/2015	Number of Beds: 72	Superior: 0
VERO BEACH, FL 32960	Days in CR 365	Maximum: 26,280	Standard: 366
County: Indian River [31]	First Used : 2016/09	Max Annualized: 26,280	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 20,965	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 8,469	Inflation
Current Class South Small	Initial CR? False	Medicaid: 7,989	FY Index: 1.37939113
Class at 1/94: South Small	Medicaid Utilization	38.10637%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	79.77549%	Cost: 1.04651568
Open Date: 04/01/2004	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/01/2004	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 03/07/2009	Low Occupancy Adjustment Factor:	100.88968%	DC Sem Index: 1.30450000
Med # Active Date: 03/07/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	587,457	632,076	524,599	479,739		2,223,871	
1a	Audit Adjustments							
2	Cost Per Diem	73.5332	79.1183	65.6652	60.0499		278.3666	
3	Cost Per Diem Inflated	76.9536	82.3373	68.7197				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	76.9536	82.3373	68.7197	60.0499		288.0605	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.3845		92.5100				
7	Provider Target Rate	64.7992		97.6562				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	81.4098		90.3004				
10b	Base for line 10a	77.1198		85.5419				
11	Lesser of 5,7,8,10, 10a	64.7992	82.3373	68.7197	13.6500		229.5062	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	64.7992	82.3373	68.7197	13.6500		229.5062	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 011998-00 - 2016/09

242.38

Grace Rehabilitation Center Of Vero Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	03/07/2009	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,500,207.00		Total Amount	Per Diem
RS to Start Calcs:	2004/01	Type:	Variable	80% Capital(1):	2,895,730	9.8999
Indexed Asset Value	3,619,663	<60% of Base:	False	20% ROE(2):	723,933	0.6186
FRVS Base Asset:	0	Interest Rate:	8.0300%	Insurance Cost(3):	13,632	0.6502
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	37,075	1.7684
ROE Factor	0.020210	Amortization Rate:	5.2500%	Home Office(3):	14,212	0.6779
		Interest Only:	False	Replacement(3&4):	101,049	0.0000
		Yearly Payment:	234,153	Total FRVS PD:		13.6150

(1) 80% Capital (\$2,895,730) amortized at 5.2500 % for 20 years Principal & Interest of \$234,153 divided by annual available days (26280) divided by Occup. Adj. (0.90) = \$9.8999

(2) 20% ROE (\$723,933) times the ROE factor (0.020210) divided by annual available days (26280) divided by Occup. Adj. (0.90) = \$0.6186

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	43,031
Comparison Date: 07/01/2003	Current RS PBS:	54,155
Comparison Bed 72	Effective PBS Limitation	3,098,232

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	64.7992	64.7992	2.9399	61.8593
Direct Care	82.3373	82.3373	3.7356	78.6017
Indirect Care	68.7197	68.7197	3.1178	65.6019
Property	13.6500	13.6150	0.6177	12.9973
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.1415
Supplemental Rate				8.1814
Totals	229.5062	229.4712	10.4110	242.3831

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

0 011998-00 - 2016/09

242.38

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/01	3,503,044	0.00	1.3268	1.3268		72	5.85	3,098,232	3,098,232	1
2009/07	112,759	0.10	0.6841	0.6841		72	5.85	3,210,991	3,451,896	
2010/01	2,541	0.10	0.8643	0.8643		72	5.85	3,213,532	3,481,704	
2010/07		0.20	0.7107	0.7107		72	5.85	3,213,532	3,506,472	
2011/01		0.20	0.9198	0.9198		72	5.85	3,213,532	3,538,728	
2011/07		0.30	0.9028	0.9028		72	5.85	3,213,532	3,570,696	
2012/01	19,254	0.30	0.3865	0.3865		72	12.79	3,232,786	3,584,520	
2012/07		0.40	0.9417	0.9417		72	12.79	3,232,786	3,618,288	
2013/01		0.40	0.4901	0.4901		72	17.76	3,232,786	3,636,000	
2013/07		0.50	0.6196	0.6196		72	17.76	3,232,786	3,658,536	
2014/01		0.50	0.8564	0.8564		72	17.05	3,232,786	3,689,856	
2014/07		0.60	1.2383	1.2383		72	17.05	3,232,786	3,735,576	
2015/01	282,443	0.60	0.7571	0.7571		72	13.61	3,515,229	3,763,872	
2015/09		0.70	1.5736	1.5736		72	13.61	3,515,229	3,823,128	
2016/09	65,677	0.80	1.9890	1.9890		72	38.11	3,619,663	3,899,160	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 011998123120150101201504262016151432



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0014169-00 - 2016/09

250.34

Gulf Shore Rehab & Nursing

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6767 86TH AVE N	2/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
PINELLAS PARK, FL 33782	Days in CR 334	Maximum: 40,080	Standard: 366
County: Pinellas [52]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 36,775	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 14,845	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 19,945	FY Index: 1.34462269
Class at 1/94: North Large	Medicaid Utilization	54.23521%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.75399%	Cost: 1.07357585
Open Date: 02/06/1998	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/06/1998	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23099675
Entered Medicaid 02/06/1998	Low Occupancy Adjustment Factor:	116.03853%	DC Sem Index: 1.30450000
Med # Active Date: 07/31/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05971035
Previous Med # 264351			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	996,528	1,902,333	1,286,710	822,532		5,008,103
1a	Audit Adjustments						
2	Cost Per Diem	49.9638	95.3789	64.5129	41.2400		251.0956
3	Cost Per Diem Inflated	53.6399	101.0740	69.2595			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	53.6399	101.0740	69.2595	41.2400		265.2134
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	57.8948		80.6423			
7	Provider Target Rate	61.1154		85.1283			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	65.8303		76.6252			
10b	Base for line 10a	62.3613		72.5873			
11	Lesser of 5,7,8,10, 10a	53.6399	101.0740	68.1848	13.6500		236.5487
12/13	Medicaid Adjustment Rate		0.4816	0.3249			
14	Prospective Per Diem 11	53.6399	101.5556	68.5097	13.6500		237.3552
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Gulf Shore Rehab & Nursing

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/06/1998		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,900,000.00		Total Amount	Per Diem
RS to Start Calcs:	1998/01	Type:	Variable	80% Capital(1):	2,512,650	7.0252
Indexed Asset Value	3,140,812	<60% of Base:	False	20% ROE(2):	628,162	0.3585
FRVS Base Asset:	2,246,700	Interest Rate:	9.2900%	Insurance Cost(3):	131,143	3.5661
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	116,823	3.1767
ROE Factor	0.022500	Amortization Rate:	9.2900%	Home Office(3):	10,676	0.2903
		Interest Only:	False	Replacement(3&4):	48,654	0.0000
		Yearly Payment:	276,933	Total FRVS PD:		14.4168

(1) 80% Capital (\$2,512,650) amortized at 9.2900 % for 20 years Principal & Interest of \$276,933 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.0252

(2) 20% ROE (\$628,162) times the ROE factor (0.022500) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3585

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1997	Current RS PBS:	37,445
Comparison Bed	60	Effective PBS Limitation	54,155
			2,246,700

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.6399	53.6399	2.4336	51.2063
Direct Care	101.5556	101.5556	4.6075	96.9481
Indirect Care	68.5097	68.5097	3.1083	65.4014
Property	13.6500	14.4168	0.6541	13.7627
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				14.8409
Supplemental Rate				8.1814
Totals	237.3552	238.1220	10.8035	250.3408

Medicaid Trend Adjustment



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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
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250.34

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01	3,207,826	0.00	1.1663	1.1663		60	58.87	2,246,700	2,246,700	1
1998/07	8,147	0.10	1.0794	1.0794		60	58.87	2,257,271	2,297,460	
1999/01		0.10	1.4499	1.4499		60	58.87	2,260,544	2,330,760	
1999/07		0.20	1.2299	1.2299		60	58.87	2,266,105	2,359,440	
2000/01		0.20	1.3356	1.3356		60	58.87	2,272,158	2,390,940	
2000/07		0.30	1.1129	1.1129		60	58.87	2,279,745	2,417,520	
2001/01		0.30	1.2976	1.2976		60	58.87	2,288,620	2,448,900	
2001/07		0.40	0.9615	0.9615		60	67.14	2,297,422	2,472,420	
2002/01		0.40	1.0301	1.0301		60	61.51	2,306,887	2,497,860	
2002/07		0.50	0.8337	0.8337		60	61.51	2,316,504	2,518,680	
2003/01	78,673	0.50	1.3271	1.3271		60	66.74	2,410,549	2,552,100	
2003/07		0.60	1.1664	1.1664		60	66.74	2,427,418	2,581,860	
2004/01		0.60	1.1103	1.1103		60	66.74	2,443,589	2,610,540	
2004/07		0.70	0.8378	0.8378		60	66.74	2,457,921	2,632,440	
2005/01		0.70	0.8595	0.8595		60	66.74	2,472,710	2,655,060	
2005/07		0.80	0.7364	0.7364		60	66.74	2,487,277	2,674,620	
2006/01		0.80	0.9068	0.9068		60	66.74	2,505,320	2,698,860	
2006/07		0.90	0.8133	0.8133		60	74.87	2,523,659	2,720,820	
2007/01		0.90	1.0133	1.0133		60	74.87	2,546,675	2,748,360	
2007/07		1.00	1.1050	1.1050		60	77.04	2,574,816	2,778,720	
2008/01		1.00	0.8556	0.8556		60	77.04	2,596,846	2,802,480	
2008/07		1.00	0.6104	0.6104		60	68.73	2,612,697	2,819,580	
2009/01		1.00	1.3268	1.3268		60	68.73	2,647,362	2,857,020	
2009/07	88,688	1.00	0.6841	0.6841		120	65.06	2,754,161	5,753,160	
2010/01		1.00	0.8643	0.8643		120	65.06	2,777,965	5,802,840	
2010/07		1.00	0.7107	0.7107		120	65.06	2,797,708	5,844,120	
2011/01		1.00	0.9198	0.9198		120	65.06	2,823,441	5,897,880	
2011/07		1.00	0.9028	0.9028		120	65.06	2,848,931	5,951,160	
2012/01		1.00	0.3865	0.3865		120	61.90	2,859,942	5,974,200	
2012/07		1.00	0.9417	0.9417		120	61.90	2,886,874	6,030,480	



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250.34

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		1.00	0.4901	0.4901		120	62.21	2,901,023	6,060,000	
2013/07		1.00	0.6196	0.6196		120	62.21	2,918,998	6,097,560	
2014/01	33,242	1.00	0.8564	0.8564		120	53.32	2,976,475	6,149,760	
2014/07		1.00	1.2383	1.2383		120	53.32	3,012,207	6,225,960	
2015/01		1.00	0.7571	0.7571		120	50.91	3,033,317	6,273,120	
2015/09		1.00	1.5736	1.5736		120	54.24	3,080,390	6,371,880	
2016/09		1.00	1.9890	1.9890		120	54.24	3,140,812	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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0015613-00 - 2016/09

207.21

St. James Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
239 CROOKED RIVER ROAD	1/1/2014-12/31/2014	Number of Beds: 90	Superior: 0
CARRABELLE, FL 32322	Days in CR 365	Maximum: 32,850	Standard: 366
County: Franklin [19]	First Used : 2015/09	Max Annualized: 32,850	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 25,938	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,655	Inflation
Current Class North Small	Initial CR? False	Medicaid: 22,212	FY Index: 1.34193004
Class at 1/94: North Small	Medicaid Utilization	85.63498%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	78.95890%	Cost: 1.07573004
Open Date: 05/26/2009	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/26/2009	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 05/26/2009	Low Occupancy Adjustment Factor:	99.85697%	DC Sem Index: 1.30450000
Med # Active Date: 05/26/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	874,342	1,578,233	966,492	1,194,561		4,613,628
1a	Audit Adjustments						
2	Cost Per Diem	39.3635	71.0532	43.5122	53.7800		207.7089
3	Cost Per Diem Inflated	42.3445	75.4181	46.8074			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	42.3445	75.4181	46.8074	53.7800		218.3500
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	117.5676		122.3884			
7	Provider Target Rate	124.1077		129.1966			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500		
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507			
10	Target Rate Class Ceiling	59.8766		72.7784			
10a	New Provider Target Limitation	60.6611		71.1624			
10b	Base for line 10a	57.4645		67.4124			
11	Lesser of 5,7,8,10, 10a	42.3445	75.4181	46.8074	13.6500		178.2200
12/13	Medicaid Adjustment Rate		3.0235	1.8765			
14	Prospective Per Diem 11	42.3445	78.4416	48.6839	13.6500		183.1200
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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207.21

St. James Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/26/2009		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	7,799,191.00		Total Amount	Per Diem
RS to Start Calcs:	2009/01	Type:	Variable	80% Capital(1):	3,617,086	7.9481
Indexed Asset Value	4,521,357	<60% of Base:	False	20% ROE(2):	904,271	0.6946
FRVS Base Asset:	4,229,370	Interest Rate:	2.7341%	Insurance Cost(3):	99,519	3.8368
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	72,023	2.7767
ROE Factor	0.022710	Amortization Rate:	2.7341%	Home Office(3):	14,174	0.5465
		Interest Only:	False	Replacement(3&4):	19,237	0.0000
		Yearly Payment:	234,987	Total FRVS PD:		15.8027

(1) 80% Capital (\$3,617,086) amortized at 2.7341 % for 20 years Principal & Interest of \$234,987 divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$7.9481

(2) 20% ROE (\$904,271) times the ROE factor (0.022710) divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$0.6946

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/2008	Current RS PBS:	46,993
Comparison Bed	90	Effective PBS Limitation	54,155
			4,229,370

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.3445	42.3445	1.9211	40.4234
Direct Care	78.4416	78.4416	3.5589	74.8827
Indirect Care	48.6839	48.6839	2.2088	46.4751
Property	13.6500	15.8027	0.7170	15.0857
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.1580
Supplemental Rate				8.1814
Totals	183.1200	185.2727	8.4058	207.2063

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 015613-00 - 2016/09

207.21

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/01	6,152,351	0.00	1.3268	1.3268		90	64.77	4,229,370	4,229,370	1
2009/07	6,504	0.10	0.6841	0.6841		90	64.77	4,238,767	4,314,870	
2010/01		0.10	0.8643	0.8643		90	64.77	4,242,429	4,352,130	
2010/07		0.20	0.7107	0.7107		90	64.77	4,248,457	4,383,090	
2011/01		0.20	0.9198	0.9198		90	64.77	4,256,274	4,423,410	
2011/07		0.30	0.9028	0.9028		90	64.77	4,267,800	4,463,370	
2012/01	20,529	0.30	0.3865	0.3865		90	66.29	4,293,280	4,480,650	
2012/07		0.40	0.9417	0.9417		90	66.29	4,309,453	4,522,860	
2013/01		0.40	0.4901	0.4901		90	76.83	4,317,900	4,545,000	
2013/07		0.50	0.6196	0.6196		90	76.83	4,331,277	4,573,170	
2014/01		0.50	0.8564	0.8564		90	84.38	4,349,824	4,612,320	
2014/07		0.60	1.2383	1.2383		90	84.38	4,382,143	4,669,470	
2015/01		0.60	0.7571	0.7571		90	81.76	4,402,051	4,704,840	
2015/09		0.70	1.5736	1.5736		90	85.63	4,450,540	4,778,910	
2016/09		0.80	1.9890	1.9890		90	85.63	4,521,357	4,873,950	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 015613123120140101201405142015092143



Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

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Bayside Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4343 LANGLEY AVENUE	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
PENSACOLA, FL 32504	Days in CR 181	Maximum: 21,720	Standard: 366
County: Escambia [17]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 20,959	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,874	Inflation
Current Class North Large	Initial CR? False	Medicaid: 14,777	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	70.50432%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.49632%	Cost: 1.08180716
Open Date: 10/01/1979	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1979	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 10/01/1979	Low Occupancy Adjustment Factor:	122.03602%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213853			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	710,733	1,180,983	854,527	407,845		3,154,088	
1a	Audit Adjustments							
2	Cost Per Diem	48.0972	79.9203	57.8282	27.6000		213.4457	
3	Cost Per Diem Inflated	52.0319	85.0722	62.5590				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.0319	85.0722	62.5590	27.6000		227.2631	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.4584		69.3853				
7	Provider Target Rate	54.3209		73.2451				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.5572		66.3913				
10b	Base for line 10a	51.6822		62.8927				
11	Lesser of 5,7,8,10, 10a	52.0319	85.0722	62.5590	13.6500		213.3131	
12/13	Medicaid Adjustment Rate		1.9624	1.4431				
14	Prospective Per Diem 11	52.0319	87.0346	64.0021	13.6500		216.7186	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Bayside Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/01/1992		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,652,500.00		Total Amount	Per Diem
RS to Start Calcs:	1979/07	Type:	Fixed	80% Capital(1):	2,397,374	7.7827
Indexed Asset Value	2,996,718	<60% of Base:	False	20% ROE(2):	599,344	0.3547
FRVS Base Asset:	1,740,980	Interest Rate:	11.5000%	Insurance Cost(3):	13,541	0.6461
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	25,267	1.2055
ROE Factor	0.023330	Amortization Rate:	11.5000%	Home Office(3):	19,382	0.9248
		Interest Only:	False	Replacement(3&4):	85,901	0.0000
		Yearly Payment:	306,796	Total FRVS PD:		10.9138

(1) 80% Capital (\$2,397,374) amortized at 11.5000 % for 20 years Principal & Interest of \$306,796 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.7827

(2) 20% ROE (\$599,344) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3547

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.0319	52.0319	2.3607	49.6712
Direct Care	87.0346	87.0346	3.9487	83.0859
Indirect Care	64.0021	64.0021	2.9037	61.0984
Property	13.6500	10.9138	0.4952	10.4186
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.8578
Supplemental Rate				8.1814
Totals	216.7186	213.9824	9.7083	232.3133

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1979/07	1,581,767	0.00	4.1982	3.0000	1.1982	120	100.00	1,581,767	2,468,640	
1980/01		0.10	7.3640	3.0000	4.3640	120	47.83	1,585,894	2,620,920	
1980/07		0.10	8.1746	3.0000	5.1746	120	47.83	1,590,031	2,720,760	
1981/01	20,630	0.20	8.9986	3.0000	5.9986	120	43.90	1,618,276	2,824,800	
1981/07		0.20	8.5874	3.0000	5.5874	120	43.90	1,626,026	2,897,880	
1982/01		0.30	8.2634	3.0000	5.2634	120	42.45	1,637,321	2,975,520	
1982/07		0.30	7.5611	3.0000	4.5611	120	42.45	1,648,694	3,043,800	
1983/04		0.40	7.1899	3.0000	4.1899	120	42.45	1,663,964	3,123,840	
1983/07		0.40	8.1477	3.0000	5.1477	120	42.45	1,679,375	3,247,440	
1984/01		0.50	6.4429	3.0000	3.4429	120	37.73	1,696,656	3,289,560	
1984/07		0.50	5.3608	3.0000	2.3608	120	37.73	1,714,115	3,352,680	
1985/01		0.60	3.5079	3.0000	0.5079	120	32.84	1,732,538	3,391,080	
1985/10		0.60	1.3601	1.3601		120	32.84	1,740,980	3,420,000	
1986/01		0.70	0.8299	0.8299		120	35.56	1,747,519	3,448,440	
1986/07		0.70	0.2974	0.2974		120	35.56	1,749,871	3,441,840	
1987/01		0.80	1.0091	1.0091		120	35.56	1,759,005	3,503,400	
1987/07		0.80	0.9007	0.9007		120	39.12	1,768,021	3,530,760	
1988/01		0.90	0.9007	0.9007		120	42.69	1,779,145	3,559,440	
1988/07		0.90	0.5899	0.5899		120	42.69	1,786,476	3,557,520	
1989/01		1.00	0.5899	0.5899		120	42.69	1,794,656	3,578,520	
1989/07	27,649	1.00	0.5899	0.5899		120	48.85	1,831,708	3,602,760	
1990/01		1.00	0.5899	0.5899		120	58.75	1,842,513	3,620,880	
1990/07		1.00	0.5899	0.5899		120	58.75	1,853,382	3,642,240	
1991/01		1.00	0.5899	0.5899		120	58.75	1,864,315	3,663,600	
1991/07		1.00	1.4932	1.4932		120	53.83	1,864,315	3,718,320	5
1992/01		1.00	2.0117	2.0117		120	55.97	1,929,614	3,793,080	
1992/07		1.00	1.8152	1.8152		120	55.97	1,964,640	3,861,960	
1993/01		1.00	1.7710	1.7710		120	60.78	1,999,434	3,930,360	
1993/07		1.00	1.5329	1.5329		120	60.78	2,030,083	3,990,600	
1994/01		1.00	1.6983	1.6983		120	65.66	2,064,560	4,058,400	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/07		1.00	1.5991	1.5991		120	65.66	2,097,574	4,123,320	
1995/01		1.00	1.5812	1.5812		120	65.66	2,130,741	4,188,480	
1995/07		1.00	1.5250	1.5250		120	65.66	2,163,235	4,252,320	
1996/01		1.00	1.7228	1.7228		120	65.66	2,200,503	4,325,640	
1996/07		1.00	1.3294	1.3294		120	65.66	2,229,756	4,383,120	
1997/01	23,029	1.00	1.4109	1.4109		120	66.54	2,284,245	4,444,920	
1997/07		1.00	1.0917	1.0917		120	66.54	2,309,182	4,493,400	
1998/01		1.00	1.1663	1.1663		120	66.54	2,336,114	4,545,840	
1998/07	24,761	1.00	1.0794	1.0794		120	73.31	2,386,091	4,594,920	
1999/01	16,319	1.00	1.4499	1.4499		120	73.31	2,437,006	4,661,520	
1999/07	1,657	1.00	1.2299	1.2299		120	73.31	2,438,663	4,718,880	5
2000/01		0.95	1.3356	1.3356		120	73.31	2,499,958	4,781,880	
2000/07		0.95	1.1129	1.1129		120	73.31	2,526,390	4,835,040	
2001/01		0.90	1.2976	1.2976		120	71.46	2,555,893	4,897,800	
2001/07		0.90	0.9615	0.9615		120	71.46	2,578,012	4,944,840	
2002/01		0.85	1.0301	1.0301		120	69.16	2,600,585	4,995,720	
2002/07		0.85	0.8337	0.8337		120	69.16	2,619,013	5,037,360	
2003/01		0.80	1.3271	1.3271		120	70.06	2,646,819	5,104,200	
2003/07		0.80	1.1664	1.1664		120	70.06	2,671,516	5,163,720	
2004/01		0.75	1.1103	1.1103		120	66.86	2,693,762	5,221,080	
2004/07		0.75	0.8378	0.8378		120	66.86	2,710,690	5,264,880	
2005/01		0.70	0.8595	0.8595		120	69.29	2,727,000	5,310,120	
2005/07		0.70	0.7364	0.7364		120	69.29	2,741,058	5,349,240	
2006/01		0.65	0.9068	0.9068		120	63.54	2,757,214	5,397,720	
2006/07		0.65	0.8133	0.8133		120	63.54	2,771,789	5,441,640	
2007/01		0.60	1.0133	1.0133		120	66.55	2,788,641	5,496,720	
2007/07		0.60	1.1050	1.1050		120	66.55	2,807,130	5,557,440	
2008/01		0.55	0.8556	0.8556		120	66.55	2,820,340	5,604,960	
2008/07		0.55	0.6104	0.6104		120	63.43	2,829,808	5,639,160	
2009/01	34,669	0.50	1.3268	1.3268		120	60.66	2,883,250	5,714,040	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07		0.50	0.6841	0.6841		120	60.66	2,893,114	5,753,160	
2010/01		0.45	0.8643	0.8643		120	60.79	2,904,365	5,802,840	
2010/07		0.45	0.7107	0.7107		120	60.79	2,913,653	5,844,120	
2011/01		0.40	0.9198	0.9198		120	60.79	2,924,372	5,897,880	
2011/07		0.40	0.9028	0.9028		120	60.79	2,934,932	5,951,160	
2012/01		0.35	0.3865	0.3865		120	60.79	2,938,903	5,974,200	
2012/07		0.35	0.9417	0.9417		120	60.79	2,948,590	6,030,480	
2013/01		0.30	0.4901	0.4901		120	61.06	2,952,924	6,060,000	
2013/07		0.30	0.6196	0.6196		120	61.06	2,958,413	6,097,560	
2014/01		0.25	0.8564	0.8564		120	65.74	2,964,747	6,149,760	
2014/07		0.25	1.2383	1.2383		120	65.74	2,973,926	6,225,960	
2015/01		0.20	0.7571	0.7571		120	70.50	2,978,429	6,273,120	
2015/09		0.20	1.5736	1.5736		120	70.50	2,987,802	6,371,880	
2016/09		0.15	1.9890	1.9890		120	70.50	2,996,718	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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Margate Health And Rehabilitation Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5951 COLONIAL DRIVE	1/1/2014-6/30/2014	Number of Beds: 170	Superior: 0
MARGATE, FL 33063	Days in CR 181	Maximum: 30,770	Standard: 366
County: Broward [6]	First Used : 2015/01	Max Annualized: 62,050	Conditional: 0
Region: South Area: 10	Last Used: 2016/09	Total Patient: 28,871	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,950	Inflation
Current Class South Large	Initial CR? False	Medicaid: 17,010	FY Index: 1.33439166
Class at 1/94: South Large	Medicaid Utilization	58.91725%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.82840%	Cost: 1.08180716
Open Date: 06/10/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/10/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 06/10/1985	Low Occupancy Adjustment Factor:	118.66198%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 214931	Interim Component Effective Date:	11/01/2015	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	734,099	1,488,408	1,051,512	717,822		3,991,841
1a	Audit Adjustments						
2	Cost Per Diem	43.1569	87.5019	61.8173	42.2000		234.6761
3	Cost Per Diem Inflated	46.6874	93.1426	66.8744			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.6874	93.1426	66.8744	42.2000		248.9044
5a	Interim Adjustment	2.7427					
5b	Interim Adjusted Per Diem	49.4301					
6	Prior Semester: Provider Target Base	53.4896		68.0290			
7	Provider Target Rate	56.4651		71.8133			
7a	Interim Adjustment	2.7427					
7b	Interim Adjusted Target Rate	59.2078					
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	60.6534		69.3794			
10b	Base for line 10a	54.8590		65.7233			
11	Lesser of 5,7,8,10, 10a	49.4301	93.1426	66.8744	13.6500		223.0971
12/13	Medicaid Adjustment Rate		0.9344	0.6709			
14	Prospective Per Diem 11	49.4301	94.0770	67.5453	13.6500		224.7024
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Margate Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	02/01/2005	Amount:	13,125,000.00		Total Amount	Per Diem
RS to Start Calcs:	1985/01	Type:	Fixed	80% Capital(1):	6,633,517	14.4712
Indexed Asset Value	8,291,896	<60% of Base:	False	20% ROE(2):	1,658,379	0.6928
FRVS Base Asset:	3,420,000	Interest Rate:	10.7500%	Insurance Cost(3):	25,579	0.8860
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	132,812	4.6002
ROE Factor	0.023330	Amortization Rate:	10.7500%	Home Office(3):	22,303	0.7725
		Interest Only:	False	Replacement(3&4):	8,821	0.0000
		Yearly Payment:	808,145	Total FRVS PD:		21.4227

(1) 80% Capital (\$6,633,517) amortized at 10.7500 % for 20 years Principal & Interest of \$808,145 divided by annual available days (62050) divided by Occup. Adj. (0.90) = \$14.4712

(2) 20% ROE (\$1,658,379) times the ROE factor (0.023330) divided by annual available days (62050) divided by Occup. Adj. (0.90) = \$0.6928

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.4301	49.4301	2.2426	47.1875
Direct Care	94.0770	94.0770	4.2682	89.8088
Indirect Care	67.5453	67.5453	3.0645	64.4808
Property	13.6500	21.4227	0.9719	20.4508
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.2896
Supplemental Rate				8.1814
Totals	224.7024	232.4751	10.5472	247.3989

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/01	4,397,762	0.00	1.1471	1.1471		120	14.20	4,397,762	3,391,080	
1985/10		0.10	0.8522	0.8522		120	14.20	3,420,000	3,420,000	1
1986/01		0.10	0.8299	0.8299		120	14.20	3,420,000	3,448,440	
1986/07		0.20	0.2974	0.2974		120	14.20	3,420,000	3,441,840	
1987/01		0.20	1.0091	1.0091		120	14.20	3,420,000	3,503,400	
1987/07		0.30	0.9007	0.9007		120	14.20	3,420,000	3,530,760	
1988/01		0.30	0.9007	0.9007		120	16.09	3,420,000	3,559,440	
1988/07		0.40	0.5899	0.5899		120	16.09	3,420,000	3,557,520	
1989/01		0.40	0.5899	0.5899		120	30.24	3,424,438	3,578,520	
1989/07		0.50	0.5899	0.5899		120	30.24	3,429,992	3,602,760	
1990/01		0.50	0.5899	0.5899		120	39.54	3,437,266	3,620,880	
1990/07		0.60	0.5899	0.5899		120	39.54	3,446,011	3,642,240	
1991/01		0.60	0.5899	0.5899		120	52.28	3,446,011	3,663,600	5
1991/07		0.70	1.4932	1.4932		120	52.28	3,457,603	3,718,320	5
1992/01		0.70	2.0117	2.0117		120	59.88	3,541,129	3,793,080	
1992/07		0.80	1.8152	1.8152		120	59.88	3,592,553	3,861,960	
1993/01		0.80	1.7710	1.7710		120	60.35	3,643,452	3,930,360	
1993/07		0.90	1.5329	1.5329		120	60.35	3,693,717	3,990,600	
1994/01		0.90	1.6983	1.6983		120	50.74	3,745,802	4,058,400	
1994/07		1.00	1.5991	1.5991		120	50.74	3,801,062	4,123,320	
1995/01		1.00	1.5812	1.5812		120	47.65	3,801,062	4,188,480	5
1995/07		1.00	1.5250	1.5250		120	47.65	3,904,041	4,252,320	
1996/01		1.00	1.7228	1.7228		120	46.24	3,960,587	4,325,640	
1996/07		1.00	1.3294	1.3294		120	46.24	4,004,853	4,383,120	
1997/01	57,133	1.00	1.4109	1.4109		120	49.17	4,061,986	4,444,920	5
1997/07		1.00	1.0917	1.0917		120	49.17	4,152,638	4,493,400	
1998/01	1,838,707	1.00	1.1663	1.1663		170	45.79	6,031,667	6,439,940	
1998/07		1.00	1.0794	1.0794		170	45.79	6,085,871	6,509,470	
1999/01	32,360	1.00	1.4499	1.4499		170	61.89	6,206,470	6,603,820	
1999/07	613	1.00	1.2299	1.2299		170	61.89	6,283,416	6,685,080	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/01		1.00	1.3356	1.3356		170	61.89	6,367,337	6,774,330	
2000/07		1.00	1.1129	1.1129		170	61.89	6,438,199	6,849,640	
2001/01		1.00	1.2976	1.2976		170	61.89	6,521,741	6,938,550	
2001/07		1.00	0.9615	0.9615		170	62.46	6,584,448	7,005,190	
2002/01		1.00	1.0301	1.0301		170	62.46	6,652,274	7,077,270	
2002/07	152,107	1.00	0.8337	0.8337		170	60.74	6,859,841	7,136,260	
2003/01		1.00	1.3271	1.3271		170	60.74	6,950,878	7,230,950	
2003/07		1.00	1.1664	1.1664		170	59.02	7,031,953	7,315,270	
2004/01		1.00	1.1103	1.1103		170	59.02	7,110,029	7,396,530	
2004/07		1.00	0.8378	0.8378		170	60.39	7,169,597	7,458,580	
2005/01		1.00	0.8595	0.8595		170	60.39	7,231,220	7,522,670	
2005/07		0.95	0.7364	0.7364		170	65.54	7,281,810	7,578,090	
2006/01		0.95	0.9068	0.9068		170	65.54	7,344,543	7,646,770	
2006/07		0.90	0.8133	0.8133		170	64.52	7,398,305	7,708,990	
2007/01		0.90	1.0133	1.0133		170	64.52	7,465,778	7,787,020	
2007/07		0.85	1.1050	1.1050		170	59.22	7,535,904	7,873,040	
2008/01		0.85	0.8556	0.8556		170	59.22	7,590,713	7,940,360	
2008/07		0.80	0.6104	0.6104		170	56.16	7,627,778	7,988,810	
2009/01		0.80	1.3268	1.3268		170	56.16	7,708,739	8,094,890	
2009/07		0.75	0.6841	0.6841		170	56.16	7,748,293	8,150,310	
2010/01		0.75	0.8643	0.8643		170	58.43	7,798,517	8,220,690	
2010/07		0.70	0.7107	0.7107		170	58.43	7,837,315	8,279,170	
2011/01		0.70	0.9198	0.9198		170	58.43	7,887,779	8,355,330	
2011/07		0.65	0.9028	0.9028		170	58.43	7,934,064	8,430,810	
2012/01		0.65	0.3865	0.3865		170	58.43	7,953,994	8,463,450	
2012/07		0.60	0.9417	0.9417		170	58.43	7,998,934	8,543,180	
2013/01		0.60	0.4901	0.4901		170	57.43	8,022,459	8,585,000	
2013/07		0.55	0.6196	0.6196		170	57.43	8,049,800	8,638,210	
2014/01		0.55	0.8564	0.8564		170	61.98	8,087,715	8,712,160	
2014/07		0.50	1.2383	1.2383		170	61.98	8,137,794	8,820,110	



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2015/01		0.50	0.7571	0.7571		170	58.92	8,168,604	8,886,920	
2015/09		0.45	1.5736	1.5736		170	58.92	8,226,446	9,026,830	
2016/09		0.40	1.9890	1.9890		170	58.92	8,291,896	9,206,350	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 017222063020140101201410132014134039



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Rosewood Healthcare And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3107 NORTH H STREET	1/1/2014-6/30/2014	Number of Beds: 155	Superior: 0
PENSACOLA, FL 32501-1043	Days in CR 181	Maximum: 28,055	Standard: 366
County: Escambia [17]	First Used : 2015/01	Max Annualized: 56,575	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 26,337	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,444	Inflation
Current Class North Large	Initial CR? False	Medicaid: 20,884	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	79.29529%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.87631%	Cost: 1.08180716
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	118.72257%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 211842			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	980,986	1,860,709	1,190,185	456,733		4,488,613
1a	Audit Adjustments						
2	Cost Per Diem	46.9731	89.0973	56.9903	21.8700		214.9307
3	Cost Per Diem Inflated	50.8158	94.8408	61.6525			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.8158	94.8408	61.6525	21.8700		229.1791
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	50.4200		61.4269			
7	Provider Target Rate	53.2248		64.8440			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	53.5756		66.0584			
10b	Base for line 10a	50.7523		62.5773			
11	Lesser of 5,7,8,10, 10a	50.8158	94.8408	61.6525	13.6500		220.9591
12/13	Medicaid Adjustment Rate		3.1257	2.0319			
14	Prospective Per Diem 11	50.8158	97.9665	63.6844	13.6500		226.1167
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.				0.00



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Rosewood Healthcare And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,487,500.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Fixed	80% Capital(1):	2,581,945	5.4748
Indexed Asset Value	3,227,431	<60% of Base:	False	20% ROE(2):	645,486	0.2958
FRVS Base Asset:	1,485,746	Interest Rate:	9.0000%	Insurance Cost(3):	17,070	0.6481
Occup Adj Factor	0.9000	Chase Rate:	6.0000%	Taxes Cost(3):	13,377	0.5079
ROE Factor	0.023330	Amortization Rate:	9.0000%	Home Office(3):	20,728	0.7870
		Interest Only:	False	Replacement(3&4):	38,991	0.0000
		Yearly Payment:	278,765	Total FRVS PD:		7.7136

(1) 80% Capital (\$2,581,945) amortized at 9.0000 % for 20 years Principal & Interest of \$278,765 divided by annual available days (56575) divided by Occup. Adj. (0.90) = \$5.4748

(2) 20% ROE (\$645,486) times the ROE factor (0.023330) divided by annual available days (56575) divided by Occup. Adj. (0.90) = \$0.2958

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 155	Effective PBS Limitation	4,417,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.8158	50.8158	2.3055	48.5103
Direct Care	97.9665	97.9665	4.4447	93.5218
Indirect Care	63.6844	63.6844	2.8893	60.7951
Property	13.6500	7.7136	0.3500	7.3636
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9706
Supplemental Rate				8.1814
Totals	226.1167	220.1803	9.9895	239.3428

Medicaid Trend Adjustment



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1971/07	846,080	0.00				155	100.00	846,080	1,590,455	
1972/01		0.10	3.9787	3.0000	0.9787	155	100.00	848,618	1,653,695	
1972/07		0.10	5.9113	3.0000	2.9113	155	100.00	851,164	1,735,225	
1973/01		0.20	8.0622	3.0000	5.0622	155	100.00	856,271	1,824,660	
1973/07		0.20	10.7186	3.0000	7.7186	155	100.00	861,409	1,927,890	
1974/01		0.30	12.9457	3.0000	9.9457	155	100.00	869,162	2,028,640	
1974/07		0.30	13.0494	3.0000	10.0494	155	100.00	876,984	2,091,570	
1975/01		0.40	13.1399	3.0000	10.1399	155	100.00	887,508	2,156,205	
1975/07		0.40	14.2033	3.0000	11.2033	155	100.00	898,158	2,243,935	
1976/01		0.50	15.2478	3.0000	12.2478	155	100.00	911,630	2,334,610	
1976/07		0.50	15.7330	3.0000	12.7330	155	100.00	925,304	2,415,985	
1977/01		0.60	16.4836	3.0000	13.4836	155	100.00	941,959	2,506,660	
1977/07		0.60	18.5412	3.0000	15.5412	155	100.00	958,914	2,633,295	
1978/01		0.70	20.2809	3.0000	17.2809	155	100.00	979,051	2,758,225	
1978/07		0.70	22.8203	3.0000	19.8203	155	100.00	999,611	2,910,900	
1979/01		0.80	24.9476	3.0000	21.9476	155	100.00	1,023,602	3,060,165	
1979/07		0.80	26.1458	3.0000	23.1458	155	100.00	1,048,168	3,188,660	
1980/01		0.90	29.3115	3.0000	26.3115	155	62.50	1,076,469	3,385,355	
1980/07		0.90	30.1222	3.0000	27.1222	155	62.50	1,105,534	3,514,315	
1981/01		1.00	30.9462	3.0000	27.9462	155	100.00	1,138,700	3,648,700	
1981/07		1.00	30.5350	3.0000	27.5350	155	100.00	1,172,861	3,743,095	
1982/01		1.00	30.2110	3.0000	27.2110	155	100.00	1,208,047	3,843,380	
1982/07		1.00	29.5087	3.0000	26.5087	155	100.00	1,244,288	3,931,575	
1983/04		1.00	29.1375	3.0000	26.1375	155	98.56	1,281,617	4,034,960	
1983/07		1.00	30.0953	3.0000	27.0953	155	98.56	1,320,066	4,194,610	
1984/01		1.00	28.3905	3.0000	25.3905	155	100.00	1,359,668	4,249,015	
1984/07		1.00	27.3084	3.0000	24.3084	155	100.00	1,400,458	4,330,545	
1985/01		1.00	25.4555	3.0000	22.4555	155	98.56	1,442,472	4,380,145	
1985/10		1.00	23.3077	3.0000	20.3077	155	100.00	1,485,746	4,417,500	
1986/01		1.00	21.1376	3.0000	18.1376	155	100.00	1,530,318	4,454,235	



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1986/07		1.00	18.4350	3.0000	15.4350	155	99.03	1,576,228	4,445,710	
1987/01		1.00	16.4441	3.0000	13.4441	155	99.03	1,623,515	4,525,225	
1987/07		1.00	14.3448	3.0000	11.3448	155	95.33	1,672,220	4,560,565	
1988/01		1.00	12.2455	3.0000	9.2455	155	95.33	1,722,387	4,597,610	
1988/07	44,742	1.00	9.8354	3.0000	6.8354	155	90.64	1,818,801	4,595,130	
1989/01		1.00	7.4253	3.0000	4.4253	155	90.64	1,873,365	4,622,255	
1989/07	19,162	1.00	5.0152	3.0000	2.0152	155	92.03	1,948,728	4,653,565	
1990/01		1.00	2.6051	2.6051		155	92.03	1,999,494	4,676,970	
1990/07		1.00	0.5899	0.5899		155	94.52	2,011,289	4,704,560	
1991/01		1.00	0.5899	0.5899		155	94.52	2,023,154	4,732,150	
1991/07		1.00	1.4932	1.4932		155	95.83	2,053,364	4,802,830	
1992/01		0.95	2.0117	2.0117		155	95.83	2,092,606	4,899,395	
1992/07		0.95	1.8152	1.8152		155	96.19	2,128,691	4,988,365	
1993/01	76,072	0.90	1.7710	1.7710		155	96.19	2,238,692	5,076,715	
1993/07		0.90	1.5329	1.5329		155	97.60	2,269,577	5,154,525	
1994/01		0.85	1.6983	1.6983		155	97.60	2,302,341	5,242,100	
1994/07		0.85	1.5991	1.5991		155	97.60	2,333,634	5,325,955	
1995/01		0.80	1.5812	1.5812		155	87.15	2,363,154	5,410,120	
1995/07		0.80	1.5250	1.5250		155	87.15	2,391,984	5,492,580	
1996/01		0.75	1.7228	1.7228		155	87.15	2,422,891	5,587,285	
1996/07		0.75	1.3294	1.3294		155	79.05	2,447,050	5,661,530	
1997/01		0.70	1.4109	1.4109		155	79.05	2,471,217	5,741,355	
1997/07	28,063	0.70	1.0917	1.0917		155	79.30	2,518,165	5,803,975	
1998/01		0.65	1.1663	1.1663		155	79.30	2,537,255	5,871,710	
1998/07	28,788	0.65	1.0794	1.0794		155	81.48	2,583,844	5,935,105	
1999/01		0.60	1.4499	1.4499		155	81.48	2,606,321	6,021,130	
1999/07		0.60	1.2299	1.2299		155	82.16	2,625,553	6,095,220	
2000/01	48,933	0.55	1.3356	1.3356		155	82.34	2,674,486	6,176,595	5
2000/07		0.55	1.1129	1.1129		155	82.34	2,710,262	6,245,260	
2001/01		0.50	1.2976	1.2976		155	79.91	2,727,846	6,326,325	



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2001/07		0.50	0.9615	0.9615		155	79.91	2,740,961	6,387,085	
2002/01	292,371	0.45	1.0301	1.0301		155	78.45	3,046,036	6,452,805	
2002/07		0.45	0.8337	0.8337		155	78.45	3,057,465	6,506,590	
2003/01		0.40	1.3271	1.3271		155	76.23	3,073,694	6,592,925	
2003/07		0.40	1.1664	1.1664		155	76.23	3,088,036	6,669,805	
2004/01		0.35	1.1103	1.1103		155	76.92	3,100,036	6,743,895	
2004/07		0.35	0.8378	0.8378		155	76.92	3,109,125	6,800,470	
2005/01		0.30	0.8595	0.8595		155	76.93	3,117,143	6,858,905	
2005/07		0.30	0.7364	0.7364		155	76.93	3,124,029	6,909,435	
2006/01		0.25	0.9068	0.9068		155	79.76	3,131,111	6,972,055	
2006/07		0.25	0.8133	0.8133		155	79.76	3,137,477	7,028,785	
2007/01		0.20	1.0133	1.0133		155	78.37	3,143,837	7,099,930	
2007/07		0.20	1.1050	1.1050		155	78.37	3,150,785	7,178,360	
2008/01		0.15	0.8556	0.8556		155	78.37	3,154,827	7,239,740	
2008/07		0.15	0.6104	0.6104		155	76.69	3,157,717	7,283,915	
2009/01	35,036	0.10	1.3268	1.3268		155	77.00	3,196,943	7,380,635	
2009/07		0.10	0.6841	0.6841		155	77.00	3,199,130	7,431,165	
2010/01	25,774	0.05	0.8643	0.8643		155	69.90	3,226,286	7,495,335	
2010/07		0.05	0.7107	0.7107		155	69.90	3,227,431	7,548,655	
2011/01		0.00	0.9198	0.9198		155	69.90	3,227,431	7,618,095	
2011/07		0.00	0.9028	0.9028		155	69.90	3,227,431	7,686,915	
2012/01		0.00	0.3865	0.3865		155	69.90	3,227,431	7,716,675	
2012/07		0.00	0.9417	0.9417		155	69.90	3,227,431	7,789,370	
2013/01		0.00	0.4901	0.4901		155	74.11	3,227,431	7,827,500	
2013/07		0.00	0.6196	0.6196		155	74.11	3,227,431	7,876,015	
2014/01		0.00	0.8564	0.8564		155	73.78	3,227,431	7,943,440	
2014/07		0.00	1.2383	1.2383		155	73.78	3,227,431	8,041,865	
2015/01		0.00	0.7571	0.7571		155	79.30	3,227,431	8,102,780	
2015/09		0.00	1.5736	1.5736		155	79.30	3,227,431	8,230,345	
2016/09		0.00	1.9890	1.9890		155	79.30	3,227,431	8,394,025	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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Bay Breeze Senior Living And Rehabilitation Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3387 GULF BREEZE PARKWAY	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
GULF BREEZE, FL 32563	Days in CR 181	Maximum: 21,720	Standard: 366
County: Santa Rosa [57]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 20,169	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,096	Inflation
Current Class North Large	Initial CR? False	Medicaid: 12,650	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	62.72002%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.85912%	Cost: 1.08180716
Open Date: 08/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 08/01/1984	Low Occupancy Adjustment Factor:	117.43616%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213861	Interim Component Effective Date:	04/01/2016	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	563,927	1,127,282	709,840	392,656		2,793,705	
1a	Audit Adjustments							
2	Cost Per Diem	44.5792	89.1132	56.1138	31.0400		220.8462	
3	Cost Per Diem Inflated	48.2261	94.8577	60.7043				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.2261	94.8577	60.7043	31.0400		234.8281	
5a	Interim Adjustment	7.8908						
5b	Interim Adjusted Per Diem	56.1169						
6	Prior Semester: Provider Target Base	47.8715		68.6291				
7	Provider Target Rate	50.5345		72.4468				
7a	Interim Adjustment	7.8908						
7b	Interim Adjusted Target Rate	58.4253						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	60.2573		66.3913				
10b	Base for line 10a	49.6070		62.8927				
11	Lesser of 5,7,8,10, 10a	54.8223	94.8577	60.7043	13.6500		224.0343	
12/13	Medicaid Adjustment Rate		1.3574	0.8687				
14	Prospective Per Diem 11	54.8223	96.2151	61.5730	13.6500		226.2604	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Bay Breeze Senior Living And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/30/1994		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,767,000.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	4,020,733	13.0528
Indexed Asset Value	5,025,916	<60% of Base:	False	20% ROE(2):	1,005,183	0.5949
FRVS Base Asset:	1,698,423	Interest Rate:	11.5000%	Insurance Cost(3):	9,817	0.4867
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	17,659	0.8756
ROE Factor	0.023330	Amortization Rate:	11.5000%	Home Office(3):	19,130	0.9485
		Interest Only:	False	Replacement(3&4):	6,501	0.0000
		Yearly Payment:	514,540	Total FRVS PD:		15.9585

(1) 80% Capital (\$4,020,733) amortized at 11.5000 % for 20 years Principal & Interest of \$514,540 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$13.0528

(2) 20% ROE (\$1,005,183) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5949

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	96.2151	96.2151	4.3652	91.8499
Indirect Care	61.5730	61.5730	2.7935	58.7795
Property	13.6500	15.9585	0.7240	15.2345
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.8574
Supplemental Rate				8.1814
Totals	226.2604	228.5689	10.3700	245.2377

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	1,695,033	0.00	1.9179	1.9179		60	63.83	1,695,033	1,676,340	
1985/01		0.10	1.1471	1.1471		60	63.83	1,696,977	1,695,540	
1985/10		0.10	0.8522	0.8522		60	63.83	1,698,423	1,710,000	
1986/01		0.20	0.8299	0.8299		60	63.83	1,701,242	1,724,220	
1986/07		0.20	0.2974	0.2974		60	63.83	1,702,254	1,720,920	
1987/01		0.30	1.0091	1.0091		60	69.16	1,707,407	1,751,700	
1987/07	925,931	0.30	0.9007	0.9007		120	72.24	2,637,951	3,530,760	
1988/01		0.40	0.9007	0.9007		120	72.24	2,647,456	3,559,440	
1988/07		0.40	0.5899	0.5899		120	72.24	2,653,704	3,557,520	
1989/01	247,019	0.50	0.5899	0.5899		120	63.42	2,908,551	3,578,520	
1989/07		0.50	0.5899	0.5899		120	67.87	2,917,131	3,602,760	
1990/01		0.60	0.5899	0.5899		120	67.87	2,927,455	3,620,880	
1990/07		0.60	0.5899	0.5899		120	64.15	2,937,815	3,642,240	
1991/01		0.70	0.5899	0.5899		120	64.15	2,949,945	3,663,600	
1991/07		0.70	1.4932	1.4932		120	63.31	2,980,778	3,718,320	
1992/01		0.80	2.0117	2.0117		120	63.31	3,028,751	3,793,080	
1992/07		0.80	1.8152	1.8152		120	65.27	3,072,735	3,861,960	
1993/01		0.90	1.7710	1.7710		120	65.27	3,121,711	3,930,360	
1993/07		0.90	1.5329	1.5329		120	66.99	3,164,778	3,990,600	
1994/01	33,512	1.00	1.6983	1.6983		120	59.68	3,252,037	4,058,400	
1994/07		1.00	1.5991	1.5991		120	59.68	3,304,040	4,123,320	
1995/01		1.00	1.5812	1.5812		120	59.68	3,356,283	4,188,480	
1995/07		1.00	1.5250	1.5250		120	59.68	3,407,466	4,252,320	
1996/01		1.00	1.7228	1.7228		120	59.68	3,466,170	4,325,640	
1996/07		1.00	1.3294	1.3294		120	59.68	3,512,249	4,383,120	
1997/01		1.00	1.4109	1.4109		120	59.68	3,561,803	4,444,920	
1997/07	34,399	1.00	1.0917	1.0917		120	56.51	3,635,086	4,493,400	
1998/01		1.00	1.1663	1.1663		120	59.38	3,677,482	4,545,840	
1998/07	46,274	1.00	1.0794	1.0794		120	60.93	3,763,451	4,594,920	
1999/01		1.00	1.4499	1.4499		120	60.93	3,818,017	4,661,520	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		120	60.93	3,864,975	4,718,880	
2000/01		1.00	1.3356	1.3356		120	60.93	3,916,596	4,781,880	
2000/07		1.00	1.1129	1.1129		120	60.93	3,960,184	4,835,040	
2001/01	56,068	1.00	1.2976	1.2976		120	65.03	4,067,639	4,897,800	
2001/07		1.00	0.9615	0.9615		120	65.03	4,106,749	4,944,840	
2002/01		1.00	1.0301	1.0301		120	59.27	4,149,053	4,995,720	
2002/07		1.00	0.8337	0.8337		120	59.27	4,183,644	5,037,360	
2003/01		1.00	1.3271	1.3271		120	57.03	4,239,165	5,104,200	
2003/07		1.00	1.1664	1.1664		120	57.03	4,288,611	5,163,720	
2004/01		1.00	1.1103	1.1103		120	53.01	4,334,505	5,221,080	
2004/07		1.00	0.8378	0.8378		120	53.01	4,369,506	5,264,880	
2005/01		0.95	0.8595	0.8595		120	57.35	4,405,183	5,310,120	
2005/07		0.95	0.7364	0.7364		120	57.35	4,436,002	5,349,240	
2006/01		0.90	0.9068	0.9068		120	54.92	4,472,152	5,397,720	
2006/07		0.90	0.8133	0.8133		120	54.92	4,504,841	5,441,640	
2007/01		0.85	1.0133	1.0133		120	48.30	4,538,915	5,496,720	
2007/07		0.85	1.1050	1.1050		120	48.30	4,576,355	5,557,440	
2008/01		0.80	0.8556	0.8556		120	48.30	4,603,864	5,604,960	
2008/07		0.80	0.6104	0.6104		120	48.69	4,623,766	5,639,160	
2009/01		0.75	1.3268	1.3268		120	50.18	4,665,745	5,714,040	
2009/07		0.75	0.6841	0.6841		120	50.18	4,687,587	5,753,160	
2010/01	18,952	0.70	0.8643	0.8643		120	56.71	4,734,899	5,802,840	
2010/07		0.70	0.7107	0.7107		120	56.71	4,758,455	5,844,120	
2011/01		0.65	0.9198	0.9198		120	56.71	4,786,906	5,897,880	
2011/07		0.65	0.9028	0.9028		120	56.71	4,814,996	5,951,160	
2012/01		0.60	0.3865	0.3865		120	56.71	4,826,162	5,974,200	
2012/07		0.60	0.9417	0.9417		120	56.71	4,853,430	6,030,480	
2013/01		0.55	0.4901	0.4901		120	58.10	4,866,515	6,060,000	
2013/07		0.55	0.6196	0.6196		120	58.10	4,883,100	6,097,560	
2014/01		0.50	0.8564	0.8564		120	60.64	4,904,009	6,149,760	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	60.64	4,934,375	6,225,960	
2015/01		0.45	0.7571	0.7571		120	62.72	4,951,186	6,273,120	
2015/09		0.45	1.5736	1.5736		120	62.72	4,986,245	6,371,880	
2016/09		0.40	1.9890	1.9890		120	62.72	5,025,916	6,498,600	

Message Code:

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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244.62

Silvercrest Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
910 BROOKMEADE DRIVE	1/1/2014-6/30/2014	Number of Beds: 60	Superior: 0
CRESTVIEW, FL 32539	Days in CR 181	Maximum: 10,860	Standard: 366
County: Okaloosa [46]	First Used : 2015/01	Max Annualized: 21,900	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 10,345	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,981	Inflation
Current Class North Small	Initial CR? False	Medicaid: 7,385	FY Index: 1.33439166
Class at 1/94: North Small	Medicaid Utilization	71.38714%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.25783%	Cost: 1.08180716
Open Date: 07/01/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 08/01/1988	Low Occupancy Adjustment Factor:	120.46974%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213926			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	391,876	564,966	447,095	258,918		1,662,855
1a	Audit Adjustments						
2	Cost Per Diem	53.0638	76.5018	60.5410	35.0600		225.1666
3	Cost Per Diem Inflated	57.4048	81.4334	65.4937			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	57.4048	81.4334	65.4937	35.0600		239.3919
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	58.0848		68.3193			
7	Provider Target Rate	61.3159		72.1198			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500		
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507			
10	Target Rate Class Ceiling	59.8766		72.7784			
10a	New Provider Target Limitation	60.7572		72.5104			
10b	Base for line 10a	57.5555		68.6893			
11	Lesser of 5,7,8,10, 10a	57.4048	81.4334	65.4937	13.6500		217.9819
12/13	Medicaid Adjustment Rate		1.9593	1.5758			
14	Prospective Per Diem 11	57.4048	83.3927	67.0695	13.6500		221.5170
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Silvercrest Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/04/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,309,333.00		Total Amount	Per Diem
RS to Start Calcs:	1988/07	Type:	Fixed	80% Capital(1):	2,385,706	15.4898
Indexed Asset Value	2,982,132	<60% of Base:	False	20% ROE(2):	596,426	0.7060
FRVS Base Asset:	1,779,720	Interest Rate:	11.5000%	Insurance Cost(3):	9,513	0.9196
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	10,442	1.0094
ROE Factor	0.023330	Amortization Rate:	11.5000%	Home Office(3):	16,355	1.5810
		Interest Only:	False	Replacement(3&4):	3,139	0.0000
		Yearly Payment:	305,303	Total FRVS PD:		19.7058

(1) 80% Capital (\$2,385,706) amortized at 11.5000 % for 20 years Principal & Interest of \$305,303 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$15.4898

(2) 20% ROE (\$596,426) times the ROE factor (0.023330) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.7060

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,662
Comparison Date: 01/01/1988	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,779,720

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.4048	57.4048	2.6044	54.8004
Direct Care	83.3927	83.3927	3.7835	79.6092
Indirect Care	67.0695	67.0695	3.0429	64.0266
Property	13.6500	19.7058	0.8940	18.8118
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1942
Supplemental Rate				8.1814
Totals	221.5170	227.5728	10.3248	244.6236

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/07	1,907,811	0.00	0.5899	0.5899		60	88.86	1,779,720	1,779,720	1
1989/01		0.10	0.5899	0.5899		60	88.86	1,780,770	1,789,260	
1989/07		0.10	0.5899	0.5899		60	88.86	1,781,821	1,801,380	
1990/01		0.20	0.5899	0.5899		60	88.86	1,783,924	1,810,440	
1990/07		0.20	0.5899	0.5899		60	88.86	1,786,029	1,821,120	
1991/01		0.30	0.5899	0.5899		60	88.28	1,789,190	1,831,800	
1991/07		0.30	1.4932	1.4932		60	88.28	1,797,206	1,859,160	
1992/01		0.40	2.0117	2.0117		60	93.89	1,811,668	1,896,540	
1992/07		0.40	1.8152	1.8152		60	92.60	1,824,823	1,930,980	
1993/01		0.50	1.7710	1.7710		60	92.60	1,840,982	1,965,180	
1993/07		0.50	1.5329	1.5329		60	92.60	1,855,093	1,995,300	
1994/01	29,286	0.60	1.6983	1.6983		60	84.36	1,903,282	2,029,200	
1994/07		0.60	1.5991	1.5991		60	84.36	1,921,544	2,061,660	
1995/01		0.70	1.5812	1.5812		60	84.36	1,942,812	2,094,240	
1995/07		0.70	1.5250	1.5250		60	84.36	1,963,552	2,126,160	
1996/01		0.80	1.7228	1.7228		60	84.36	1,990,614	2,162,820	
1996/07		0.80	1.3294	1.3294		60	84.36	2,011,784	2,191,560	
1997/01		0.90	1.4109	1.4109		60	84.36	2,037,330	2,222,460	
1997/07	14,647	0.90	1.0917	1.0917		60	84.95	2,071,994	2,246,700	
1998/01		1.00	1.1663	1.1663		60	84.95	2,096,160	2,272,920	
1998/07	18,392	1.00	1.0794	1.0794		60	85.50	2,137,178	2,297,460	
1999/01	2,509	1.00	1.4499	1.4499		60	85.50	2,170,674	2,330,760	
1999/07		1.00	1.2299	1.2299		60	85.50	2,197,371	2,359,440	
2000/01		1.00	1.3356	1.3356		60	85.50	2,226,719	2,390,940	
2000/07		1.00	1.1129	1.1129		60	85.50	2,251,500	2,417,520	
2001/01		1.00	1.2976	1.2976		60	81.81	2,280,715	2,448,900	
2001/07		1.00	0.9615	0.9615		60	81.81	2,302,644	2,472,420	
2002/01		1.00	1.0301	1.0301		60	75.43	2,326,364	2,497,860	
2002/07		1.00	0.8337	0.8337		60	75.43	2,345,759	2,518,680	
2003/01		1.00	1.3271	1.3271		60	74.41	2,376,890	2,552,100	



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
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0 017230-00 - 2016/09

244.62

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/07		1.00	1.1664	1.1664		60	74.41	2,404,614	2,581,860	
2004/01		1.00	1.1103	1.1103		60	72.56	2,431,312	2,610,540	
2004/07		1.00	0.8378	0.8378		60	72.56	2,451,682	2,632,440	
2005/01	8,790	1.00	0.8595	0.8595		60	76.08	2,481,544	2,655,060	
2005/07		1.00	0.7364	0.7364		60	76.08	2,499,818	2,674,620	
2006/01		1.00	0.9068	0.9068		60	72.45	2,522,486	2,698,860	
2006/07		1.00	0.8133	0.8133		60	72.45	2,543,001	2,720,820	
2007/01		1.00	1.0133	1.0133		60	65.99	2,568,769	2,748,360	
2007/07		1.00	1.1050	1.1050		60	65.99	2,568,769	2,778,720	5
2008/01		1.00	0.8556	0.8556		60	65.99	2,619,375	2,802,480	
2008/07		1.00	0.6104	0.6104		60	57.97	2,635,364	2,819,580	
2009/01		0.95	1.3268	1.3268		60	61.46	2,668,583	2,857,020	
2009/07		0.95	0.6841	0.6841		60	61.46	2,685,926	2,876,580	
2010/01	23,031	0.90	0.8643	0.8643		60	63.00	2,729,851	2,901,420	
2010/07		0.90	0.7107	0.7107		60	63.00	2,747,311	2,922,060	
2011/01		0.85	0.9198	0.9198		60	63.00	2,768,789	2,948,940	
2011/07		0.85	0.9028	0.9028		60	63.00	2,790,037	2,975,580	
2012/01		0.80	0.3865	0.3865		60	63.00	2,798,664	2,987,100	
2012/07		0.80	0.9417	0.9417		60	63.00	2,819,749	3,015,240	
2013/01	17,400	0.75	0.4901	0.4901		60	62.67	2,847,514	3,030,000	
2013/07		0.75	0.6196	0.6196		60	62.67	2,860,746	3,048,780	
2014/01		0.70	0.8564	0.8564		60	67.66	2,877,896	3,074,880	
2014/07		0.70	1.2383	1.2383		60	67.53	2,902,842	3,112,980	
2015/01		0.65	0.7571	0.7571		60	71.39	2,917,127	3,136,560	
2015/09		0.65	1.5736	1.5736		60	71.39	2,946,963	3,185,940	
2016/09		0.60	1.9890	1.9890		60	71.39	2,982,132	3,249,300	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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246.05

Specialty Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6984 PINE FOREST ROAD	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
PENSACOLA, FL 32526	Days in CR 181	Maximum: 21,720	Standard: 366
County: Escambia [17]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 20,505	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,248	Inflation
Current Class North Large	Initial CR? False	Medicaid: 12,732	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	62.09217%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.40608%	Cost: 1.08180716
Open Date: 12/09/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/09/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 12/16/1991	Low Occupancy Adjustment Factor:	119.39255%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 213918			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	601,958	1,150,911	734,941	379,159		2,866,969	
1a	Audit Adjustments							
2	Cost Per Diem	47.2791	90.3951	57.7239	29.7800		225.1781	
3	Cost Per Diem Inflated	51.1469	96.2223	62.4461				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.1469	96.2223	62.4461	29.7800		239.5953	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.5022		66.8170				
7	Provider Target Rate	53.3115		70.5339				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.5572		66.3976				
10b	Base for line 10a	51.6822		62.8987				
11	Lesser of 5,7,8,10, 10a	51.1469	96.2223	62.4461	13.6500		223.4653	
12/13	Medicaid Adjustment Rate		1.3090	0.8495				
14	Prospective Per Diem 11	51.1469	97.5313	63.2956	13.6500		225.6238	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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246.05

Specialty Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/16/1991	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,652,500.00		Total Amount	Per Diem
RS to Start Calcs:	1991/07	Type:	Fixed	80% Capital(1):	4,487,126	14.5668
Indexed Asset Value	5,608,907	<60% of Base:	False	20% ROE(2):	1,121,781	0.6639
FRVS Base Asset:	3,576,837	Interest Rate:	11.5000%	Insurance Cost(3):	19,591	0.9554
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	18,696	0.9118
ROE Factor	0.023330	Amortization Rate:	11.5000%	Home Office(3):	19,960	0.9734
		Interest Only:	False	Replacement(3&4):	7,095	0.0000
		Yearly Payment:	574,225	Total FRVS PD:		18.0713

(1) 80% Capital (\$4,487,126) amortized at 11.5000 % for 20 years Principal & Interest of \$574,225 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$14.5668

(2) 20% ROE (\$1,121,781) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6639

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	30,530
Comparison Date:	01/01/1991	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,663,600

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.1469	51.1469	2.3205	48.8264
Direct Care	97.5313	97.5313	4.4249	93.1064
Indirect Care	63.2956	63.2956	2.8717	60.4239
Property	13.6500	18.0713	0.8199	17.2514
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.2603
Supplemental Rate				8.1814
Totals	225.6238	230.0451	10.4370	246.0498

Medicaid Trend Adjustment



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246.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/07	3,576,837	0.00	1.4932	1.4932		120	84.27	3,576,837	3,718,320	
1992/01		0.10	2.0117	2.0117		120	84.27	3,584,034	3,793,080	
1992/07		0.10	1.8152	1.8152		120	81.36	3,590,539	3,861,960	
1993/01		0.20	1.7710	1.7710		120	81.36	3,603,257	3,930,360	
1993/07		0.20	1.5329	1.5329		120	81.36	3,614,305	3,990,600	
1994/01		0.30	1.6983	1.6983		120	77.02	3,632,720	4,058,400	
1994/07	114,752	0.30	1.5991	1.5991		120	77.02	3,764,898	4,123,320	
1995/01		0.40	1.5812	1.5812		120	77.02	3,788,711	4,188,480	
1995/07		0.40	1.5250	1.5250		120	77.02	3,811,822	4,252,320	
1996/01		0.50	1.7228	1.7228		120	77.02	3,811,822	4,325,640	5
1996/07		0.50	1.3294	1.3294		120	77.02	3,844,657	4,383,120	5
1997/01		0.60	1.4109	1.4109		120	77.02	3,902,973	4,444,920	
1997/07		0.60	1.0917	1.0917		120	73.47	3,928,537	4,493,400	
1998/01		0.70	1.1663	1.1663		120	73.47	3,960,610	4,545,840	
1998/07	26,235	0.70	1.0794	1.0794		120	71.71	4,016,771	4,594,920	
1999/01	5,049	0.80	1.4499	1.4499		120	71.71	4,068,411	4,661,520	
1999/07		0.80	1.2299	1.2299		120	71.71	4,108,440	4,718,880	
2000/01		0.90	1.3356	1.3356		120	71.71	4,157,823	4,781,880	
2000/07		0.90	1.1129	1.1129		120	71.71	4,199,468	4,835,040	
2001/01		1.00	1.2976	1.2976		120	74.21	4,253,960	4,897,800	
2001/07		1.00	0.9615	0.9615		120	74.21	4,294,862	4,944,840	
2002/01		1.00	1.0301	1.0301		120	69.08	4,339,103	4,995,720	
2002/07		1.00	0.8337	0.8337		120	69.08	4,375,278	5,037,360	
2003/01	19,628	1.00	1.3271	1.3271		120	66.90	4,452,970	5,104,200	
2003/07		1.00	1.1664	1.1664		120	66.90	4,504,909	5,163,720	
2004/01		1.00	1.1103	1.1103		120	65.63	4,554,927	5,221,080	
2004/07		1.00	0.8378	0.8378		120	65.63	4,593,088	5,264,880	
2005/01		1.00	0.8595	0.8595		120	65.70	4,632,566	5,310,120	
2005/07		1.00	0.7364	0.7364		120	65.70	4,666,680	5,349,240	
2006/01		1.00	0.9068	0.9068		120	58.24	4,708,997	5,397,720	



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246.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/07		1.00	0.8133	0.8133		120	58.24	4,747,295	5,441,640	
2007/01		1.00	1.0133	1.0133		120	57.91	4,795,399	5,496,720	
2007/07		1.00	1.1050	1.1050		120	57.91	4,848,388	5,557,440	
2008/01		1.00	0.8556	0.8556		120	57.91	4,889,871	5,604,960	
2008/07		1.00	0.6104	0.6104		120	56.75	4,919,719	5,639,160	
2009/01		1.00	1.3268	1.3268		120	58.34	4,984,994	5,714,040	
2009/07		1.00	0.6841	0.6841		120	58.34	5,019,096	5,753,160	
2010/01		1.00	0.8643	0.8643		120	57.11	5,062,476	5,802,840	
2010/07	18,698	1.00	0.7107	0.7107		120	57.11	5,117,153	5,844,120	
2011/01		1.00	0.9198	0.9198		120	57.11	5,164,221	5,897,880	
2011/07		1.00	0.9028	0.9028		120	57.11	5,210,844	5,951,160	
2012/01		0.95	0.3865	0.3865		120	57.11	5,229,978	5,974,200	
2012/07		0.95	0.9417	0.9417		120	57.11	5,276,765	6,030,480	
2013/01		0.90	0.4901	0.4901		120	57.89	5,300,041	6,060,000	
2013/07		0.90	0.6196	0.6196		120	57.89	5,329,594	6,097,560	
2014/01		0.85	0.8564	0.8564		120	60.75	5,368,388	6,149,760	
2014/07		0.85	1.2383	1.2383		120	60.96	5,424,896	6,225,960	
2015/01		0.80	0.7571	0.7571		120	62.09	5,457,755	6,273,120	
2015/09		0.80	1.5736	1.5736		120	62.09	5,526,463	6,371,880	
2016/09		0.75	1.9890	1.9890		120	62.09	5,608,907	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 017236063020140101201410122014142356



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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251.31

Grand Boulevard Health & Rehab. Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
138 SANDESTIN LANE	1/1/2014-6/30/2014	Number of Beds: 97	Superior: 0
MIRAMAR BEACH, FL 32550	Days in CR 181	Maximum: 17,557	Standard: 366
County: Walton [66]	First Used : 2015/09	Max Annualized: 35,405	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 13,583	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,513	Inflation
Current Class North Small	Initial CR? False	Medicaid: 7,305	FY Index: 1.33439166
Class at 1/94: North Small	Medicaid Utilization	53.78046%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	77.36515%	Cost: 1.08180716
Open Date: 02/24/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/24/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 02/24/1988	Low Occupancy Adjustment Factor:	97.84140%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 211621			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	349,832	630,392	487,290	326,680		1,794,194	
1a	Audit Adjustments							
2	Cost Per Diem	47.8894	86.2960	66.7064	44.7201		245.6119	
3	Cost Per Diem Inflated	51.8071	91.8589	72.1635				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.8071	91.8589	72.1635	44.7201		260.5496	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.1886		69.5903				
7	Provider Target Rate	59.3143		73.4615				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	58.8002		72.8948				
10b	Base for line 10a	55.7016		69.0535				
11	Lesser of 5,7,8,10, 10a	51.8071	91.8589	72.1635	13.6500		229.4795	
12/13	Medicaid Adjustment Rate		0.3907	0.3069				
14	Prospective Per Diem 11	51.8071	92.2496	72.4704	13.6500		230.1771	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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251.31

Grand Boulevard Health & Rehab. Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/24/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/01	Type:	Variable	80% Capital(1):	3,921,429	14.7440
Indexed Asset Value	4,901,786	<60% of Base:	False	20% ROE(2):	980,357	0.7178
FRVS Base Asset:	1,765,380	Interest Rate:	11.5000%	Insurance Cost(3):	13,405	0.9869
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	12,153	0.8947
ROE Factor	0.023330	Amortization Rate:	10.5000%	Home Office(3):	17,531	1.2907
		Interest Only:	False	Replacement(3&4):	15,152	0.0000
		Yearly Payment:	469,809	Total FRVS PD:		18.6341

(1) 80% Capital (\$3,921,429) amortized at 10.5000 % for 20 years Principal & Interest of \$469,809 divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$14.7440

(2) 20% ROE (\$980,357) times the ROE factor (0.023330) divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$0.7178

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1987	Current RS PBS:	29,423
Comparison Bed	60	Effective PBS Limitation	54,155
			1,765,380

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.8071	51.8071	2.3505	49.4566
Direct Care	92.2496	92.2496	4.1853	88.0643
Indirect Care	72.4704	72.4704	3.2879	69.1825
Property	13.6500	18.6341	0.8454	17.7887
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.6394
Supplemental Rate				8.1814
Totals	230.1771	235.1612	10.6691	251.3129

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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251.31

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/01	2,274,685	0.00	0.9007	0.9007		60	65.97	1,765,380	1,765,380	1
1988/07		0.10	0.5899	0.5899		60	65.97	1,766,422	1,778,760	
1989/01		0.10	0.5899	0.5899		60	65.97	1,767,464	1,789,260	
1989/07		0.20	0.5899	0.5899		60	65.97	1,767,464	1,801,380	5
1990/01		0.20	0.5899	0.5899		60	65.97	1,769,550	1,810,440	5
1990/07		0.30	0.5899	0.5899		60	65.97	1,771,638	1,821,120	5
1991/01		0.30	0.5899	0.5899		60	65.97	1,777,915	1,831,800	
1991/07		0.40	1.4932	1.4932		60	65.97	1,788,534	1,859,160	
1992/01		0.40	2.0117	2.0117		60	69.06	1,802,926	1,896,540	
1992/07		0.50	1.8152	1.8152		60	62.33	1,819,289	1,930,980	
1993/01		0.50	1.7710	1.7710		60	62.33	1,835,399	1,965,180	
1993/07		0.60	1.5329	1.5329		60	65.60	1,852,279	1,995,300	
1994/01	1,230,435	0.60	1.6983	1.6983		60	65.60	2,029,200	2,029,200	5
1994/07		0.70	1.5991	1.5991		60	65.60	2,061,660	2,061,660	5
1995/01	57,882	0.70	1.5812	1.5812		97	69.52	3,228,903	3,385,688	
1995/07	1,380	0.80	1.5250	1.5250		97	69.52	3,269,676	3,437,292	
1996/01	1,990	0.80	1.7228	1.7228		97	69.52	3,316,729	3,496,559	
1996/07		0.90	1.3294	1.3294		97	69.52	3,356,414	3,543,022	
1997/01		0.90	1.4109	1.4109		97	69.52	3,399,034	3,592,977	
1997/07		1.00	1.0917	1.0917		97	69.52	3,436,141	3,632,165	
1998/01		1.00	1.1663	1.1663		97	70.41	3,476,217	3,674,554	
1998/07		1.00	1.0794	1.0794		97	70.41	3,513,739	3,714,227	
1999/01	47,801	1.00	1.4499	1.4499		97	67.12	3,612,486	3,768,062	
1999/07		1.00	1.2299	1.2299		97	67.12	3,656,916	3,814,428	
2000/01	18,572	1.00	1.3356	1.3356		97	69.43	3,724,330	3,865,353	
2000/07		1.00	1.1129	1.1129		97	73.87	3,765,778	3,908,324	
2001/01		1.00	1.2976	1.2976		97	73.87	3,814,643	3,959,055	
2001/07		1.00	0.9615	0.9615		97	72.46	3,851,321	3,997,079	
2002/01		1.00	1.0301	1.0301		97	72.46	3,890,993	4,038,207	
2002/07		1.00	0.8337	0.8337		97	71.46	3,923,432	4,071,866	



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251.31

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/01		1.00	1.3271	1.3271		97	71.46	3,975,500	4,125,895	
2003/07		1.00	1.1664	1.1664		97	74.78	4,021,870	4,174,007	
2004/01		1.00	1.1103	1.1103		97	74.78	4,066,525	4,220,373	
2004/07		1.00	0.8378	0.8378		97	67.97	4,100,594	4,255,778	
2005/01		1.00	0.8595	0.8595		97	67.97	4,135,839	4,292,347	
2005/07		1.00	0.7364	0.7364		97	67.24	4,166,295	4,323,969	
2006/01		1.00	0.9068	0.9068		97	67.24	4,204,075	4,363,157	
2006/07		1.00	0.8133	0.8133		97	64.22	4,238,267	4,398,659	
2007/01		1.00	1.0133	1.0133		97	64.22	4,281,213	4,443,182	
2007/07		1.00	1.1050	1.1050		97	55.75	4,328,520	4,492,264	
2008/01		1.00	0.8556	0.8556		97	55.75	4,365,555	4,530,676	
2008/07		0.95	0.6104	0.6104		97	59.26	4,390,871	4,558,321	
2009/01		0.95	1.3268	1.3268		97	59.26	4,446,218	4,618,849	
2009/07		0.90	0.6841	0.6841		97	59.26	4,473,593	4,650,471	
2010/01	26,209	0.90	0.8643	0.8643		97	64.62	4,534,602	4,690,629	
2010/07		0.85	0.7107	0.7107		97	64.62	4,561,996	4,723,997	
2011/01		0.85	0.9198	0.9198		97	64.62	4,597,662	4,767,453	
2011/07		0.80	0.9028	0.9028		97	64.62	4,630,866	4,810,521	
2012/01		0.80	0.3865	0.3865		97	64.62	4,630,866	4,829,145	5
2012/07		0.75	0.9417	0.9417		97	64.62	4,677,994	4,874,638	
2013/01		0.75	0.4901	0.4901		97	60.70	4,695,190	4,898,500	
2013/07		0.70	0.6196	0.6196		97	60.70	4,715,553	4,928,861	
2014/01		0.70	0.8564	0.8564		97	56.56	4,743,823	4,971,056	
2014/07		0.65	1.2383	1.2383		97	57.51	4,782,006	5,032,651	
2015/01		0.65	0.7571	0.7571		97	57.51	4,805,538	5,070,772	
2015/09		0.60	1.5736	1.5736		97	53.78	4,849,905	5,150,603	
2016/09		0.55	1.9890	1.9890		97	53.78	4,901,786	5,253,035	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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The Park Summit at Coral Springs

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
8500 ROYAL PALM BLVD	1/1/2015-12/31/2015	Number of Beds: 35	Superior: 366
CORAL SPRINGS, FL 33065	Days in CR 365	Maximum: 12,775	Standard: 0
County: Broward [6]	First Used : 2016/09	Max Annualized: 12,775	Conditional: 0
Region: South Area: 10	Last Used: 2016/09	Total Patient: 11,577	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,248	Inflation
Current Class South Small	Initial CR? False	Medicaid: 4,075	FY Index: 1.37939113
Class at 1/94: South Small	Medicaid Utilization	35.19910%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	90.62231%	Cost: 1.04651568
Open Date: 06/01/1986	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1986	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 06/01/1986	Low Occupancy Adjustment Factor:	114.60733%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 254134			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	197,373	344,445	392,610	97,800		1,032,228	
1a	Audit Adjustments							
2	Cost Per Diem	48.4351	84.5264	96.3460	24.0000		253.3075	
3	Cost Per Diem Inflated	50.6881	87.9654	100.8276				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.6881	87.9654	100.8276	24.0000		263.4811	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	82.6896		122.6998				
7	Provider Target Rate	87.2895		129.5254				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	50.6881	87.9654	88.3937	13.6500		240.6972	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	50.6881	87.9654	88.3937	13.6500		240.6972	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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The Park Summit at Coral Springs

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/01/1986		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1986/01	Type:	None	80% Capital(1):	1,081,884	8.8684
Indexed Asset Value	1,352,355	<60% of Base:	True	20% ROE(2):	270,471	0.4754
FRVS Base Asset:	997,500	Interest Rate:	9.5000%	Insurance Cost(3):	5,505	0.4755
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	21,185	1.8299
ROE Factor	0.020210	Amortization Rate:	9.5000%	Home Office(3):	771	0.0666
		Interest Only:	True	Replacement(3&4):	934,284	0.0000
		Yearly Payment:	101,964	Total FRVS PD:		11.7158

(1) 80% Capital (\$1,081,884) amortized at 9.5000 % for 20 years Interest of \$101,964 divided by annual available days (12775) divided by Occup. Adj. (0.90) = \$8.8684

(2) 20% ROE (\$270,471) times the ROE factor (0.020210) divided by annual available days (12775) divided by Occup. Adj. (0.90) = \$0.4754

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 35	Effective PBS Limitation	997,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.6881	50.6881	2.2997	48.3884
Direct Care	87.9654	87.9654	3.9909	83.9745
Indirect Care	88.3937	88.3937	4.0104	84.3833
Property	13.6500	11.7158	0.5315	11.1843
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	240.6972	238.7630	10.8325	236.1119

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/01	1,914,476	0.00	0.8299	0.8299		35	7.03	997,500	997,500	1
1986/07		0.10	0.2974	0.2974		35	7.03	997,500	1,003,870	
1987/01	11,768	0.10	1.0091	1.0091		35	7.03	1,009,268	1,021,825	
1987/07		0.20	0.9007	0.9007		35	7.03	1,009,268	1,029,805	
1988/01		0.20	0.9007	0.9007		35	7.03	1,009,268	1,038,170	
1988/07		0.30	0.5899	0.5899		35	7.03	1,009,268	1,037,610	
1989/01	13,477	0.30	0.5899	0.5899		35	8.77	1,022,745	1,043,735	
1989/07		0.40	0.5899	0.5899		35	8.77	1,022,745	1,050,805	
1990/01		0.40	0.5899	0.5899		35	12.88	1,022,745	1,056,090	
1990/07		0.50	0.5899	0.5899		35	12.88	1,022,745	1,062,320	
1991/01		0.50	0.5899	0.5899		35	12.88	1,022,745	1,068,550	
1991/07		0.60	1.4932	1.4932		35	12.88	1,022,745	1,084,510	
1992/01	6,610	0.60	2.0117	2.0117		35	12.88	1,029,355	1,106,315	
1992/07		0.70	1.8152	1.8152		35	18.91	1,029,355	1,126,405	
1993/01		0.70	1.7710	1.7710		35	18.91	1,029,355	1,146,355	
1993/07	54,109	0.80	1.5329	1.5329		35	24.42	1,083,464	1,163,925	
1994/01	11,078	0.80	1.6983	1.6983		35	20.71	1,094,542	1,183,700	
1994/07		0.90	1.5991	1.5991		35	20.71	1,094,542	1,202,635	
1995/01	10,674	0.90	1.5812	1.5812		35	16.53	1,105,216	1,221,640	
1995/07		1.00	1.5250	1.5250		35	16.53	1,105,216	1,240,260	
1996/01		1.00	1.7228	1.7228		35	16.53	1,105,216	1,261,645	
1996/07		1.00	1.3294	1.3294		35	9.92	1,105,216	1,278,410	
1997/01		1.00	1.4109	1.4109		35	20.14	1,105,216	1,296,435	
1997/07		1.00	1.0917	1.0917		35	20.14	1,105,216	1,310,575	
1998/01		1.00	1.1663	1.1663		35	15.42	1,105,216	1,325,870	
1998/07		1.00	1.0794	1.0794		35	15.42	1,105,216	1,340,185	
1999/01		1.00	1.4499	1.4499		35	19.21	1,105,216	1,359,610	
1999/07		1.00	1.2299	1.2299		35	19.21	1,105,216	1,376,340	
2000/01		1.00	1.3356	1.3356		35	24.27	1,105,216	1,394,715	
2000/07		1.00	1.1129	1.1129		35	24.27	1,105,216	1,410,220	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/01		1.00	1.2976	1.2976		35	23.00	1,105,216	1,428,525	
2001/07		1.00	0.9615	0.9615		35	23.00	1,105,216	1,442,245	
2002/01	25,800	1.00	1.0301	1.0301		35	38.32	1,138,948	1,457,085	
2002/07		1.00	0.8337	0.8337		35	38.32	1,145,564	1,469,230	
2003/01	10,494	1.00	1.3271	1.3271		35	43.92	1,168,198	1,488,725	
2003/07		1.00	1.1664	1.1664		35	43.92	1,179,079	1,506,085	
2004/01		1.00	1.1103	1.1103		35	36.50	1,187,767	1,522,815	
2004/07		1.00	0.8378	0.8378		35	36.50	1,194,371	1,535,590	
2005/01	9,406	1.00	0.8595	0.8595		35	39.86	1,211,217	1,548,785	
2005/07		1.00	0.7364	0.7364		35	39.86	1,217,681	1,560,195	
2006/01		1.00	0.9068	0.9068		35	39.86	1,225,683	1,574,335	
2006/07	8,019	0.95	0.8133	0.8133		35	46.50	1,241,708	1,587,145	
2007/01		0.95	1.0133	1.0133		35	46.50	1,251,813	1,603,210	
2007/07		0.90	1.1050	1.1050		35	33.13	1,259,312	1,620,920	
2008/01		0.90	0.8556	0.8556		35	33.13	1,265,153	1,634,780	
2008/07		0.85	0.6104	0.6104		35	35.78	1,269,423	1,644,755	
2009/01		0.85	1.3268	1.3268		35	35.78	1,278,737	1,666,595	
2009/07		0.80	0.6841	0.6841		35	32.69	1,282,897	1,678,005	
2010/01		0.80	0.8643	0.8643		35	32.69	1,288,169	1,692,495	
2010/07		0.75	0.7107	0.7107		35	33.25	1,292,320	1,704,535	
2011/01		0.75	0.9198	0.9198		35	39.43	1,298,712	1,720,215	
2011/07		0.70	0.9028	0.9028		35	39.43	1,304,596	1,735,755	
2012/01		0.70	0.3865	0.3865		35	36.44	1,306,935	1,742,475	
2012/07		0.65	0.9417	0.9417		35	36.44	1,312,235	1,758,890	
2013/01		0.65	0.4901	0.4901		35	42.41	1,315,459	1,767,500	
2013/07		0.60	0.6196	0.6196		35	42.41	1,319,230	1,778,455	
2014/01		0.60	0.8564	0.8564		35	42.41	1,324,457	1,793,680	
2014/07		0.55	1.2383	1.2383		35	45.57	1,331,931	1,815,905	
2015/01		0.55	0.7571	0.7571		35	45.57	1,336,526	1,829,660	
2015/09		0.50	1.5736	1.5736		35	42.50	1,344,652	1,858,465	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2016/09		0.45	1.9890	1.9890		35	35.20	1,352,355	1,895,425	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 018066123120150101201503262016142110



Florida Agency for Health Care Administration
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272.76

Bay Village of Sarasota

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
8400 VAMO ROAD	1/1/2014-12/31/2014	Number of Beds: 95	Superior: 0
SARASOTA, FL 34231	Days in CR 365	Maximum: 34,675	Standard: 366
County: Sarasota [58]	First Used : 2016/09	Max Annualized: 34,675	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 23,967	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 5,647	Inflation
Current Class South Small	Initial CR? False	Medicaid: 4,071	FY Index: 1.34193004
Class at 1/94: South Small	Medicaid Utilization	16.98586%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	69.11896%	Cost: 1.07573004
Open Date: 12/05/1975	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/05/1975	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 02/22/2010	Low Occupancy Adjustment Factor:	87.41269%	DC Sem Index: 1.30450000
Med # Active Date: 02/22/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	403,792	589,805	430,722	93,144		1,517,463	
1a	Audit Adjustments							
2	Cost Per Diem	99.1874	144.8796	105.8025	22.8799		372.7494	
3	Cost Per Diem Inflated	106.6989	153.7799	113.8149				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	106.6989	153.7799	113.8149	22.8799		397.1736	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	84.9839		102.8966				
7	Provider Target Rate	89.7114		108.6205				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	72.6547		87.1218				
10b	Base for line 10a	68.8260		82.5308				
11	Lesser of 5,7,8,10, 10a	71.0408	115.1428	87.1218	13.6500		286.9554	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	71.0408	115.1428	87.1218	13.6500		286.9554	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Bay Village of Sarasota

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/22/2010		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	12,300,000.00		Total Amount	Per Diem
RS to Start Calcs:	1975/07	Type:	Fixed	80% Capital(1):	1,081,084	2.5664
Indexed Asset Value	1,351,355	<60% of Base:	False	20% ROE(2):	270,271	0.1967
FRVS Base Asset:	0	Interest Rate:	4.2150%	Insurance Cost(3):	0	0.0000
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	25,882	1.0799
ROE Factor	0.022710	Amortization Rate:	4.2150%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	23,393	0.0000
		Yearly Payment:	80,091	Total FRVS PD:		3.8430

- (1) 80% Capital (\$1,081,084) amortized at 4.2150 % for 20 years Principal & Interest of \$80,091 divided by annual available days (34675) divided by Occup. Adj. (0.90) = \$2.5664
 (2) 20% ROE (\$270,271) times the ROE factor (0.022710) divided by annual available days (34675) divided by Occup. Adj. (0.90) = \$0.1967
 (3) Pass-throughs: Cost divided by Total Patient Days
 (4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	13,911
Comparison Date: 01/01/1975	Current RS PBS:	54,155
Comparison Bed 95	Effective PBS Limitation	1,321,545

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	71.0408	71.0408	3.2231	67.8177
Direct Care	115.1428	115.1428	5.2240	109.9188
Indirect Care	87.1218	87.1218	3.9527	83.1691
Property	13.6500	3.8430	0.1744	3.6686
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	286.9554	277.1484	12.5742	272.7556

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 018777-00 - 2016/09

272.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/01	6,780,572	0.00	0.8643	0.8643		95	9.05	1,321,545	1,321,545	1
2010/07	15,237	0.10	0.7107	0.7107		95	9.05	1,336,782	4,626,595	
2011/01	5,687	0.10	0.9198	0.9198		95	9.05	1,342,469	4,669,155	
2011/07	780	0.20	0.9028	0.9028		95	9.05	1,343,249	4,711,335	
2012/01		0.20	0.3865	0.3865		95	9.05	1,343,249	4,729,575	
2012/07		0.30	0.9417	0.9417		95	9.05	1,343,249	4,774,130	
2013/01		0.30	0.4901	0.4901		95	9.05	1,343,249	4,797,500	
2013/07		0.40	0.6196	0.6196		95	21.88	1,343,249	4,827,235	
2014/01		0.40	0.8564	0.8564		95	21.88	1,343,249	4,868,560	
2014/07		0.50	1.2383	1.2383		95	21.88	1,343,249	4,928,885	
2015/01		0.50	0.7571	0.7571		95	25.06	1,345,566	4,966,220	
2015/09		0.60	1.5736	1.5736		95	25.06	1,351,355	5,044,405	
2016/09		0.70	1.9890	1.9890		95	16.99	1,351,355	5,144,725	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 018777123120140101201405212015102809



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0019085-00 - 2016/09

209.81

Golfview Healthcare Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3636 10TH AVE N	8/1/2014-7/31/2015	Number of Beds: 56	Superior: 0
SAINT PETERSBURG, FL 33713	Days in CR: 365	Maximum: 20,440	Standard: 366
County: Pinellas [52]	First Used: 2016/09	Max Annualized: 20,440	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 17,684	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,833	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 9,778	FY Index: 1.36305434
Class at 1/94: North Small	Medicaid Utilization	55.29292%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	86.51663%	Cost: 1.05905862
Open Date: 03/01/1980	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/15/1986	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 12/15/1986	Low Occupancy Adjustment Factor:	109.41500%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 262722			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	466,468	647,941	529,780	139,630		1,783,819
1a	Audit Adjustments						
2	Cost Per Diem	47.7059	66.2652	54.1808	14.2800		182.4319
3	Cost Per Diem Inflated	50.5233	69.6000	57.3806			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.5233	69.6000	57.3806	14.2800		191.7839
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	78.2825		83.8144			
7	Provider Target Rate	82.6372		88.4768			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500		
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674			
10	Target Rate Class Ceiling	67.5182		79.7567			
10a	New Provider Target Limitation	67.6416		73.1494			
10b	Base for line 10a	64.0771		69.2947			
11	Lesser of 5,7,8,10, 10a	50.5233	69.6000	57.3806	13.6500		191.1539
12/13	Medicaid Adjustment Rate		0.4144	0.3417			
14	Prospective Per Diem 11	50.5233	70.0144	57.7223	13.6500		191.9100
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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209.81

Golfview Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/15/1986	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1986/07	Type:	Fixed	80% Capital(1):	1,455,329	10.2327
Indexed Asset Value	1,819,161	<60% of Base:	True	20% ROE(2):	363,832	0.4080
FRVS Base Asset:	1,114,559	Interest Rate:	0.0000%	Insurance Cost(3):	11,804	0.6675
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	20,841	1.1785
ROE Factor	0.020630	Amortization Rate:	13.0000%	Home Office(3):	10,929	0.6180
		Interest Only:	True	Replacement(3&4):	34,653	0.0000
		Yearly Payment:	188,241	Total FRVS PD:		13.1047

(1) 80% Capital (\$1,455,329) amortized at 13.0000 % for 20 years Interest of \$188,241 divided by annual available days (20440) divided by Occup. Adj. (0.90) = \$10.2327

(2) 20% ROE (\$363,832) times the ROE factor (0.020630) divided by annual available days (20440) divided by Occup. Adj. (0.90) = \$0.4080

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1979	Current RS PBS:	20,572
Comparison Bed	56	Effective PBS Limitation	54,155
			1,152,032

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.5233	50.5233	2.2922	48.2311
Direct Care	70.0144	70.0144	3.1765	66.8379
Indirect Care	57.7223	57.7223	2.6188	55.1035
Property	13.6500	13.1047	0.5946	12.5101
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.9462
Supplemental Rate				8.1814
Totals	191.9100	191.3647	8.6821	209.8102

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 7/31/2015

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209.81

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07	1,114,559	0.00	0.2974	0.2974		56	9.87	1,114,559	1,606,192	
1987/01		0.10	1.0091	1.0091		56	9.87	1,114,559	1,634,920	
1987/07		0.10	0.9007	0.9007		56	9.87	1,114,559	1,647,688	
1988/01		0.20	0.9007	0.9007		56	9.87	1,114,559	1,661,072	
1988/07		0.20	0.5899	0.5899		56	9.87	1,114,559	1,660,176	
1989/01		0.30	0.5899	0.5899		56	28.14	1,115,568	1,669,976	
1989/07		0.30	0.5899	0.5899		56	28.14	1,115,568	1,681,288	5
1990/01		0.40	0.5899	0.5899		56	31.96	1,118,109	1,689,744	
1990/07		0.40	0.5899	0.5899		56	31.96	1,119,642	1,699,712	
1991/01		0.50	0.5899	0.5899		56	37.70	1,119,642	1,709,680	5
1991/07		0.50	1.4932	1.4932		56	37.70	1,127,647	1,735,216	
1992/01		0.60	2.0117	2.0117		56	37.70	1,136,977	1,770,104	
1992/07		0.60	1.8152	1.8152		56	45.67	1,147,259	1,802,248	
1993/01		0.70	1.7710	1.7710		56	49.44	1,160,044	1,834,168	
1993/07		0.70	1.5329	1.5329		56	49.44	1,171,233	1,862,280	
1994/01		0.80	1.6983	1.6983		56	56.93	1,187,145	1,893,920	
1994/07		0.80	1.5991	1.5991		56	56.93	1,202,332	1,924,216	
1995/01		0.90	1.5812	1.5812		56	56.97	1,219,442	1,954,624	
1995/07		0.90	1.5250	1.5250		56	56.97	1,236,179	1,984,416	
1996/01		1.00	1.7228	1.7228		56	73.13	1,236,179	2,018,632	5
1996/07	4,469	1.00	1.3294	1.3294		56	75.85	1,261,945	2,045,456	5
1997/01		1.00	1.4109	1.4109		56	75.85	1,296,703	2,074,296	
1997/07		1.00	1.0917	1.0917		56	75.85	1,310,859	2,096,920	
1998/01		1.00	1.1663	1.1663		56	75.85	1,326,148	2,121,392	
1998/07		1.00	1.0794	1.0794		56	75.85	1,340,462	2,144,296	
1999/01		1.00	1.4499	1.4499		56	76.00	1,359,897	2,175,376	
1999/07	11,425	1.00	1.2299	1.2299		56	80.11	1,388,047	2,202,144	
2000/01		1.00	1.3356	1.3356		56	80.11	1,388,047	2,231,544	5
2000/07		1.00	1.1129	1.1129		56	80.11	1,422,240	2,256,352	
2001/01		1.00	1.2976	1.2976		56	83.31	1,440,695	2,285,640	



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209.81

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		1.00	0.9615	0.9615		56	83.31	1,454,547	2,307,592	
2002/01		1.00	1.0301	1.0301		56	83.26	1,469,530	2,331,336	
2002/07		1.00	0.8337	0.8337		56	83.26	1,481,781	2,350,768	
2003/01		1.00	1.3271	1.3271		56	76.48	1,501,446	2,381,960	
2003/07		1.00	1.1664	1.1664		56	76.48	1,518,959	2,409,736	
2004/01		1.00	1.1103	1.1103		56	76.48	1,535,824	2,436,504	
2004/07		1.00	0.8378	0.8378		56	76.48	1,548,691	2,456,944	
2005/01		1.00	0.8595	0.8595		56	76.48	1,562,002	2,478,056	
2005/07		1.00	0.7364	0.7364		56	75.52	1,573,505	2,496,312	
2006/01		1.00	0.9068	0.9068		56	75.52	1,587,774	2,518,936	
2006/07		1.00	0.8133	0.8133		56	75.49	1,600,687	2,539,432	
2007/01		0.95	1.0133	1.0133		56	75.49	1,616,095	2,565,136	
2007/07		0.95	1.1050	1.1050		56	72.08	1,633,061	2,593,472	
2008/01		0.90	0.8556	0.8556		56	72.08	1,645,636	2,615,648	
2008/07		0.90	0.6104	0.6104		56	62.75	1,654,677	2,631,608	
2009/01		0.85	1.3268	1.3268		56	62.75	1,673,338	2,666,552	
2009/07		0.85	0.6841	0.6841		56	54.09	1,682,907	2,684,808	
2010/01		0.80	0.8643	0.8643		56	62.73	1,694,543	2,707,992	
2010/07		0.80	0.7107	0.7107		56	62.73	1,704,178	2,727,256	
2011/01		0.75	0.9198	0.9198		56	62.73	1,715,935	2,752,344	
2011/07		0.75	0.9028	0.9028		56	62.73	1,727,554	2,777,208	
2012/01		0.70	0.3865	0.3865		56	62.73	1,732,229	2,787,960	
2012/07		0.70	0.9417	0.9417		56	67.66	1,743,648	2,814,224	
2013/01		0.65	0.4901	0.4901		56	67.66	1,749,203	2,828,000	
2013/07		0.65	0.6196	0.6196		56	66.98	1,756,247	2,845,528	
2014/01		0.60	0.8564	0.8564		56	64.52	1,765,271	2,869,888	
2014/07		0.60	1.2383	1.2383		56	64.52	1,778,387	2,905,448	
2015/01		0.55	0.7571	0.7571		56	64.52	1,785,792	2,927,456	
2015/09		0.55	1.5736	1.5736		56	60.13	1,801,248	2,973,544	
2016/09		0.50	1.9890	1.9890		56	55.29	1,819,161	3,032,680	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0019282-00 - 2016/09

195.71

Southern Pines Healthcare Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6140 CONGRESS ST	8/1/2014-7/31/2015	Number of Beds: 120	Superior: 0
NEW PORT RICHEY, FL 34653	Days in CR 365	Maximum: 43,800	Standard: 366
County: Pasco [51]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 34,784	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,607	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 22,338	FY Index: 1.36305434
Class at 1/94: North Large	Medicaid Utilization	64.21918%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	79.41553%	Cost: 1.05905862
Open Date: 03/01/1980	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/01/1980	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 03/01/1980	Low Occupancy Adjustment Factor:	100.43445%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 262706			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	982,122	1,521,867	954,338	432,017		3,890,344	
1a	Audit Adjustments							
2	Cost Per Diem	43.9664	68.1291	42.7226	19.3400		174.1581	
3	Cost Per Diem Inflated	46.5630	71.5577	45.2457				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.5630	71.5577	45.2457	19.3400		182.7064	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	58.1817		60.2210				
7	Provider Target Rate	61.4182		63.5710				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	57.1343		61.6509				
10b	Base for line 10a	54.1235		58.4021				
11	Lesser of 5,7,8,10, 10a	46.5630	71.5577	45.2457	13.6500		177.0164	
12/13	Medicaid Adjustment Rate		1.1447	0.7238				
14	Prospective Per Diem 11	46.5630	72.7024	45.9695	13.6500		178.8849	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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195.71

Southern Pines Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	09/01/1987	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1980/01	Type:	Fixed	80% Capital(1):	2,575,755	8.4516
Indexed Asset Value	3,219,694	<60% of Base:	True	20% ROE(2):	643,939	0.3370
FRVS Base Asset:	1,765,697	Interest Rate:	0.0000%	Insurance Cost(3):	19,051	0.5477
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	32,279	0.9280
ROE Factor	0.020630	Amortization Rate:	13.0000%	Home Office(3):	19,323	0.5555
		Interest Only:	True	Replacement(3&4):	4,537	0.0000
		Yearly Payment:	333,163	Total FRVS PD:		10.8198

(1) 80% Capital (\$2,575,755) amortized at 13.0000 % for 20 years Interest of \$333,163 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.4516

(2) 20% ROE (\$643,939) times the ROE factor (0.020630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3370

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.5630	46.5630	2.1125	44.4505
Direct Care	72.7024	72.7024	3.2985	69.4039
Indirect Care	45.9695	45.9695	2.0856	43.8839
Property	13.6500	10.8198	0.4909	10.3289
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.4629
Supplemental Rate				8.1814
Totals	178.8849	176.0547	7.9875	195.7115

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 7/31/2015

0 019282-00 - 2016/09

195.71

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1980/01	1,608,640	0.00	6.1657	3.0000	3.1657	120	64.59	1,608,640	2,620,920	
1980/07		0.10	6.9764	3.0000	3.9764	120	64.59	1,613,466	2,720,760	
1981/01		0.10	7.8004	3.0000	4.8004	120	55.00	1,618,306	2,824,800	
1981/07		0.20	7.3892	3.0000	4.3892	120	55.00	1,628,016	2,897,880	
1982/01	1,539	0.20	7.0652	3.0000	4.0652	120	66.00	1,639,323	2,975,520	
1982/07		0.30	6.3629	3.0000	3.3629	120	66.00	1,654,077	3,043,800	
1983/04	525	0.30	5.9917	3.0000	2.9917	120	64.29	1,669,489	3,123,840	
1983/07		0.40	6.9495	3.0000	3.9495	120	64.29	1,689,523	3,247,440	
1984/01		0.40	5.2447	3.0000	2.2447	120	63.69	1,709,797	3,289,560	
1984/07		0.50	4.1626	3.0000	1.1626	120	63.69	1,735,444	3,352,680	
1985/01	1,228	0.50	2.3097	2.3097		120	56.71	1,756,715	3,391,080	
1985/10		0.60	0.8522	0.8522		120	56.71	1,765,697	3,420,000	
1986/01		0.60	0.8299	0.8299		120	56.71	1,774,488	3,448,440	
1986/07		0.70	0.2974	0.2974		120	52.32	1,778,002	3,441,840	
1987/01		0.70	1.0091	1.0091		120	52.36	1,789,959	3,503,400	
1987/07		0.80	0.9007	0.9007		120	52.36	1,802,238	3,530,760	
1988/01		0.80	0.9007	0.9007		120	52.36	1,814,602	3,559,440	
1988/07	13,607	0.90	0.5899	0.5899		120	59.71	1,837,843	3,557,520	
1989/01		0.90	0.5899	0.5899		120	59.18	1,847,600	3,578,520	
1989/07		1.00	0.5899	0.5899		120	59.18	1,858,499	3,602,760	
1990/01		1.00	0.5899	0.5899		120	59.18	1,869,462	3,620,880	
1990/07		1.00	0.5899	0.5899		120	52.38	1,879,965	3,642,240	
1991/01		1.00	0.5899	0.5899		120	51.75	1,890,400	3,663,600	
1991/07		1.00	1.4932	1.4932		120	51.75	1,916,959	3,718,320	
1992/01		1.00	2.0117	2.0117		120	50.55	1,952,402	3,793,080	
1992/07		1.00	1.8152	1.8152		120	50.55	1,984,975	3,861,960	
1993/01		1.00	1.7710	1.7710		120	50.55	2,017,285	3,930,360	
1993/07		1.00	1.5329	1.5329		120	62.66	2,048,208	3,990,600	
1994/01		1.00	1.6983	1.6983		120	63.71	2,082,993	4,058,400	
1994/07		1.00	1.5991	1.5991		120	63.71	2,116,302	4,123,320	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1995/01	94,024	1.00	1.5812	1.5812		120	58.28	2,243,789	4,188,480	
1995/07		1.00	1.5250	1.5250		120	58.28	2,278,007	4,252,320	
1996/01		1.00	1.7228	1.7228		120	58.99	2,317,253	4,325,640	
1996/07	11,200	1.00	1.3294	1.3294		120	52.64	2,357,937	4,383,120	
1997/01		1.00	1.4109	1.4109		120	52.64	2,389,778	4,444,920	
1997/07		1.00	1.0917	1.0917		120	52.64	2,414,748	4,493,400	
1998/01		1.00	1.1663	1.1663		120	52.64	2,441,703	4,545,840	
1998/07		1.00	1.0794	1.0794		120	52.64	2,466,928	4,594,920	
1999/01		1.00	1.4499	1.4499		120	58.52	2,502,696	4,661,520	
1999/07		1.00	1.2299	1.2299		120	63.02	2,533,477	4,718,880	
2000/01		1.00	1.3356	1.3356		120	63.02	2,567,314	4,781,880	
2000/07	68,655	0.95	1.1129	1.1129		120	69.48	2,663,113	4,835,040	
2001/01		0.95	1.2976	1.2976		120	69.48	2,695,941	4,897,800	
2001/07		0.90	0.9615	0.9615		120	69.48	2,719,272	4,944,840	
2002/01		0.90	1.0301	1.0301		120	69.45	2,744,482	4,995,720	
2002/07		0.85	0.8337	0.8337		120	68.20	2,763,929	5,037,360	
2003/01		0.85	1.3271	1.3271		120	69.25	2,795,106	5,104,200	
2003/07		0.80	1.1664	1.1664		120	69.25	2,821,187	5,163,720	
2004/01		0.80	1.1103	1.1103		120	69.25	2,846,245	5,221,080	
2004/07		0.75	0.8378	0.8378		120	69.25	2,864,131	5,264,880	
2005/01		0.75	0.8595	0.8595		120	69.25	2,882,593	5,310,120	
2005/07		0.70	0.7364	0.7364		120	69.32	2,897,453	5,349,240	
2006/01		0.70	0.9068	0.9068		120	69.32	2,915,846	5,397,720	
2006/07		0.65	0.8133	0.8133		120	70.91	2,931,259	5,441,640	
2007/01		0.65	1.0133	1.0133		120	70.91	2,950,564	5,496,720	
2007/07		0.60	1.1050	1.1050		120	74.30	2,970,126	5,557,440	
2008/01		0.60	0.8556	0.8556		120	74.30	2,985,375	5,604,960	
2008/07	28,418	0.55	0.6104	0.6104		120	71.83	3,023,815	5,639,160	
2009/01		0.55	1.3268	1.3268		120	71.83	3,045,880	5,714,040	
2009/07		0.50	0.6841	0.6841		120	64.38	3,056,300	5,753,160	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/01	27,287	0.50	0.8643	0.8643		120	59.75	3,096,796	5,802,840	
2010/07	760	0.45	0.7107	0.7107		120	59.75	3,107,460	5,844,120	
2011/01		0.45	0.9198	0.9198		120	59.75	3,120,322	5,897,880	
2011/07		0.40	0.9028	0.9028		120	59.75	3,131,589	5,951,160	
2012/01		0.40	0.3865	0.3865		120	59.75	3,136,430	5,974,200	
2012/07		0.35	0.9417	0.9417		120	63.24	3,146,768	6,030,480	
2013/01		0.35	0.4901	0.4901		120	63.24	3,152,165	6,060,000	
2013/07	17,956	0.30	0.6196	0.6196		120	67.99	3,175,981	6,097,560	
2014/01		0.30	0.8564	0.8564		120	66.79	3,184,140	6,149,760	
2014/07		0.25	1.2383	1.2383		120	66.79	3,193,998	6,225,960	
2015/01		0.25	0.7571	0.7571		120	66.79	3,200,044	6,273,120	
2015/09		0.20	1.5736	1.5736		120	62.98	3,210,115	6,371,880	
2016/09		0.15	1.9890	1.9890		120	64.22	3,219,694	6,498,600	

Message Code:

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Signature HealthCARE of Jacksonville

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2061 HYDE PARK RD	8/1/2014-7/31/2015	Number of Beds: 180	Superior: 0
JACKSONVILLE, FL 32210	Days in CR 365	Maximum: 65,700	Standard: 366
County: Duval [16]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 50,272	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,631	Inflation
Current Class North Large	Initial CR? False	Medicaid: 39,825	FY Index: 1.36305434
Class at 1/94: North Large	Medicaid Utilization	79.21905%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	76.51750%	Cost: 1.05905862
Open Date: 07/01/1972	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1972	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 07/01/1972	Low Occupancy Adjustment Factor:	96.76940%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 262714			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,600,888	2,963,733	1,652,144	694,946		6,911,711
1a	Audit Adjustments						
2	Cost Per Diem	40.1981	74.4189	41.4851	17.4500		173.5521
3	Cost Per Diem Inflated	42.5721	78.1640	43.9352			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	42.5721	78.1640	43.9352	17.4500		182.1213
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	51.4857		55.4313			
7	Provider Target Rate	54.3498		58.5148			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	51.6096		59.0856			
10b	Base for line 10a	48.8899		55.9720			
11	Lesser of 5,7,8,10, 10a	42.5721	78.1640	43.9352	13.6500		178.3213
12/13	Medicaid Adjustment Rate		2.5694	1.4442			
14	Prospective Per Diem 11	42.5721	80.7334	45.3794	13.6500		182.3349
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	04/01/1993	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1972/07	Type:	Fixed	80% Capital(1):	4,200,536	9.1886
Indexed Asset Value	5,250,670	<60% of Base:	True	20% ROE(2):	1,050,134	0.3664
FRVS Base Asset:	2,853,841	Interest Rate:	0.0000%	Insurance Cost(3):	30,365	0.6040
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	53,818	1.0705
ROE Factor	0.020630	Amortization Rate:	13.0000%	Home Office(3):	27,810	0.5532
		Interest Only:	True	Replacement(3&4):	210,420	0.0000
		Yearly Payment:	543,321	Total FRVS PD:		11.7827

(1) 80% Capital (\$4,200,536) amortized at 13.0000 % for 20 years Interest of \$543,321 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$9.1886

(2) 20% ROE (\$1,050,134) times the ROE factor (0.020630) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.3664

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.5721	42.5721	1.9315	40.6406
Direct Care	80.7334	80.7334	3.6628	77.0706
Indirect Care	45.3794	45.3794	2.0588	43.3206
Property	13.6500	11.7827	0.5346	11.2481
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5646
Supplemental Rate				8.1814
Totals	182.3349	180.4676	8.1877	202.0259

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1972/07	1,117,697	0.00	4.9326	3.0000	1.9326	180	100.00	1,117,697	2,015,100	
1973/01		0.10	7.0835	3.0000	4.0835	180	100.00	1,121,050	2,118,960	
1973/07	28,434	0.10	9.7399	3.0000	6.7399	180	100.00	1,152,847	2,238,840	
1974/01		0.20	11.9670	3.0000	8.9670	180	100.00	1,159,764	2,355,840	
1974/07		0.20	12.0707	3.0000	9.0707	180	100.00	1,166,723	2,428,920	
1975/01		0.30	12.1612	3.0000	9.1612	180	100.00	1,177,224	2,503,980	
1975/07		0.30	13.2246	3.0000	10.2246	180	100.00	1,187,819	2,605,860	
1976/01	23,178	0.40	14.2691	3.0000	11.2691	180	100.00	1,225,251	2,711,160	
1976/07		0.40	14.7543	3.0000	11.7543	180	100.00	1,239,954	2,805,660	
1977/01		0.50	15.5049	3.0000	12.5049	180	100.00	1,258,553	2,910,960	
1977/07		0.50	17.5625	3.0000	14.5625	180	100.00	1,277,431	3,058,020	
1978/01		0.60	19.3022	3.0000	16.3022	180	100.00	1,300,425	3,203,100	
1978/07	69,429	0.60	21.8416	3.0000	18.8416	180	100.00	1,393,262	3,380,400	
1979/01	69,428	0.70	23.9689	3.0000	20.9689	180	94.10	1,491,949	3,553,740	
1979/07	1,139	0.70	25.1671	3.0000	22.1671	180	94.10	1,524,419	3,702,960	
1980/01	449,797	0.80	28.3328	3.0000	25.3328	180	94.10	2,010,802	3,931,380	
1980/07	15,938	0.80	29.1435	3.0000	26.1435	180	94.10	2,074,999	4,081,140	
1981/01	15,937	0.90	29.9675	3.0000	26.9675	180	94.10	2,146,961	4,237,200	
1981/07	8,994	0.90	29.5563	3.0000	26.5563	180	88.81	2,213,923	4,346,820	
1982/01	8,994	1.00	29.2323	3.0000	26.2323	180	95.56	2,289,335	4,463,280	
1982/07	992	1.00	28.5300	3.0000	25.5300	180	95.56	2,359,007	4,565,700	
1983/04	991	1.00	28.1588	3.0000	25.1588	180	93.96	2,430,768	4,685,760	
1983/07	8,870	1.00	29.1166	3.0000	26.1166	180	93.96	2,512,561	4,871,160	
1984/01	8,870	1.00	27.4118	3.0000	24.4118	180	91.13	2,596,808	4,934,340	
1984/07	5,617	1.00	26.3297	3.0000	23.3297	180	91.13	2,680,329	5,029,020	
1985/01	5,617	1.00	24.4768	3.0000	21.4768	180	90.44	2,766,356	5,086,620	
1985/10	4,494	1.00	22.3290	3.0000	19.3290	180	90.44	2,853,841	5,130,000	
1986/01		1.00	20.1589	3.0000	17.1589	180	90.44	2,939,456	5,172,660	
1986/07		1.00	17.4563	3.0000	14.4563	180	86.35	3,027,640	5,162,760	
1987/01		1.00	15.4654	3.0000	12.4654	180	85.79	3,118,469	5,255,100	



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1987/07		1.00	13.3661	3.0000	10.3661	180	85.79	3,212,023	5,296,140	
1988/01		1.00	11.2668	3.0000	8.2668	180	86.40	3,308,384	5,339,160	
1988/07		1.00	8.8567	3.0000	5.8567	180	86.40	3,407,636	5,336,280	
1989/01		1.00	6.4466	3.0000	3.4466	180	84.19	3,509,865	5,367,780	
1989/07		1.00	4.0365	3.0000	1.0365	180	84.19	3,615,161	5,404,140	
1990/01		1.00	1.6264	1.6264		180	80.39	3,673,958	5,431,320	
1990/07		1.00	0.5899	0.5899		180	80.39	3,695,631	5,463,360	
1991/01		1.00	0.5899	0.5899		180	82.01	3,717,432	5,495,400	
1991/07		1.00	1.4932	1.4932		180	82.01	3,772,941	5,577,480	
1992/01		1.00	2.0117	2.0117		180	84.41	3,848,841	5,689,620	
1992/07		1.00	1.8152	1.8152		180	84.41	3,918,705	5,792,940	
1993/01		0.95	1.7710	1.7710		180	84.41	3,984,637	5,895,540	
1993/07		0.95	1.5329	1.5329		180	89.94	4,042,665	5,985,900	
1994/01		0.90	1.6983	1.6983		180	83.91	4,104,457	6,087,600	
1994/07		0.90	1.5991	1.5991		180	83.91	4,163,528	6,184,980	
1995/01	144,589	0.85	1.5812	1.5812		180	83.06	4,364,075	6,282,720	
1995/07		0.85	1.5250	1.5250		180	83.06	4,420,647	6,378,480	
1996/01		0.80	1.7228	1.7228		180	83.06	4,481,572	6,488,460	
1996/07		0.80	1.3294	1.3294		180	90.42	4,529,234	6,574,680	
1997/01		0.75	1.4109	1.4109		180	90.42	4,577,162	6,667,380	
1997/07		0.75	1.0917	1.0917		180	90.42	4,614,640	6,740,100	
1998/01		0.70	1.1663	1.1663		180	90.42	4,652,314	6,818,760	
1998/07		0.70	1.0794	1.0794		180	90.42	4,687,467	6,892,380	
1999/01		0.65	1.4499	1.4499		180	88.58	4,731,642	6,992,280	
1999/07		0.65	1.2299	1.2299		180	88.58	4,769,467	7,078,320	
2000/01		0.60	1.3356	1.3356		180	89.61	4,807,690	7,172,820	
2000/07		0.60	1.1129	1.1129		180	89.61	4,839,791	7,252,560	
2001/01		0.55	1.2976	1.2976		180	93.18	4,874,333	7,346,700	
2001/07		0.55	0.9615	0.9615		180	93.23	4,900,108	7,417,260	
2002/01		0.50	1.0301	1.0301		180	93.48	4,925,348	7,493,580	



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2002/07		0.50	0.8337	0.8337		180	93.48	4,945,882	7,556,040	
2003/01		0.45	1.3271	1.3271		180	81.38	4,975,419	7,656,300	
2003/07		0.45	1.1664	1.1664		180	81.38	5,001,535	7,745,580	
2004/01		0.40	1.1103	1.1103		180	81.38	5,023,747	7,831,620	
2004/07		0.40	0.8378	0.8378		180	81.38	5,040,582	7,897,320	
2005/01		0.35	0.8595	0.8595		180	81.38	5,055,744	7,965,180	
2005/07		0.35	0.7364	0.7364		180	81.06	5,068,773	8,023,860	
2006/01		0.30	0.9068	0.9068		180	81.06	5,082,560	8,096,580	
2006/07		0.30	0.8133	0.8133		180	78.09	5,094,961	8,162,460	
2007/01		0.25	1.0133	1.0133		180	78.09	5,107,867	8,245,080	
2007/07		0.25	1.1050	1.1050		180	83.26	5,121,980	8,336,160	
2008/01		0.20	0.8556	0.8556		180	83.26	5,130,744	8,407,440	
2008/07		0.20	0.6104	0.6104		180	83.26	5,137,009	8,458,740	
2009/01		0.15	1.3268	1.3268		180	83.26	5,147,232	8,571,060	
2009/07	32,623	0.15	0.6841	0.6841		180	84.16	5,185,136	8,629,740	
2010/01	48,205	0.10	0.8643	0.8643		180	84.87	5,237,821	8,704,260	
2010/07	4,345	0.10	0.7107	0.7107		180	84.87	5,245,890	8,766,180	
2011/01		0.05	0.9198	0.9198		180	84.87	5,248,303	8,846,820	
2011/07		0.05	0.9028	0.9028		180	84.87	5,250,670	8,926,740	
2012/01		0.00	0.3865	0.3865		180	84.87	5,250,670	8,961,300	
2012/07		0.00	0.9417	0.9417		180	83.32	5,250,670	9,045,720	
2013/01		0.00	0.4901	0.4901		180	83.32	5,250,670	9,090,000	
2013/07		0.00	0.6196	0.6196		180	83.07	5,250,670	9,146,340	
2014/01		0.00	0.8564	0.8564		180	85.07	5,250,670	9,224,640	
2014/07		0.00	1.2383	1.2383		180	85.07	5,250,670	9,338,940	
2015/01		0.00	0.7571	0.7571		180	85.07	5,250,670	9,409,680	
2015/09		0.00	1.5736	1.5736		180	80.48	5,250,670	9,557,820	
2016/09		0.00	1.9890	1.9890		180	79.22	5,250,670	9,747,900	

Message Code:

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Report Calculated: 6/30/2016 8:16:40 AM

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ID: 019284073120150801201403142016131649



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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202.68

Golfcrest Healthcare Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
600 NORTH 17TH AVE	8/1/2014-7/31/2015	Number of Beds: 67	Superior: 0
HOLLYWOOD, FL 33020	Days in CR 365	Maximum: 24,455	Standard: 366
County: Broward [6]	First Used : 2016/09	Max Annualized: 24,455	Conditional: 0
Region: South Area: 10	Last Used: 2016/09	Total Patient: 22,321	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,446	Inflation
Current Class South Small	Initial CR? False	Medicaid: 12,952	FY Index: 1.36305434
Class at 1/94: South Small	Medicaid Utilization	58.02607%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.27377%	Cost: 1.05905862
Open Date: 03/01/1980	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/01/1980	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 03/01/1980	Low Occupancy Adjustment Factor:	115.43121%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 262064			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	651,333	861,038	593,849	231,841		2,338,061	
1a	Audit Adjustments							
2	Cost Per Diem	50.2882	66.4792	45.8500	17.9000		180.5174	
3	Cost Per Diem Inflated	53.2582	69.8248	48.5578				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.2582	69.8248	48.5578	17.9000		189.5408	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	63.6138		75.0306				
7	Provider Target Rate	67.1525		79.2044				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	67.7957		79.2044				
10b	Base for line 10a	64.2231		75.0306				
11	Lesser of 5,7,8,10, 10a	53.2582	69.8248	48.5578	13.6500		185.2908	
12/13	Medicaid Adjustment Rate		0.6305	0.4384				
14	Prospective Per Diem 11	53.2582	70.4553	48.9962	13.6500		186.3597	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Golfcrest Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 04/01/2003		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1980/01	Type:	Fixed	80% Capital(1):	1,628,134	9.5682
Indexed Asset Value	2,035,167	<60% of Base:	True	20% ROE(2):	407,033	0.3815
FRVS Base Asset:	1,178,716	Interest Rate:	0.0000%	Insurance Cost(3):	13,062	0.5852
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	52,903	2.3701
ROE Factor	0.020630	Amortization Rate:	13.0000%	Home Office(3):	13,605	0.6095
		Interest Only:	True	Replacement(3&4):	12,640	0.0000
		Yearly Payment:	210,592	Total FRVS PD:		13.5145

(1) 80% Capital (\$1,628,134) amortized at 13.0000 % for 20 years Interest of \$210,592 divided by annual available days (24455) divided by Occup. Adj. (0.90) = \$9.5682

(2) 20% ROE (\$407,033) times the ROE factor (0.020630) divided by annual available days (24455) divided by Occup. Adj. (0.90) = \$0.3815

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 67	Effective PBS Limitation	1,909,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.2582	53.2582	2.4163	50.8419
Direct Care	70.4553	70.4553	3.1965	67.2588
Indirect Care	48.9962	48.9962	2.2229	46.7733
Property	13.6500	13.5145	0.6131	12.9014
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.7212
Supplemental Rate				8.1814
Totals	186.3597	186.2242	8.4488	202.6780

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1980/01	1,158,305	0.00	6.1657	3.0000	3.1657	67	5.55	1,158,305	1,463,347	
1980/07		0.10	6.9764	3.0000	3.9764	67	5.55	1,158,305	1,519,091	
1981/01		0.10	7.8004	3.0000	4.8004	67	9.70	1,158,305	1,577,180	
1981/07		0.20	7.3892	3.0000	4.3892	67	9.70	1,158,305	1,617,983	
1982/01	1,650	0.20	7.0652	3.0000	4.0652	67	5.55	1,159,955	1,661,332	
1982/07		0.30	6.3629	3.0000	3.3629	67	5.55	1,159,955	1,699,455	
1983/04	17,926	0.30	5.9917	3.0000	2.9917	67	9.70	1,177,881	1,744,144	
1983/07		0.40	6.9495	3.0000	3.9495	67	9.70	1,177,881	1,813,154	
1984/01	835	0.40	5.2447	3.0000	2.2447	67	14.40	1,178,716	1,836,671	
1984/07		0.50	4.1626	3.0000	1.1626	67	14.40	1,178,716	1,871,913	
1985/01		0.50	2.3097	2.3097		67	14.40	1,178,716	1,893,353	
1985/10		0.60	0.8522	0.8522		67	14.40	1,178,716	1,909,500	
1986/01		0.60	0.8299	0.8299		67	14.40	1,178,716	1,925,379	
1986/07		0.70	0.2974	0.2974		67	17.11	1,178,716	1,921,694	
1987/01		0.70	1.0091	1.0091		67	22.52	1,178,716	1,956,065	
1987/07		0.80	0.9007	0.9007		67	22.52	1,178,716	1,971,341	
1988/01		0.80	0.9007	0.9007		67	22.52	1,178,716	1,987,354	
1988/07		0.90	0.5899	0.5899		67	33.45	1,182,522	1,986,282	
1989/01	8,757	0.90	0.5899	0.5899		67	40.07	1,195,853	1,998,007	
1989/07		1.00	0.5899	0.5899		67	40.07	1,200,992	2,011,541	
1990/01		1.00	0.5899	0.5899		67	45.40	1,206,840	2,021,658	
1990/07		1.00	0.5899	0.5899		67	45.40	1,212,717	2,033,584	
1991/01		1.00	0.5899	0.5899		67	45.40	1,218,622	2,045,510	
1991/07		1.00	1.4932	1.4932		67	58.83	1,236,818	2,076,062	
1992/01		1.00	2.0117	2.0117		67	65.30	1,261,699	2,117,803	
1992/07		1.00	1.8152	1.8152		67	65.30	1,284,601	2,156,261	
1993/01	24,993	1.00	1.7710	1.7710		67	72.79	1,332,344	2,194,451	
1993/07		1.00	1.5329	1.5329		67	72.79	1,352,768	2,228,085	
1994/01		1.00	1.6983	1.6983		67	72.79	1,375,742	2,265,940	
1994/07		1.00	1.5991	1.5991		67	77.29	1,397,741	2,302,187	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1995/01		1.00	1.5812	1.5812		67	75.88	1,419,842	2,338,568	
1995/07		1.00	1.5250	1.5250		67	75.88	1,441,495	2,374,212	
1996/01		1.00	1.7228	1.7228		67	75.88	1,466,329	2,415,149	
1996/07	10,990	1.00	1.3294	1.3294		67	70.43	1,477,319	2,447,242	5
1997/01		1.00	1.4109	1.4109		67	70.43	1,517,931	2,481,747	
1997/07		1.00	1.0917	1.0917		67	70.43	1,534,502	2,508,815	
1998/01		1.00	1.1663	1.1663		67	70.43	1,552,399	2,538,094	
1998/07		1.00	1.0794	1.0794		67	70.43	1,569,156	2,565,497	
1999/01	12,265	1.00	1.4499	1.4499		67	68.65	1,604,172	2,602,682	
1999/07		1.00	1.2299	1.2299		67	68.65	1,623,902	2,634,708	
2000/01	18,174	1.00	1.3356	1.3356		67	72.83	1,663,765	2,669,883	
2000/07	21,845	0.95	1.1129	1.1129		67	67.48	1,703,201	2,699,564	
2001/01		0.95	1.2976	1.2976		67	67.48	1,724,196	2,734,605	
2001/07		0.90	0.9615	0.9615		67	67.48	1,739,117	2,760,869	
2002/01		0.90	1.0301	1.0301		67	63.62	1,755,240	2,789,277	
2002/07		0.85	0.8337	0.8337		67	59.45	1,767,678	2,812,526	
2003/01		0.85	1.3271	1.3271		67	65.07	1,787,617	2,849,845	
2003/07		0.80	1.1664	1.1664		67	65.07	1,804,297	2,883,077	
2004/01		0.80	1.1103	1.1103		67	65.07	1,820,323	2,915,103	
2004/07		0.75	0.8378	0.8378		67	65.07	1,831,762	2,939,558	
2005/01		0.75	0.8595	0.8595		67	65.07	1,843,570	2,964,817	
2005/07		0.70	0.7364	0.7364		67	66.17	1,853,074	2,986,659	
2006/01		0.70	0.9068	0.9068		67	66.17	1,864,837	3,013,727	
2006/07		0.65	0.8133	0.8133		67	66.81	1,874,695	3,038,249	
2007/01		0.65	1.0133	1.0133		67	66.81	1,887,042	3,069,002	
2007/07		0.60	1.1050	1.1050		67	62.67	1,899,553	3,102,904	
2008/01		0.60	0.8556	0.8556		67	62.67	1,909,305	3,129,436	
2008/07		0.55	0.6104	0.6104		67	66.25	1,915,715	3,148,531	
2009/01		0.55	1.3268	1.3268		67	66.25	1,929,694	3,190,339	
2009/07	24,325	0.50	0.6841	0.6841		67	65.03	1,960,620	3,212,181	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/01		0.50	0.8643	0.8643		67	67.86	1,969,094	3,239,919	
2010/07		0.45	0.7107	0.7107		67	67.86	1,975,391	3,262,967	
2011/01		0.45	0.9198	0.9198		67	67.86	1,983,567	3,292,983	
2011/07		0.40	0.9028	0.9028		67	67.86	1,990,730	3,322,731	
2012/01		0.40	0.3865	0.3865		67	67.86	1,993,808	3,335,595	
2012/07		0.35	0.9417	0.9417		67	59.52	2,000,380	3,367,018	
2013/01		0.35	0.4901	0.4901		67	59.52	2,003,811	3,383,500	
2013/07		0.30	0.6196	0.6196		67	55.60	2,007,536	3,404,471	
2014/01		0.30	0.8564	0.8564		67	55.60	2,012,693	3,433,616	
2014/07		0.25	1.2383	1.2383		67	59.49	2,018,924	3,476,161	
2015/01		0.25	0.7571	0.7571		67	60.45	2,022,746	3,502,492	
2015/09		0.20	1.5736	1.5736		67	60.45	2,029,112	3,557,633	
2016/09		0.15	1.9890	1.9890		67	58.03	2,035,167	3,628,385	

Message Code:

5 Uncorrected Licensure Deficiency

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216.56

Coastal Health and Rehabilitation Center

Type of Cost Report: Prospective with Interim Component Type of Cost: Actual with Interim Component Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
820 N CLYDE MORRIS BLVD	1/1/2014-6/30/2014	Number of Beds: 120	Superior: 0
DAYTONA BEACH, FL 32117	Days in CR 181	Maximum: 21,720	Standard: 366
County: Volusia [64]	First Used : 2015/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 21,338	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,122	Inflation
Current Class North Large	Initial CR? False	Medicaid: 16,943	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	79.40294%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	98.24125%	Cost: 1.08180716
Open Date: 02/05/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/05/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 02/06/1987	Low Occupancy Adjustment Factor:	124.24278%	DC Sem Index: 1.30450000
Med # Active Date: 01/10/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 283134	Interim Component Effective Date:	08/01/2015	PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	724,406	1,198,058	872,339	440,687		3,235,490	
1a	Audit Adjustments							
2	Cost Per Diem	42.7555	70.7111	51.4867	26.0100		190.9633	
3	Cost Per Diem Inflated	46.2532	75.2694	55.6987				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.2532	75.2694	55.6987	26.0100		203.2313	
5a	Interim Adjustment	4.1679						
5b	Interim Adjusted Per Diem	50.4211						
6	Prior Semester: Provider Target Base	52.9302		75.6935				
7	Provider Target Rate	55.8746		79.9042				
7a	Interim Adjustment	4.1679						
7b	Interim Adjusted Target Rate	60.0425						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	56.9790		66.6627				
10b	Base for line 10a	50.0281		63.1498				
11	Lesser of 5,7,8,10, 10a	50.4211	75.2694	55.6987	13.6500		195.0392	
12/13	Medicaid Adjustment Rate		2.4898	1.8424				
14	Prospective Per Diem 11	50.4211	77.7592	57.5411	13.6500		199.3714	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Coastal Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/19/2004		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1987/01	Type:	None	80% Capital(1):	4,571,370	6.0079
Indexed Asset Value	5,714,212	<60% of Base:	True	20% ROE(2):	1,142,842	0.6764
FRVS Base Asset:	2,020,491	Interest Rate:	5.2500%	Insurance Cost(3):	16,412	0.7691
Occup Adj Factor	0.9000	Chase Rate:	5.2500%	Taxes Cost(3):	22,877	1.0721
ROE Factor	0.023330	Amortization Rate:	5.2500%	Home Office(3):	18,846	0.8832
		Interest Only:	True	Replacement(3&4):	24,327	0.0000
		Yearly Payment:	236,831	Total FRVS PD:		9.4087

(1) 80% Capital (\$4,571,370) amortized at 5.2500 % for 20 years Interest of \$236,831 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$6.0079

(2) 20% ROE (\$1,142,842) times the ROE factor (0.023330) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6764

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1986	Current RS PBS:	28,682
Comparison Bed	84	Effective PBS Limitation	54,155
			2,409,288

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.4211	50.4211	2.2876	48.1335
Direct Care	77.7592	77.7592	3.5279	74.2313
Indirect Care	57.5411	57.5411	2.6106	54.9305
Property	13.6500	9.4087	0.4269	8.9818
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.0968
Supplemental Rate				8.1814
Totals	199.3714	195.1301	8.8530	216.5553

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/01	2,020,491	0.00	1.0091	1.0091		84	67.82	2,020,491	2,452,380	
1987/07		0.10	0.9007	0.9007		84	67.82	2,022,311	2,471,532	
1988/01		0.10	0.9007	0.9007		84	67.82	2,024,133	2,491,608	
1988/07		0.20	0.5899	0.5899		84	67.82	2,026,521	2,490,264	
1989/01		0.20	0.5899	0.5899		84	67.82	2,028,912	2,504,964	
1989/07		0.30	0.5899	0.5899		84	76.68	2,032,503	2,521,932	
1990/01		0.30	0.5899	0.5899		84	76.68	2,036,101	2,534,616	
1990/07		0.40	0.5899	0.5899		84	77.17	2,040,906	2,549,568	
1991/01		0.40	0.5899	0.5899		84	72.02	2,045,723	2,564,520	
1991/07		0.50	1.4932	1.4932		84	72.02	2,060,996	2,602,824	
1992/01	717,139	0.50	2.0117	2.0117		120	65.73	2,798,867	3,793,080	
1992/07		0.60	1.8152	1.8152		120	65.73	2,829,349	3,861,960	
1993/01	25,134	0.60	1.7710	1.7710		120	72.66	2,884,548	3,930,360	
1993/07		0.70	1.5329	1.5329		120	72.66	2,915,499	3,990,600	
1994/01		0.70	1.6983	1.6983		120	72.57	2,950,158	4,058,400	
1994/07		0.80	1.5991	1.5991		120	72.57	2,987,899	4,123,320	
1995/01		0.80	1.5812	1.5812		120	79.62	3,025,696	4,188,480	
1995/07		0.90	1.5250	1.5250		120	79.62	3,067,224	4,252,320	
1996/01		0.90	1.7228	1.7228		120	73.42	3,114,781	4,325,640	
1996/07		1.00	1.3294	1.3294		120	73.42	3,156,189	4,383,120	
1997/01		1.00	1.4109	1.4109		120	76.63	3,200,720	4,444,920	
1997/07		1.00	1.0917	1.0917		120	76.63	3,235,662	4,493,400	
1998/01	8,577	1.00	1.1663	1.1663		120	83.50	3,281,977	4,545,840	
1998/07	26,474	1.00	1.0794	1.0794		120	83.50	3,343,877	4,594,920	
1999/01	1,479	1.00	1.4499	1.4499		120	83.50	3,393,839	4,661,520	
1999/07	920	1.00	1.2299	1.2299		120	83.50	3,436,500	4,718,880	
2000/01		1.00	1.3356	1.3356		120	83.50	3,482,398	4,781,880	
2000/07		1.00	1.1129	1.1129		120	83.50	3,521,154	4,835,040	
2001/01	752,264	1.00	1.2976	1.2976		120	91.03	4,319,108	4,897,800	
2001/07		1.00	0.9615	0.9615		120	91.03	4,360,636	4,944,840	



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216.56

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/01		1.00	1.0301	1.0301		120	77.26	4,405,555	4,995,720	
2002/07		1.00	0.8337	0.8337		120	77.26	4,442,284	5,037,360	
2003/01	108,979	1.00	1.3271	1.3271		120	73.53	4,610,217	5,104,200	
2003/07		1.00	1.1664	1.1664		120	73.53	4,610,217	5,163,720	5
2004/01		1.00	1.1103	1.1103		120	69.12	4,715,775	5,221,080	
2004/07		1.00	0.8378	0.8378		120	69.12	4,755,284	5,264,880	
2005/01		1.00	0.8595	0.8595		120	80.36	4,796,156	5,310,120	
2005/07		1.00	0.7364	0.7364		120	80.36	4,831,475	5,349,240	
2006/01		1.00	0.9068	0.9068		120	80.36	4,875,287	5,397,720	
2006/07		1.00	0.8133	0.8133		120	80.36	4,914,938	5,441,640	
2007/01		1.00	1.0133	1.0133		120	80.36	4,964,741	5,496,720	
2007/07		0.95	1.1050	1.1050		120	79.35	5,016,861	5,557,440	
2008/01		0.95	0.8556	0.8556		120	79.35	5,057,638	5,604,960	
2008/07		0.90	0.6104	0.6104		120	79.35	5,085,425	5,639,160	
2009/01		0.90	1.3268	1.3268		120	85.39	5,146,150	5,714,040	
2009/07		0.85	0.6841	0.6841		120	85.39	5,176,075	5,753,160	
2010/01	64,103	0.85	0.8643	0.8643		120	85.16	5,278,207	5,802,840	
2010/07		0.80	0.7107	0.7107		120	85.16	5,308,219	5,844,120	
2011/01		0.80	0.9198	0.9198		120	85.16	5,347,277	5,897,880	
2011/07		0.75	0.9028	0.9028		120	85.16	5,383,483	5,951,160	
2012/01		0.75	0.3865	0.3865		120	85.16	5,399,090	5,974,200	
2012/07		0.70	0.9417	0.9417		120	85.16	5,434,681	6,030,480	
2013/01	36,723	0.70	0.4901	0.4901		120	82.70	5,490,050	6,060,000	
2013/07		0.65	0.6196	0.6196		120	82.70	5,512,158	6,097,560	
2014/01		0.65	0.8564	0.8564		120	78.80	5,542,844	6,149,760	
2014/07		0.60	1.2383	1.2383		120	78.80	5,584,027	6,225,960	
2015/01		0.60	0.7571	0.7571		120	79.40	5,609,395	6,273,120	
2015/09		0.55	1.5736	1.5736		120	79.40	5,657,944	6,371,880	
2016/09		0.50	1.9890	1.9890		120	79.40	5,714,212	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency



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Carlton Shores Health and Rehab Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1350 S NOVA RD	9/1/2014-12/31/2015	Number of Beds: 114	Superior: 0
DAYTONA BEACH, FL 32114	Days in CR 487	Maximum: 55,518	Standard: 335
County: Volusia [64]	First Used : 2016/09	Max Annualized: 41,610	Conditional: 31
Region: North Area: 4	Last Used: 2016/09	Total Patient: 51,720	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 13,555	Inflation
Current Class North Large	Initial CR? False	Medicaid: 21,364	FY Index: 1.37302921
Class at 1/94: North Large	Medicaid Utilization	41.30704%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.15898%	Cost: 1.05136470
Open Date: 02/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24849500
Entered Medicaid 07/01/1987	Low Occupancy Adjustment Factor:	117.81538%	DC Sem Index: 1.30450000
Med # Active Date: 05/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04485801
Previous Med # 223905			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,372,358	2,078,540	1,248,730	537,732	22,453	5,259,813	
1a	Audit Adjustments							
2	Cost Per Diem	64.2369	97.2917	58.4502	25.1700	1.0510	246.1998	
3	Cost Per Diem Inflated	67.5364	101.6560	61.4525				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	67.5364	101.6560	61.4525	25.1700	1.0510	256.8659	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	92.5020		92.9410				
7	Provider Target Rate	97.6477		98.1111				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	66.0069		78.2020				
10b	Base for line 10a	62.5286		74.0810				
11	Lesser of 5,7,8,10, 10a	54.8223	101.4900	61.4525	13.6500	1.0510	232.4658	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	54.8223	101.4900	61.4525	13.6500	1.0510	232.4658	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Carlton Shores Health and Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Variable	80% Capital(1):	3,707,797	8.0060
Indexed Asset Value	4,634,746	<60% of Base:	False	20% ROE(2):	926,949	0.5087
FRVS Base Asset:	813,756	Interest Rate:	5.2500%	Insurance Cost(3):	85,223	1.6478
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	103,610	2.0033
ROE Factor	0.020550	Amortization Rate:	5.2500%	Home Office(3):	34,090	0.6591
		Interest Only:	False	Replacement(3&4):	287,264	0.0000
		Yearly Payment:	299,817	Total FRVS PD:		12.8249

(1) 80% Capital (\$3,707,797) amortized at 5.2500 % for 20 years Principal & Interest of \$299,817 divided by annual available days (41610) divided by Occup. Adj. (0.90) = \$8.0060

(2) 20% ROE (\$926,949) times the ROE factor (0.020550) divided by annual available days (41610) divided by Occup. Adj. (0.90) = \$0.5087

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	25,365
Comparison Date: 07/01/1982	Current RS PBS:	54,155
Comparison Bed 55	Effective PBS Limitation	1,395,075

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	101.4900	101.4900	4.6046	96.8854
Indirect Care	61.4525	61.4525	2.7881	58.6644
Property	13.6500	12.8249	0.5819	12.2430
ROE	1.0510	1.0465	0.0475	0.9990
ROE Adjustment	-1.0465	-1.0465	-0.0475	-0.9990
Quality Assess-Medicaid Share				13.7393
Supplemental Rate				8.1814
Totals	231.4193	230.5897	10.4619	242.0485

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/04	813,756	0.00	2.6288	2.6288		55		813,756	1,431,760	
1983/07		0.10	3.9578	3.0000	0.9578	55		813,756	1,488,410	
1984/01		0.10	2.2530	2.2530		55		813,756	1,507,715	
1984/07		0.20	1.9179	1.9179		55		813,756	1,536,645	
1985/01		0.20	1.1471	1.1471		55		813,756	1,554,245	
1985/10		0.30	0.8522	0.8522		55		813,756	1,567,500	
1986/01		0.30	0.8299	0.8299		55		813,756	1,580,535	
1986/07		0.40	0.2974	0.2974		55		813,756	1,577,510	
1987/01		0.40	1.0091	1.0091		55		813,756	1,605,725	
1987/07		0.50	0.9007	0.9007		55	21.59	813,756	1,618,265	
1988/01		0.50	0.9007	0.9007		55	21.59	813,756	1,631,410	
1988/07		0.60	0.5899	0.5899		55	21.59	813,756	1,630,530	
1989/01		0.60	0.5899	0.5899		55	21.59	813,756	1,640,155	
1989/07		0.70	0.5899	0.5899		55	21.59	813,756	1,651,265	
1990/01		0.70	0.5899	0.5899		55	21.59	813,756	1,659,570	
1990/07		0.80	0.5899	0.5899		55	21.59	813,756	1,669,360	
1991/01		0.80	0.5899	0.5899		55	31.04	815,923	1,679,150	
1991/07		0.90	1.4932	1.4932		55	31.04	822,111	1,704,230	
1992/01	10,753	0.90	2.0117	2.0117		55	31.04	841,264	1,738,495	
1992/07		1.00	1.8152	1.8152		55	53.20	856,035	1,770,065	
1993/01		1.00	1.7710	1.7710		55	61.63	871,195	1,801,415	
1993/07		1.00	1.5329	1.5329		55	61.63	884,550	1,829,025	
1994/01	61,005	1.00	1.6983	1.6983		55	65.67	960,577	1,860,100	
1994/07		1.00	1.5991	1.5991		55	65.67	975,938	1,889,855	
1995/01	986,338	1.00	1.5812	1.5812		84	61.96	1,977,708	2,931,936	
1995/07		1.00	1.5250	1.5250		84	61.96	2,007,868	2,976,624	
1996/01	283,296	1.00	1.7228	1.7228		84	54.16	2,325,227	3,027,948	
1996/07		1.00	1.3294	1.3294		84	54.16	2,355,666	3,068,184	
1997/01		1.00	1.4109	1.4109		84	54.16	2,388,394	3,111,444	
1997/07		1.00	1.0917	1.0917		84	61.22	2,414,468	3,145,380	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01	67,343	1.00	1.1663	1.1663		84	61.86	2,509,971	3,182,088	
1998/07		1.00	1.0794	1.0794		84	61.86	2,537,064	3,216,444	
1999/01		1.00	1.4499	1.4499		84	61.86	2,573,849	3,263,064	
1999/07		1.00	1.2299	1.2299		84	61.86	2,605,505	3,303,216	
2000/01		1.00	1.3356	1.3356		84	61.86	2,640,304	3,347,316	
2000/07		1.00	1.1129	1.1129		84	61.86	2,669,688	3,384,528	
2001/01		1.00	1.2976	1.2976		84	60.01	2,669,688	3,428,460	5
2001/07		1.00	0.9615	0.9615		84	60.01	2,730,332	3,461,388	
2002/01		1.00	1.0301	1.0301		84	70.76	2,758,457	3,497,004	
2002/07		1.00	0.8337	0.8337		84	70.76	2,781,454	3,526,152	
2003/01	15,518	1.00	1.3271	1.3271		84	60.21	2,833,885	3,572,940	
2003/07		0.95	1.1664	1.1664		84	60.21	2,865,287	3,614,604	
2004/01		0.95	1.1103	1.1103		84	50.97	2,893,296	3,654,756	
2004/07		0.90	0.8378	0.8378		84	50.97	2,913,513	3,685,416	
2005/01		0.90	0.8595	0.8595		84	51.06	2,934,437	3,717,084	
2005/07		0.85	0.7364	0.7364		84	51.06	2,951,488	3,744,468	
2006/01	13,095	0.85	0.9068	0.9068		84	58.44	2,987,333	3,778,404	
2006/07		0.80	0.8133	0.8133		84	58.44	3,006,769	3,809,148	
2007/01	75,978	0.80	1.0133	1.0133		84	50.08	3,104,940	3,847,704	
2007/07		0.75	1.1050	1.1050		84	50.08	3,128,372	3,890,208	
2008/01		0.75	0.8556	0.8556		84	43.82	3,144,366	3,923,472	
2008/07		0.70	0.6104	0.6104		84	43.82	3,155,071	3,947,412	
2009/01	68,824	0.70	1.3268	1.3268		84	45.56	3,248,170	3,999,828	
2009/07		0.65	0.6841	0.6841		84	45.56	3,260,135	4,027,212	
2010/01	56,230	0.65	0.8643	0.8643		84	54.13	3,334,391	4,061,988	
2010/07	23,340	0.60	0.7107	0.7107		84	54.13	3,371,724	4,090,884	
2011/01		0.60	0.9198	0.9198		84	54.13	3,390,038	4,128,516	
2011/07		0.55	0.9028	0.9028		84	54.13	3,406,603	4,165,812	
2012/01		0.55	0.3865	0.3865		84	54.13	3,413,731	4,181,940	
2012/07		0.50	0.9417	0.9417		84	54.13	3,429,552	4,221,336	



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242.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01	133,115	0.50	0.4901	0.4901		84	48.22	3,570,037	4,242,000	
2013/07		0.45	0.6196	0.6196		84	48.22	3,578,763	4,268,292	
2014/01	743,895	0.45	0.8564	0.8564		99	37.37	4,332,029	5,073,552	
2014/07	101,814	0.40	1.2383	1.2383		99	36.77	4,448,188	5,136,417	
2015/01		0.40	0.7571	0.7571		99	36.77	4,457,193	5,175,324	
2015/09	55,784	0.35	1.5736	1.5736		114	37.97	4,529,926	6,053,286	
2016/09	84,518	0.30	1.9890	1.9890		114	41.31	4,634,746	6,173,670	

Message Code:

5 Uncorrected Licensure Deficiency

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 022138123120150901201404292016141227



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212.65

Blountstown Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
16690 SW CHIPOLA RD	1/1/2014-12/31/2014	Number of Beds: 96	Superior: 0
BLOUNTSTOWN, FL 32424	Days in CR 365	Maximum: 35,040	Standard: 366
County: Calhoun [7]	First Used : 2016/09	Max Annualized: 35,040	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 30,410	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,865	Inflation
Current Class North Small	Initial CR? False	Medicaid: 21,709	FY Index: 1.34193004
Class at 1/94: North Small	Medicaid Utilization	71.38770%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	86.78653%	Cost: 1.07573004
Open Date: 08/01/1996	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1996	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 08/01/1996	Low Occupancy Adjustment Factor:	109.75634%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 264067			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,051,950	1,618,616	925,449	616,753		4,212,768
1a	Audit Adjustments						
2	Cost Per Diem	48.4569	74.5597	42.6297	28.4100		194.0563
3	Cost Per Diem Inflated	52.1265	79.1401	45.8580			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	52.1265	79.1401	45.8580	28.4100		205.5346
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	53.4586		61.2757			
7	Provider Target Rate	56.4324		64.6843			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500		
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507			
10	Target Rate Class Ceiling	59.8766		72.7784			
10a	New Provider Target Limitation	57.5490		67.9327			
10b	Base for line 10a	54.5164		64.3529			
11	Lesser of 5,7,8,10, 10a	52.1265	79.1401	45.8580	13.6500		190.7746
12/13	Medicaid Adjustment Rate		1.9042	1.1034			
14	Prospective Per Diem 11	52.1265	81.0443	46.9614	13.6500		193.7822
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Blountstown Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/01/1996		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,991,000.00		Total Amount	Per Diem
RS to Start Calcs:	1996/07	Type:	Variable	80% Capital(1):	3,150,225	8.0775
Indexed Asset Value	3,937,781	<60% of Base:	False	20% ROE(2):	787,556	0.5671
FRVS Base Asset:	2,919,807	Interest Rate:	6.9500%	Insurance Cost(3):	17,799	0.5853
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	59,483	1.9560
ROE Factor	0.022710	Amortization Rate:	5.2500%	Home Office(3):	19,098	0.6280
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	254,731	Total FRVS PD:		11.8139

(1) 80% Capital (\$3,150,225) amortized at 5.2500 % for 20 years Principal & Interest of \$254,731 divided by annual available days (35040) divided by Occup. Adj. (0.90) = \$8.0775

(2) 20% ROE (\$787,556) times the ROE factor (0.022710) divided by annual available days (35040) divided by Occup. Adj. (0.90) = \$0.5671

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	36,047
Comparison Date: 01/01/1996	Current RS PBS:	54,155
Comparison Bed 81	Effective PBS Limitation	2,919,807

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.1265	52.1265	2.3650	49.7615
Direct Care	81.0443	81.0443	3.6769	77.3674
Indirect Care	46.9614	46.9614	2.1306	44.8308
Property	13.6500	11.8139	0.5360	11.2779
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.2320
Supplemental Rate				8.1814
Totals	193.7822	191.9461	8.7085	212.6510

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/07	3,362,906	0.00	1.3294	1.3294		81	60.49	2,919,807	2,919,807	1
1997/01	10,586	0.10	1.4109	1.4109		81	60.49	2,934,513	3,000,321	
1997/07	3,735	0.10	1.0917	1.0917		81	60.49	2,941,452	3,033,045	
1998/01		0.20	1.1663	1.1663		81	79.51	2,948,314	3,068,442	
1998/07		0.20	1.0794	1.0794		81	79.51	2,954,679	3,101,571	
1999/01		0.30	1.4499	1.4499		81	79.51	2,967,532	3,146,526	
1999/07		0.30	1.2299	1.2299		81	79.51	2,978,482	3,185,244	
2000/01		0.40	1.3356	1.3356		81	79.51	2,994,393	3,227,769	
2000/07		0.40	1.1129	1.1129		92	76.83	3,007,724	3,706,864	
2001/01		0.50	1.2976	1.2976		92	76.83	3,027,238	3,754,980	
2001/07		0.50	0.9615	0.9615		92	76.83	3,041,793	3,791,044	
2002/01		0.60	1.0301	1.0301		92	76.83	3,060,594	3,830,052	
2002/07		0.60	0.8337	0.8337		92	82.18	3,075,903	3,861,976	
2003/01		0.70	1.3271	1.3271		96	86.56	3,104,478	4,083,360	
2003/07		0.70	1.1664	1.1664		96	86.56	3,129,826	4,130,976	
2004/01		0.80	1.1103	1.1103		96	86.56	3,157,625	4,176,864	
2004/07		0.80	0.8378	0.8378		96	86.56	3,178,787	4,211,904	
2005/01		0.90	0.8595	0.8595		96	86.56	3,203,378	4,248,096	
2005/07		0.90	0.7364	0.7364		96	86.56	3,224,610	4,279,392	
2006/01		1.00	0.9068	0.9068		96	86.56	3,253,851	4,318,176	
2006/07		1.00	0.8133	0.8133		96	86.56	3,280,315	4,353,312	
2007/01		1.00	1.0133	1.0133		96	83.50	3,313,554	4,397,376	
2007/07		1.00	1.1050	1.1050		96	83.50	3,350,169	4,445,952	
2008/01		1.00	0.8556	0.8556		96	83.50	3,378,833	4,483,968	
2008/07		1.00	0.6104	0.6104		96	83.50	3,399,457	4,511,328	
2009/01		1.00	1.3268	1.3268		96	83.50	3,444,561	4,571,232	
2009/07		1.00	0.6841	0.6841		96	72.66	3,468,125	4,602,528	
2010/01		1.00	0.8643	0.8643		96	72.66	3,498,100	4,642,272	
2010/07		1.00	0.7107	0.7107		96	74.00	3,522,961	4,675,296	
2011/01		1.00	0.9198	0.9198		96	74.50	3,555,365	4,718,304	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07		1.00	0.9028	0.9028		96	74.50	3,587,463	4,760,928	
2012/01		1.00	0.3865	0.3865		96	74.50	3,601,329	4,779,360	
2012/07		1.00	0.9417	0.9417		96	74.50	3,635,243	4,824,384	
2013/01		1.00	0.4901	0.4901		96	74.50	3,653,059	4,848,000	
2013/07		1.00	0.6196	0.6196		96	74.50	3,675,693	4,878,048	
2014/01		1.00	0.8564	0.8564		96	72.72	3,707,172	4,919,808	
2014/07	19,531	1.00	1.2383	1.2383		96	74.17	3,772,609	4,980,768	
2015/01		1.00	0.7571	0.7571		96	74.17	3,801,171	5,018,496	
2015/09		1.00	1.5736	1.5736		96	74.17	3,860,986	5,097,504	
2016/09		1.00	1.9890	1.9890		96	71.39	3,937,781	5,198,880	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 022987123120140101201406302015115717



Florida Agency for Health Care Administration
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211.83

The Home Association, Inc.

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1203 E 22ND AVE	7/1/2014-6/30/2015	Number of Beds: 96	Superior: 0
TAMPA, FL 33605	Days in CR 365	Maximum: 35,040	Standard: 366
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 35,040	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 31,425	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 1,994	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 22,072	FY Index: 1.35966457
Class at 1/94: North Small	Medicaid Utilization	70.23707%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.68322%	Cost: 1.06169895
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24000000
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	113.41969%	DC Sem Index: 1.30450000
Med # Active Date: 03/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05201613
Previous Med # 201154			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,028,329	1,608,465	1,041,651	376,107		4,054,552	
1a	Audit Adjustments							
2	Cost Per Diem	46.5898	72.8736	47.1933	17.0400		183.6967	
3	Cost Per Diem Inflated	49.4643	76.6642	50.1051				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.4643	76.6642	50.1051	17.0400		193.2736	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	71.6333		68.7230				
7	Provider Target Rate	75.6181		72.5459				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500			
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674				
10	Target Rate Class Ceiling	67.5182		79.7567				
10a	New Provider Target Limitation	73.4891		78.3902				
10b	Base for line 10a	69.6165		74.2593				
11	Lesser of 5,7,8,10, 10a	49.4643	76.6642	50.1051	13.6500		189.8836	
12/13	Medicaid Adjustment Rate		1.7454	1.1407				
14	Prospective Per Diem 11	49.4643	78.4096	51.2458	13.6500		192.7697	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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The Home Association, Inc.

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	None	80% Capital(1):	1,804,386	8.5496
Indexed Asset Value	2,255,483	<60% of Base:	True	20% ROE(2):	451,097	0.2951
FRVS Base Asset:	1,040,890	Interest Rate:	0.0000%	Insurance Cost(3):	4,676	0.1488
Occup Adj Factor	0.9000	Chase Rate:	0.0000%	Taxes Cost(3):	529	0.0168
ROE Factor	0.020630	Amortization Rate:	15.0000%	Home Office(3):	26,733	0.8507
		Interest Only:	True	Replacement(3&4):	8,096	0.0000
		Yearly Payment:	269,621	Total FRVS PD:		9.8610

(1) 80% Capital (\$1,804,386) amortized at 15.0000 % for 20 years Interest of \$269,621 divided by annual available days (35040) divided by Occup. Adj. (0.90) = \$8.5496

(2) 20% ROE (\$451,097) times the ROE factor (0.020630) divided by annual available days (35040) divided by Occup. Adj. (0.90) = \$0.2951

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	96	Effective PBS Limitation	54,155
			2,736,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.4643	49.4643	2.2442	47.2201
Direct Care	78.4096	78.4096	3.5574	74.8522
Indirect Care	51.2458	51.2458	2.3250	48.9208
Property	13.6500	9.8610	0.4474	9.4136
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.2467
Supplemental Rate				8.1814
Totals	192.7697	188.9807	8.5740	211.8348

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	350,514	0.00				96	100.00	350,514	985,056	
1972/01	23,325	0.10	3.9787	3.0000	0.9787	96	100.00	374,891	1,024,224	
1972/07		0.10	5.9113	3.0000	2.9113	96	100.00	376,016	1,074,720	
1973/01		0.20	8.0622	3.0000	5.0622	96	100.00	378,272	1,130,112	
1973/07	3,623	0.20	10.7186	3.0000	7.7186	96	100.00	384,165	1,194,048	
1974/01		0.30	12.9457	3.0000	9.9457	96	100.00	387,622	1,256,448	
1974/07	10,068	0.30	13.0494	3.0000	10.0494	96	100.00	401,179	1,295,424	
1975/01		0.40	13.1399	3.0000	10.1399	96	100.00	405,993	1,335,456	
1975/07	14,690	0.40	14.2033	3.0000	11.2033	96	100.00	425,555	1,389,792	
1976/01		0.50	15.2478	3.0000	12.2478	96	100.00	431,938	1,445,952	
1976/07	31,177	0.50	15.7330	3.0000	12.7330	96	100.00	469,594	1,496,352	
1977/01		0.60	16.4836	3.0000	13.4836	96	100.00	478,047	1,552,512	
1977/07	31,172	0.60	18.5412	3.0000	15.5412	96	100.00	517,824	1,630,944	
1978/01		0.70	20.2809	3.0000	17.2809	96	100.00	528,698	1,708,320	
1978/07	27,160	0.70	22.8203	3.0000	19.8203	96	100.00	566,961	1,802,880	
1979/01	15,599	0.80	24.9476	3.0000	21.9476	96	100.00	596,167	1,895,328	
1979/07		0.80	26.1458	3.0000	23.1458	96	100.00	610,475	1,974,912	
1980/01		0.90	29.3115	3.0000	26.3115	96	83.11	626,958	2,096,736	
1980/07	86,542	0.90	30.1222	3.0000	27.1222	96	83.11	730,428	2,176,608	
1981/01		1.00	30.9462	3.0000	27.9462	96	72.56	752,341	2,259,840	
1981/07	22,659	1.00	30.5350	3.0000	27.5350	96	72.56	797,570	2,318,304	
1982/01		1.00	30.2110	3.0000	27.2110	96	85.53	821,497	2,380,416	
1982/07		1.00	29.5087	3.0000	26.5087	96	100.00	846,142	2,435,040	
1983/04		1.00	29.1375	3.0000	26.1375	96	100.00	871,526	2,499,072	
1983/07	13,347	1.00	30.0953	3.0000	27.0953	96	85.10	911,019	2,597,952	
1984/01		1.00	28.3905	3.0000	25.3905	96	86.36	938,350	2,631,648	
1984/07	4,317	1.00	27.3084	3.0000	24.3084	96	85.10	970,818	2,682,144	
1985/01	10,630	1.00	25.4555	3.0000	22.4555	96	85.10	1,010,573	2,712,864	
1985/10		1.00	23.3077	3.0000	20.3077	96	86.35	1,040,890	2,736,000	
1986/01		1.00	21.1376	3.0000	18.1376	96	86.35	1,072,117	2,758,752	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07		1.00	18.4350	3.0000	15.4350	96	82.74	1,104,281	2,753,472	
1987/01		1.00	16.4441	3.0000	13.4441	96	82.74	1,137,409	2,802,720	
1987/07		1.00	14.3448	3.0000	11.3448	96	86.80	1,171,531	2,824,608	
1988/01		1.00	12.2455	3.0000	9.2455	96	86.80	1,206,677	2,847,552	
1988/07	46,416	1.00	9.8354	3.0000	6.8354	96	80.62	1,289,293	2,846,016	
1989/01		1.00	7.4253	3.0000	4.4253	96	80.62	1,327,972	2,862,816	
1989/07		1.00	5.0152	3.0000	2.0152	96	75.01	1,367,811	2,882,208	
1990/01		1.00	2.6051	2.6051		96	75.01	1,403,444	2,896,704	
1990/07		1.00	0.5899	0.5899		96	70.77	1,411,723	2,913,792	
1991/01		1.00	0.5899	0.5899		96	70.77	1,411,723	2,930,880	5
1991/07		1.00	1.4932	1.4932		96	70.77	1,420,051	2,974,656	5
1992/01	44,789	0.95	2.0117	2.0117		96	69.04	1,513,588	3,034,464	
1992/07		0.95	1.8152	1.8152		96	69.61	1,539,688	3,089,568	
1993/01		0.90	1.7710	1.7710		96	69.61	1,564,229	3,144,288	
1993/07		0.90	1.5329	1.5329		96	72.22	1,585,809	3,192,480	
1994/01		0.85	1.6983	1.6983		96	72.22	1,608,702	3,246,720	
1994/07	20,362	0.85	1.5991	1.5991		96	80.22	1,650,929	3,298,656	
1995/01		0.80	1.5812	1.5812		96	80.22	1,671,813	3,350,784	
1995/07		0.80	1.5250	1.5250		96	83.50	1,692,209	3,401,856	
1996/01		0.75	1.7228	1.7228		96	83.50	1,714,074	3,460,512	
1996/07	58,006	0.75	1.3294	1.3294		96	88.94	1,789,171	3,506,496	
1997/01		0.70	1.4109	1.4109		96	88.94	1,806,841	3,555,936	
1997/07	67,155	0.70	1.0917	1.0917		96	87.51	1,887,804	3,594,720	
1998/01		0.65	1.1663	1.1663		96	87.51	1,902,115	3,636,672	
1998/07	25,934	0.65	1.0794	1.0794		96	83.28	1,941,394	3,675,936	
1999/01		0.60	1.4499	1.4499		96	83.28	1,958,282	3,729,216	
1999/07		0.60	1.2299	1.2299		96	88.20	1,958,282	3,775,104	5
2000/01		0.55	1.3356	1.3356		96	88.20	1,987,224	3,825,504	
2000/07	35,336	0.55	1.1129	1.1129		96	90.12	2,034,724	3,868,032	
2001/01		0.50	1.2976	1.2976		96	90.12	2,047,925	3,918,240	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07	24,529	0.50	0.9615	0.9615		96	84.86	2,082,300	3,955,872	
2002/01		0.45	1.0301	1.0301		96	84.86	2,091,951	3,996,576	
2002/07		0.45	0.8337	0.8337		96	81.06	2,099,800	4,029,888	
2003/01		0.40	1.3271	1.3271		96	81.06	2,110,946	4,083,360	
2003/07	17,634	0.40	1.1664	1.1664		96	81.60	2,138,430	4,130,976	
2004/01		0.35	1.1103	1.1103		96	81.60	2,146,740	4,176,864	
2004/07		0.35	0.8378	0.8378		96	78.89	2,153,034	4,211,904	
2005/01		0.30	0.8595	0.8595		96	78.89	2,158,587	4,248,096	
2005/07		0.30	0.7364	0.7364		96	78.89	2,163,355	4,279,392	
2006/01		0.25	0.9068	0.9068		96	82.46	2,168,259	4,318,176	
2006/07		0.25	0.8133	0.8133		96	82.46	2,172,667	4,353,312	
2007/01	28,160	0.20	1.0133	1.0133		96	75.67	2,205,231	4,397,376	
2007/07	34,142	0.20	1.1050	1.1050		96	64.25	2,244,247	4,445,952	
2008/01		0.15	0.8556	0.8556		96	64.25	2,247,126	4,483,968	
2008/07		0.15	0.6104	0.6104		96	64.25	2,249,184	4,511,328	
2009/01		0.10	1.3268	1.3268		96	68.78	2,249,184	4,571,232	5
2009/07		0.10	0.6841	0.6841		96	68.78	2,253,709	4,602,528	
2010/01		0.05	0.8643	0.8643		96	68.78	2,254,683	4,642,272	
2010/07		0.05	0.7107	0.7107		96	68.78	2,255,483	4,675,296	
2011/01		0.00	0.9198	0.9198		96	68.78	2,255,483	4,718,304	
2011/07		0.00	0.9028	0.9028		96	68.78	2,255,483	4,760,928	
2012/01		0.00	0.3865	0.3865		96	68.78	2,255,483	4,779,360	
2012/07		0.00	0.9417	0.9417		96	73.69	2,255,483	4,824,384	
2013/01		0.00	0.4901	0.4901		96	73.69	2,255,483	4,848,000	
2013/07		0.00	0.6196	0.6196		96	74.62	2,255,483	4,878,048	
2014/01		0.00	0.8564	0.8564		96	74.62	2,255,483	4,919,808	
2014/07		0.00	1.2383	1.2383		96	73.49	2,255,483	4,980,768	
2015/01		0.00	0.7571	0.7571		96	73.49	2,255,483	5,018,496	
2015/09		0.00	1.5736	1.5736		96	77.58	2,255,483	5,097,504	
2016/09		0.00	1.9890	1.9890		96	70.24	2,255,483	5,198,880	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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Okeechobee Healthcare Facility

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1646 HIGHWAY 441 N	10/1/2014-3/31/2015	Number of Beds: 180	Superior: 0
OKEECHOBEE, FL 34972	Days in CR 182	Maximum: 32,760	Standard: 366
County: Okeechobee [47]	First Used : 2015/09	Max Annualized: 65,700	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 32,000	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,232	Inflation
Current Class South Large	Initial CR? False	Medicaid: 24,411	FY Index: 1.35966457
Class at 1/94: South Large	Medicaid Utilization	76.28438%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.68010%	Cost: 1.06169895
Open Date: 12/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24000000
Entered Medicaid 12/01/1984	Low Occupancy Adjustment Factor:	123.53311%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05201613
Previous Med # 009495			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,364,094	2,409,644	1,504,141	338,336		5,616,215	
1a	Audit Adjustments							
2	Cost Per Diem	55.8803	98.7114	61.6173	13.8600		230.0690	
3	Cost Per Diem Inflated	59.3281	103.8460	65.4190				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	59.3281	103.8460	65.4190	13.8600		242.4531	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	71.6651		61.4289				
7	Provider Target Rate	75.6517		64.8461				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	58.7902	103.8460	64.8461	13.6500		241.1323	
12/13	Medicaid Adjustment Rate		3.0707	1.9175				
14	Prospective Per Diem 11	58.7902	106.9167	66.7636	13.6500		246.1205	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Okeechobee Healthcare Facility

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 03/01/2005		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	6,232,719	13.4891
Indexed Asset Value	7,790,899	<60% of Base:	False	20% ROE(2):	1,558,180	0.5326
FRVS Base Asset:	2,565,000	Interest Rate:	11.5000%	Insurance Cost(3):	56,951	1.7797
Occup Adj Factor	0.9000	Chase Rate:	10.0000%	Taxes Cost(3):	59,567	1.8615
ROE Factor	0.020210	Amortization Rate:	11.5000%	Home Office(3):	55,061	1.7207
		Interest Only:	False	Replacement(3&4):	73,968	0.0000
		Yearly Payment:	797,611	Total FRVS PD:		19.3836

(1) 80% Capital (\$6,232,719) amortized at 11.5000 % for 20 years Principal & Interest of \$797,611 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$13.4891

(2) 20% ROE (\$1,558,180) times the ROE factor (0.020210) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.5326

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	90	Effective PBS Limitation	54,155
			2,565,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	106.9167	106.9167	4.8508	102.0659
Indirect Care	66.7636	66.7636	3.0290	63.7346
Property	13.6500	19.3836	0.8794	18.5042
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.2205
Supplemental Rate				8.1814
Totals	246.1205	251.8541	11.4265	268.8295

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	3,732,442	0.00	1.9179	1.9179		90	71.32	3,732,442	2,514,510	
1985/01	49,012	0.10	1.1471	1.1471		90	71.32	3,785,735	2,543,310	
1985/10		0.10	0.8522	0.8522		90	71.32	2,565,000	2,565,000	1
1986/01		0.20	0.8299	0.8299		90	70.94	2,569,258	2,586,330	
1986/07		0.20	0.2974	0.2974		90	70.94	2,570,787	2,581,380	
1987/01		0.30	1.0091	1.0091		90	70.94	2,578,569	2,627,550	
1987/07		0.30	0.9007	0.9007		90	75.12	2,585,536	2,648,070	
1988/01		0.40	0.9007	0.9007		90	75.12	2,594,852	2,669,580	
1988/07	540,930	0.40	0.5899	0.5899		120	83.69	3,141,906	3,557,520	
1989/01		0.50	0.5899	0.5899		120	83.69	3,151,175	3,578,520	
1989/07	909,477	0.50	0.5899	0.5899		150	81.80	4,069,948	4,503,450	
1990/01	123,509	0.60	0.5899	0.5899		155	81.80	4,207,861	4,676,970	
1990/07		0.60	0.5899	0.5899		155	81.80	4,222,753	4,704,560	
1991/01		0.70	0.5899	0.5899		155	81.80	4,240,189	4,732,150	
1991/07		0.70	1.4932	1.4932		155	81.80	4,240,189	4,802,830	5
1992/01		0.80	2.0117	2.0117		155	81.80	4,353,462	4,899,395	
1992/07		0.80	1.8152	1.8152		155	81.80	4,353,462	4,988,365	5
1993/01		0.90	1.7710	1.7710		155	83.68	4,416,683	5,076,715	5
1993/07		0.90	1.5329	1.5329		155	81.93	4,548,985	5,154,525	
1994/01		1.00	1.6983	1.6983		155	81.93	4,626,240	5,242,100	
1994/07		1.00	1.5991	1.5991		155	81.93	4,700,218	5,325,955	
1995/01		1.00	1.5812	1.5812		155	79.19	4,774,538	5,410,120	
1995/07		1.00	1.5250	1.5250		155	76.43	4,847,350	5,492,580	
1996/01		1.00	1.7228	1.7228		155	76.43	4,930,860	5,587,285	
1996/07		1.00	1.3294	1.3294		155	76.43	4,996,411	5,661,530	
1997/01		1.00	1.4109	1.4109		155	75.50	5,066,905	5,741,355	
1997/07	432,564	1.00	1.0917	1.0917		167	69.48	5,554,784	6,253,315	
1998/01		1.00	1.1663	1.1663		167	69.48	5,619,569	6,326,294	
1998/07		1.00	1.0794	1.0794		167	69.48	5,680,227	6,394,597	
1999/01	37,692	1.00	1.4499	1.4499		167	71.39	5,800,277	6,487,282	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		167	71.39	5,871,615	6,567,108	
2000/01		1.00	1.3356	1.3356		167	76.78	5,950,036	6,654,783	
2000/07		1.00	1.1129	1.1129		167	76.78	6,016,254	6,728,764	
2001/01		1.00	1.2976	1.2976		167	75.94	6,094,321	6,816,105	
2001/07		1.00	0.9615	0.9615		167	78.53	6,152,918	6,881,569	
2002/01		1.00	1.0301	1.0301		167	74.48	6,216,299	6,952,377	
2002/07		1.00	0.8337	0.8337		167	74.48	6,268,124	7,010,326	
2003/01		1.00	1.3271	1.3271		173	76.69	6,351,308	7,358,555	
2003/07		1.00	1.1664	1.1664		173	76.69	6,425,390	7,444,363	
2004/01		1.00	1.1103	1.1103		173	76.69	6,496,731	7,527,057	
2004/07		1.00	0.8378	0.8378		173	75.86	6,551,161	7,590,202	
2005/01	36,712	0.95	0.8595	0.8595		173	74.94	6,641,363	7,655,423	
2005/07		0.95	0.7364	0.7364		173	74.94	6,687,826	7,711,821	
2006/01		0.90	0.9068	0.9068		173	76.21	6,742,405	7,781,713	
2006/07		0.90	0.8133	0.8133		173	76.21	6,791,759	7,845,031	
2007/01		0.85	1.0133	1.0133		173	76.21	6,850,256	7,924,438	
2007/07	31,340	0.85	1.1050	1.1050		173	79.69	6,945,940	8,011,976	
2008/01		0.80	0.8556	0.8556		173	78.34	6,993,485	8,080,484	
2008/07		0.80	0.6104	0.6104		173	78.34	7,027,634	8,129,789	
2009/01		0.75	1.3268	1.3268		173	78.34	7,097,566	8,237,741	
2009/07		0.75	0.6841	0.6841		173	75.39	7,133,984	8,294,139	
2010/01	73,491	0.70	0.8643	0.8643		180	72.76	7,250,636	8,704,260	
2010/07		0.70	0.7107	0.7107		180	72.76	7,286,708	8,766,180	
2011/01	90,125	0.65	0.9198	0.9198		180	70.74	7,420,400	8,846,820	
2011/07		0.65	0.9028	0.9028		180	70.74	7,463,943	8,926,740	
2012/01		0.60	0.3865	0.3865		180	70.74	7,481,252	8,961,300	
2012/07		0.60	0.9417	0.9417		180	66.72	7,523,521	9,045,720	
2013/01		0.55	0.4901	0.4901		180	70.23	7,543,804	9,090,000	
2013/07		0.55	0.6196	0.6196		180	70.23	7,569,513	9,146,340	
2014/01		0.50	0.8564	0.8564		180	70.23	7,601,926	9,224,640	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		180	71.39	7,648,997	9,338,940	
2015/01		0.45	0.7571	0.7571		180	71.39	7,675,057	9,409,680	
2015/09		0.45	1.5736	1.5736		180	76.28	7,729,404	9,557,820	
2016/09		0.40	1.9890	1.9890		180	76.28	7,790,899	9,747,900	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 023067033120151001201404292015144210



Florida Agency for Health Care Administration
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218.20

Key West Health & Rehabilitation

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5860 W JUNIOR COLLEGE RD	7/1/2014-6/30/2015	Number of Beds: 120	Superior: 0
KEY WEST, FL 33040	Days in CR 365	Maximum: 43,800	Standard: 366
County: Monroe [44]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 35,170	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 6,516	Inflation
Current Class South Large	Initial CR? False	Medicaid: 23,257	FY Index: 1.35966457
Class at 1/94: South Large	Medicaid Utilization	66.12738%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	80.29680%	Cost: 1.06169895
Open Date: 03/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24000000
Entered Medicaid 03/01/1984	Low Occupancy Adjustment Factor:	101.54897%	DC Sem Index: 1.30450000
Med # Active Date: 08/12/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05201613
Previous Med # 207756			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	948,039	2,101,689	991,819	514,677		4,556,224	
1a	Audit Adjustments							
2	Cost Per Diem	40.7636	90.3680	42.6460	22.1300		195.9076	
3	Cost Per Diem Inflated	43.2787	95.0686	45.2772				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.2787	95.0686	45.2772	22.1300		205.7545	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	225.3445		149.1200				
7	Provider Target Rate	237.8800		157.4153				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	63.7627		73.2544				
10b	Base for line 10a	60.4026		69.3941				
11	Lesser of 5,7,8,10, 10a	43.2787	95.0686	45.2772	13.6500		197.2745	
12/13	Medicaid Adjustment Rate		1.7249	0.8215				
14	Prospective Per Diem 11	43.2787	96.7935	46.0987	13.6500		199.8209	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Key West Health & Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/12/2010		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,591,437.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Fixed	80% Capital(1):	5,122,702	10.2915
Indexed Asset Value	6,403,378	<60% of Base:	False	20% ROE(2):	1,280,676	0.6702
FRVS Base Asset:	2,696,041	Interest Rate:	5.0000%	Insurance Cost(3):	41,918	1.1919
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	9,045	0.2572
ROE Factor	0.020630	Amortization Rate:	5.0000%	Home Office(3):	32,436	0.9223
		Interest Only:	False	Replacement(3&4):	6,470	0.0000
		Yearly Payment:	405,691	Total FRVS PD:		13.3331

- (1) 80% Capital (\$5,122,702) amortized at 5.0000 % for 20 years Principal & Interest of \$405,691 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.2915
- (2) 20% ROE (\$1,280,676) times the ROE factor (0.020630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6702
- (3) Pass-throughs: Cost divided by Total Patient Days
- (4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.2787	43.2787	1.9635	41.3152
Direct Care	96.7935	96.7935	4.3915	92.4020
Indirect Care	46.0987	46.0987	2.0915	44.0072
Property	13.6500	13.3331	0.6049	12.7282
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.5695
Supplemental Rate				8.1814
Totals	199.8209	199.5040	9.0514	218.2035

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	2,683,225	0.00	1.2952	1.2952		120	77.69	2,683,225	3,289,560	
1984/07		0.10	1.9179	1.9179		120	77.69	2,688,371	3,352,680	
1985/01		0.10	1.1471	1.1471		120	95.04	2,691,455	3,391,080	
1985/10		0.20	0.8522	0.8522		120	77.51	2,696,041	3,420,000	
1986/01		0.20	0.8299	0.8299		120	77.51	2,700,516	3,448,440	
1986/07		0.30	0.2974	0.2974		120	74.91	2,702,925	3,441,840	
1987/01		0.30	1.0091	1.0091		120	74.91	2,711,107	3,503,400	
1987/07		0.40	0.9007	0.9007		120	74.87	2,720,875	3,530,760	
1988/01		0.40	0.9007	0.9007		120	74.87	2,730,678	3,559,440	
1988/07		0.50	0.5899	0.5899		120	72.98	2,738,734	3,557,520	
1989/01		0.50	0.5899	0.5899		120	72.98	2,746,813	3,578,520	
1989/07		0.60	0.5899	0.5899		120	74.85	2,756,534	3,602,760	
1990/01		0.60	0.5899	0.5899		120	74.85	2,766,289	3,620,880	
1990/07		0.70	0.5899	0.5899		120	86.79	2,777,711	3,642,240	
1991/01		0.70	0.5899	0.5899		120	86.79	2,789,180	3,663,600	
1991/07	23,180	0.80	1.4932	1.4932		120	90.62	2,812,360	3,718,320	5
1992/01		0.80	2.0117	2.0117		120	90.62	2,845,680	3,793,080	5
1992/07		0.90	1.8152	1.8152		120	88.44	2,938,716	3,861,960	
1993/01		0.90	1.7710	1.7710		120	88.44	2,985,556	3,930,360	
1993/07		1.00	1.5329	1.5329		120	82.48	2,985,556	3,990,600	5
1994/01		1.00	1.6983	1.6983		120	82.48	3,082,803	4,058,400	
1994/07	26,468	1.00	1.5991	1.5991		120	78.83	3,158,568	4,123,320	
1995/01		1.00	1.5812	1.5812		120	78.83	3,208,511	4,188,480	
1995/07		1.00	1.5250	1.5250		120	78.83	3,257,441	4,252,320	
1996/01		1.00	1.7228	1.7228		120	78.65	3,313,560	4,325,640	
1996/07		1.00	1.3294	1.3294		120	75.89	3,357,610	4,383,120	
1997/01		1.00	1.4109	1.4109		120	75.89	3,404,983	4,444,920	
1997/07		1.00	1.0917	1.0917		120	76.83	3,404,983	4,493,400	5
1998/01		1.00	1.1663	1.1663		120	76.83	3,442,155	4,545,840	5
1998/07		1.00	1.0794	1.0794		120	76.83	3,482,301	4,594,920	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01		1.00	1.4499	1.4499		120	74.62	3,570,924	4,661,520	
1999/07		1.00	1.2299	1.2299		120	74.62	3,614,843	4,718,880	
2000/01		1.00	1.3356	1.3356		120	77.22	3,663,123	4,781,880	
2000/07		1.00	1.1129	1.1129		120	77.22	3,703,890	4,835,040	
2001/01		1.00	1.2976	1.2976		120	81.58	3,751,952	4,897,800	
2001/07		1.00	0.9615	0.9615		120	77.73	3,788,027	4,944,840	
2002/01		1.00	1.0301	1.0301		120	76.27	3,827,047	4,995,720	
2002/07		1.00	0.8337	0.8337		120	76.27	3,858,953	5,037,360	
2003/01		1.00	1.3271	1.3271		120	76.27	3,910,165	5,104,200	
2003/07		1.00	1.1664	1.1664		120	66.53	3,955,773	5,163,720	
2004/01		1.00	1.1103	1.1103		120	66.53	3,999,694	5,221,080	
2004/07		0.95	0.8378	0.8378		120	68.90	4,031,528	5,264,880	
2005/01		0.95	0.8595	0.8595		120	68.90	4,064,445	5,310,120	
2005/07		0.90	0.7364	0.7364		120	75.80	4,091,384	5,349,240	
2006/01		0.90	0.9068	0.9068		120	75.80	4,124,774	5,397,720	
2006/07		0.85	0.8133	0.8133		120	68.11	4,153,289	5,441,640	
2007/01		0.85	1.0133	1.0133		120	68.11	4,189,061	5,496,720	
2007/07		0.80	1.1050	1.1050		120	68.10	4,226,092	5,557,440	
2008/01		0.80	0.8556	0.8556		120	61.56	4,255,020	5,604,960	
2008/07		0.75	0.6104	0.6104		120	61.56	4,274,499	5,639,160	11
2009/01		0.75	0.6104	0.6104		120	78.83	4,274,499	5,714,040	11
2009/07		0.75	0.6104	0.6104		120	1.00	4,274,499	5,753,160	11
2010/01		0.75	0.6104	0.6104		120	1.00	4,274,499	5,802,840	11
2010/07	1,113,661	0.75	0.7107	0.7107		120	46.13	5,388,160	5,802,840	13
2011/01	347,029	0.75	0.9198	0.9198		120	46.13	5,766,367	5,897,880	
2011/07		0.70	0.9028	0.9028		120	46.13	5,796,933	5,951,160	
2012/01		0.70	0.3865	0.3865		120	46.13	5,810,090	5,974,200	
2012/07		0.65	0.9417	0.9417		120	46.13	5,839,918	6,030,480	
2013/01		0.65	0.4901	0.4901		120	46.13	5,855,523	6,060,000	
2013/07	310,732	0.60	0.6196	0.6196		120	50.02	6,097,560	6,097,560	8



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.60	0.8564	0.8564		120	50.02	6,126,053	6,149,760	
2014/07	103,954	0.55	1.2383	1.2383		120	65.64	6,225,960	6,225,960	8
2015/01		0.55	0.7571	0.7571		120	65.64	6,251,885	6,273,120	
2015/09	45,495	0.50	1.5736	1.5736		120	65.40	6,346,570	6,371,880	
2016/09		0.45	1.9890	1.9890		120	66.13	6,403,378	6,498,600	

Message Code:

- | | |
|----|--|
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |
| 11 | Not in Medicaid |
| 13 | Re-Entry to Medicaid and Limited to Current RS Per Bed Std |

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 024167063020150701201411032015073045



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West Broward Rehabilitation and Healthcare

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
7751 W BROWARD BLVD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
PLANTATION, FL 33324	Days in CR 365	Maximum: 43,800	Standard: 366
County: Broward [6]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 10	Last Used: 2016/09	Total Patient: 39,135	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 8,090	Inflation
Current Class South Large	Initial CR? False	Medicaid: 25,842	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	66.03296%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.34932%	Cost: 1.04651568
Open Date: 11/01/1971	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1971	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 11/01/1971	Low Occupancy Adjustment Factor:	112.99742%	DC Sem Index: 1.30450000
Med # Active Date: 06/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 002419			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,513,234	2,433,065	1,646,302	812,214		6,404,815
1a	Audit Adjustments						
2	Cost Per Diem	58.5572	94.1516	63.7064	31.4300		247.8452
3	Cost Per Diem Inflated	61.2810	97.9823	66.6697			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	61.2810	97.9823	66.6697	31.4300		257.3630
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	71.9430		74.7774			
7	Provider Target Rate	75.9451		78.9371			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	66.0481		73.9006			
10b	Base for line 10a	62.5676		70.0063			
11	Lesser of 5,7,8,10, 10a	58.7902	97.9823	66.6697	13.6500		237.0922
12/13	Medicaid Adjustment Rate		1.7673	1.2025			
14	Prospective Per Diem 11	58.7902	99.7496	67.8722	13.6500		240.0620
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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West Broward Rehabilitation and Healthcare

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	3,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Fixed	80% Capital(1):	4,670,491	15.1621
Indexed Asset Value	5,838,114	<60% of Base:	False	20% ROE(2):	1,167,623	0.5986
FRVS Base Asset:	2,206,339	Interest Rate:	13.0000%	Insurance Cost(3):	85,584	2.1869
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	72,896	1.8627
ROE Factor	0.020210	Amortization Rate:	11.5000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	56,264	0.0000
		Yearly Payment:	597,690	Total FRVS PD:		19.8103

(1) 80% Capital (\$4,670,491) amortized at 11.5000 % for 20 years Principal & Interest of \$597,690 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$15.1621

(2) 20% ROE (\$1,167,623) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5986

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	99.7496	99.7496	4.5256	95.2240
Indirect Care	67.8722	67.8722	3.0793	64.7929
Property	13.6500	19.8103	0.8988	18.9115
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7332
Supplemental Rate				8.1814
Totals	240.0620	246.2223	11.1710	262.9659

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	806,040	0.00				120	100.00	806,040	1,231,320	
1972/01	4,277	0.10	3.9787	3.0000	0.9787	120	100.00	812,735	1,280,280	
1972/07	1,184	0.10	5.9113	3.0000	2.9113	120	100.00	816,357	1,343,400	
1973/01		0.20	8.0622	3.0000	5.0622	120	100.00	821,255	1,412,640	
1973/07		0.20	10.7186	3.0000	7.7186	120	100.00	826,183	1,492,560	
1974/01	52,927	0.30	12.9457	3.0000	9.9457	120	100.00	886,546	1,570,560	
1974/07		0.30	13.0494	3.0000	10.0494	120	100.00	894,525	1,619,280	
1975/01		0.40	13.1399	3.0000	10.1399	120	100.00	905,259	1,669,320	
1975/07		0.40	14.2033	3.0000	11.2033	120	100.00	916,122	1,737,240	
1976/01	20,198	0.50	15.2478	3.0000	12.2478	120	100.00	950,062	1,807,440	
1976/07		0.50	15.7330	3.0000	12.7330	120	100.00	964,313	1,870,440	
1977/01		0.60	16.4836	3.0000	13.4836	120	100.00	981,671	1,940,640	
1977/07		0.60	18.5412	3.0000	15.5412	120	100.00	999,341	2,038,680	
1978/01	2,765	0.70	20.2809	3.0000	17.2809	120	100.00	1,023,092	2,135,400	
1978/07		0.70	22.8203	3.0000	19.8203	120	100.00	1,044,577	2,253,600	
1979/01		0.80	24.9476	3.0000	21.9476	120	100.00	1,069,647	2,369,160	
1979/07		0.80	26.1458	3.0000	23.1458	120	100.00	1,095,319	2,468,640	
1980/01	14,402	0.90	29.3115	3.0000	26.3115	120	49.89	1,136,547	2,620,920	
1980/07		0.90	30.1222	3.0000	27.1222	120	49.89	1,164,383	2,720,760	
1981/01		1.00	30.9462	3.0000	27.9462	120	50.38	1,196,380	2,824,800	
1981/07		1.00	30.5350	3.0000	27.5350	120	50.38	1,229,257	2,897,880	
1982/01		1.00	30.2110	3.0000	27.2110	120	50.37	1,263,030	2,975,520	
1982/07		1.00	29.5087	3.0000	26.5087	120	50.37	1,297,731	3,043,800	
1983/04		1.00	29.1375	3.0000	26.1375	120	46.03	1,330,313	3,123,840	
1983/07		1.00	30.0953	3.0000	27.0953	120	46.03	1,363,714	3,247,440	
1984/01		1.00	28.3905	3.0000	25.3905	120	42.79	1,395,543	3,289,560	
1984/07		1.00	27.3084	3.0000	24.3084	120	42.79	1,428,115	3,352,680	
1985/01	680,042	1.00	25.4555	3.0000	22.4555	120	42.79	2,141,489	3,391,080	
1985/10	14,868	1.00	23.3077	3.0000	20.3077	120	42.79	2,206,339	3,420,000	
1986/01		1.00	21.1376	3.0000	18.1376	120	42.79	2,257,835	3,448,440	



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1986/07		1.00	18.4350	3.0000	15.4350	120	46.16	2,314,683	3,441,840	
1987/01		1.00	16.4441	3.0000	13.4441	120	46.16	2,372,963	3,503,400	
1987/07		1.00	14.3448	3.0000	11.3448	120	46.16	2,432,710	3,530,760	
1988/01		1.00	12.2455	3.0000	9.2455	120	46.16	2,493,961	3,559,440	
1988/07		1.00	9.8354	3.0000	6.8354	120	46.16	2,556,754	3,557,520	
1989/01	436,631	1.00	7.4253	3.0000	4.4253	120	46.16	3,057,759	3,578,520	
1989/07		1.00	5.0152	3.0000	2.0152	120	46.16	3,134,748	3,602,760	
1990/01		1.00	2.6051	2.6051		120	46.16	3,203,286	3,620,880	
1990/07		1.00	0.5899	0.5899		120	58.49	3,203,286	3,642,240	5
1991/01		1.00	0.5899	0.5899		120	58.49	3,241,190	3,663,600	
1991/07		1.00	1.4932	1.4932		120	64.87	3,289,587	3,718,320	
1992/01		0.95	2.0117	2.0117		120	64.87	3,352,454	3,793,080	
1992/07		0.95	1.8152	1.8152		120	68.57	3,410,264	3,861,960	
1993/01		0.90	1.7710	1.7710		120	68.57	3,464,620	3,930,360	
1993/07		0.90	1.5329	1.5329		120	68.57	3,512,418	3,990,600	
1994/01		0.85	1.6983	1.6983		120	68.57	3,563,123	4,058,400	
1994/07		0.85	1.5991	1.5991		120	68.57	3,611,553	4,123,320	
1995/01		0.80	1.5812	1.5812		120	80.24	3,657,239	4,188,480	
1995/07		0.80	1.5250	1.5250		120	63.33	3,701,857	4,252,320	
1996/01		0.75	1.7228	1.7228		120	63.33	3,749,689	4,325,640	
1996/07		0.75	1.3294	1.3294		120	63.33	3,787,077	4,383,120	
1997/01		0.70	1.4109	1.4109		120	63.33	3,824,478	4,444,920	
1997/07		0.70	1.0917	1.0917		120	63.33	3,824,478	4,493,400	5
1998/01		0.65	1.1663	1.1663		120	63.33	3,882,920	4,545,840	
1998/07		0.65	1.0794	1.0794		120	62.82	3,910,163	4,594,920	
1999/01		0.60	1.4499	1.4499		120	62.82	3,944,178	4,661,520	
1999/07		0.60	1.2299	1.2299		120	62.82	3,973,282	4,718,880	
2000/01	364,569	0.55	1.3356	1.3356		120	72.93	4,337,851	4,781,880	5
2000/07		0.55	1.1129	1.1129		120	72.93	4,393,770	4,835,040	
2001/01		0.50	1.2976	1.2976		120	72.93	4,422,277	4,897,800	



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2001/07		0.50	0.9615	0.9615		120	72.93	4,443,539	4,944,840	
2002/01		0.45	1.0301	1.0301		120	72.93	4,464,135	4,995,720	
2002/07		0.45	0.8337	0.8337		120	72.93	4,480,884	5,037,360	
2003/01		0.40	1.3271	1.3271		120	75.59	4,504,669	5,104,200	
2003/07		0.40	1.1664	1.1664		120	75.59	4,525,688	5,163,720	
2004/01		0.35	1.1103	1.1103		120	75.59	4,543,275	5,221,080	
2004/07		0.35	0.8378	0.8378		120	72.84	4,556,596	5,264,880	
2005/01		0.30	0.8595	0.8595		120	72.84	4,568,347	5,310,120	
2005/07		0.30	0.7364	0.7364		120	61.97	4,578,438	5,349,240	
2006/01		0.25	0.9068	0.9068		120	65.72	4,588,817	5,397,720	
2006/07		0.25	0.8133	0.8133		120	65.72	4,598,146	5,441,640	
2007/01		0.20	1.0133	1.0133		120	67.06	4,607,466	5,496,720	
2007/07		0.20	1.1050	1.1050		120	67.06	4,617,648	5,557,440	
2008/01		0.15	0.8556	0.8556		120	64.08	4,623,572	5,604,960	
2008/07	41,338	0.15	0.6104	0.6104		120	64.08	4,669,145	5,639,160	
2009/01		0.10	1.3268	1.3268		120	64.08	4,675,341	5,714,040	
2009/07		0.10	0.6841	0.6841		120	64.08	4,678,539	5,753,160	
2010/01		0.05	0.8643	0.8643		120	72.87	4,680,560	5,802,840	
2010/07		0.05	0.7107	0.7107		120	72.87	4,682,222	5,844,120	
2011/01		0.00	0.9198	0.9198		120	72.87	4,682,222	5,897,880	
2011/07		0.00	0.9028	0.9028		120	72.87	4,682,222	5,951,160	
2012/01		0.00	0.3865	0.3865		120	72.87	4,682,222	5,974,200	
2012/07		0.00	0.9417	0.9417		120	72.87	4,682,222	6,030,480	
2013/01	1,155,892	0.00	0.4901	0.4901		120	70.06	5,838,114	6,060,000	
2013/07		0.00	0.6196	0.6196		120	70.06	5,838,114	6,097,560	
2014/01		0.00	0.8564	0.8564		120	69.73	5,838,114	6,149,760	
2014/07		0.00	1.2383	1.2383		120	69.73	5,838,114	6,225,960	
2015/01		0.00	0.7571	0.7571		120	67.08	5,838,114	6,273,120	
2015/09		0.00	1.5736	1.5736		120	67.08	5,838,114	6,371,880	
2016/09		0.00	1.9890	1.9890		120	66.03	5,838,114	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0032049-00 - 2016/09

249.90

Clyde E. Lassen State Veterans' Nursing Home

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Government CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4650 STATE RD 16	7/1/2014-6/30/2015	Number of Beds: 120	Superior: 0
SAINT AUGUSTINE, FL 32092	Days in CR 365	Maximum: 43,800	Standard: 366
County: St Johns [55]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 43,709	Total: 366
Control: Government	Unaudited	Medicare: 1,312	Inflation
Current Class North Large	Initial CR? False	Medicaid: 14,328	FY Index: 1.35966457
Class at 1/94: North Large	Medicaid Utilization	32.78043%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	99.79224%	Cost: 1.06169895
Open Date: 09/13/2010	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/13/2010	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24000000
Entered Medicaid 11/16/2010	Low Occupancy Adjustment Factor:	126.20427%	DC Sem Index: 1.30450000
Med # Active Date: 11/16/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05201613
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	747,533	1,871,213	1,057,066	286,703		3,962,515	
1a	Audit Adjustments							
2	Cost Per Diem	52.1729	130.5983	73.7762	20.0100		276.5574	
3	Cost Per Diem Inflated	55.3919	137.3915	78.3281				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.3919	137.3915	78.3281	20.0100		291.1215	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	170.9348		152.1667				
7	Provider Target Rate	180.4436		160.6314				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	57.4078		66.5367				
10b	Base for line 10a	54.3826		63.0304				
11	Lesser of 5,7,8,10, 10a	54.8223	101.4900	66.1467	13.6500		236.1090	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	54.8223	101.4900	66.1467	13.6500		236.1090	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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249.90

Clyde E. Lassen State Veterans' Nursing Home

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	11/16/2010	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	2010/07	Type:	None	80% Capital(1):	4,802,198	3.8941
Indexed Asset Value	6,002,748	<60% of Base:	True	20% ROE(2):	1,200,550	0.6283
FRVS Base Asset:	5,802,840	Interest Rate:	0.0000%	Insurance Cost(3):	408	0.0093
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	0	0.0000
ROE Factor	0.020630	Amortization Rate:	3.2500%	Home Office(3):	51,780	1.1847
		Interest Only:	True	Replacement(3&4):	100,141	0.0000
		Yearly Payment:	153,504	Total FRVS PD:		5.7164

(1) 80% Capital (\$4,802,198) amortized at 3.2500 % for 20 years Interest of \$153,504 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$3.8941

(2) 20% ROE (\$1,200,550) times the ROE factor (0.020630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6283

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/2010	Current RS PBS:	48,357
Comparison Bed	120	Effective PBS Limitation	54,155
			5,802,840

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	101.4900	101.4900	4.6046	96.8854
Indirect Care	66.1467	66.1467	3.0010	63.1457
Property	13.6500	5.7164	0.2594	5.4570
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.8978
Supplemental Rate				8.1814
Totals	236.1090	228.1754	10.3523	249.9023

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2015

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249.90

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/07	27,990,240	0.00	0.7107	0.7107		120	5.99	5,802,840	5,802,840	1
2011/01	6,308	0.10	0.9198	0.9198		120	5.99	5,809,148	5,897,880	
2011/07		0.10	0.9028	0.9028		120	5.99	5,809,148	5,951,160	
2012/01		0.20	0.3865	0.3865		120	5.99	5,809,148	5,974,200	
2012/07		0.20	0.9417	0.9417		120	5.99	5,809,148	6,030,480	
2013/01		0.30	0.4901	0.4901		120	5.99	5,809,148	6,060,000	
2013/07	22,635	0.30	0.6196	0.6196		120	32.10	5,838,086	6,097,560	
2014/01		0.40	0.8564	0.8564		120	32.10	5,849,759	6,149,760	
2014/07	24,110	0.40	1.2383	1.2383		120	36.82	5,893,266	6,225,960	
2015/01		0.50	0.7571	0.7571		120	32.47	5,906,438	6,273,120	
2015/09		0.50	1.5736	1.5736		120	32.47	5,933,873	6,371,880	
2016/09	26,669	0.60	1.9890	1.9890		120	32.78	6,002,748	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 032049063020150701201411232015125519



Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

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246.15

Unity Health and Rehab Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1404 NW 22ND STREET	1/1/2014-8/31/2014	Number of Beds: 294	Superior: 0
MIAMI, FL 33142	Days in CR 243	Maximum: 71,442	Standard: 366
County: Dade [13]	First Used : 2015/01	Max Annualized: 107,310	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 65,310	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,174	Inflation
Current Class South Large	Initial CR? False	Medicaid: 56,865	FY Index: 1.33689974
Class at 1/94: South Large	Medicaid Utilization	87.06936%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.41681%	Cost: 1.07977764
Open Date: 01/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 01/01/1984	Low Occupancy Adjustment Factor:	115.61211%	DC Sem Index: 1.30450000
Med # Active Date: 05/13/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 227544			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	3,023,814	5,606,798	3,238,019	578,886	18,820	12,466,337	
1a	Audit Adjustments							
2	Cost Per Diem	53.1753	98.5984	56.9422	10.1800	0.3310	219.2269	
3	Cost Per Diem Inflated	57.4175	104.8547	61.4849				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.4175	104.8547	61.4849	10.1800	0.3310	234.2681	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.1461		63.3387				
7	Provider Target Rate	62.4363		66.8621				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	57.4175	104.3884	61.4849	10.1800	0.3310	233.8018	
12/13	Medicaid Adjustment Rate		4.3533	2.5641				
14	Prospective Per Diem 11	57.4175	108.7417	64.0490	10.1800	0.3310	240.7192	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Unity Health and Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	11/01/1988	Amount:	5,562,567.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Variable	80% Capital(1):	8,730,431	11.2855
Indexed Asset Value	10,913,039	<60% of Base:	False	20% ROE(2):	2,182,608	0.5261
FRVS Base Asset:	5,044,343	Interest Rate:	11.1200%	Insurance Cost(3):	83,328	1.2759
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	48,300	0.7395
ROE Factor	0.023280	Amortization Rate:	11.1200%	Home Office(3):	42,656	0.6531
		Interest Only:	False	Replacement(3&4):	84,107	0.0000
		Yearly Payment:	1,089,943	Total FRVS PD:		14.4801

(1) 80% Capital (\$8,730,431) amortized at 11.1200 % for 20 years Principal & Interest of \$1,089,943 divided by annual available days (107310) divided by Occup. Adj. (0.90) = \$11.2855

(2) 20% ROE (\$2,182,608) times the ROE factor (0.023280) divided by annual available days (107310) divided by Occup. Adj. (0.90) = \$0.5261

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 298	Effective PBS Limitation	8,493,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.4175	57.4175	2.6050	54.8125
Direct Care	108.7417	108.7417	4.9336	103.8081
Indirect Care	64.0490	64.0490	2.9059	61.1431
Property	10.1800	14.4801	0.6570	13.8231
ROE	0.3310	0.3307	0.0150	0.3157
ROE Adjustment	-0.3307	-0.3307	-0.0150	-0.3157
Quality Assess-Medicaid Share				4.3847
Supplemental Rate				8.1814
Totals	240.3885	244.6883	11.1015	246.1529

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	5,020,364	0.00	1.2952	1.2952		298	99.60	5,020,364	8,169,074	
1984/07		0.10	1.9179	1.9179		298	99.60	5,029,993	8,325,822	
1985/01		0.10	1.1471	1.1471		298	97.94	5,035,762	8,421,182	
1985/10		0.20	0.8522	0.8522		298	98.45	5,044,343	8,493,000	
1986/01		0.20	0.8299	0.8299		298	98.45	5,052,717	8,563,626	
1986/07		0.30	0.2974	0.2974		298	98.45	5,057,224	8,547,236	
1987/01		0.30	1.0091	1.0091		298	98.45	5,072,532	8,700,110	
1987/07		0.40	0.9007	0.9007		298	98.07	5,090,808	8,768,054	
1988/01		0.40	0.9007	0.9007		298	98.07	5,109,150	8,839,276	
1988/07	58,538	0.50	0.5899	0.5899		298	98.07	5,182,760	8,834,508	
1989/01		0.50	0.5899	0.5899		298	96.87	5,198,049	8,886,658	
1989/07		0.60	0.5899	0.5899		298	93.97	5,216,445	8,946,854	
1990/01		0.60	0.5899	0.5899		298	93.97	5,234,906	8,991,852	
1990/07		0.70	0.5899	0.5899		298	91.51	5,234,906	9,044,896	5
1991/01		0.70	0.5899	0.5899		298	91.51	5,256,521	9,097,940	5
1991/07		0.80	1.4932	1.4932		298	91.59	5,278,225	9,233,828	5
1992/01		0.80	2.0117	2.0117		298	91.59	5,341,279	9,419,482	5
1992/07		0.90	1.8152	1.8152		298	90.88	5,515,907	9,590,534	
1993/01		0.90	1.7710	1.7710		298	90.88	5,603,825	9,760,394	
1993/07		1.00	1.5329	1.5329		298	90.18	5,603,825	9,909,990	5
1994/01		1.00	1.6983	1.6983		298	90.18	5,689,726	10,078,360	5
1994/07	76,889	1.00	1.5991	1.5991		298	87.56	5,955,774	10,239,578	
1995/01		1.00	1.5812	1.5812		298	87.56	6,049,947	10,401,392	
1995/07	89,716	1.00	1.5250	1.5250		298	84.16	6,231,925	10,559,928	
1996/01		1.00	1.7228	1.7228		298	84.16	6,339,289	10,742,006	
1996/07	83,886	1.00	1.3294	1.3294		298	85.02	6,507,450	10,884,748	
1997/01		1.00	1.4109	1.4109		298	85.02	6,599,264	11,038,218	
1997/07		1.00	1.0917	1.0917		298	85.88	6,671,308	11,158,610	
1998/01		1.00	1.1663	1.1663		298	85.88	6,749,115	11,288,836	
1998/07		1.00	1.0794	1.0794		294	86.33	6,821,965	11,257,554	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01		1.00	1.4499	1.4499		294	86.33	6,920,877	11,420,724	
1999/07	588,897	1.00	1.2299	1.2299		294	87.04	7,594,894	11,561,256	
2000/01		1.00	1.3356	1.3356		294	87.04	7,696,331	11,715,606	
2000/07		1.00	1.1129	1.1129		294	87.32	7,781,983	11,845,848	
2001/01		1.00	1.2976	1.2976		294	87.32	7,882,962	11,999,610	
2001/07		1.00	0.9615	0.9615		294	87.32	7,958,757	12,114,858	
2002/01		1.00	1.0301	1.0301		294	87.32	8,040,740	12,239,514	
2002/07		1.00	0.8337	0.8337		294	87.32	8,040,740	12,341,532	5
2003/01		1.00	1.3271	1.3271		294	87.24	8,215,374	12,505,290	
2003/07		1.00	1.1664	1.1664		294	87.24	8,311,198	12,651,114	
2004/01		1.00	1.1103	1.1103		294	86.85	8,403,477	12,791,646	
2004/07		0.95	0.8378	0.8378		294	86.85	8,470,360	12,898,956	
2005/01		0.95	0.8595	0.8595		294	86.85	8,539,520	13,009,794	
2005/07	140,652	0.90	0.7364	0.7364		294	86.55	8,736,772	13,105,638	
2006/01		0.90	0.9068	0.9068		294	86.55	8,736,772	13,224,414	5
2006/07		0.85	0.8133	0.8133		294	86.55	8,868,963	13,332,018	
2007/01	78,885	0.85	1.0133	1.0133		294	87.05	9,024,236	13,466,964	
2007/07		0.80	1.1050	1.1050		294	89.19	9,104,010	13,615,728	
2008/01		0.80	0.8556	0.8556		294	89.19	9,166,327	13,732,152	
2008/07	126,721	0.75	0.6104	0.6104		294	90.39	9,335,011	13,815,942	
2009/01		0.75	1.3268	1.3268		294	90.39	9,335,011	13,999,398	5
2009/07		0.70	0.6841	0.6841		294	90.39	9,473,054	14,095,242	
2010/01	233,914	0.70	0.8643	0.8643		294	90.29	9,764,280	14,216,958	
2010/07	47,649	0.65	0.7107	0.7107		294	90.71	9,857,040	14,318,094	
2011/01		0.65	0.9198	0.9198		294	90.71	9,915,975	14,449,806	
2011/07	50,315	0.60	0.9028	0.9028		294	89.64	10,020,005	14,580,342	
2012/01		0.60	0.3865	0.3865		294	89.64	10,043,241	14,636,790	
2012/07	256,947	0.55	0.9417	0.9417		294	87.54	10,352,202	14,774,676	
2013/01		0.55	0.4901	0.4901		294	87.54	10,380,112	14,847,000	
2013/07		0.50	0.6196	0.6196		294	87.54	10,412,270	14,939,022	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01	178,660	0.50	0.8564	0.8564		294	89.99	10,635,515	15,066,912	
2014/07		0.45	1.2383	1.2383		294	89.99	10,694,776	15,253,602	
2015/01	38,590	0.45	0.7571	0.7571		294	87.07	10,769,803	15,369,144	
2015/09		0.40	1.5736	1.5736		294	87.07	10,837,588	15,611,106	
2016/09		0.35	1.9890	1.9890		294	87.07	10,913,039	15,921,570	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 032482083120140101201411192014165437



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0032486-00 - 2016/09

250.03

Lady Lake Specialty Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
630 GRIFFIN AVENUE	1/1/2014-8/31/2014	Number of Beds: 145	Superior: 0
LADY LAKE, FL 32159	Days in CR 243	Maximum: 35,235	Standard: 366
County: Lake [35]	First Used : 2015/01	Max Annualized: 52,925	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 32,464	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,078	Inflation
Current Class North Large	Initial CR? False	Medicaid: 12,485	FY Index: 1.33689974
Class at 1/94: North Large	Medicaid Utilization	38.45798%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.13566%	Cost: 1.07977764
Open Date: 01/29/1999	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/30/1999	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 03/30/1999	Low Occupancy Adjustment Factor:	116.52122%	DC Sem Index: 1.30450000
Med # Active Date: 05/13/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 227561			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	624,976	1,157,188	724,679	314,123	5,869	2,826,835	
1a	Audit Adjustments							
2	Cost Per Diem	50.0581	92.6863	58.0440	25.1600	0.4701	226.4185	
3	Cost Per Diem Inflated	54.0516	98.5674	62.6746				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.0516	98.5674	62.6746	25.1600	0.4701	240.9237	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.1963		70.8245				
7	Provider Target Rate	62.4893		74.7643				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	54.0516	98.5674	62.6746	13.6500	0.4701	229.4137	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	54.0516	98.5674	62.6746	13.6500	0.4701	229.4137	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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Lady Lake Specialty Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	03/30/1999	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,742,850.00		Total Amount	Per Diem
RS to Start Calcs:	1999/01	Type:	Variable	80% Capital(1):	6,042,718	15.8379
Indexed Asset Value	7,553,397	<60% of Base:	False	20% ROE(2):	1,510,679	0.7383
FRVS Base Asset:	4,594,920	Interest Rate:	11.1200%	Insurance Cost(3):	50,356	1.5511
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	56,696	1.7464
ROE Factor	0.023280	Amortization Rate:	11.1200%	Home Office(3):	31,541	0.9716
		Interest Only:	False	Replacement(3&4):	112,876	0.0000
		Yearly Payment:	754,398	Total FRVS PD:		20.8453

(1) 80% Capital (\$6,042,718) amortized at 11.1200 % for 20 years Principal & Interest of \$754,398 divided by annual available days (52925) divided by Occup. Adj. (0.90) = \$15.8379

(2) 20% ROE (\$1,510,679) times the ROE factor (0.023280) divided by annual available days (52925) divided by Occup. Adj. (0.90) = \$0.7383

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	38,291
Comparison Date: 07/01/1998	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	4,594,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.0516	54.0516	2.4523	51.5993
Direct Care	98.5674	98.5674	4.4720	94.0954
Indirect Care	62.6746	62.6746	2.8435	59.8311
Property	13.6500	20.8453	0.9457	19.8996
ROE	0.4701	0.2465	0.0112	0.2353
ROE Adjustment	-0.2465	-0.2465	-0.0112	-0.2353
Quality Assess-Medicaid Share				16.4234
Supplemental Rate				8.1814
Totals	229.1672	236.1389	10.7135	250.0302

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 8/31/2014

0 032486-00 - 2016/09

250.03

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01	6,465,779	0.00	1.4499	1.4499		120	37.34	4,594,920	4,594,920	1
1999/07	16,555	0.10	1.2299	1.2299		120	37.34	4,615,312	4,718,880	
2000/01		0.10	1.3356	1.3356		120	37.34	4,619,498	4,781,880	
2000/07		0.20	1.1129	1.1129		120	49.52	4,628,756	4,835,040	
2001/01		0.20	1.2976	1.2976		120	49.52	4,639,571	4,897,800	
2001/07		0.30	0.9615	0.9615		120	49.52	4,651,623	4,944,840	
2002/01		0.30	1.0301	1.0301		120	49.52	4,664,564	4,995,720	
2002/07		0.40	0.8337	0.8337		120	49.52	4,664,564	5,037,360	5
2003/01		0.40	1.3271	1.3271		120	50.03	4,701,160	5,104,200	
2003/07		0.50	1.1664	1.1664		120	50.03	4,726,100	5,163,720	
2004/01		0.50	1.1103	1.1103		120	50.03	4,749,968	5,221,080	
2004/07		0.60	0.8378	0.8378		120	42.37	4,768,363	5,264,880	
2005/01	1,172,619	0.60	0.8595	0.8595		145	39.14	5,958,481	6,416,395	
2005/07		0.70	0.7364	0.7364		145	39.14	5,980,340	6,463,665	
2006/01	50,345	0.70	0.9068	0.9068		145	31.58	6,052,483	6,522,245	
2006/07	18,597	0.80	0.8133	0.8133		145	32.24	6,094,162	6,575,315	
2007/01		0.80	1.0133	1.0133		145	32.24	6,123,119	6,641,870	
2007/07		0.90	1.1050	1.1050		145	34.64	6,161,471	6,715,240	
2008/01		0.90	0.8556	0.8556		145	34.64	6,191,352	6,772,660	
2008/07	67,183	1.00	0.6104	0.6104		145	36.04	6,283,299	6,813,985	
2009/01		1.00	1.3268	1.3268		145	36.04	6,337,927	6,904,465	
2009/07		1.00	0.6841	0.6841		145	36.04	6,366,338	6,951,735	
2010/01	33,820	1.00	0.8643	0.8643		145	34.09	6,434,263	7,011,765	
2010/07	276,504	1.00	0.7107	0.7107		145	31.93	6,737,314	7,061,645	
2011/01		1.00	0.9198	0.9198		145	31.93	6,773,290	7,126,605	
2011/07	109,366	1.00	0.9028	0.9028		145	32.45	6,918,734	7,190,985	
2012/01		1.00	0.3865	0.3865		145	32.45	6,934,511	7,218,825	
2012/07	35,775	1.00	0.9417	0.9417		145	32.25	7,008,577	7,286,830	
2013/01		1.00	0.4901	0.4901		145	32.25	7,028,718	7,322,500	
2013/07		1.00	0.6196	0.6196		145	32.25	7,054,254	7,367,885	



Florida Agency for Health Care Administration
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250.03

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01	106,935	1.00	0.8564	0.8564		145	28.98	7,193,021	7,430,960	
2014/07	35,348	1.00	1.2383	1.2383		145	35.70	7,286,184	7,523,035	
2015/01	43,940	1.00	0.7571	0.7571		145	38.46	7,368,698	7,580,020	
2015/09		1.00	1.5736	1.5736		145	38.46	7,449,781	7,699,355	
2016/09		1.00	1.9890	1.9890		145	38.46	7,553,397	7,852,475	

Message Code:

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| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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Report Calculated: 6/30/2016 8:16:40 AM

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ID: 032486083120140101201410092014140735



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0032551-00 - 2016/09

257.76

Sunset Lake Health and Rehab Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
832 SUNSET LAKE BOULEVAR	1/1/2014-8/31/2014	Number of Beds: 120	Superior: 0
VENICE, FL 34292	Days in CR 243	Maximum: 29,160	Standard: 366
County: Sarasota [58]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 27,397	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,714	Inflation
Current Class South Large	Initial CR? False	Medicaid: 11,490	FY Index: 1.33689974
Class at 1/94: South Large	Medicaid Utilization	41.93890%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.95405%	Cost: 1.07977764
Open Date: 02/10/1992	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/10/1992	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 03/17/1992	Low Occupancy Adjustment Factor:	118.82088%	DC Sem Index: 1.30450000
Med # Active Date: 05/13/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 308501			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	611,383	1,098,740	727,309	284,837	6,907	2,729,176	
1a	Audit Adjustments							
2	Cost Per Diem	53.2100	95.6258	63.2993	24.7900	0.6011	237.5262	
3	Cost Per Diem Inflated	57.4550	101.6935	68.3492				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.4550	101.6935	68.3492	24.7900	0.6011	252.8888	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	70.7701		74.1383				
7	Provider Target Rate	74.7069		78.2625				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	57.4550	101.6935	68.3492	13.6500	0.6011	241.7488	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	57.4550	101.6935	68.3492	13.6500	0.6011	241.7488	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Rate Semester 09/01/2016 through 08/31/2017

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Sunset Lake Health and Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 03/17/1992		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	7,500,000.00		Total Amount	Per Diem
RS to Start Calcs:	1992/01	Type:	Fixed	80% Capital(1):	4,626,143	12.3732
Indexed Asset Value	5,782,679	<60% of Base:	False	20% ROE(2):	1,156,536	0.6830
FRVS Base Asset:	3,718,320	Interest Rate:	8.6700%	Insurance Cost(3):	58,345	2.1296
Occup Adj Factor	0.9000	Chase Rate:	6.0000%	Taxes Cost(3):	36,445	1.3303
ROE Factor	0.023280	Amortization Rate:	8.6700%	Home Office(3):	26,786	0.9777
		Interest Only:	False	Replacement(3&4):	42,636	0.0000
		Yearly Payment:	487,751	Total FRVS PD:		17.4938

(1) 80% Capital (\$4,626,143) amortized at 8.6700 % for 20 years Principal & Interest of \$487,751 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$12.3732

(2) 20% ROE (\$1,156,536) times the ROE factor (0.023280) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6830

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1991	Current RS PBS:	30,986
Comparison Bed	120	Effective PBS Limitation	54,155
			3,718,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.4550	57.4550	2.6067	54.8483
Direct Care	101.6935	101.6935	4.6138	97.0797
Indirect Care	68.3492	68.3492	3.1010	65.2482
Property	13.6500	17.4938	0.7937	16.7001
ROE	0.6011	0.6010	0.0273	0.5737
ROE Adjustment	-0.6010	-0.6010	-0.0273	-0.5737
Quality Assess-Medicaid Share				15.7024
Supplemental Rate				8.1814
Totals	241.1478	244.9915	11.1152	257.7601

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1992/01	4,273,713	0.00	2.0117	2.0117		120	32.19	3,718,320	3,718,320	1
1992/07	41,445	0.10	1.8152	1.8152		120	32.19	3,763,715	3,861,960	
1993/01		0.10	1.7710	1.7710		120	32.19	3,767,616	3,930,360	
1993/07		0.20	1.5329	1.5329		120	32.19	3,767,616	3,990,600	5
1994/01		0.20	1.6983	1.6983		120	32.19	3,781,881	4,058,400	
1994/07		0.30	1.5991	1.5991		120	32.19	3,792,499	4,123,320	
1995/01	23,451	0.30	1.5812	1.5812		120	36.61	3,827,926	4,188,480	
1995/07		0.40	1.5250	1.5250		120	46.06	3,847,481	4,252,320	
1996/01		0.40	1.7228	1.7228		120	46.06	3,869,684	4,325,640	
1996/07		0.50	1.3294	1.3294		120	46.06	3,891,225	4,383,120	
1997/01		0.50	1.4109	1.4109		120	46.06	3,914,215	4,444,920	
1997/07		0.60	1.0917	1.0917		120	46.06	3,935,686	4,493,400	
1998/01		0.60	1.1663	1.1663		120	46.06	3,958,751	4,545,840	
1998/07		0.70	1.0794	1.0794		120	46.06	3,983,801	4,594,920	
1999/01		0.70	1.4499	1.4499		120	46.06	3,983,801	4,661,520	5
1999/07		0.80	1.2299	1.2299		120	46.06	4,017,661	4,718,880	5
2000/01		0.80	1.3356	1.3356		120	45.45	4,086,532	4,781,880	
2000/07		0.90	1.1129	1.1129		120	36.12	4,113,412	4,835,040	
2001/01		0.90	1.2976	1.2976		120	36.12	4,144,959	4,897,800	
2001/07	61,570	1.00	0.9615	0.9615		120	32.32	4,206,529	4,944,840	5
2002/01		1.00	1.0301	1.0301		120	32.32	4,255,554	4,995,720	
2002/07	54,035	1.00	0.8337	0.8337		120	31.25	4,329,747	5,037,360	
2003/01		1.00	1.3271	1.3271		120	31.25	4,362,395	5,104,200	
2003/07		1.00	1.1664	1.1664		120	39.77	4,399,188	5,163,720	
2004/01		1.00	1.1103	1.1103		120	39.77	4,434,507	5,221,080	
2004/07		1.00	0.8378	0.8378		120	43.11	4,463,628	5,264,880	
2005/01	24,993	1.00	0.8595	0.8595		120	40.24	4,516,690	5,310,120	
2005/07		1.00	0.7364	0.7364		120	40.24	4,541,025	5,349,240	
2006/01		1.00	0.9068	0.9068		120	40.24	4,571,152	5,397,720	
2006/07		1.00	0.8133	0.8133		120	40.24	4,598,352	5,441,640	



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257.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/01		1.00	1.0133	1.0133		120	40.24	4,632,443	5,496,720	
2007/07	41,602	1.00	1.1050	1.1050		120	36.37	4,707,895	5,557,440	
2008/01		1.00	0.8556	0.8556		120	36.37	4,734,532	5,604,960	
2008/07	160,071	1.00	0.6104	0.6104		120	33.01	4,911,948	5,639,160	
2009/01		1.00	1.3268	1.3268		120	33.01	4,951,063	5,714,040	
2009/07		1.00	0.6841	0.6841		120	33.01	4,971,391	5,753,160	
2010/01	26,967	1.00	0.8643	0.8643		120	33.69	5,024,678	5,802,840	
2010/07	52,775	1.00	0.7107	0.7107		120	44.59	5,106,404	5,844,120	
2011/01		1.00	0.9198	0.9198		120	44.59	5,144,483	5,897,880	
2011/07		1.00	0.9028	0.9028		120	44.59	5,182,137	5,951,160	
2012/01	25,172	1.00	0.3865	0.3865		120	40.70	5,222,130	5,974,200	
2012/07	18,217	0.95	0.9417	0.9417		120	38.41	5,272,973	6,030,480	
2013/01		0.95	0.4901	0.4901		120	38.41	5,290,118	6,060,000	
2013/07		0.90	0.6196	0.6196		120	38.41	5,310,718	6,097,560	
2014/01	32,230	0.90	0.8564	0.8564		120	40.52	5,373,106	6,149,760	
2014/07	45,046	0.85	1.2383	1.2383		120	38.65	5,457,896	6,225,960	
2015/01		0.85	0.7571	0.7571		120	38.65	5,482,577	6,273,120	
2015/09	182,429	0.80	1.5736	1.5736		120	41.94	5,717,637	6,371,880	
2016/09		0.75	1.9890	1.9890		120	41.94	5,782,679	6,498,600	

Message Code:

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| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0032553-00 - 2016/09

227.91

Lexington Health & Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6300 46TH AVE N	9/1/2014-12/31/2015	Number of Beds: 159	Superior: 0
SAINT PETERSBURG, FL 33709	Days in CR 487	Maximum: 77,433	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 58,035	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 72,019	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 15,460	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 40,705	FY Index: 1.37302921
Class at 1/94: North Large	Medicaid Utilization	56.51981%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.00815%	Cost: 1.05136470
Open Date: 06/01/1982	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1982	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24849500
Entered Medicaid 06/01/1982	Low Occupancy Adjustment Factor:	117.62463%	DC Sem Index: 1.30450000
Med # Active Date: 05/13/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04485801
Previous Med # 227650			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,332,909	3,522,528	1,995,351	935,808	24,821	8,811,417	
1a	Audit Adjustments							
2	Cost Per Diem	57.3126	86.5380	49.0198	22.9900	0.6098	216.4702	
3	Cost Per Diem Inflated	60.2564	90.4199	51.5377				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	60.2564	90.4199	51.5377	22.9900	0.6098	225.8138	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	63.0343		70.3131				
7	Provider Target Rate	66.5408		74.2245				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	56.8063	90.4199	51.5377	13.6500	0.6098	213.0237	
12/13	Medicaid Adjustment Rate		0.6632	0.3780				
14	Prospective Per Diem 11	56.8063	91.0831	51.9157	13.6500	0.6098	214.0649	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Lexington Health & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On Payback FRV

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,623,017.00		Total Amount	Per Diem
RS to Start Calcs:	1982/01	Type:	Variable	80% Capital(1):	5,014,570	10.1811
Indexed Asset Value	6,268,212	<60% of Base:	False	20% ROE(2):	1,253,642	0.4932
FRVS Base Asset:	1,243,324	Interest Rate:	10.4900%	Insurance Cost(3):	137,508	1.9093
Occup Adj Factor	0.9000	Chase Rate:	6.7500%	Taxes Cost(3):	106,880	1.4841
ROE Factor	0.020550	Amortization Rate:	8.7500%	Home Office(3):	42,369	0.5883
		Interest Only:	False	Replacement(3&4):	127,476	0.0000
		Yearly Payment:	531,772	Total FRVS PD:		14.6560

(1) 80% Capital (\$5,014,570) amortized at 8.7500 % for 20 years Principal & Interest of \$531,772 divided by annual available days (58035) divided by Occup. Adj. (0.90) = \$10.1811

(2) 20% ROE (\$1,253,642) times the ROE factor (0.020550) divided by annual available days (58035) divided by Occup. Adj. (0.90) = \$0.4932

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	102	Effective PBS Limitation	54,155
			2,907,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	91.0831	91.0831	4.1324	86.9507
Indirect Care	51.9157	51.9157	2.3554	49.5603
Property	13.6500	14.6560	0.6193	13.0307
ROE	0.6098	0.6040	0.0277	0.5821
ROE Adjustment	-0.6040	-0.6040	-0.0274	-0.5766
Quality Assess-Medicaid Share				15.9556
Supplemental Rate				8.1814
Totals	213.4609	214.4611	9.6847	227.9132

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1982/01	1,209,024	0.00	2.6760	2.6760		102	58.37	1,209,024	2,529,192	
1982/07		0.10	2.2977	2.2977		102	58.37	1,211,802	2,587,230	
1983/04		0.10	2.6288	2.6288		102	56.61	1,214,988	2,655,264	
1983/07		0.20	3.9578	3.0000	0.9578	102	56.61	1,222,278	2,760,324	
1984/01		0.20	2.2530	2.2530		102	56.61	1,227,786	2,796,126	
1984/07		0.30	1.9179	1.9179		102	58.37	1,234,851	2,849,778	
1985/01		0.30	1.1471	1.1471		102	58.37	1,239,100	2,882,418	
1985/10		0.40	0.8522	0.8522		102	55.14	1,243,324	2,907,000	
1986/01		0.40	0.8299	0.8299		102	55.14	1,247,452	2,931,174	
1986/07		0.50	0.2974	0.2974		102	53.67	1,249,262	2,925,564	
1987/01		0.50	1.0091	1.0091		102	53.67	1,255,413	2,977,890	
1987/07		0.60	0.9007	0.9007		102	52.85	1,261,932	3,001,146	
1988/01		0.60	0.9007	0.9007		102	52.85	1,268,485	3,025,524	
1988/07	22,903	0.70	0.5899	0.5899		102	44.46	1,295,622	3,023,892	
1989/01		0.70	0.5899	0.5899		102	44.46	1,299,946	3,041,742	
1989/07	10,790	0.80	0.5899	0.5899		102	39.88	1,315,184	3,062,346	
1990/01		0.80	0.5899	0.5899		102	39.88	1,319,684	3,077,748	
1990/07		0.90	0.5899	0.5899		102	34.47	1,324,075	3,095,904	
1991/01		0.90	0.5899	0.5899		102	34.47	1,328,481	3,114,060	
1991/07		1.00	1.4932	1.4932		102	40.50	1,343,088	3,160,572	
1992/01		1.00	2.0117	2.0117		102	40.50	1,362,984	3,224,118	
1992/07		1.00	1.8152	1.8152		102	41.28	1,381,553	3,282,666	
1993/01		1.00	1.7710	1.7710		102	41.28	1,399,917	3,340,806	
1993/07		1.00	1.5329	1.5329		102	43.45	1,416,870	3,392,010	
1994/01		1.00	1.6983	1.6983		102	43.45	1,435,880	3,449,640	
1994/07	26,980	1.00	1.5991	1.5991		102	44.41	1,481,400	3,504,822	
1995/01		1.00	1.5812	1.5812		102	44.41	1,500,314	3,560,208	
1995/07	29,966	1.00	1.5250	1.5250		102	42.13	1,547,806	3,614,472	
1996/01		1.00	1.7228	1.7228		102	42.13	1,547,806	3,676,794	5
1996/07	1,357,887	1.00	1.3294	1.3294		134	38.19	2,926,119	4,894,484	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/01		1.00	1.4109	1.4109		134	38.19	2,969,403	4,963,494	
1997/07	23,957	1.00	1.0917	1.0917		134	45.14	3,019,965	5,017,630	
1998/01		1.00	1.1663	1.1663		134	45.14	3,048,873	5,076,188	
1998/07		1.00	1.0794	1.0794		134	43.71	3,075,027	5,130,994	
1999/01		1.00	1.4499	1.4499		134	43.71	3,110,460	5,205,364	
1999/07		1.00	1.2299	1.2299		134	40.44	3,138,588	5,269,416	
2000/01		1.00	1.3356	1.3356		134	40.44	3,169,410	5,339,766	
2000/07		1.00	1.1129	1.1129		134	46.69	3,199,353	5,399,128	
2001/01		1.00	1.2976	1.2976		134	46.69	3,234,595	5,469,210	
2001/07		1.00	0.9615	0.9615		134	46.69	3,260,997	5,521,738	
2002/01		1.00	1.0301	1.0301		134	46.69	3,289,513	5,578,554	
2002/07		0.95	0.8337	0.8337		134	46.69	3,289,513	5,625,052	5
2003/01		0.95	1.3271	1.3271		134	53.21	3,352,021	5,699,690	
2003/07		0.90	1.1664	1.1664		134	53.21	3,386,065	5,766,154	
2004/01		0.90	1.1103	1.1103		134	53.21	3,418,801	5,830,206	
2004/07		0.85	0.8378	0.8378		134	58.13	3,443,146	5,879,116	
2005/01		0.85	0.8595	0.8595		134	58.13	3,468,302	5,929,634	
2005/07	70,250	0.80	0.7364	0.7364		134	54.39	3,558,757	5,973,318	
2006/01		0.80	0.9068	0.9068		134	54.39	3,584,286	6,027,454	
2006/07		0.75	0.8133	0.8133		134	54.39	3,605,908	6,076,498	
2007/01		0.75	1.0133	1.0133		134	54.93	3,633,278	6,138,004	
2007/07	116,049	0.70	1.1050	1.1050		134	52.83	3,776,322	6,205,808	
2008/01		0.70	0.8556	0.8556		134	52.83	3,798,046	6,258,872	
2008/07		0.65	0.6104	0.6104		134	52.83	3,812,522	6,297,062	
2009/01	113,777	0.65	1.3268	1.3268		134	52.08	3,957,433	6,380,678	
2009/07	388,957	0.60	0.6841	0.6841		134	52.46	4,361,885	6,424,362	
2010/01		0.60	0.8643	0.8643		134	52.46	4,383,461	6,479,838	
2010/07	986,853	0.55	0.7107	0.7107		155	50.70	5,386,109	7,548,655	
2011/01		0.55	0.9198	0.9198		155	50.70	5,411,227	7,618,095	
2011/07		0.50	0.9028	0.9028		155	50.70	5,433,744	7,686,915	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/01	42,705	0.50	0.3865	0.3865		159	51.44	5,486,273	7,915,815	
2012/07		0.45	0.9417	0.9417		159	51.44	5,508,019	7,990,386	
2013/01	29,747	0.45	0.4901	0.4901		159	51.22	5,549,076	8,029,500	
2013/07		0.40	0.6196	0.6196		159	51.22	5,561,882	8,079,267	
2014/01	54,932	0.40	0.8564	0.8564		159	53.00	5,635,176	8,148,432	
2014/07		0.35	1.2383	1.2383		159	53.00	5,658,711	8,249,397	
2015/01	168,155	0.35	0.7571	0.7571		159	55.10	5,841,862	8,311,884	
2015/09	166,417	0.30	1.5736	1.5736		159	55.46	6,035,858	8,442,741	
2016/09	202,338	0.25	1.9890	1.9890		159	56.52	6,268,212	8,610,645	

Message Code:

5 Uncorrected Licensure Deficiency

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230.37

Seven Hills Health & Rehab Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3333 CAPITAL MEDICAL BLVD	2/1/2015-1/31/2016	Number of Beds: 156	Superior: 0
TALLAHASSEE, FL 32308	Days in CR 365	Maximum: 56,940	Standard: 366
County: Leon [37]	First Used : 2016/09	Max Annualized: 56,940	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 53,433	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 7,123	Inflation
Current Class North Large	Initial CR? False	Medicaid: 37,878	FY Index: 1.38133246
Class at 1/94: North Large	Medicaid Utilization	70.88878%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.84089%	Cost: 1.04504491
Open Date: 11/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25516446
Entered Medicaid 11/01/1984	Low Occupancy Adjustment Factor:	118.67777%	DC Sem Index: 1.30450000
Med # Active Date: 12/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03930604
Previous Med # 252093			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,601,375	3,342,826	2,152,228	1,142,779		8,239,208
1a	Audit Adjustments						
2	Cost Per Diem	42.2772	88.2524	56.8200	30.1700		217.5196
3	Cost Per Diem Inflated	44.1816	91.7213	59.3795			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	44.1816	91.7213	59.3795	30.1700		225.4524
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	56.0582		76.1715			
7	Provider Target Rate	59.1766		80.4088			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	55.2664		66.3679			
10b	Base for line 10a	52.3540		62.8705			
11	Lesser of 5,7,8,10, 10a	44.1816	91.7213	59.3795	13.6500		208.9324
12/13	Medicaid Adjustment Rate		2.1554	1.3954			
14	Prospective Per Diem 11	44.1816	93.8767	60.7749	13.6500		212.4832
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Seven Hills Health & Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 12/01/2001		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,202,036.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	5,122,574	9.8475
Indexed Asset Value	6,403,217	<60% of Base:	False	20% ROE(2):	1,280,643	0.5075
FRVS Base Asset:	2,265,264	Interest Rate:	10.6343%	Insurance Cost(3):	47,679	0.8923
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	66,341	1.2416
ROE Factor	0.020310	Amortization Rate:	7.7500%	Home Office(3):	21,841	0.4088
		Interest Only:	False	Replacement(3&4):	50,144	0.0000
		Yearly Payment:	504,644	Total FRVS PD:		12.8977

(1) 80% Capital (\$5,122,574) amortized at 7.7500 % for 20 years Principal & Interest of \$504,644 divided by annual available days (56940) divided by Occup. Adj. (0.90) = \$9.8475

(2) 20% ROE (\$1,280,643) times the ROE factor (0.020310) divided by annual available days (56940) divided by Occup. Adj. (0.90) = \$0.5075

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 156	Effective PBS Limitation	4,446,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.1816	44.1816	2.0045	42.1771
Direct Care	93.8767	93.8767	4.2591	89.6176
Indirect Care	60.7749	60.7749	2.7573	58.0176
Property	13.6500	12.8977	0.5852	12.3125
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.0659
Supplemental Rate				8.1814
Totals	212.4832	211.7309	9.6061	230.3721

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	2,261,278	0.00	1.9179	1.9179		120	48.48	2,261,278	3,352,680	
1985/01		0.10	1.1471	1.1471		120	48.48	2,263,564	3,391,080	
1985/10		0.10	0.8522	0.8522		120	48.48	2,265,264	3,420,000	
1986/01		0.20	0.8299	0.8299		120	48.48	2,268,579	3,448,440	
1986/07		0.20	0.2974	0.2974		120	48.48	2,269,769	3,441,840	
1987/01		0.30	1.0091	1.0091		120	48.48	2,275,825	3,503,400	
1987/07		0.30	0.9007	0.9007		120	46.45	2,281,018	3,530,760	
1988/01		0.40	0.9007	0.9007		120	46.45	2,287,959	3,559,440	
1988/07	36,421	0.40	0.5899	0.5899		120	48.56	2,329,147	3,557,520	
1989/01		0.50	0.5899	0.5899		120	48.56	2,335,213	3,578,520	
1989/07	1,067,832	0.50	0.5899	0.5899		156	53.18	3,409,706	4,683,588	
1990/01		0.60	0.5899	0.5899		156	53.18	3,421,374	4,707,144	
1990/07		0.60	0.5899	0.5899		156	49.08	3,432,179	4,734,912	
1991/01		0.70	0.5899	0.5899		156	49.08	3,444,825	4,762,680	
1991/07		0.70	1.4932	1.4932		156	51.82	3,478,749	4,833,816	
1992/01		0.80	2.0117	2.0117		156	53.21	3,532,914	4,931,004	
1992/07		0.80	1.8152	1.8152		156	53.21	3,582,549	5,020,548	
1993/01		0.90	1.7710	1.7710		156	57.39	3,639,651	5,109,468	
1993/07		0.90	1.5329	1.5329		156	57.39	3,689,864	5,187,780	
1994/01	28,875	1.00	1.6983	1.6983		156	64.26	3,781,404	5,275,920	
1994/07		1.00	1.5991	1.5991		156	64.26	3,841,872	5,360,316	
1995/01		1.00	1.5812	1.5812		156	61.86	3,902,620	5,445,024	
1995/07		1.00	1.5250	1.5250		156	61.86	3,962,135	5,528,016	
1996/01		1.00	1.7228	1.7228		156	63.71	4,030,395	5,623,332	
1996/07		1.00	1.3294	1.3294		156	63.71	4,083,975	5,698,056	
1997/01	307,399	1.00	1.4109	1.4109		156	67.03	4,448,995	5,778,396	
1997/07		1.00	1.0917	1.0917		156	67.03	4,497,565	5,841,420	
1998/01		1.00	1.1663	1.1663		156	63.06	4,550,020	5,909,592	
1998/07		1.00	1.0794	1.0794		156	63.06	4,599,133	5,973,396	
1999/01		1.00	1.4499	1.4499		156	70.74	4,665,816	6,059,976	



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230.37

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		156	70.74	4,723,201	6,134,544	
2000/01	78,347	1.00	1.3356	1.3356		156	72.39	4,801,548	6,216,444	5
2000/07		1.00	1.1129	1.1129		156	72.39	4,918,769	6,285,552	
2001/01		1.00	1.2976	1.2976		156	68.38	4,982,595	6,367,140	
2001/07		1.00	0.9615	0.9615		156	67.96	5,030,503	6,428,292	
2002/01		1.00	1.0301	1.0301		156	67.96	5,082,322	6,494,436	
2002/07		1.00	0.8337	0.8337		156	67.96	5,124,693	6,548,568	
2003/01		1.00	1.3271	1.3271		156	67.96	5,192,703	6,635,460	
2003/07		1.00	1.1664	1.1664		156	67.96	5,253,271	6,712,836	
2004/01		1.00	1.1103	1.1103		156	67.96	5,311,598	6,787,404	
2004/07		1.00	0.8378	0.8378		156	75.49	5,356,099	6,844,344	
2005/01		0.95	0.8595	0.8595		156	75.49	5,399,832	6,903,156	
2005/07		0.95	0.7364	0.7364		156	69.62	5,437,609	6,954,012	
2006/01		0.90	0.9068	0.9068		156	69.62	5,481,985	7,017,036	
2006/07		0.90	0.8133	0.8133		156	66.44	5,522,113	7,074,132	
2007/01		0.85	1.0133	1.0133		156	65.42	5,569,675	7,145,736	
2007/07		0.85	1.1050	1.1050		156	65.42	5,621,991	7,224,672	
2008/01		0.80	0.8556	0.8556		156	65.42	5,660,474	7,286,448	
2008/07		0.80	0.6104	0.6104		156	67.17	5,688,114	7,330,908	
2009/01		0.75	1.3268	1.3268		156	62.81	5,744,716	7,428,252	
2009/07		0.75	0.6841	0.6841		156	62.81	5,774,192	7,479,108	
2010/01		0.70	0.8643	0.8643		156	62.81	5,809,126	7,543,692	
2010/07	62,160	0.70	0.7107	0.7107		156	67.02	5,900,186	7,597,356	
2011/01	35,869	0.65	0.9198	0.9198		156	67.02	5,971,332	7,667,244	
2011/07	21,408	0.65	0.9028	0.9028		156	67.02	6,027,780	7,736,508	
2012/01	4,850	0.60	0.3865	0.3865		156	67.02	6,046,608	7,766,460	
2012/07		0.60	0.9417	0.9417		156	67.02	6,080,771	7,839,624	
2013/01		0.55	0.4901	0.4901		156	67.02	6,097,165	7,878,000	
2013/07		0.55	0.6196	0.6196		156	67.02	6,117,944	7,926,828	
2014/01	23,710	0.50	0.8564	0.8564		156	65.45	6,167,851	7,994,688	



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230.37

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		156	65.45	6,206,042	8,093,748	
2015/01	23,000	0.45	0.7571	0.7571		156	65.66	6,250,186	8,155,056	
2015/09		0.45	1.5736	1.5736		156	65.66	6,294,444	8,283,444	
2016/09	58,694	0.40	1.9890	1.9890		156	70.89	6,403,217	8,448,180	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 033175013120160201201504292016105106



Florida Agency for Health Care Administration
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242.46

Benderson Family Skilled Nursing & Rehab Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1959 N HONORE AVE	7/1/2014-6/30/2015	Number of Beds: 45	Superior: 0
SARASOTA, FL 34235	Days in CR 365	Maximum: 17,295	Standard: 366
County: Sarasota [58]	First Used : 2016/09	Max Annualized: 16,425	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 12,767	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 2,952	Inflation
Current Class South Small	Initial CR? False	Medicaid: 4,555	FY Index: 1.35966457
Class at 1/94: South Small	Medicaid Utilization	35.67792%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	73.81902%	Cost: 1.06169895
Open Date: 03/04/2011	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/04/2011	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24000000
Entered Medicaid 03/22/2011	Low Occupancy Adjustment Factor:	93.35671%	DC Sem Index: 1.30450000
Med # Active Date: 03/22/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05201613
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	448,858	439,016	281,512	140,704		1,310,090	
1a	Audit Adjustments							
2	Cost Per Diem	98.5418	96.3811	61.8029	30.8900		287.6158	
3	Cost Per Diem Inflated	104.6217	101.3945	65.6161				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	104.6217	101.3945	65.6161	30.8900		302.5223	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	76.6426		72.0923				
7	Provider Target Rate	80.9061		76.1027				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	74.6747		88.8648				
10b	Base for line 10a	70.7396		84.1819				
11	Lesser of 5,7,8,10, 10a	71.0408	101.3945	65.6161	13.6500		251.7014	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	71.0408	101.3945	65.6161	13.6500		251.7014	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Benderson Family Skilled Nursing & Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	03/22/2011	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	2011/01	Type:	None	80% Capital(1):	1,949,580	4.2157
Indexed Asset Value	2,436,975	<60% of Base:	True	20% ROE(2):	487,395	0.6802
FRVS Base Asset:	2,435,050	Interest Rate:	0.0000%	Insurance Cost(3):	31,464	2.4645
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	0	0.0000
ROE Factor	0.020630	Amortization Rate:	3.2500%	Home Office(3):	0	0.0000
		Interest Only:	True	Replacement(3&4):	25,637	0.0000
		Yearly Payment:	62,319	Total FRVS PD:		7.3604

(1) 80% Capital (\$1,949,580) amortized at 3.2500 % for 20 years Interest of \$62,319 divided by annual available days (16425) divided by Occup. Adj. (0.90) = \$4.2157

(2) 20% ROE (\$487,395) times the ROE factor (0.020630) divided by annual available days (16425) divided by Occup. Adj. (0.90) = \$0.6802

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/2010	Current RS PBS:	48,701
Comparison Bed	50	Effective PBS Limitation	54,155
			2,435,050

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	71.0408	71.0408	3.2231	67.8177
Direct Care	101.3945	101.3945	4.6002	96.7943
Indirect Care	65.6161	65.6161	2.9770	62.6391
Property	13.6500	7.3604	0.3339	7.0265
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	251.7014	245.4118	11.1342	242.4590

Medicaid Trend Adjustment



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242.46

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/01	37,466,681	0.00	0.9198	0.9198		50	23.68	2,435,050	2,435,050	1
2011/07		0.10	0.9028	0.9028		50	23.68	2,435,050	2,479,650	
2012/01		0.10	0.3865	0.3865		50	23.68	2,435,050	2,489,250	
2012/07		0.20	0.9417	0.9417		50	23.68	2,435,050	2,512,700	
2013/01		0.20	0.4901	0.4901		50	23.68	2,435,050	2,525,000	
2013/07		0.30	0.6196	0.6196		50	23.68	2,435,050	2,540,650	
2014/01		0.30	0.8564	0.8564		50	23.68	2,435,050	2,562,400	
2014/07		0.40	1.2383	1.2383		50	23.68	2,435,050	2,594,150	
2015/01		0.40	0.7571	0.7571		50	23.68	2,435,050	2,613,800	
2015/09		0.50	1.5736	1.5736		50	32.04	2,446,211	2,654,950	
2016/09		0.60	1.9890	1.9890		45	35.68	2,436,975	2,436,975	8

Message Code:

- | |
|--|
| 1 Per Bed Standard Limitation |
| 8 Limited to Current RS Per Bed Standard |

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 033717063020150701201406012016153735



Florida Agency for Health Care Administration
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0034504-00 - 2016/09

215.66

Grace Healthcare of Lake Wales

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
730 N SCENIC HWY	1/1/2015-12/31/2015	Number of Beds: 100	Superior: 0
LAKE WALES, FL 33853-3208	Days in CR 365	Maximum: 36,500	Standard: 366
County: Polk [53]	First Used : 2016/09	Max Annualized: 36,500	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 30,593	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,099	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 18,907	FY Index: 1.37939113
Class at 1/94: South Small	Medicaid Utilization	61.80172%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	83.81644%	Cost: 1.04651568
Open Date: 08/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 08/01/1983	Low Occupancy Adjustment Factor:	106.00015%	DC Sem Index: 1.30450000
Med # Active Date: 03/09/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 319341			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,123,524	1,468,742	894,309	288,521		3,775,096	
1a	Audit Adjustments							
2	Cost Per Diem	59.4237	77.6824	47.3004	15.2600		199.6665	
3	Cost Per Diem Inflated	62.1878	80.8430	49.5006				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	62.1878	80.8430	49.5006	15.2600		207.7914	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.7144		67.0818				
7	Provider Target Rate	54.5912		70.8134				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500			
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674				
10	Target Rate Class Ceiling	67.5182		79.7567				
10a	New Provider Target Limitation	66.4229		78.8024				
10b	Base for line 10a	62.9226		74.6498				
11	Lesser of 5,7,8,10, 10a	54.5912	80.8430	49.5006	13.6500		198.5848	
12/13	Medicaid Adjustment Rate		1.0733	0.6572				
14	Prospective Per Diem 11	54.5912	81.9163	50.1578	13.6500		200.3153	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Grace Healthcare of Lake Wales

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 03/09/2011		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Variable	80% Capital(1):	3,569,464	8.7864
Indexed Asset Value	4,461,830	<60% of Base:	False	20% ROE(2):	892,366	0.5490
FRVS Base Asset:	1,301,586	Interest Rate:	7.0000%	Insurance Cost(3):	12,692	0.4149
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	32,795	1.0720
ROE Factor	0.020210	Amortization Rate:	5.2500%	Home Office(3):	15,178	0.4961
		Interest Only:	False	Replacement(3&4):	44,861	0.0000
		Yearly Payment:	288,632	Total FRVS PD:		11.3184

(1) 80% Capital (\$3,569,464) amortized at 5.2500 % for 20 years Principal & Interest of \$288,632 divided by annual available days (36500) divided by Occup. Adj. (0.90) = \$8.7864

(2) 20% ROE (\$892,366) times the ROE factor (0.020210) divided by annual available days (36500) divided by Occup. Adj. (0.90) = \$0.5490

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 100	Effective PBS Limitation	2,850,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.5912	54.5912	2.4768	52.1144
Direct Care	81.9163	81.9163	3.7165	78.1998
Indirect Care	50.1578	50.1578	2.2756	47.8822
Property	13.6500	11.3184	0.5135	10.8049
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.4748
Supplemental Rate				8.1814
Totals	200.3153	197.9837	8.9824	215.6575

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/07	1,244,284	0.00	3.9578	3.0000	0.9578	100	52.16	1,244,284	2,706,200	
1984/01	41,496	0.10	2.2530	2.2530		100	52.16	1,288,439	2,741,300	
1984/07		0.10	1.9179	1.9179		100	52.16	1,290,783	2,793,900	
1985/01	5,781	0.20	1.1471	1.1471		100	52.16	1,299,372	2,825,900	
1985/10		0.20	0.8522	0.8522		100	59.85	1,301,586	2,850,000	
1986/01		0.30	0.8299	0.8299		100	59.85	1,304,827	2,873,700	
1986/07		0.30	0.2974	0.2974		100	67.51	1,305,991	2,868,200	
1987/01		0.40	1.0091	1.0091		100	67.51	1,311,262	2,919,500	
1987/07		0.40	0.9007	0.9007		100	67.34	1,315,986	2,942,300	
1988/01		0.50	0.9007	0.9007		100	67.34	1,321,913	2,966,200	
1988/07		0.50	0.5899	0.5899		100	67.34	1,325,813	2,964,600	
1989/01		0.60	0.5899	0.5899		100	71.47	1,330,505	2,982,100	
1989/07	10,655	0.60	0.5899	0.5899		100	72.95	1,345,869	3,002,300	
1990/01		0.70	0.5899	0.5899		100	72.95	1,351,426	3,017,400	
1990/07	35,000	0.70	0.5899	0.5899		100	77.99	1,386,426	3,035,200	5
1991/01		0.80	0.5899	0.5899		100	77.99	1,392,006	3,053,000	5
1991/07	62,377	0.80	1.4932	1.4932		100	79.02	1,460,952	3,098,600	5
1992/01		0.90	2.0117	2.0117		100	79.02	1,477,659	3,160,900	5
1992/07		0.90	1.8152	1.8152		100	82.46	1,528,990	3,218,300	
1993/01		1.00	1.7710	1.7710		100	82.46	1,556,068	3,275,300	
1993/07		1.00	1.5329	1.5329		100	84.18	1,579,921	3,325,500	
1994/01		1.00	1.6983	1.6983		100	84.18	1,606,753	3,382,000	
1994/07	40,116	1.00	1.5991	1.5991		100	75.59	1,646,869	3,436,100	5
1995/01		1.00	1.5812	1.5812		100	75.59	1,699,010	3,490,400	
1995/07		1.00	1.5250	1.5250		100	79.24	1,724,920	3,543,600	
1996/01		1.00	1.7228	1.7228		100	79.24	1,754,637	3,604,700	
1996/07		1.00	1.3294	1.3294		100	79.24	1,777,963	3,652,600	
1997/01		1.00	1.4109	1.4109		100	79.24	1,803,048	3,704,100	
1997/07		1.00	1.0917	1.0917		100	79.24	1,822,732	3,744,500	
1998/01		1.00	1.1663	1.1663		100	79.24	1,843,991	3,788,200	



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215.66

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07		1.00	1.0794	1.0794		100	79.24	1,863,895	3,829,100	
1999/01		1.00	1.4499	1.4499		100	79.24	1,890,920	3,884,600	
1999/07		1.00	1.2299	1.2299		100	79.24	1,914,176	3,932,400	
2000/01		1.00	1.3356	1.3356		100	79.24	1,939,742	3,984,900	
2000/07		1.00	1.1129	1.1129		100	79.24	1,961,329	4,029,200	
2001/01		1.00	1.2976	1.2976		100	79.24	1,986,779	4,081,500	
2001/07		1.00	0.9615	0.9615		100	79.24	2,005,882	4,120,700	
2002/01		1.00	1.0301	1.0301		100	76.87	2,026,545	4,163,100	
2002/07		1.00	0.8337	0.8337		100	78.98	2,043,440	4,197,800	
2003/01		1.00	1.3271	1.3271		100	78.98	2,070,558	4,253,500	
2003/07		1.00	1.1664	1.1664		100	76.56	2,094,709	4,303,100	
2004/01		0.95	1.1103	1.1103		100	76.56	2,116,804	4,350,900	
2004/07		0.95	0.8378	0.8378		100	78.92	2,133,652	4,387,400	
2005/01		0.90	0.8595	0.8595		100	78.92	2,133,652	4,425,100	5
2005/07		0.90	0.7364	0.7364		100	78.92	2,150,158	4,457,700	5
2006/01	1,755,830	0.85	0.9068	0.9068		100	61.69	3,920,239	4,498,100	5
2006/07		0.85	0.8133	0.8133		100	61.69	3,936,922	4,534,700	5
2007/01		0.80	1.0133	1.0133		100	61.69	3,996,271	4,580,600	
2007/07		0.80	1.1050	1.1050		100	61.69	4,031,598	4,631,200	
2008/01		0.75	0.8556	0.8556		100	61.69	4,057,469	4,670,800	
2008/07		0.75	0.6104	0.6104		100	66.81	4,076,044	4,699,300	
2009/01		0.70	1.3268	1.3268		100	66.81	4,113,902	4,761,700	
2009/07		0.70	0.6841	0.6841		100	67.98	4,133,603	4,794,300	
2010/01		0.65	0.8643	0.8643		100	67.17	4,156,826	4,835,700	
2010/07		0.65	0.7107	0.7107		100	67.17	4,176,031	4,870,100	
2011/01	30,275	0.60	0.9198	0.9198		100	57.75	4,229,354	4,914,900	
2011/07	12,136	0.60	0.9028	0.9028		100	57.75	4,264,400	4,959,300	
2012/01		0.55	0.3865	0.3865		100	57.75	4,273,466	4,978,500	
2012/07		0.55	0.9417	0.9417		100	57.75	4,295,598	5,025,400	
2013/01		0.50	0.4901	0.4901		100	57.75	4,306,127	5,050,000	



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

0 034504-00 - 2016/09

215.66

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		100	57.75	4,319,467	5,081,300	
2014/01		0.45	0.8564	0.8564		100	59.67	4,336,114	5,124,800	
2014/07		0.45	1.2383	1.2383		100	59.54	4,360,275	5,188,300	
2015/01		0.40	0.7571	0.7571		100	59.54	4,373,478	5,227,600	
2015/09		0.40	1.5736	1.5736		100	66.15	4,401,005	5,309,900	
2016/09	30,185	0.35	1.9890	1.9890		100	61.80	4,461,830	5,415,500	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 034504123120150101201504282016111947



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0038640-00 - 2016/09

234.76

NuVista Living at Wellington Green

Type of Cost Report: Interim New Facility Type of Cost: Estimated Type of Rate: Interim

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: New Provider

Provider Information	Cost Report	Patient Days	Ratings Days
10330 NuVISTA AVENUE	7/1/2011-6/30/2012	Number of Beds: 120	Superior: 0
WELLINGTON, FL 33414	Days in CR 366	Maximum: 43,920	Standard: 366
County: Palm Beach [50]	First Used : 2011/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 29,785	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 13,401	Inflation
Current Class South Large	Initial CR? True	Medicaid: 7,448	FY Index: 1.26665332
Class at 1/94: South Large	Medicaid Utilization	25.00588%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	67.81648%	Cost: 1.00000000
Open Date: 10/04/2011	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/04/2011	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.19500000
Entered Medicaid 07/12/2011	Low Occupancy Adjustment Factor:	85.76548%	DC Sem Index: 1.30450000
Med # Active Date: 10/04/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	378,064	741,136	464,760	566,197		2,150,157	
1a	Audit Adjustments							
2	Cost Per Diem	50.7605	99.5081	62.4006	76.0200		288.6892	
3	Cost Per Diem Inflated	50.7605	99.5081	62.4006				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.7605	99.5081	62.4006	76.0200		288.6892	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	63.9059		71.0558				
10b	Base for line 10a	60.5383		67.3114				
11	Lesser of 5,7,8,10, 10a	50.7605	99.5081	62.4006	13.6500		226.3192	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	50.7605	99.5081	62.4006	13.6500		226.3192	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 038640-00 - 2016/09

234.76

NuVista Living at Wellington Green

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/04/2011	Amount:	22,227,907.00		Total Amount	Per Diem
RS to Start Calcs:	2011/07	Type:	Fixed	80% Capital(1):	4,781,067	9.3656
Indexed Asset Value	5,976,334	<60% of Base:	False	20% ROE(2):	1,195,267	0.5685
FRVS Base Asset:	5,897,880	Interest Rate:	4.7000%	Insurance Cost(3):	75,581	2.5376
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	363,592	12.2072
ROE Factor	0.018750	Amortization Rate:	4.7000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	369,192	Total FRVS PD:		24.6789

(1) 80% Capital (\$4,781,067) amortized at 4.7000 % for 20 years Principal & Interest of \$369,192 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.3656

(2) 20% ROE (\$1,195,267) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5685

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	49,149
Comparison Date: 01/01/2011	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	5,897,880

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.7605	50.7605	2.3030	48.4575
Direct Care	99.5081	99.5081	4.5146	94.9935
Indirect Care	62.4006	62.4006	2.8311	59.5695
Property	13.6500	24.6789	1.1197	23.5592
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	226.3192	237.3481	10.7684	234.7611

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2012

0 038640-00 - 2016/09
234.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07	35,474,823	0.00	0.9028	0.9028		120	25.01	5,897,880	5,897,880	1
2012/01		0.10	0.3865	0.3865		120	25.01	5,898,918	5,974,200	
2012/07		0.10	0.9417	0.9417		120	25.01	5,901,445	6,030,480	
2013/01		0.20	0.4901	0.4901		120	25.01	5,904,075	6,060,000	
2013/07		0.20	0.6196	0.6196		120	25.01	5,907,401	6,097,560	
2014/01		0.30	0.8564	0.8564		120	25.01	5,914,302	6,149,760	
2014/07		0.30	1.2383	1.2383		120	25.01	5,924,293	6,225,960	
2015/01		0.40	0.7571	0.7571		120	25.01	5,932,450	6,273,120	
2015/09		0.40	1.5736	1.5736		120	25.01	5,949,429	6,371,880	
2016/09		0.50	1.9890	1.9890		120	25.01	5,976,334	6,498,600	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0041324-00 - 2016/09

231.47

NuVista Living at Hillsborough Lakes

Type of Cost Report: Interim New Facility Type of Cost: Estimated Type of Rate: Interim

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: New Provider

Provider Information	Cost Report	Patient Days	Ratings Days
19091 N DALE MABRY HWY	7/1/2011-6/30/2012	Number of Beds: 120	Superior: 0
LUTZ, FL 33548	Days in CR 366	Maximum: 43,920	Standard: 366
County: Hillsborough [29]	First Used : 2011/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 26,024	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,807	Inflation
Current Class Central Large	Initial CR? True	Medicaid: 15,614	FY Index: 1.26665332
Class at 1/94: North Large	Medicaid Utilization	59.99846%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	59.25319%	Cost: 1.00000000
Open Date: 09/28/2011	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/28/2011	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.19500000
Entered Medicaid 09/28/2011	Low Occupancy Adjustment Factor:	74.93574%	DC Sem Index: 1.30450000
Med # Active Date: 09/28/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	772,713	1,538,273	844,878	932,156		4,088,020	
1a	Audit Adjustments							
2	Cost Per Diem	49.4885	98.5188	54.1103	59.7000		261.8176	
3	Cost Per Diem Inflated	49.4885	98.5188	54.1103				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.4885	98.5188	54.1103	59.7000		261.8176	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	58.8585		68.4364				
10b	Base for line 10a	55.7569		64.8300				
11	Lesser of 5,7,8,10, 10a	49.4885	98.5188	54.1103	13.6500		215.7676	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	49.4885	98.5188	54.1103	13.6500		215.7676	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 041324-00 - 2016/09

231.47

NuVista Living at Hillsborough Lakes

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/28/2011		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	13,984,000.00		Total Amount	Per Diem
RS to Start Calcs:	2011/07	Type:	Fixed	80% Capital(1):	4,857,204	10.0712
Indexed Asset Value	6,071,505	<60% of Base:	False	20% ROE(2):	1,214,301	0.5776
FRVS Base Asset:	5,897,880	Interest Rate:	5.3800%	Insurance Cost(3):	186,486	7.1659
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	353,009	13.5647
ROE Factor	0.018750	Amortization Rate:	5.3800%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	397,005	Total FRVS PD:		31.3794

(1) 80% Capital (\$4,857,204) amortized at 5.3800 % for 20 years Principal & Interest of \$397,005 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.0712

(2) 20% ROE (\$1,214,301) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5776

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/2011	Current RS PBS:	49,149
Comparison Bed	120	Effective PBS Limitation	54,155
			5,897,880

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.4885	49.4885	2.2453	47.2432
Direct Care	98.5188	98.5188	4.4697	94.0491
Indirect Care	54.1103	54.1103	2.4550	51.6553
Property	13.6500	31.3794	1.4237	29.9557
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				0.3807
Supplemental Rate				8.1814
Totals	215.7676	233.4970	10.5937	231.4654

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2012

0 041324-00 - 2016/09
231.47

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07	16,700,860	0.00	0.9028	0.9028		120	60.00	5,897,880	5,897,880	1
2012/01		0.10	0.3865	0.3865		120	60.00	5,900,162	5,974,200	
2012/07		0.10	0.9417	0.9417		120	60.00	5,905,720	6,030,480	
2013/01		0.20	0.4901	0.4901		120	60.00	5,911,508	6,060,000	
2013/07		0.20	0.6196	0.6196		120	60.00	5,918,832	6,097,560	
2014/01		0.30	0.8564	0.8564		120	60.00	5,934,037	6,149,760	
2014/07		0.30	1.2383	1.2383		120	60.00	5,956,082	6,225,960	
2015/01		0.40	0.7571	0.7571		120	60.00	5,974,117	6,273,120	
2015/09		0.40	1.5736	1.5736		120	60.00	6,011,718	6,371,880	
2016/09		0.50	1.9890	1.9890		120	60.00	6,071,505	6,498,600	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0041685-00 - 2016/09

218.58

University Center West

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
545 WEST EUCLID AVENUE	9/1/2014-2/28/2015	Number of Beds: 60	Superior: 0
DELAND, FL 32720	Days in CR 181	Maximum: 10,860	Standard: 366
County: Volusia [64]	First Used : 2016/09	Max Annualized: 21,900	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 9,304	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 610	Inflation
Current Class North Small	Initial CR? False	Medicaid: 8,337	FY Index: 1.35644350
Class at 1/94: North Small	Medicaid Utilization	89.60662%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	85.67219%	Cost: 1.06422011
Open Date: 07/01/1972	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1972	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23833109
Entered Medicaid 07/01/1972	Low Occupancy Adjustment Factor:	108.34706%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05343394
Previous Med # 212831			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	367,467	628,420	426,850	147,898		1,570,635	
1a	Audit Adjustments							
2	Cost Per Diem	44.0766	75.3772	51.1995	17.7400		188.3933	
3	Cost Per Diem Inflated	46.9072	79.4049	54.4875				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.9072	79.4049	54.4875	17.7400		198.5396	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.9699		62.4156				
7	Provider Target Rate	55.9165		65.8877				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	46.9072	79.4049	54.4875	13.6500		194.4496	
12/13	Medicaid Adjustment Rate		3.5381	2.4278				
14	Prospective Per Diem 11	46.9072	82.9430	56.9153	13.6500		200.4155	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0 041685-00 - 2016/09

218.58

University Center West

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/01/1985		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	958,334.00		Total Amount	Per Diem
RS to Start Calcs:	1972/07	Type:	Variable	80% Capital(1):	1,067,452	6.9307
Indexed Asset Value	1,334,315	<60% of Base:	False	20% ROE(2):	266,863	0.2793
FRVS Base Asset:	688,794	Interest Rate:	11.5000%	Insurance Cost(3):	18,618	2.0011
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	5,343	0.5743
ROE Factor	0.020630	Amortization Rate:	11.5000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	11,234	0.0000
		Yearly Payment:	136,604	Total FRVS PD:		9.7854

- (1) 80% Capital (\$1,067,452) amortized at 11.5000 % for 20 years Principal & Interest of \$136,604 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$6.9307
- (2) 20% ROE (\$266,863) times the ROE factor (0.020630) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.2793
- (3) Pass-throughs: Cost divided by Total Patient Days
- (4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	28,500
Comparison Date:	07/01/1985	Current RS PBS:	54,155
Comparison Bed	60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.9072	46.9072	2.1282	44.7790
Direct Care	82.9430	82.9430	3.7631	79.1799
Indirect Care	56.9153	56.9153	2.5822	54.3331
Property	13.6500	9.7854	0.4440	9.3414
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.7695
Supplemental Rate				8.1814
Totals	200.4155	196.5509	8.9175	218.5843

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 2/28/2015

0 041685-00 - 2016/09

218.58

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1972/07	382,794	0.00	4.9326	3.0000	1.9326	60	100.00	382,794	671,700	
1973/01		0.10	7.0835	3.0000	4.0835	60	100.00	383,942	706,320	
1973/07		0.10	9.7399	3.0000	6.7399	60	100.00	385,094	746,280	
1974/01	8,600	0.20	11.9670	3.0000	8.9670	60	100.00	396,005	785,280	
1974/07		0.20	12.0707	3.0000	9.0707	60	100.00	398,381	809,640	
1975/01	22,580	0.30	12.1612	3.0000	9.1612	60	100.00	424,546	834,660	
1975/07	470	0.30	13.2246	3.0000	10.2246	60	100.00	428,837	868,620	
1976/01		0.40	14.2691	3.0000	11.2691	60	100.00	433,983	903,720	
1976/07		0.40	14.7543	3.0000	11.7543	60	100.00	439,191	935,220	
1977/01		0.50	15.5049	3.0000	12.5049	60	100.00	445,779	970,320	
1977/07		0.50	17.5625	3.0000	14.5625	60	100.00	452,466	1,019,340	
1978/01		0.60	19.3022	3.0000	16.3022	60	100.00	460,610	1,067,700	
1978/07		0.60	21.8416	3.0000	18.8416	60	100.00	468,901	1,126,800	
1979/01		0.70	23.9689	3.0000	20.9689	60	100.00	478,748	1,184,580	
1979/07		0.70	25.1671	3.0000	22.1671	60	100.00	488,802	1,234,320	
1980/01		0.80	28.3328	3.0000	25.3328	60	68.14	500,533	1,310,460	
1980/07		0.80	29.1435	3.0000	26.1435	60	68.14	512,546	1,360,380	
1981/01		0.90	29.9675	3.0000	26.9675	60	64.57	526,385	1,412,400	
1981/07		0.90	29.5563	3.0000	26.5563	60	64.57	540,597	1,448,940	
1982/01		1.00	29.2323	3.0000	26.2323	60	58.17	556,815	1,487,760	
1982/07		1.00	28.5300	3.0000	25.5300	60	58.17	573,519	1,521,900	
1983/04		1.00	28.1588	3.0000	25.1588	60	66.91	590,725	1,561,920	
1983/07		1.00	29.1166	3.0000	26.1166	60	66.91	608,447	1,623,720	
1984/01		1.00	27.4118	3.0000	24.4118	60	67.61	626,700	1,644,780	
1984/07		1.00	26.3297	3.0000	23.3297	60	67.61	645,501	1,676,340	
1985/01		1.00	24.4768	3.0000	21.4768	60	67.60	664,866	1,695,540	
1985/10	3,982	1.00	22.3290	3.0000	19.3290	60	67.60	688,794	1,710,000	
1986/01		1.00	20.1589	3.0000	17.1589	60	65.64	709,458	1,724,220	
1986/07		1.00	17.4563	3.0000	14.4563	60	65.64	730,742	1,720,920	
1987/01		1.00	15.4654	3.0000	12.4654	60	71.13	752,664	1,751,700	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07		1.00	13.3661	3.0000	10.3661	60	71.13	775,244	1,765,380	
1988/01		1.00	11.2668	3.0000	8.2668	60	71.13	798,501	1,779,720	
1988/07		1.00	8.8567	3.0000	5.8567	60	68.95	822,456	1,778,760	
1989/01		1.00	6.4466	3.0000	3.4466	60	68.64	847,130	1,789,260	
1989/07		1.00	4.0365	3.0000	1.0365	60	68.64	872,544	1,801,380	
1990/01		1.00	1.6264	1.6264		60	68.20	886,735	1,810,440	
1990/07		1.00	0.5899	0.5899		60	68.20	891,966	1,821,120	
1991/01		1.00	0.5899	0.5899		60	68.20	897,228	1,831,800	
1991/07		1.00	1.4932	1.4932		60	72.43	910,625	1,859,160	
1992/01		1.00	2.0117	2.0117		60	63.45	928,944	1,896,540	
1992/07		1.00	1.8152	1.8152		60	63.45	945,806	1,930,980	
1993/01		0.95	1.7710	1.7710		60	63.45	961,719	1,965,180	
1993/07		0.95	1.5329	1.5329		60	67.98	975,725	1,995,300	
1994/01		0.90	1.6983	1.6983		60	67.98	990,639	2,029,200	
1994/07		0.90	1.5991	1.5991		60	67.98	1,004,896	2,061,660	
1995/01		0.85	1.5812	1.5812		60	67.98	1,018,402	2,094,240	
1995/07		0.85	1.5250	1.5250		60	67.98	1,031,604	2,126,160	
1996/01		0.80	1.7228	1.7228		60	67.98	1,045,822	2,162,820	
1996/07	13,570	0.80	1.3294	1.3294		60	68.55	1,070,514	2,191,560	
1997/01		0.75	1.4109	1.4109		60	68.55	1,081,842	2,222,460	
1997/07		0.75	1.0917	1.0917		60	68.55	1,090,700	2,246,700	
1998/01		0.70	1.1663	1.1663		60	68.55	1,099,604	2,272,920	
1998/07		0.70	1.0794	1.0794		60	68.55	1,107,913	2,297,460	
1999/01		0.65	1.4499	1.4499		60	68.55	1,118,354	2,330,760	
1999/07	27,640	0.65	1.2299	1.2299		60	79.68	1,154,934	2,359,440	
2000/01		0.60	1.3356	1.3356		60	77.95	1,164,190	2,390,940	
2000/07		0.60	1.1129	1.1129		60	77.95	1,171,963	2,417,520	
2001/01		0.55	1.2976	1.2976		60	73.03	1,180,327	2,448,900	
2001/07		0.55	0.9615	0.9615		60	73.03	1,186,569	2,472,420	
2002/01		0.50	1.0301	1.0301		60	84.65	1,192,681	2,497,860	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		0.50	0.8337	0.8337		60	84.65	1,197,653	2,518,680	
2003/01		0.45	1.3271	1.3271		60	84.86	1,204,805	2,552,100	
2003/07		0.45	1.1664	1.1664		60	84.86	1,211,129	2,581,860	
2004/01	10,741	0.40	1.1103	1.1103		60	77.85	1,227,249	2,610,540	
2004/07		0.40	0.8378	0.8378		60	77.85	1,231,362	2,632,440	
2005/01		0.35	0.8595	0.8595		60	83.01	1,235,066	2,655,060	
2005/07		0.35	0.7364	0.7364		60	83.01	1,238,249	2,674,620	
2006/01		0.30	0.9068	0.9068		60	80.33	1,241,617	2,698,860	
2006/07		0.30	0.8133	0.8133		60	80.33	1,244,647	2,720,820	
2007/01		0.25	1.0133	1.0133		60	80.33	1,247,800	2,748,360	
2007/07		0.25	1.1050	1.1050		60	79.43	1,251,248	2,778,720	
2008/01		0.20	0.8556	0.8556		60	79.43	1,253,389	2,802,480	
2008/07		0.20	0.6104	0.6104		60	84.19	1,254,919	2,819,580	
2009/01		0.15	1.3268	1.3268		60	84.19	1,257,416	2,857,020	
2009/07		0.15	0.6841	0.6841		60	82.29	1,258,706	2,876,580	
2010/01		0.10	0.8643	0.8643		60	82.29	1,259,794	2,901,420	
2010/07		0.10	0.7107	0.7107		60	85.67	1,260,690	2,922,060	
2011/01	11,710	0.05	0.9198	0.9198		60	91.85	1,272,980	2,948,940	
2011/07		0.05	0.9028	0.9028		60	91.85	1,273,554	2,975,580	
2012/01		0.00	0.3865	0.3865		60	91.85	1,273,554	2,987,100	
2012/07		0.00	0.9417	0.9417		60	92.32	1,273,554	3,015,240	
2013/01		0.00	0.4901	0.4901		60	92.32	1,273,554	3,030,000	
2013/07	46,854	0.00	0.6196	0.6196		60	86.34	1,320,408	3,048,780	
2014/01		0.00	0.8564	0.8564		60	86.34	1,320,408	3,074,880	
2014/07	13,907	0.00	1.2383	1.2383		60	90.52	1,334,315	3,112,980	
2015/01		0.00	0.7571	0.7571		60	91.53	1,334,315	3,136,560	
2015/09		0.00	1.5736	1.5736		60	91.53	1,334,315	3,185,940	
2016/09		0.00	1.9890	1.9890		60	89.61	1,334,315	3,249,300	

Message Code:

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 041685022820150901201407072015141215



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University Center East

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
991 E NEW YORK AVE	2/1/2015-1/31/2016	Number of Beds: 60	Superior: 0
DELAND, FL 32724	Days in CR 365	Maximum: 21,900	Standard: 366
County: Volusia [64]	First Used : 2016/09	Max Annualized: 21,900	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 17,341	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 944	Inflation
Current Class North Small	Initial CR? False	Medicaid: 14,757	FY Index: 1.38133246
Class at 1/94: North Small	Medicaid Utilization	85.09890%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	79.18265%	Cost: 1.04504491
Open Date: 08/01/1972	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1972	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25516446
Entered Medicaid 08/01/1972	Low Occupancy Adjustment Factor:	100.13994%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03930604
Previous Med # 212873			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	827,833	1,089,481	802,933	289,090		3,009,337	
1a	Audit Adjustments							
2	Cost Per Diem	56.0976	73.8281	54.4103	19.5900		203.9260	
3	Cost Per Diem Inflated	58.6245	76.7300	56.8612				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	58.6245	76.7300	56.8612	19.5900		211.8057	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.5379		62.4156				
7	Provider Target Rate	55.4605		65.8877				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	55.4605	76.7300	56.8612	13.6500		202.7017	
12/13	Medicaid Adjustment Rate		3.0298	2.2452				
14	Prospective Per Diem 11	55.4605	79.7598	59.1064	13.6500		207.9767	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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University Center East

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	1,500,000.00		Total Amount	Per Diem
RS to Start Calcs:	1972/07	Type:	Variable	80% Capital(1):	902,546	5.8600
Indexed Asset Value	1,128,182	<60% of Base:	False	20% ROE(2):	225,636	0.2325
FRVS Base Asset:	605,676	Interest Rate:	11.5000%	Insurance Cost(3):	33,479	1.9306
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	12,734	0.7343
ROE Factor	0.020310	Amortization Rate:	11.5000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	18,808	0.0000
		Yearly Payment:	115,500	Total FRVS PD:		8.7574

(1) 80% Capital (\$902,546) amortized at 11.5000 % for 20 years Principal & Interest of \$115,500 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$5.8600

(2) 20% ROE (\$225,636) times the ROE factor (0.020310) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.2325

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	60	Effective PBS Limitation	54,155
			1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.4605	55.4605	2.5162	52.9443
Direct Care	79.7598	79.7598	3.6187	76.1411
Indirect Care	59.1064	59.1064	2.6816	56.4248
Property	13.6500	8.7574	0.3973	8.3601
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.1120
Supplemental Rate				8.1814
Totals	207.9767	203.0841	9.2138	225.1637

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1972/07	400,857	0.00	4.9326	3.0000	1.9326	60	100.00	400,857	671,700	
1973/01		0.10	7.0835	3.0000	4.0835	60	100.00	402,060	706,320	
1973/07		0.10	9.7399	3.0000	6.7399	60	100.00	403,266	746,280	
1974/01		0.20	11.9670	3.0000	8.9670	60	100.00	405,686	785,280	
1974/07		0.20	12.0707	3.0000	9.0707	60	100.00	408,120	809,640	
1975/01		0.30	12.1612	3.0000	9.1612	60	100.00	411,793	834,660	
1975/07		0.30	13.2246	3.0000	10.2246	60	100.00	415,499	868,620	
1976/01		0.40	14.2691	3.0000	11.2691	60	100.00	420,485	903,720	
1976/07		0.40	14.7543	3.0000	11.7543	60	100.00	425,531	935,220	
1977/01		0.50	15.5049	3.0000	12.5049	60	100.00	431,914	970,320	
1977/07		0.50	17.5625	3.0000	14.5625	60	100.00	438,393	1,019,340	
1978/01		0.60	19.3022	3.0000	16.3022	60	100.00	446,284	1,067,700	
1978/07		0.60	21.8416	3.0000	18.8416	60	100.00	454,317	1,126,800	
1979/01		0.70	23.9689	3.0000	20.9689	60	100.00	463,858	1,184,580	
1979/07		0.70	25.1671	3.0000	22.1671	60	100.00	473,599	1,234,320	
1980/01		0.80	28.3328	3.0000	25.3328	60	34.11	480,648	1,310,460	
1980/07		0.80	29.1435	3.0000	26.1435	60	34.11	487,802	1,360,380	
1981/01		0.90	29.9675	3.0000	26.9675	60	34.91	496,162	1,412,400	
1981/07		0.90	29.5563	3.0000	26.5563	60	34.91	504,665	1,448,940	
1982/01		1.00	29.2323	3.0000	26.2323	60	31.49	513,333	1,487,760	
1982/07		1.00	28.5300	3.0000	25.5300	60	31.49	522,150	1,521,900	
1983/04		1.00	28.1588	3.0000	25.1588	60	30.98	530,973	1,561,920	
1983/07		1.00	29.1166	3.0000	26.1166	60	30.98	539,945	1,623,720	
1984/01		1.00	27.4118	3.0000	24.4118	60	30.92	549,051	1,644,780	
1984/07		1.00	26.3297	3.0000	23.3297	60	30.92	558,311	1,676,340	
1985/01		1.00	24.4768	3.0000	21.4768	60	30.91	567,724	1,695,540	
1985/10	28,380	1.00	22.3290	3.0000	19.3290	60	30.91	605,676	1,710,000	
1986/01		1.00	20.1589	3.0000	17.1589	60	35.04	617,252	1,724,220	
1986/07		1.00	17.4563	3.0000	14.4563	60	35.04	629,049	1,720,920	
1987/01		1.00	15.4654	3.0000	12.4654	60	37.17	641,803	1,751,700	



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1987/07		1.00	13.3661	3.0000	10.3661	60	37.17	654,815	1,765,380	
1988/01		1.00	11.2668	3.0000	8.2668	60	37.17	668,091	1,779,720	
1988/07		1.00	8.8567	3.0000	5.8567	60	44.05	684,143	1,778,760	
1989/01		1.00	6.4466	3.0000	3.4466	60	47.97	702,044	1,789,260	
1989/07		1.00	4.0365	3.0000	1.0365	60	47.97	720,413	1,801,380	
1990/01		1.00	1.6264	1.6264		60	49.62	730,984	1,810,440	
1990/07		1.00	0.5899	0.5899		60	49.62	734,874	1,821,120	
1991/01		1.00	0.5899	0.5899		60	49.62	738,785	1,831,800	
1991/07		1.00	1.4932	1.4932		60	58.56	749,817	1,859,160	
1992/01		1.00	2.0117	2.0117		60	59.39	764,901	1,896,540	
1992/07		1.00	1.8152	1.8152		60	59.39	778,785	1,930,980	
1993/01		0.95	1.7710	1.7710		60	59.39	791,888	1,965,180	
1993/07	17,646	0.95	1.5329	1.5329		60	66.29	821,066	1,995,300	
1994/01		0.90	1.6983	1.6983		60	66.29	833,616	2,029,200	
1994/07		0.90	1.5991	1.5991		60	66.29	845,613	2,061,660	
1995/01		0.85	1.5812	1.5812		60	66.29	856,978	2,094,240	
1995/07		0.85	1.5250	1.5250		60	66.29	868,087	2,126,160	
1996/01		0.80	1.7228	1.7228		60	66.29	880,051	2,162,820	
1996/07	27,130	0.80	1.3294	1.3294		60	68.59	916,540	2,191,560	
1997/01		0.75	1.4109	1.4109		60	68.59	926,239	2,222,460	
1997/07		0.75	1.0917	1.0917		60	68.59	933,823	2,246,700	
1998/01		0.70	1.1663	1.1663		60	68.59	941,447	2,272,920	
1998/07		0.70	1.0794	1.0794		60	68.59	948,561	2,297,460	
1999/01		0.65	1.4499	1.4499		60	68.59	957,500	2,330,760	
1999/07		0.65	1.2299	1.2299		60	77.09	965,154	2,359,440	
2000/01		0.60	1.3356	1.3356		60	75.41	972,889	2,390,940	
2000/07		0.60	1.1129	1.1129		60	75.41	979,385	2,417,520	
2001/01		0.55	1.2976	1.2976		60	75.41	986,375	2,448,900	
2001/07		0.55	0.9615	0.9615		60	74.90	991,591	2,472,420	
2002/01		0.50	1.0301	1.0301		60	73.36	996,699	2,497,860	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		0.50	0.8337	0.8337		60	73.36	1,000,854	2,518,680	
2003/01		0.45	1.3271	1.3271		60	72.65	1,006,831	2,552,100	
2003/07		0.45	1.1664	1.1664		60	72.65	1,012,116	2,581,860	
2004/01		0.40	1.1103	1.1103		60	77.60	1,016,611	2,610,540	
2004/07		0.40	0.8378	0.8378		60	77.60	1,020,018	2,632,440	
2005/01		0.35	0.8595	0.8595		60	79.59	1,023,086	2,655,060	
2005/07		0.35	0.7364	0.7364		60	79.59	1,025,722	2,674,620	
2006/01		0.30	0.9068	0.9068		60	77.38	1,028,512	2,698,860	
2006/07		0.30	0.8133	0.8133		60	77.38	1,031,022	2,720,820	
2007/01		0.25	1.0133	1.0133		60	77.38	1,033,634	2,748,360	
2007/07		0.25	1.1050	1.1050		60	72.21	1,036,490	2,778,720	
2008/01		0.20	0.8556	0.8556		60	72.21	1,038,263	2,802,480	
2008/07		0.20	0.6104	0.6104		60	70.91	1,039,531	2,819,580	
2009/01		0.15	1.3268	1.3268		60	79.90	1,041,600	2,857,020	
2009/07		0.15	0.6841	0.6841		60	79.90	1,042,669	2,876,580	
2010/01		0.10	0.8643	0.8643		60	79.90	1,043,570	2,901,420	
2010/07		0.10	0.7107	0.7107		60	82.67	1,044,312	2,922,060	
2011/01		0.05	0.9198	0.9198		60	80.46	1,044,792	2,948,940	
2011/07		0.05	0.9028	0.9028		60	80.46	1,045,263	2,975,580	
2012/01		0.00	0.3865	0.3865		60	80.46	1,045,263	2,987,100	
2012/07		0.00	0.9417	0.9417		60	83.49	1,045,263	3,015,240	
2013/01		0.00	0.4901	0.4901		60	83.49	1,045,263	3,030,000	
2013/07	60,170	0.00	0.6196	0.6196		60	79.53	1,105,433	3,048,780	
2014/01		0.00	0.8564	0.8564		60	79.53	1,105,433	3,074,880	
2014/07	13,749	0.00	1.2383	1.2383		60	81.89	1,119,182	3,112,980	
2015/01		0.00	0.7571	0.7571		60	86.65	1,119,182	3,136,560	
2015/09		0.00	1.5736	1.5736		60	86.65	1,119,182	3,185,940	
2016/09	9,000	0.00	1.9890	1.9890		60	85.10	1,128,182	3,249,300	

Message Code:

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Report Calculated: 6/30/2016 8:16:40 AM

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Heron Pointe Health and Rehabilitation

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1445 HOWELL AVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
BROOKSVILLE, FL 34601-1502	Days in CR 365	Maximum: 43,800	Standard: 366
County: Hernando [27]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 42,432	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,396	Inflation
Current Class North Large	Initial CR? False	Medicaid: 30,895	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	72.81061%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.87671%	Cost: 1.04651568
Open Date: 11/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 11/01/1984	Low Occupancy Adjustment Factor:	122.51709%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252174			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,434,843	2,044,694	1,092,325	992,965		5,564,827
1a	Audit Adjustments						
2	Cost Per Diem	46.4426	66.1820	35.3560	32.1400		180.1206
3	Cost Per Diem Inflated	48.6029	68.8747	37.0006			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.6029	68.8747	37.0006	32.1400		186.6182
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	52.9727		59.2838			
7	Provider Target Rate	55.9195		62.5816			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	53.3213		67.2298			
10b	Base for line 10a	50.5114		63.6870			
11	Lesser of 5,7,8,10, 10a	48.6029	68.8747	37.0006	13.6500		168.1282
12/13	Medicaid Adjustment Rate		1.7675	0.9495			
14	Prospective Per Diem 11	48.6029	70.6422	37.9501	13.6500		170.8452
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Heron Pointe Health and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/01/2001	Amount:	1,980,521.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	2,909,012	7.2699
Indexed Asset Value	3,636,265	<60% of Base:	False	20% ROE(2):	727,253	0.3729
FRVS Base Asset:	2,054,536	Interest Rate:	10.6343%	Insurance Cost(3):	28,793	0.6786
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	56,596	1.3338
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	36,178	0.8526
		Interest Only:	False	Replacement(3&4):	61,676	0.0000
		Yearly Payment:	286,578	Total FRVS PD:		10.5078

(1) 80% Capital (\$2,909,012) amortized at 7.7500 % for 20 years Principal & Interest of \$286,578 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.2699

(2) 20% ROE (\$727,253) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3729

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.6029	48.6029	2.2051	46.3978
Direct Care	70.6422	70.6422	3.2050	67.4372
Indirect Care	37.9501	37.9501	1.7218	36.2283
Property	13.6500	10.5078	0.4767	10.0311
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.4532
Supplemental Rate				8.1814
Totals	170.8452	167.7030	7.6086	189.7290

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/07	2,025,758	0.00	3.9578	3.0000	0.9578	120	68.39	2,025,758	3,247,440	
1984/01	7,577	0.10	2.2530	2.2530		120	68.39	2,037,899	3,289,560	
1984/07	195	0.10	1.9179	1.9179		120	68.39	2,042,003	3,352,680	
1985/01	4,354	0.20	1.1471	1.1471		120	68.39	2,051,041	3,391,080	
1985/10		0.20	0.8522	0.8522		120	68.39	2,054,536	3,420,000	
1986/01		0.30	0.8299	0.8299		120	64.97	2,059,652	3,448,440	
1986/07		0.30	0.2974	0.2974		120	64.97	2,061,489	3,441,840	
1987/01		0.40	1.0091	1.0091		120	69.69	2,069,809	3,503,400	
1987/07		0.40	0.9007	0.9007		120	69.69	2,077,267	3,530,760	
1988/01		0.50	0.9007	0.9007		120	73.30	2,086,623	3,559,440	
1988/07		0.50	0.5899	0.5899		120	73.30	2,092,779	3,557,520	
1989/01		0.60	0.5899	0.5899		120	73.95	2,100,185	3,578,520	
1989/07		0.60	0.5899	0.5899		120	73.95	2,107,618	3,602,760	
1990/01		0.70	0.5899	0.5899		120	64.95	2,116,320	3,620,880	
1990/07		0.70	0.5899	0.5899		120	64.95	2,125,058	3,642,240	
1991/01		0.80	0.5899	0.5899		120	59.74	2,135,086	3,663,600	
1991/07		0.80	1.4932	1.4932		120	59.74	2,160,592	3,718,320	
1992/01		0.90	2.0117	2.0117		120	73.24	2,199,710	3,793,080	
1992/07		0.90	1.8152	1.8152		120	73.24	2,235,647	3,861,960	
1993/01		1.00	1.7710	1.7710		120	77.28	2,275,240	3,930,360	
1993/07		1.00	1.5329	1.5329		120	77.28	2,310,117	3,990,600	
1994/01		1.00	1.6983	1.6983		120	71.50	2,349,350	4,058,400	
1994/07		1.00	1.5991	1.5991		120	71.50	2,386,918	4,123,320	
1995/01		1.00	1.5812	1.5812		120	67.80	2,424,660	4,188,480	
1995/07		1.00	1.5250	1.5250		120	67.80	2,461,636	4,252,320	
1996/01	53,363	1.00	1.7228	1.7228		120	66.31	2,557,408	4,325,640	
1996/07		1.00	1.3294	1.3294		120	66.31	2,557,408	4,383,120	5
1997/01	26,607	1.00	1.4109	1.4109		120	66.57	2,618,013	4,444,920	5
1997/07		1.00	1.0917	1.0917		120	66.57	2,654,575	4,493,400	5
1998/01		1.00	1.1663	1.1663		120	69.54	2,714,853	4,545,840	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07		1.00	1.0794	1.0794		120	69.54	2,744,157	4,594,920	
1999/01		1.00	1.4499	1.4499		120	70.05	2,744,157	4,661,520	5
1999/07		1.00	1.2299	1.2299		120	70.05	2,818,185	4,718,880	
2000/01	46,024	1.00	1.3356	1.3356		120	68.78	2,901,849	4,781,880	
2000/07		1.00	1.1129	1.1129		120	68.78	2,934,144	4,835,040	
2001/01		1.00	1.2976	1.2976		120	71.47	2,972,217	4,897,800	
2001/07		1.00	0.9615	0.9615		120	75.92	3,000,795	4,944,840	
2002/01		1.00	1.0301	1.0301		120	75.92	3,031,706	4,995,720	
2002/07		1.00	0.8337	0.8337		120	75.92	3,056,981	5,037,360	
2003/01		1.00	1.3271	1.3271		120	75.92	3,097,550	5,104,200	
2003/07		1.00	1.1664	1.1664		120	75.92	3,133,680	5,163,720	
2004/01		0.95	1.1103	1.1103		120	75.92	3,166,734	5,221,080	
2004/07		0.95	0.8378	0.8378		120	73.58	3,191,938	5,264,880	
2005/01		0.90	0.8595	0.8595		120	73.58	3,216,631	5,310,120	
2005/07		0.90	0.7364	0.7364		120	73.25	3,237,951	5,349,240	
2006/01		0.85	0.9068	0.9068		120	73.25	3,262,909	5,397,720	
2006/07		0.85	0.8133	0.8133		120	69.12	3,285,465	5,441,640	
2007/01		0.80	1.0133	1.0133		120	66.99	3,312,097	5,496,720	
2007/07		0.80	1.1050	1.1050		120	66.99	3,341,376	5,557,440	
2008/01		0.75	0.8556	0.8556		120	66.99	3,362,818	5,604,960	
2008/07		0.75	0.6104	0.6104		120	70.14	3,378,213	5,639,160	
2009/01		0.70	1.3268	1.3268		120	69.28	3,409,590	5,714,040	
2009/07		0.70	0.6841	0.6841		120	69.28	3,425,919	5,753,160	
2010/01		0.65	0.8643	0.8643		120	69.28	3,445,166	5,802,840	
2010/07		0.65	0.7107	0.7107		120	62.92	3,461,083	5,844,120	
2011/01		0.60	0.9198	0.9198		120	62.92	3,480,185	5,897,880	
2011/07		0.60	0.9028	0.9028		120	67.92	3,499,037	5,951,160	
2012/01		0.55	0.3865	0.3865		120	69.03	3,506,476	5,974,200	
2012/07		0.55	0.9417	0.9417		120	69.03	3,524,636	6,030,480	
2013/01		0.50	0.4901	0.4901		120	69.03	3,533,275	6,060,000	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		120	69.03	3,544,221	6,097,560	
2014/01		0.45	0.8564	0.8564		120	69.03	3,557,880	6,149,760	
2014/07		0.45	1.2383	1.2383		120	69.03	3,577,705	6,225,960	
2015/01		0.40	0.7571	0.7571		120	71.93	3,588,538	6,273,120	
2015/09		0.40	1.5736	1.5736		120	71.93	3,611,124	6,371,880	
2016/09		0.35	1.9890	1.9890		120	72.81	3,636,265	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 043832123120150101201504252016110649



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Heritage Healthcare Center At Tallahassee

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3101 GINGER DR	1/1/2015-12/31/2015	Number of Beds: 180	Superior: 0
TALLAHASSEE, FL 32308-4437	Days in CR 365	Maximum: 65,700	Standard: 366
County: Leon [37]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 59,713	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,440	Inflation
Current Class North Large	Initial CR? False	Medicaid: 45,554	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	76.28825%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	90.88737%	Cost: 1.04651568
Open Date: 10/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 10/01/1983	Low Occupancy Adjustment Factor:	114.94255%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252298			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,162,384	3,064,668	1,613,939	1,130,195		7,971,186
1a	Audit Adjustments						
2	Cost Per Diem	47.4686	67.2755	35.4291	24.8100		174.9832
3	Cost Per Diem Inflated	49.6766	70.0127	37.0771			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	49.6766	70.0127	37.0771	24.8100		181.5764
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	51.5462		55.4171			
7	Provider Target Rate	54.4136		58.4998			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	54.6248		61.1523			
10b	Base for line 10a	51.7463		57.9298			
11	Lesser of 5,7,8,10, 10a	49.6766	70.0127	37.0771	13.6500		170.4164
12/13	Medicaid Adjustment Rate		2.0706	1.0965			
14	Prospective Per Diem 11	49.6766	72.0833	38.1736	13.6500		173.5835
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Heritage Healthcare Center At Tallahassee

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/01/1997		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,364,391.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Fixed	80% Capital(1):	6,859,238	11.4279
Indexed Asset Value	8,574,048	<60% of Base:	False	20% ROE(2):	1,714,810	0.5861
FRVS Base Asset:	3,249,000	Interest Rate:	10.6343%	Insurance Cost(3):	48,495	0.8121
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	83,119	1.3920
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	52,160	0.8735
		Interest Only:	False	Replacement(3&4):	90,558	0.0000
		Yearly Payment:	675,730	Total FRVS PD:		15.0916

(1) 80% Capital (\$6,859,238) amortized at 7.7500 % for 20 years Principal & Interest of \$675,730 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$11.4279

(2) 20% ROE (\$1,714,810) times the ROE factor (0.020210) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.5861

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 114	Effective PBS Limitation	3,249,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.6766	49.6766	2.2538	47.4228
Direct Care	72.0833	72.0833	3.2704	68.8129
Indirect Care	38.1736	38.1736	1.7319	36.4417
Property	13.6500	15.0916	0.6847	14.4069
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9435
Supplemental Rate				8.1814
Totals	173.5835	175.0251	7.9408	196.2092

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/07	3,571,279	0.00	3.9578	3.0000	0.9578	114	61.66	3,571,279	3,085,068	
1984/01	20,801	0.10	2.2530	2.2530		114	61.66	3,600,126	3,125,082	
1984/07	2,558	0.10	1.9179	1.9179		114	61.66	3,609,589	3,185,046	
1985/01		0.20	1.1471	1.1471		114	61.66	3,617,869	3,221,526	
1985/10		0.20	0.8522	0.8522		114	61.66	3,249,000	3,249,000	1
1986/01		0.30	0.8299	0.8299		114	78.46	3,257,090	3,276,018	
1986/07		0.30	0.2974	0.2974		114	78.46	3,259,995	3,269,748	
1987/01		0.40	1.0091	1.0091		114	80.17	3,273,152	3,328,230	
1987/07		0.40	0.9007	0.9007		114	80.17	3,284,945	3,354,222	
1988/01		0.50	0.9007	0.9007		114	76.56	3,299,740	3,381,468	
1988/07		0.50	0.5899	0.5899		114	76.56	3,309,474	3,379,644	
1989/01	28,259	0.60	0.5899	0.5899		120	74.47	3,349,445	3,578,520	
1989/07		0.60	0.5899	0.5899		120	74.47	3,361,299	3,602,760	
1990/01		0.70	0.5899	0.5899		120	65.98	3,375,178	3,620,880	
1990/07		0.70	0.5899	0.5899		120	65.98	3,389,114	3,642,240	
1991/01		0.80	0.5899	0.5899		120	60.17	3,405,107	3,663,600	
1991/07		0.80	1.4932	1.4932		120	60.17	3,445,784	3,718,320	
1992/01		0.90	2.0117	2.0117		120	63.26	3,508,170	3,793,080	
1992/07		0.90	1.8152	1.8152		120	63.26	3,565,483	3,861,960	
1993/01	27,444	1.00	1.7710	1.7710		120	61.11	3,656,072	3,930,360	
1993/07		1.00	1.5329	1.5329		120	61.11	3,712,116	3,990,600	
1994/01		1.00	1.6983	1.6983		120	57.11	3,775,159	4,058,400	
1994/07		1.00	1.5991	1.5991		120	57.11	3,835,528	4,123,320	
1995/01		1.00	1.5812	1.5812		120	59.55	3,896,175	4,188,480	
1995/07		1.00	1.5250	1.5250		120	59.55	3,955,592	4,252,320	
1996/01		1.00	1.7228	1.7228		120	62.47	4,023,739	4,325,640	
1996/07		1.00	1.3294	1.3294		120	62.47	4,077,231	4,383,120	
1997/01		1.00	1.4109	1.4109		120	63.42	4,134,757	4,444,920	
1997/07		1.00	1.0917	1.0917		120	63.42	4,179,896	4,493,400	
1998/01	2,200,850	1.00	1.1663	1.1663		180	54.49	6,429,044	6,818,760	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07		1.00	1.0794	1.0794		180	54.49	6,497,796	6,892,380	
1999/01		1.00	1.4499	1.4499		180	57.92	6,592,008	6,992,280	
1999/07		1.00	1.2299	1.2299		180	57.92	6,673,083	7,078,320	
2000/01	80,141	1.00	1.3356	1.3356		180	61.50	6,753,224	7,172,820	5
2000/07		1.00	1.1129	1.1129		180	61.50	6,918,499	7,252,560	
2001/01		1.00	1.2976	1.2976		180	67.15	6,918,499	7,346,700	5
2001/07		1.00	0.9615	0.9615		180	74.01	7,075,658	7,417,260	
2002/01		1.00	1.0301	1.0301		180	74.01	7,148,544	7,493,580	
2002/07		1.00	0.8337	0.8337		180	74.01	7,208,141	7,556,040	
2003/01		1.00	1.3271	1.3271		180	74.01	7,303,800	7,656,300	
2003/07		1.00	1.1664	1.1664		180	74.01	7,303,800	7,745,580	5
2004/01		0.95	1.1103	1.1103		180	74.01	7,466,931	7,831,620	
2004/07		0.95	0.8378	0.8378		180	75.47	7,526,360	7,897,320	
2005/01		0.90	0.8595	0.8595		180	75.47	7,584,584	7,965,180	
2005/07		0.90	0.7364	0.7364		180	75.87	7,634,855	8,023,860	
2006/01		0.85	0.9068	0.9068		180	75.87	7,634,855	8,096,580	5
2006/07		0.85	0.8133	0.8133		180	76.80	7,746,891	8,162,460	
2007/01		0.80	1.0133	1.0133		180	75.94	7,809,687	8,245,080	
2007/07		0.80	1.1050	1.1050		180	75.94	7,878,725	8,336,160	
2008/01		0.75	0.8556	0.8556		180	69.62	7,929,283	8,407,440	
2008/07		0.75	0.6104	0.6104		180	69.62	7,965,583	8,458,740	
2009/01		0.70	1.3268	1.3268		180	67.63	8,039,567	8,571,060	
2009/07		0.70	0.6841	0.6841		180	67.63	8,078,068	8,629,740	
2010/01		0.65	0.8643	0.8643		180	67.63	8,123,451	8,704,260	
2010/07		0.65	0.7107	0.7107		180	72.37	8,123,451	8,766,180	5
2011/01		0.60	0.9198	0.9198		180	70.87	8,206,021	8,846,820	
2011/07		0.60	0.9028	0.9028		180	70.87	8,250,473	8,926,740	
2012/01		0.55	0.3865	0.3865		180	68.09	8,268,014	8,961,300	
2012/07		0.55	0.9417	0.9417		180	68.09	8,310,834	9,045,720	
2013/01		0.50	0.4901	0.4901		180	68.09	8,331,204	9,090,000	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		180	68.09	8,357,014	9,146,340	
2014/01		0.45	0.8564	0.8564		180	68.09	8,389,222	9,224,640	
2014/07		0.45	1.2383	1.2383		180	68.09	8,435,967	9,338,940	
2015/01		0.40	0.7571	0.7571		180	71.35	8,461,511	9,409,680	
2015/09		0.40	1.5736	1.5736		180	71.35	8,514,768	9,557,820	
2016/09		0.35	1.9890	1.9890		180	76.29	8,574,048	9,747,900	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Bay Breeze Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1026 ALBEE FARM RD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
VENICE, FL 34285-6213	Days in CR 365	Maximum: 43,800	Standard: 366
County: Sarasota [58]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 40,743	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,882	Inflation
Current Class South Large	Initial CR? False	Medicaid: 30,150	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	74.00044%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.02055%	Cost: 1.04651568
Open Date: 12/29/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/29/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 12/29/1983	Low Occupancy Adjustment Factor:	117.64032%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252271			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,496,523	2,406,391	1,159,394	950,931		6,013,239	
1a	Audit Adjustments							
2	Cost Per Diem	49.6359	79.8140	38.4542	31.5400		199.4441	
3	Cost Per Diem Inflated	51.9447	83.0613	40.2429				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.9447	83.0613	40.2429	31.5400		206.7889	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.0651		64.1346				
7	Provider Target Rate	60.2395		67.7023				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	60.0532		70.3746				
10b	Base for line 10a	56.8886		66.6661				
11	Lesser of 5,7,8,10, 10a	51.9447	83.0613	40.2429	13.6500		188.8989	
12/13	Medicaid Adjustment Rate		2.2427	1.0866				
14	Prospective Per Diem 11	51.9447	85.3040	41.3295	13.6500		192.2282	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Bay Breeze Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/23/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,099,608.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Fixed	80% Capital(1):	4,552,734	11.3777
Indexed Asset Value	5,690,918	<60% of Base:	False	20% ROE(2):	1,138,184	0.5835
FRVS Base Asset:	3,249,000	Interest Rate:	10.6343%	Insurance Cost(3):	31,661	0.7771
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	81,045	1.9892
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	39,097	0.9596
		Interest Only:	False	Replacement(3&4):	82,070	0.0000
		Yearly Payment:	448,507	Total FRVS PD:		15.6871

(1) 80% Capital (\$4,552,734) amortized at 7.7500 % for 20 years Principal & Interest of \$448,507 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.3777

(2) 20% ROE (\$1,138,184) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5835

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	114	Effective PBS Limitation	54,155
			3,249,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.9447	51.9447	2.3567	49.5880
Direct Care	85.3040	85.3040	3.8702	81.4338
Indirect Care	41.3295	41.3295	1.8751	39.4544
Property	13.6500	15.6871	0.7117	14.9754
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.9511
Supplemental Rate				8.1814
Totals	192.2282	194.2653	8.8137	215.5841

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/07	1,060,812	0.00	3.9578	3.0000	0.9578	114	37.78	1,060,812	3,085,068	
1984/01	2,673,470	0.10	2.2530	2.2530		114	25.15	3,735,375	3,125,082	
1984/07		0.10	1.9179	1.9179		114	100.00	3,742,539	3,185,046	
1985/01	19,628	0.20	1.1471	1.1471		114	25.15	3,766,093	3,221,526	
1985/10		0.20	0.8522	0.8522		114	25.15	3,249,000	3,249,000	1
1986/01		0.30	0.8299	0.8299		114	50.42	3,256,416	3,276,018	
1986/07		0.30	0.2974	0.2974		114	50.42	3,259,079	3,269,748	
1987/01		0.40	1.0091	1.0091		120	61.63	3,272,233	3,503,400	
1987/07		0.40	0.9007	0.9007		120	61.63	3,284,023	3,530,760	
1988/01		0.50	0.9007	0.9007		120	70.25	3,298,814	3,559,440	
1988/07		0.50	0.5899	0.5899		120	70.25	3,308,546	3,557,520	
1989/01		0.60	0.5899	0.5899		120	70.25	3,320,255	3,578,520	
1989/07		0.60	0.5899	0.5899		120	70.21	3,332,005	3,602,760	
1990/01		0.70	0.5899	0.5899		120	62.56	3,345,763	3,620,880	
1990/07		0.70	0.5899	0.5899		120	62.56	3,359,578	3,642,240	
1991/01		0.80	0.5899	0.5899		120	62.33	3,375,432	3,663,600	
1991/07		0.80	1.4932	1.4932		120	62.33	3,415,755	3,718,320	
1992/01		0.90	2.0117	2.0117		120	64.37	3,477,597	3,793,080	
1992/07		0.90	1.8152	1.8152		120	64.37	3,534,411	3,861,960	
1993/01		1.00	1.7710	1.7710		120	59.92	3,597,005	3,930,360	
1993/07		1.00	1.5329	1.5329		120	59.92	3,652,143	3,990,600	
1994/01		1.00	1.6983	1.6983		120	61.39	3,714,167	4,058,400	
1994/07		1.00	1.5991	1.5991		120	61.39	3,773,560	4,123,320	
1995/01		1.00	1.5812	1.5812		120	57.96	3,833,228	4,188,480	
1995/07		1.00	1.5250	1.5250		120	57.96	3,833,228	4,252,320	5
1996/01	34,563	1.00	1.7228	1.7228		120	63.69	3,926,248	4,325,640	5
1996/07		1.00	1.3294	1.3294		120	63.69	4,046,381	4,383,120	
1997/01	23,145	1.00	1.4109	1.4109		120	69.64	4,126,616	4,444,920	
1997/07		1.00	1.0917	1.0917		120	69.64	4,171,666	4,493,400	
1998/01		1.00	1.1663	1.1663		120	73.42	4,220,320	4,545,840	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07		1.00	1.0794	1.0794		120	73.42	4,265,874	4,594,920	
1999/01	19,282	1.00	1.4499	1.4499		120	74.57	4,347,007	4,661,520	
1999/07		1.00	1.2299	1.2299		120	74.57	4,400,471	4,718,880	
2000/01	29,741	1.00	1.3356	1.3356		120	73.87	4,488,985	4,781,880	
2000/07		1.00	1.1129	1.1129		120	73.87	4,538,943	4,835,040	
2001/01	53,815	1.00	1.2976	1.2976		120	71.62	4,651,655	4,897,800	
2001/07		1.00	0.9615	0.9615		120	57.11	4,696,381	4,944,840	
2002/01		1.00	1.0301	1.0301		120	57.11	4,744,758	4,995,720	
2002/07		1.00	0.8337	0.8337		120	57.11	4,784,315	5,037,360	
2003/01		1.00	1.3271	1.3271		120	57.11	4,847,808	5,104,200	
2003/07		1.00	1.1664	1.1664		120	57.11	4,904,353	5,163,720	
2004/01		0.95	1.1103	1.1103		120	57.11	4,956,084	5,221,080	
2004/07		0.95	0.8378	0.8378		120	64.76	4,995,529	5,264,880	
2005/01		0.90	0.8595	0.8595		120	64.76	5,034,174	5,310,120	
2005/07		0.90	0.7364	0.7364		120	67.21	5,067,541	5,349,240	
2006/01		0.85	0.9068	0.9068		120	67.21	5,106,602	5,397,720	
2006/07		0.85	0.8133	0.8133		120	72.02	5,141,904	5,441,640	
2007/01		0.80	1.0133	1.0133		120	70.11	5,183,584	5,496,720	
2007/07		0.80	1.1050	1.1050		120	70.11	5,229,407	5,557,440	
2008/01		0.75	0.8556	0.8556		120	63.90	5,262,964	5,604,960	
2008/07		0.75	0.6104	0.6104		120	63.90	5,287,058	5,639,160	
2009/01		0.70	1.3268	1.3268		120	63.90	5,336,164	5,714,040	
2009/07		0.70	0.6841	0.6841		120	58.92	5,361,719	5,753,160	
2010/01		0.65	0.8643	0.8643		120	58.92	5,391,841	5,802,840	
2010/07		0.65	0.7107	0.7107		120	64.07	5,416,751	5,844,120	
2011/01		0.60	0.9198	0.9198		120	64.07	5,446,646	5,897,880	
2011/07		0.60	0.9028	0.9028		120	65.55	5,476,150	5,951,160	
2012/01		0.55	0.3865	0.3865		120	74.24	5,487,792	5,974,200	
2012/07		0.55	0.9417	0.9417		120	74.24	5,516,213	6,030,480	
2013/01		0.50	0.4901	0.4901		120	74.24	5,529,733	6,060,000	



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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

0 043835-00 - 2016/09

215.58

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		120	74.24	5,546,864	6,097,560	
2014/01		0.45	0.8564	0.8564		120	74.24	5,568,242	6,149,760	
2014/07		0.45	1.2383	1.2383		120	74.24	5,599,268	6,225,960	
2015/01		0.40	0.7571	0.7571		120	73.80	5,616,223	6,273,120	
2015/09		0.40	1.5736	1.5736		120	73.80	5,651,572	6,371,880	
2016/09		0.35	1.9890	1.9890		120	74.00	5,690,918	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 043835123120150101201504252016112754



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0043838-00 - 2016/09

209.72

Heritage Healthcare and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
777 9TH ST N	1/1/2015-12/31/2015	Number of Beds: 97	Superior: 0
NAPLES, FL 34102	Days in CR 365	Maximum: 35,405	Standard: 366
County: Collier [11]	First Used : 2016/09	Max Annualized: 35,405	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 33,512	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,072	Inflation
Current Class South Small	Initial CR? False	Medicaid: 24,467	FY Index: 1.37939113
Class at 1/94: South Small	Medicaid Utilization	73.00967%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.65330%	Cost: 1.04651568
Open Date: 11/01/1981	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1981	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 10/01/1982	Low Occupancy Adjustment Factor:	119.70521%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252280			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,209,484	1,828,198	1,003,048	1,265,433		5,306,163
1a	Audit Adjustments						
2	Cost Per Diem	49.4333	74.7210	40.9960	51.7200		216.8703
3	Cost Per Diem Inflated	51.7327	77.7611	42.9030			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	51.7327	77.7611	42.9030	51.7200		224.1168
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	63.4403		74.1431			
7	Provider Target Rate	66.9694		78.2675			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500		
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807			
10	Target Rate Class Ceiling	75.1765		88.3937			
10a	New Provider Target Limitation	65.9701		79.3766			
10b	Base for line 10a	62.4937		75.1937			
11	Lesser of 5,7,8,10, 10a	51.7327	77.7611	42.9030	13.6500		186.0468
12/13	Medicaid Adjustment Rate		2.0129	1.1106			
14	Prospective Per Diem 11	51.7327	79.7740	44.0136	13.6500		189.1703
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Heritage Healthcare and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/23/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,333,936.00		Total Amount	Per Diem
RS to Start Calcs:	1981/07	Type:	Fixed	80% Capital(1):	3,774,005	11.6679
Indexed Asset Value	4,717,506	<60% of Base:	False	20% ROE(2):	943,501	0.5984
FRVS Base Asset:	3,220,500	Interest Rate:	10.6343%	Insurance Cost(3):	37,636	1.1231
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	38,955	1.1624
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	32,316	0.9643
		Interest Only:	False	Replacement(3&4):	27,201	0.0000
		Yearly Payment:	371,792	Total FRVS PD:		15.5161

(1) 80% Capital (\$3,774,005) amortized at 7.7500 % for 20 years Principal & Interest of \$371,792 divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$11.6679

(2) 20% ROE (\$943,501) times the ROE factor (0.020210) divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$0.5984

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	113	Effective PBS Limitation	54,155
			3,220,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.7327	51.7327	2.3471	49.3856
Direct Care	79.7740	79.7740	3.6193	76.1547
Indirect Care	44.0136	44.0136	1.9969	42.0167
Property	13.6500	15.5161	0.7040	14.8121
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1709
Supplemental Rate				8.1814
Totals	189.1703	191.0364	8.6673	209.7214

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1981/07	2,208,098	0.00	2.5888	2.5888		113		2,208,098	2,728,837	
1982/01	461,204	0.10	2.6760	2.6760		113		2,669,302	2,801,948	
1982/07	203,282	0.10	2.2977	2.2977		113	48.55	2,877,999	2,866,245	
1983/04	94,855	0.20	2.6288	2.6288		113	53.24	2,987,502	2,941,616	
1983/07	93,182	0.20	3.9578	3.0000	0.9578	113	53.24	3,098,035	3,058,006	
1984/01	16,082	0.30	2.2530	2.2530		113	43.22	3,130,572	3,097,669	
1984/07	152,808	0.30	1.9179	1.9179		113	43.22	3,297,535	3,157,107	
1985/01	15,959	0.40	1.1471	1.1471		113	43.22	3,325,383	3,193,267	
1985/10		0.40	0.8522	0.8522		113	43.22	3,220,500	3,220,500	1
1986/01		0.50	0.8299	0.8299		113	49.18	3,220,500	3,247,281	5
1986/07		0.50	0.2974	0.2974		113	49.18	3,236,749	3,241,066	
1987/01	47,929	0.60	1.0091	1.0091		113	55.37	3,304,277	3,299,035	
1987/07		0.60	0.9007	0.9007		113	55.37	3,322,133	3,324,799	
1988/01	(466,490)	0.70	0.9007	0.9007		97	56.40	2,855,643	2,877,214	5
1988/07		0.70	0.5899	0.5899		97	56.40	2,888,466	2,875,662	
1989/01		0.80	0.5899	0.5899		97	46.57	2,900,007	2,892,637	
1989/07		0.80	0.5899	0.5899		97	46.57	2,911,595	2,912,231	
1990/01		0.90	0.5899	0.5899		97	46.57	2,924,683	2,926,878	
1990/07		0.90	0.5899	0.5899		97	42.41	2,936,656	2,944,144	
1991/01		1.00	0.5899	0.5899		97	41.52	2,949,734	2,961,410	
1991/07		1.00	1.4932	1.4932		97	41.52	2,982,984	3,005,642	
1992/01		1.00	2.0117	2.0117		97	52.25	3,039,992	3,066,073	
1992/07		1.00	1.8152	1.8152		97	52.25	3,092,415	3,121,751	
1993/01		1.00	1.7710	1.7710		97	56.44	3,147,182	3,177,041	
1993/07		1.00	1.5329	1.5329		97	56.44	3,195,425	3,225,735	
1994/01		1.00	1.6983	1.6983		97	59.86	3,249,693	3,280,540	
1994/07		1.00	1.5991	1.5991		97	59.86	3,301,659	3,333,017	
1995/01		1.00	1.5812	1.5812		97	59.62	3,353,865	3,385,688	
1995/07		1.00	1.5250	1.5250		97	59.62	3,405,011	3,437,292	
1996/01		1.00	1.7228	1.7228		97	61.82	3,463,673	3,496,559	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/07		1.00	1.3294	1.3294		97	61.82	3,509,719	3,543,022	
1997/01		1.00	1.4109	1.4109		97	62.24	3,559,238	3,592,977	
1997/07		1.00	1.0917	1.0917		97	62.24	3,598,094	3,632,165	
1998/01		1.00	1.1663	1.1663		97	71.05	3,640,059	3,674,554	
1998/07		1.00	1.0794	1.0794		97	71.05	3,679,350	3,714,227	
1999/01		1.00	1.4499	1.4499		97	70.64	3,679,350	3,768,062	5
1999/07		1.00	1.2299	1.2299		97	70.64	3,778,605	3,814,428	
2000/01	42,514	1.00	1.3356	1.3356		97	78.42	3,865,353	3,865,353	8
2000/07		1.00	1.1129	1.1129		97	78.42	3,908,324	3,908,324	8
2001/01		1.00	1.2976	1.2976		97	78.45	3,959,038	3,959,055	
2001/07		1.00	0.9615	0.9615		97	74.60	3,997,079	3,997,079	8
2002/01		0.95	1.0301	1.0301		97	74.60	4,036,194	4,038,207	
2002/07		0.95	0.8337	0.8337		97	74.60	4,068,161	4,071,866	
2003/01		0.90	1.3271	1.3271		97	74.60	4,116,751	4,125,895	
2003/07		0.90	1.1664	1.1664		97	74.60	4,116,751	4,174,007	5
2004/01		0.85	1.1103	1.1103		97	74.60	4,199,231	4,220,373	
2004/07		0.85	0.8378	0.8378		97	79.98	4,229,134	4,255,778	
2005/01		0.80	0.8595	0.8595		97	79.98	4,258,214	4,292,347	
2005/07		0.80	0.7364	0.7364		97	83.99	4,283,299	4,323,969	
2006/01		0.75	0.9068	0.9068		97	78.39	4,312,430	4,363,157	
2006/07		0.75	0.8133	0.8133		97	78.39	4,338,736	4,398,659	
2007/01		0.70	1.0133	1.0133		97	78.39	4,369,511	4,443,182	
2007/07		0.70	1.1050	1.1050		97	70.84	4,403,309	4,492,264	
2008/01		0.65	0.8556	0.8556		97	65.71	4,427,796	4,530,676	
2008/07		0.65	0.6104	0.6104		97	65.71	4,445,365	4,558,321	
2009/01		0.60	1.3268	1.3268		97	65.71	4,480,755	4,618,849	
2009/07		0.60	0.6841	0.6841		97	55.74	4,499,148	4,650,471	
2010/01		0.55	0.8643	0.8643		97	60.35	4,520,537	4,690,629	
2010/07		0.55	0.7107	0.7107		97	60.35	4,538,208	4,723,997	
2011/01		0.50	0.9198	0.9198		97	65.32	4,559,079	4,767,453	



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209.72

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07		0.50	0.9028	0.9028		97	65.32	4,579,659	4,810,521	
2012/01		0.45	0.3865	0.3865		97	64.14	4,587,623	4,829,145	
2012/07		0.45	0.9417	0.9417		97	64.14	4,607,065	4,874,638	
2013/01		0.40	0.4901	0.4901		97	64.14	4,616,095	4,898,500	
2013/07		0.40	0.6196	0.6196		97	64.14	4,627,534	4,928,861	
2014/01		0.35	0.8564	0.8564		97	64.14	4,641,403	4,971,056	
2014/07		0.35	1.2383	1.2383		97	64.14	4,661,519	5,032,651	
2015/01		0.30	0.7571	0.7571		97	70.21	4,672,105	5,070,772	
2015/09		0.30	1.5736	1.5736		97	70.21	4,694,162	5,150,603	
2016/09		0.25	1.9890	1.9890		97	73.01	4,717,506	5,253,035	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency
8 Limited to Current RS Per Bed Standard |
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Florida Agency for Health Care Administration
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185.65

Keystone Rehabilitation and Health Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1120 W DONEGAN AVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
KISSIMMEE, FL 34741-2247	Days in CR 365	Maximum: 43,800	Standard: 366
County: Osceola [49]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 41,484	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,829	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 26,562	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	64.02951%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.71233%	Cost: 1.04651568
Open Date: 10/19/2006	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/19/2006	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 10/19/2006	Low Occupancy Adjustment Factor:	119.77986%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 317560			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,215,534	1,621,893	1,017,826	1,039,637		4,894,890	
1a	Audit Adjustments							
2	Cost Per Diem	45.7621	61.0607	38.3189	39.1400		184.2817	
3	Cost Per Diem Inflated	47.8908	63.5450	40.1013				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.8908	63.5450	40.1013	39.1400		190.6771	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.6643		60.9565				
7	Provider Target Rate	56.6495		64.3474				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	57.2291		68.1859				
10b	Base for line 10a	54.2133		64.5927				
11	Lesser of 5,7,8,10, 10a	47.8908	63.5450	40.1013	13.6500		165.1871	
12/13	Medicaid Adjustment Rate		1.0029	0.6329				
14	Prospective Per Diem 11	47.8908	64.5479	40.7342	13.6500		166.8229	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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185.65

Keystone Rehabilitation and Health Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/19/2006		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	2006/07	Type:	None	80% Capital(1):	4,769,401	9.8892
Indexed Asset Value	5,961,751	<60% of Base:	True	20% ROE(2):	1,192,350	0.6113
FRVS Base Asset:	5,397,720	Interest Rate:	8.2500%	Insurance Cost(3):	31,860	0.7680
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	81,301	1.9598
ROE Factor	0.020210	Amortization Rate:	8.2500%	Home Office(3):	39,527	0.9528
		Interest Only:	True	Replacement(3&4):	39,685	0.0000
		Yearly Payment:	389,831	Total FRVS PD:		14.1811

(1) 80% Capital (\$4,769,401) amortized at 8.2500 % for 20 years Interest of \$389,831 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.8892

(2) 20% ROE (\$1,192,350) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6113

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/2006	Current RS PBS:	44,981
Comparison Bed	120	Effective PBS Limitation	54,155
			5,397,720

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.8908	47.8908	2.1728	45.7180
Direct Care	64.5479	64.5479	2.9285	61.6194
Indirect Care	40.7342	40.7342	1.8481	38.8861
Property	13.6500	14.1811	0.6434	13.5377
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.7118
Supplemental Rate				8.1814
Totals	166.8229	167.3540	7.5928	185.6544

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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185.65

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/07	6,641,452	0.00	0.8133	0.8133		120	55.72	5,397,720	5,397,720	1
2007/01		0.10	1.0133	1.0133		120	55.72	5,403,188	5,496,720	
2007/07		0.10	1.1050	1.1050		120	55.72	5,409,159	5,557,440	
2008/01		0.20	0.8556	0.8556		120	55.72	5,418,414	5,604,960	
2008/07		0.20	0.6104	0.6104		120	55.72	5,425,030	5,639,160	
2009/01		0.30	1.3268	1.3268		120	55.72	5,446,622	5,714,040	
2009/07		0.30	0.6841	0.6841		120	64.79	5,457,798	5,753,160	
2010/01		0.40	0.8643	0.8643		120	64.79	5,476,666	5,802,840	
2010/07		0.40	0.7107	0.7107		120	69.66	5,492,236	5,844,120	
2011/01		0.50	0.9198	0.9198		120	69.66	5,517,495	5,897,880	
2011/07		0.50	0.9028	0.9028		120	70.77	5,542,401	5,951,160	
2012/01		0.60	0.3865	0.3865		120	64.12	5,555,254	5,974,200	
2012/07		0.60	0.9417	0.9417		120	64.12	5,586,641	6,030,480	
2013/01		0.70	0.4901	0.4901		120	64.12	5,605,809	6,060,000	
2013/07		0.70	0.6196	0.6196		120	64.12	5,630,121	6,097,560	
2014/01		0.80	0.8564	0.8564		120	64.12	5,668,693	6,149,760	
2014/07		0.80	1.2383	1.2383		120	64.12	5,724,847	6,225,960	
2015/01		0.90	0.7571	0.7571		120	67.94	5,763,856	6,273,120	
2015/09		0.90	1.5736	1.5736		120	67.94	5,845,484	6,371,880	
2016/09		1.00	1.9890	1.9890		120	64.03	5,961,751	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
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202.55

Oakbridge Healthcare Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3110 OAKBRIDGE BLVD E	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
LAKELAND, FL 33803-5987	Days in CR 365	Maximum: 43,800	Standard: 366
County: Polk [53]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 42,428	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 20,192	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 21,217	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	50.00707%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.86758%	Cost: 1.07573004
Open Date: 07/11/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/11/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 08/02/1991	Low Occupancy Adjustment Factor:	122.50554%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 259926			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,052,504	1,462,081	971,101	828,524		4,314,210	
1a	Audit Adjustments							
2	Cost Per Diem	49.6066	68.9108	45.7699	39.0500		203.3373	
3	Cost Per Diem Inflated	53.3633	73.1441	49.2361				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.3633	73.1441	49.2361	39.0500		214.7935	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	62.5749		71.2532				
7	Provider Target Rate	66.0558		75.2169				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	58.4614		73.5621				
10b	Base for line 10a	55.3807		69.6856				
11	Lesser of 5,7,8,10, 10a	53.3633	73.1441	49.2361	13.6500		189.3935	
12/13	Medicaid Adjustment Rate		0.0006	0.0004				
14	Prospective Per Diem 11	53.3633	73.1447	49.2365	13.6500		189.3945	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Oakbridge Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/02/1991		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,891,250.00		Total Amount	Per Diem
RS to Start Calcs:	1991/07	Type:	Variable	80% Capital(1):	4,837,841	9.2299
Indexed Asset Value	6,047,301	<60% of Base:	False	20% ROE(2):	1,209,460	0.6968
FRVS Base Asset:	3,663,600	Interest Rate:	4.3900%	Insurance Cost(3):	40,655	0.9582
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	69,290	1.6331
ROE Factor	0.022710	Amortization Rate:	4.3900%	Home Office(3):	50,855	1.1986
		Interest Only:	False	Replacement(3&4):	48,538	0.0000
		Yearly Payment:	363,841	Total FRVS PD:		13.7166

(1) 80% Capital (\$4,837,841) amortized at 4.3900 % for 20 years Principal & Interest of \$363,841 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.2299

(2) 20% ROE (\$1,209,460) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6968

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,530
Comparison Date: 01/01/1991	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,663,600

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3633	53.3633	2.4211	50.9422
Direct Care	73.1447	73.1447	3.3185	69.8262
Indirect Care	49.2365	49.2365	2.2338	47.0027
Property	13.6500	13.7166	0.6223	13.0943
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.5052
Supplemental Rate				8.1814
Totals	189.3945	189.4611	8.5957	202.5520

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/07	7,180,838	0.00	1.4932	1.4932		120	25.30	3,663,600	3,663,600	1
1992/01		0.10	2.0117	2.0117		120	25.30	3,666,991	3,793,080	
1992/07		0.10	1.8152	1.8152		120	25.30	3,670,053	3,861,960	
1993/01		0.20	1.7710	1.7710		120	25.30	3,676,033	3,930,360	
1993/07		0.20	1.5329	1.5329		120	25.30	3,681,218	3,990,600	
1994/01		0.30	1.6983	1.6983		120	25.30	3,689,846	4,058,400	
1994/07		0.30	1.5991	1.5991		120	36.13	3,701,473	4,123,320	
1995/01		0.40	1.5812	1.5812		120	36.13	3,716,852	4,188,480	
1995/07		0.40	1.5250	1.5250		120	39.80	3,733,259	4,252,320	
1996/01		0.50	1.7228	1.7228		120	39.80	3,756,530	4,325,640	
1996/07		0.50	1.3294	1.3294		120	39.80	3,756,530	4,383,120	5
1997/01		0.60	1.4109	1.4109		120	45.17	3,774,599	4,444,920	5
1997/07		0.60	1.0917	1.0917		120	42.57	3,820,109	4,493,400	
1998/01		0.70	1.1663	1.1663		120	42.57	3,844,248	4,545,840	
1998/07	39,201	0.70	1.0794	1.0794		120	40.38	3,904,775	4,594,920	
1999/01		0.80	1.4499	1.4499		120	40.38	3,938,027	4,661,520	
1999/07		0.80	1.2299	1.2299		120	42.29	3,967,819	4,718,880	
2000/01		0.90	1.3356	1.3356		120	42.29	4,004,491	4,781,880	
2000/07	68,548	0.90	1.1129	1.1129		120	43.60	4,104,834	4,835,040	
2001/01		1.00	1.2976	1.2976		120	43.60	4,147,058	4,897,800	
2001/07	979,642	1.00	0.9615	0.9615		120	45.26	4,944,840	4,944,840	8
2002/01	24,048	1.00	1.0301	1.0301		120	42.97	4,995,720	4,995,720	8
2002/07		1.00	0.8337	0.8337		120	42.97	5,028,259	5,037,360	
2003/01	46,228	1.00	1.3271	1.3271		120	48.35	5,104,200	5,104,200	8
2003/07	2,258	1.00	1.1664	1.1664		120	48.35	5,158,795	5,163,720	
2004/01		1.00	1.1103	1.1103		120	48.35	5,209,148	5,221,080	
2004/07		1.00	0.8378	0.8378		120	48.35	5,247,513	5,264,880	
2005/01		1.00	0.8595	0.8595		120	48.35	5,287,162	5,310,120	
2005/07		1.00	0.7364	0.7364		120	48.35	5,321,389	5,349,240	
2006/01		1.00	0.9068	0.9068		120	49.93	5,365,195	5,397,720	



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202.55

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/07		1.00	0.8133	0.8133		120	49.93	5,404,808	5,441,640	
2007/01		1.00	1.0133	1.0133		120	46.54	5,451,151	5,496,720	
2007/07		1.00	1.1050	1.1050		120	37.62	5,492,352	5,557,440	
2008/01		1.00	0.8556	0.8556		120	37.62	5,524,495	5,604,960	
2008/07		1.00	0.6104	0.6104		120	37.62	5,547,561	5,639,160	
2009/01		1.00	1.3268	1.3268		120	35.65	5,595,270	5,714,040	
2009/07		1.00	0.6841	0.6841		120	35.65	5,620,081	5,753,160	
2010/01		1.00	0.8643	0.8643		120	38.75	5,654,304	5,802,840	
2010/07		1.00	0.7107	0.7107		120	38.75	5,682,616	5,844,120	
2011/01		1.00	0.9198	0.9198		120	30.44	5,711,544	5,897,880	
2011/07		1.00	0.9028	0.9028		120	30.44	5,740,082	5,951,160	
2012/01		0.95	0.3865	0.3865		120	32.77	5,752,640	5,974,200	
2012/07		0.95	0.9417	0.9417		120	32.77	5,783,303	6,030,480	
2013/01		0.90	0.4901	0.4901		120	32.77	5,798,502	6,060,000	
2013/07		0.90	0.6196	0.6196		120	32.77	5,817,766	6,097,560	
2014/01		0.85	0.8564	0.8564		120	32.77	5,842,997	6,149,760	
2014/07		0.85	1.2383	1.2383		120	32.77	5,879,642	6,225,960	
2015/01		0.80	0.7571	0.7571		120	43.37	5,907,724	6,273,120	
2015/09		0.80	1.5736	1.5736		120	43.37	5,966,370	6,371,880	
2016/09		0.75	1.9890	1.9890		120	50.01	6,047,301	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency
8 Limited to Current RS Per Bed Standard |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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207.24

Oaktree Healthcare

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
650 REED CANAL RD	1/1/2015-12/31/2015	Number of Beds: 65	Superior: 0
SOUTH DAYTONA, FL 32119-32	Days in CR 365	Maximum: 23,725	Standard: 366
County: Volusia [64]	First Used : 2016/09	Max Annualized: 23,725	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 20,950	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,330	Inflation
Current Class North Small	Initial CR? False	Medicaid: 18,937	FY Index: 1.37939113
Class at 1/94: North Small	Medicaid Utilization	90.39141%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	88.30348%	Cost: 1.04651568
Open Date: 09/01/1981	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1981	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 09/01/1981	Low Occupancy Adjustment Factor:	111.67478%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252476			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,055,178	1,267,769	767,904	279,699		3,370,550	
1a	Audit Adjustments							
2	Cost Per Diem	55.7204	66.9467	40.5505	14.7700		177.9876	
3	Cost Per Diem Inflated	58.3123	69.6705	42.4367				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	58.3123	69.6705	42.4367	14.7700		185.1895	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	60.1283		63.9961				
7	Provider Target Rate	63.4731		67.5561				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	62.0519		71.0398				
10b	Base for line 10a	58.7820		67.2962				
11	Lesser of 5,7,8,10, 10a	58.3123	69.6705	42.4367	13.6500		184.0695	
12/13	Medicaid Adjustment Rate		3.1352	1.9097				
14	Prospective Per Diem 11	58.3123	72.8057	44.3464	13.6500		189.1144	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Oaktree Healthcare

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	05/21/1993	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,004,676.00		Total Amount	Per Diem
RS to Start Calcs:	1981/07	Type:	Fixed	80% Capital(1):	1,437,282	6.6312
Indexed Asset Value	1,796,602	<60% of Base:	False	20% ROE(2):	359,320	0.3401
FRVS Base Asset:	915,382	Interest Rate:	10.6343%	Insurance Cost(3):	14,856	0.7091
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	12,510	0.5971
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	19,242	0.9185
		Interest Only:	False	Replacement(3&4):	13,807	0.0000
		Yearly Payment:	141,592	Total FRVS PD:		9.1960

(1) 80% Capital (\$1,437,282) amortized at 7.7500 % for 20 years Principal & Interest of \$141,592 divided by annual available days (23725) divided by Occup. Adj. (0.90) = \$6.6312

(2) 20% ROE (\$359,320) times the ROE factor (0.020210) divided by annual available days (23725) divided by Occup. Adj. (0.90) = \$0.3401

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 65	Effective PBS Limitation	1,852,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.3123	58.3123	2.6456	55.6667
Direct Care	72.8057	72.8057	3.3032	69.5025
Indirect Care	44.3464	44.3464	2.0120	42.3344
Property	13.6500	9.1960	0.4172	8.7788
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.7737
Supplemental Rate				8.1814
Totals	189.1144	184.6604	8.3780	207.2375

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1981/07	876,031	0.00	2.5888	2.5888		65	55.00	876,031	1,569,685	
1982/01	1,650	0.10	2.6760	2.6760		65	88.28	880,025	1,611,740	
1982/07		0.10	2.2977	2.2977		65	88.28	882,047	1,648,725	
1983/04		0.20	2.6288	2.6288		65	86.65	886,685	1,692,080	
1983/07	1,675	0.20	3.9578	3.0000	0.9578	65	86.65	893,680	1,759,030	
1984/01	2,180	0.30	2.2530	2.2530		65	82.81	901,900	1,781,845	
1984/07		0.30	1.9179	1.9179		65	83.65	907,090	1,816,035	
1985/01	1,020	0.40	1.1471	1.1471		65	83.65	912,272	1,836,835	
1985/10		0.40	0.8522	0.8522		65	82.81	915,382	1,852,500	
1986/01		0.50	0.8299	0.8299		65	82.81	919,181	1,867,905	
1986/07		0.50	0.2974	0.2974		65	87.38	920,548	1,864,330	
1987/01		0.60	1.0091	1.0091		65	87.38	926,122	1,897,675	
1987/07		0.60	0.9007	0.9007		65	84.23	931,127	1,912,495	
1988/01		0.70	0.9007	0.9007		65	84.23	936,998	1,928,030	
1988/07	38,535	0.70	0.5899	0.5899		65	81.65	979,402	1,926,990	
1989/01		0.80	0.5899	0.5899		65	81.65	984,024	1,938,365	
1989/07		0.80	0.5899	0.5899		65	76.07	988,668	1,951,495	
1990/01		0.90	0.5899	0.5899		65	76.07	993,917	1,961,310	
1990/07		0.90	0.5899	0.5899		65	76.07	999,194	1,972,880	
1991/01		1.00	0.5899	0.5899		65	77.01	1,005,088	1,984,450	
1991/07		1.00	1.4932	1.4932		65	81.55	1,020,096	2,014,090	
1992/01		1.00	2.0117	2.0117		65	81.82	1,040,617	2,054,585	
1992/07		1.00	1.8152	1.8152		65	81.82	1,059,506	2,091,895	
1993/01		1.00	1.7710	1.7710		65	72.17	1,078,270	2,128,945	
1993/07		1.00	1.5329	1.5329		65	72.17	1,094,799	2,161,575	
1994/01		1.00	1.6983	1.6983		65	73.50	1,113,392	2,198,300	
1994/07		1.00	1.5991	1.5991		65	73.50	1,131,196	2,233,465	
1995/01	12,503	1.00	1.5812	1.5812		65	66.61	1,161,585	2,268,760	
1995/07		1.00	1.5250	1.5250		65	66.61	1,179,299	2,303,340	
1996/01	17,407	1.00	1.7228	1.7228		65	67.04	1,217,023	2,343,055	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/07		1.00	1.3294	1.3294		65	67.04	1,233,202	2,374,190	
1997/01	9,533	1.00	1.4109	1.4109		65	70.86	1,260,134	2,407,665	
1997/07		1.00	1.0917	1.0917		65	70.86	1,273,891	2,433,925	
1998/01	13,917	1.00	1.1663	1.1663		65	75.93	1,302,665	2,462,330	
1998/07		1.00	1.0794	1.0794		65	75.93	1,316,726	2,488,915	
1999/01		1.00	1.4499	1.4499		65	74.93	1,335,817	2,524,990	
1999/07		1.00	1.2299	1.2299		65	74.93	1,352,246	2,556,060	
2000/01	91,132	1.00	1.3356	1.3356		65	80.15	1,461,439	2,590,185	
2000/07		1.00	1.1129	1.1129		65	80.15	1,477,703	2,618,980	
2001/01	10,861	1.00	1.2976	1.2976		65	82.13	1,507,739	2,652,975	
2001/07		1.00	0.9615	0.9615		65	85.27	1,522,236	2,678,455	
2002/01		0.95	1.0301	1.0301		65	85.27	1,537,133	2,706,015	
2002/07		0.95	0.8337	0.8337		65	85.27	1,549,307	2,728,570	
2003/01		0.90	1.3271	1.3271		65	85.27	1,567,812	2,764,775	
2003/07		0.90	1.1664	1.1664		65	85.27	1,584,271	2,797,015	
2004/01		0.85	1.1103	1.1103		65	85.27	1,599,223	2,828,085	
2004/07		0.85	0.8378	0.8378		65	81.30	1,610,611	2,851,810	
2005/01		0.80	0.8595	0.8595		65	81.30	1,621,686	2,876,315	
2005/07		0.80	0.7364	0.7364		65	72.26	1,631,239	2,897,505	
2006/01		0.75	0.9068	0.9068		65	72.26	1,642,333	2,923,765	
2006/07		0.75	0.8133	0.8133		65	74.21	1,652,351	2,947,555	
2007/01		0.70	1.0133	1.0133		65	73.77	1,664,071	2,977,390	
2007/07		0.70	1.1050	1.1050		65	73.77	1,676,943	3,010,280	
2008/01		0.65	0.8556	0.8556		65	73.77	1,686,268	3,036,020	
2008/07		0.65	0.6104	0.6104		65	75.13	1,692,959	3,054,545	
2009/01		0.60	1.3268	1.3268		65	75.13	1,706,437	3,095,105	
2009/07		0.60	0.6841	0.6841		65	76.99	1,713,442	3,116,295	
2010/01		0.55	0.8643	0.8643		65	77.58	1,721,588	3,143,205	
2010/07		0.55	0.7107	0.7107		65	77.58	1,728,318	3,165,565	
2011/01		0.50	0.9198	0.9198		65	77.79	1,736,267	3,194,685	



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207.24

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07		0.50	0.9028	0.9028		65	77.79	1,744,105	3,223,545	
2012/01		0.45	0.3865	0.3865		65	78.86	1,747,138	3,236,025	
2012/07		0.45	0.9417	0.9417		65	78.86	1,754,542	3,266,510	
2013/01		0.40	0.4901	0.4901		65	78.86	1,757,981	3,282,500	
2013/07		0.40	0.6196	0.6196		65	78.86	1,762,337	3,302,845	
2014/01		0.35	0.8564	0.8564		65	78.86	1,767,619	3,331,120	
2014/07		0.35	1.2383	1.2383		65	78.86	1,775,280	3,372,395	
2015/01		0.30	0.7571	0.7571		65	84.20	1,779,312	3,397,940	
2015/09		0.30	1.5736	1.5736		65	84.20	1,787,712	3,451,435	
2016/09		0.25	1.9890	1.9890		65	90.39	1,796,602	3,520,075	

Message Code:

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 043843123120150101201504252016140336



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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196.78

Rio Pinar Health Care

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
7950 LAKE UNDERHILL ROAD	1/1/2015-12/31/2015	Number of Beds: 180	Superior: 0
ORLANDO, FL 32822	Days in CR 365	Maximum: 65,700	Standard: 366
County: Orange [48]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 63,767	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,429	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 44,703	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	70.10366%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.05784%	Cost: 1.04651568
Open Date: 02/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 02/01/1987	Low Occupancy Adjustment Factor:	122.74616%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252450			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,905,913	3,249,832	1,663,610	1,468,047		8,287,402	
1a	Audit Adjustments							
2	Cost Per Diem	42.6350	72.6983	37.2147	32.8400		185.3880	
3	Cost Per Diem Inflated	44.6182	75.6561	38.9458				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.6182	75.6561	38.9458	32.8400		192.0601	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.4615		59.4241				
7	Provider Target Rate	54.3242		62.7297				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	54.3173		65.3830				
10b	Base for line 10a	51.4550		61.9375				
11	Lesser of 5,7,8,10, 10a	44.6182	75.6561	38.9458	13.6500		172.8701	
12/13	Medicaid Adjustment Rate		1.7111	0.8808				
14	Prospective Per Diem 11	44.6182	77.3672	39.8266	13.6500		175.4620	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rio Pinar Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/23/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1987/01	Type:	None	80% Capital(1):	6,909,413	11.5981
Indexed Asset Value	8,636,766	<60% of Base:	True	20% ROE(2):	1,727,353	0.5904
FRVS Base Asset:	5,162,760	Interest Rate:	10.0000%	Insurance Cost(3):	45,977	0.7210
Occup Adj Factor	0.9000	Chase Rate:	10.0000%	Taxes Cost(3):	114,955	1.8027
ROE Factor	0.020210	Amortization Rate:	10.0000%	Home Office(3):	61,160	0.9591
		Interest Only:	True	Replacement(3&4):	123,345	0.0000
		Yearly Payment:	685,795	Total FRVS PD:		15.6713

(1) 80% Capital (\$6,909,413) amortized at 10.0000 % for 20 years Interest of \$685,795 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$11.5981

(2) 20% ROE (\$1,727,353) times the ROE factor (0.020210) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.5904

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1986	Current RS PBS:	28,682
Comparison Bed	180	Effective PBS Limitation	54,155
			5,162,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.6182	44.6182	2.0243	42.5939
Direct Care	77.3672	77.3672	3.5101	73.8571
Indirect Care	39.8266	39.8266	1.8069	38.0197
Property	13.6500	15.6713	0.7110	14.9603
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1628
Supplemental Rate				8.1814
Totals	175.4620	177.4833	8.0523	196.7752

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/01	5,998,606	0.00	1.0091	1.0091		180	57.47	5,162,760	5,162,760	1
1987/07	24,144	0.10	0.9007	0.9007		180	57.47	5,191,556	5,296,140	
1988/01	22,874	0.10	0.9007	0.9007		180	57.47	5,219,108	5,339,160	
1988/07		0.20	0.5899	0.5899		180	57.47	5,225,267	5,336,280	
1989/01		0.20	0.5899	0.5899		180	57.47	5,231,433	5,367,780	
1989/07		0.30	0.5899	0.5899		180	57.47	5,240,693	5,404,140	
1990/01		0.30	0.5899	0.5899		180	57.47	5,249,969	5,431,320	
1990/07		0.40	0.5899	0.5899		180	53.61	5,262,046	5,463,360	
1991/01		0.40	0.5899	0.5899		180	52.88	5,273,986	5,495,400	
1991/07		0.50	1.4932	1.4932		180	52.88	5,311,844	5,577,480	
1992/01		0.50	2.0117	2.0117		180	56.57	5,365,276	5,689,620	
1992/07		0.60	1.8152	1.8152		180	56.57	5,423,709	5,792,940	
1993/01		0.60	1.7710	1.7710		180	51.22	5,477,380	5,895,540	
1993/07		0.70	1.5329	1.5329		180	51.22	5,532,113	5,985,900	
1994/01		0.70	1.6983	1.6983		180	52.92	5,595,392	6,087,600	
1994/07		0.80	1.5991	1.5991		180	52.92	5,664,267	6,184,980	
1995/01	26,730	0.80	1.5812	1.5812		180	53.58	5,760,800	6,282,720	
1995/07		0.90	1.5250	1.5250		180	53.58	5,837,826	6,378,480	
1996/01		0.90	1.7228	1.7228		180	60.09	5,928,341	6,488,460	
1996/07		1.00	1.3294	1.3294		180	60.09	6,007,152	6,574,680	
1997/01		1.00	1.4109	1.4109		180	63.91	6,091,907	6,667,380	
1997/07		1.00	1.0917	1.0917		180	63.91	6,158,412	6,740,100	
1998/01		1.00	1.1663	1.1663		180	68.81	6,230,238	6,818,760	
1998/07		1.00	1.0794	1.0794		180	68.81	6,297,487	6,892,380	
1999/01		1.00	1.4499	1.4499		180	71.12	6,388,794	6,992,280	
1999/07		1.00	1.2299	1.2299		180	71.12	6,467,370	7,078,320	
2000/01	62,502	1.00	1.3356	1.3356		180	76.53	6,616,250	7,172,820	
2000/07		1.00	1.1129	1.1129		180	76.53	6,689,882	7,252,560	
2001/01	37,272	1.00	1.2976	1.2976		180	76.94	6,813,962	7,346,700	
2001/07		1.00	0.9615	0.9615		180	73.00	6,879,478	7,417,260	



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196.78

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/01		1.00	1.0301	1.0301		180	73.00	6,950,344	7,493,580	
2002/07		1.00	0.8337	0.8337		180	73.00	7,008,289	7,556,040	
2003/01		1.00	1.3271	1.3271		180	73.00	7,101,296	7,656,300	
2003/07		1.00	1.1664	1.1664		180	73.00	7,184,126	7,745,580	
2004/01		1.00	1.1103	1.1103		180	73.00	7,263,891	7,831,620	
2004/07		1.00	0.8378	0.8378		180	77.30	7,324,748	7,897,320	
2005/01		1.00	0.8595	0.8595		180	77.30	7,387,704	7,965,180	
2005/07		1.00	0.7364	0.7364		180	73.70	7,442,107	8,023,860	
2006/01		1.00	0.9068	0.9068		180	73.70	7,509,592	8,096,580	
2006/07		1.00	0.8133	0.8133		180	69.94	7,570,668	8,162,460	
2007/01		1.00	1.0133	1.0133		180	69.94	7,647,382	8,245,080	
2007/07		0.95	1.1050	1.1050		180	63.61	7,727,664	8,336,160	
2008/01		0.95	0.8556	0.8556		180	68.71	7,790,474	8,407,440	
2008/07		0.90	0.6104	0.6104		180	68.71	7,833,275	8,458,740	
2009/01		0.90	1.3268	1.3268		180	68.44	7,926,812	8,571,060	
2009/07		0.85	0.6841	0.6841		180	68.44	7,972,906	8,629,740	
2010/01		0.85	0.8643	0.8643		180	66.38	8,031,483	8,704,260	
2010/07		0.80	0.7107	0.7107		180	66.38	8,077,150	8,766,180	
2011/01		0.80	0.9198	0.9198		180	68.45	8,136,582	8,846,820	
2011/07		0.75	0.9028	0.9028		180	68.45	8,191,675	8,926,740	
2012/01		0.75	0.3865	0.3865		180	70.41	8,215,423	8,961,300	
2012/07		0.70	0.9417	0.9417		180	70.41	8,269,579	9,045,720	
2013/01		0.70	0.4901	0.4901		180	70.41	8,297,952	9,090,000	
2013/07		0.65	0.6196	0.6196		180	70.41	8,297,952	9,146,340	5
2014/01		0.65	0.8564	0.8564		180	70.41	8,377,749	9,224,640	
2014/07		0.60	1.2383	1.2383		180	70.41	8,439,996	9,338,940	
2015/01		0.60	0.7571	0.7571		180	71.63	8,478,339	9,409,680	
2015/09		0.55	1.5736	1.5736		180	71.63	8,551,719	9,557,820	
2016/09		0.50	1.9890	1.9890		180	70.10	8,636,766	9,747,900	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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204.79

The Palms Rehabilitation and Healthcare Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5405 BABCOCK ST NE	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
PALM BAY, FL 32905	Days in CR 365	Maximum: 43,800	Standard: 366
County: Brevard [5]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 41,956	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,056	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,664	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	65.93574%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.78995%	Cost: 1.07573004
Open Date: 03/11/1998	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/11/1998	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 03/11/1998	Low Occupancy Adjustment Factor:	121.14269%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252395			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,166,149	2,107,204	1,092,090	1,031,867		5,397,310	
1a	Audit Adjustments							
2	Cost Per Diem	42.1540	76.1713	39.4769	37.3000		195.1022	
3	Cost Per Diem Inflated	45.3463	80.8507	42.4665				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.3463	80.8507	42.4665	37.3000		205.9635	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.0352		60.7022				
7	Provider Target Rate	57.0411		64.0789				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	56.9433		67.0555				
10b	Base for line 10a	53.9426		63.5219				
11	Lesser of 5,7,8,10, 10a	45.3463	80.8507	42.4665	13.6500		182.3135	
12/13	Medicaid Adjustment Rate		1.4495	0.7613				
14	Prospective Per Diem 11	45.3463	82.3002	43.2278	13.6500		184.5243	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



Florida Agency for Health Care Administration

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The Palms Rehabilitation and Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 03/11/1998		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,806,562.00		Total Amount	Per Diem
RS to Start Calcs:	1998/01	Type:	Fixed	80% Capital(1):	4,664,209	11.6562
Indexed Asset Value	5,830,261	<60% of Base:	False	20% ROE(2):	1,166,052	0.6718
FRVS Base Asset:	4,493,400	Interest Rate:	10.6343%	Insurance Cost(3):	35,314	0.8417
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	74,497	1.7756
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	43,883	1.0459
		Interest Only:	False	Replacement(3&4):	39,203	0.0000
		Yearly Payment:	459,489	Total FRVS PD:		15.9912

(1) 80% Capital (\$4,664,209) amortized at 7.7500 % for 20 years Principal & Interest of \$459,489 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.6562

(2) 20% ROE (\$1,166,052) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6718

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	37,445
Comparison Date: 07/01/1997	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	4,493,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.3463	45.3463	2.0573	43.2890
Direct Care	82.3002	82.3002	3.7339	78.5663
Indirect Care	43.2278	43.2278	1.9612	41.2666
Property	13.6500	15.9912	0.7255	15.2657
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.2179
Supplemental Rate				8.1814
Totals	184.5243	186.8655	8.4779	204.7869

Medicaid Trend Adjustment



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204.79

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01	6,896,251	0.00	1.1663	1.1663		120	57.94	4,493,400	4,493,400	1
1998/07	5,150	0.10	1.0794	1.0794		120	57.94	4,503,398	4,594,920	
1999/01	15,239	0.10	1.4499	1.4499		120	57.94	4,525,167	4,661,520	
1999/07		0.20	1.2299	1.2299		120	57.94	4,536,299	4,718,880	
2000/01		0.20	1.3356	1.3356		120	57.94	4,536,299	4,781,880	5
2000/07		0.30	1.1129	1.1129		120	57.94	4,563,602	4,835,040	
2001/01		0.30	1.2976	1.2976		120	66.75	4,581,368	4,897,800	
2001/07		0.40	0.9615	0.9615		120	65.83	4,598,988	4,944,840	
2002/01		0.40	1.0301	1.0301		120	65.83	4,617,936	4,995,720	
2002/07		0.50	0.8337	0.8337		120	65.83	4,637,188	5,037,360	
2003/01		0.50	1.3271	1.3271		120	65.83	4,667,960	5,104,200	
2003/07		0.60	1.1664	1.1664		120	65.83	4,700,626	5,163,720	
2004/01		0.60	1.1103	1.1103		120	65.83	4,731,942	5,221,080	
2004/07		0.70	0.8378	0.8378		120	71.88	4,759,695	5,264,880	
2005/01		0.70	0.8595	0.8595		120	71.88	4,788,334	5,310,120	
2005/07		0.80	0.7364	0.7364		120	69.51	4,816,542	5,349,240	
2006/01		0.80	0.9068	0.9068		120	65.34	4,851,481	5,397,720	
2006/07		0.90	0.8133	0.8133		120	65.34	4,886,994	5,441,640	
2007/01		0.90	1.0133	1.0133		120	62.08	4,931,563	5,496,720	
2007/07		1.00	1.1050	1.1050		120	62.08	4,986,057	5,557,440	
2008/01		1.00	0.8556	0.8556		120	64.11	5,028,718	5,604,960	
2008/07		1.00	0.6104	0.6104		120	64.11	5,059,413	5,639,160	
2009/01		1.00	1.3268	1.3268		120	64.11	5,126,541	5,714,040	
2009/07		1.00	0.6841	0.6841		120	61.21	5,161,612	5,753,160	
2010/01		1.00	0.8643	0.8643		120	61.21	5,206,224	5,802,840	
2010/07		1.00	0.7107	0.7107		120	60.01	5,243,225	5,844,120	
2011/01		1.00	0.9198	0.9198		120	58.81	5,291,452	5,897,880	
2011/07		1.00	0.9028	0.9028		120	58.81	5,339,223	5,951,160	
2012/01		1.00	0.3865	0.3865		120	60.28	5,359,859	5,974,200	
2012/07		1.00	0.9417	0.9417		120	60.28	5,410,333	6,030,480	



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204.79

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		1.00	0.4901	0.4901		120	60.28	5,436,849	6,060,000	
2013/07		1.00	0.6196	0.6196		120	60.28	5,470,536	6,097,560	
2014/01		1.00	0.8564	0.8564		120	60.28	5,517,386	6,149,760	
2014/07		1.00	1.2383	1.2383		120	60.28	5,585,708	6,225,960	
2015/01		1.00	0.7571	0.7571		120	58.93	5,627,997	6,273,120	
2015/09		1.00	1.5736	1.5736		120	58.93	5,716,559	6,371,880	
2016/09		1.00	1.9890	1.9890		120	65.94	5,830,261	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 043847123120140101201411102015105030



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200.69

Coral Trace Health Care

Type of Cost Report: **Prospective** Type of Cost: **Actual** Type of Rate: **Prospective**

Type of Ownership: **Proprietary : Corporation**

CHOW Status based on this Cost Report: **No Change**

Provider Information	Cost Report	Patient Days	Ratings Days
216 SANTA BARBARA BLVD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
CAPE CORAL, FL 33991-2031	Days in CR 365	Maximum: 43,800	Standard: 366
County: Lee [36]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 41,582	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,916	Inflation
Current Class South Large	Initial CR? False	Medicaid: 23,450	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	56.39459%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.93607%	Cost: 1.04651568
Open Date: 11/03/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/03/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 11/03/1987	Low Occupancy Adjustment Factor:	120.06282%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252107			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,108,537	1,579,802	1,029,278	695,762		4,413,379	
1a	Audit Adjustments							
2	Cost Per Diem	47.2724	67.3690	43.8925	29.6700		188.2039	
3	Cost Per Diem Inflated	49.4713	70.1100	45.9342				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.4713	70.1100	45.9342	29.6700		195.1855	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.5539		61.0985				
7	Provider Target Rate	59.6999		64.4973				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	60.0532		70.5076				
10b	Base for line 10a	56.8886		66.7921				
11	Lesser of 5,7,8,10, 10a	49.4713	70.1100	45.9342	13.6500		179.1655	
12/13	Medicaid Adjustment Rate		0.5044	0.3304				
14	Prospective Per Diem 11	49.4713	70.6144	46.2646	13.6500		180.0003	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Coral Trace Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:	12/01/2001	Amount:	3,232,534.00	Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Fixed	80% Capital(1):	4,939,765 12.3449
Indexed Asset Value	6,174,706	<60% of Base:	False	20% ROE(2):	1,234,941 0.6331
FRVS Base Asset:	3,503,400	Interest Rate:	10.6343%	Insurance Cost(3):	31,932 0.7679
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	98,094 2.3590
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	41,937 1.0085
		Interest Only:	False	Replacement(3&4):	67,039 0.0000
		Yearly Payment:	486,635	Total FRVS PD:	17.1134

(1) 80% Capital (\$4,939,765) amortized at 7.7500 % for 20 years Principal & Interest of \$486,635 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$12.3449

(2) 20% ROE (\$1,234,941) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6331

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,195
Comparison Date: 01/01/1987	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,503,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.4713	49.4713	2.2445	47.2268
Direct Care	70.6144	70.6144	3.2037	67.4107
Indirect Care	46.2646	46.2646	2.0990	44.1656
Property	13.6500	17.1134	0.7764	16.3370
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.3643
Supplemental Rate				8.1814
Totals	180.0003	183.4637	8.3236	200.6858

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	3,900,222	0.10	0.9007	0.9007		120	29.16	3,503,400	3,503,400	1
1988/01		0.10	0.9007	0.9007		120	29.16	3,505,074	3,559,440	
1988/07		0.20	0.5899	0.5899		120	29.16	3,507,267	3,557,520	
1989/01		0.20	0.5899	0.5899		120	29.16	3,509,461	3,578,520	
1989/07		0.30	0.5899	0.5899		120	29.16	3,512,754	3,602,760	
1990/01		0.30	0.5899	0.5899		120	29.16	3,516,050	3,620,880	
1990/07		0.40	0.5899	0.5899		120	37.72	3,521,741	3,642,240	
1991/01		0.40	0.5899	0.5899		120	37.72	3,527,441	3,663,600	
1991/07	19,022	0.50	1.4932	1.4932		120	44.59	3,567,814	3,718,320	
1992/01		0.50	2.0117	2.0117		120	52.10	3,601,810	3,793,080	
1992/07		0.60	1.8152	1.8152		120	52.10	3,638,969	3,861,960	
1993/01	32,286	0.60	1.7710	1.7710		120	49.56	3,706,098	3,930,360	
1993/07		0.70	1.5329	1.5329		120	49.56	3,741,931	3,990,600	
1994/01		0.70	1.6983	1.6983		120	44.59	3,777,995	4,058,400	
1994/07		0.80	1.5991	1.5991		120	44.59	3,817,179	4,123,320	
1995/01	18,754	0.80	1.5812	1.5812		120	43.02	3,873,702	4,188,480	
1995/07		0.90	1.5250	1.5250		120	43.02	3,915,288	4,252,320	
1996/01	33,625	0.90	1.7228	1.7228		120	51.50	4,005,756	4,325,640	
1996/07		1.00	1.3294	1.3294		120	51.50	4,055,620	4,383,120	
1997/01	58,869	1.00	1.4109	1.4109		120	50.80	4,167,340	4,444,920	
1997/07		1.00	1.0917	1.0917		120	50.80	4,209,361	4,493,400	
1998/01	490,091	1.00	1.1663	1.1663		120	53.35	4,545,840	4,545,840	8
1998/07		1.00	1.0794	1.0794		120	53.35	4,593,436	4,594,920	
1999/01		1.00	1.4499	1.4499		120	54.06	4,658,898	4,661,520	
1999/07		1.00	1.2299	1.2299		120	54.06	4,658,898	4,718,880	5
2000/01	61,833	1.00	1.3356	1.3356		120	59.68	4,777,051	4,781,880	5
2000/07		1.00	1.1129	1.1129		120	59.68	4,835,040	4,835,040	8
2001/01		1.00	1.2976	1.2976		120	69.62	4,897,779	4,897,800	
2001/07		1.00	0.9615	0.9615		120	58.15	4,897,779	4,944,840	5
2002/01		1.00	1.0301	1.0301		120	58.15	4,995,720	4,995,720	8



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		120	58.15	5,037,360	5,037,360	8
2003/01		1.00	1.3271	1.3271		120	58.15	5,104,200	5,104,200	8
2003/07		1.00	1.1664	1.1664		120	58.15	5,163,720	5,163,720	8
2004/01		1.00	1.1103	1.1103		120	58.15	5,221,053	5,221,080	
2004/07		1.00	0.8378	0.8378		120	61.56	5,264,795	5,264,880	
2005/01		1.00	0.8595	0.8595		120	61.56	5,310,046	5,310,120	
2005/07		1.00	0.7364	0.7364		120	59.42	5,349,149	5,349,240	
2006/01		1.00	0.9068	0.9068		120	59.42	5,397,655	5,397,720	
2006/07		1.00	0.8133	0.8133		120	54.97	5,441,530	5,441,640	
2007/01		1.00	1.0133	1.0133		120	54.97	5,496,639	5,496,720	
2007/07		0.95	1.1050	1.1050		120	56.90	5,554,343	5,557,440	
2008/01		0.95	0.8556	0.8556		120	53.77	5,598,479	5,604,960	
2008/07		0.90	0.6104	0.6104		120	53.77	5,628,549	5,639,160	
2009/01		0.90	1.3268	1.3268		120	53.77	5,694,256	5,714,040	
2009/07		0.85	0.6841	0.6841		120	49.67	5,724,159	5,753,160	
2010/01		0.85	0.8643	0.8643		120	49.67	5,762,139	5,802,840	
2010/07		0.80	0.7107	0.7107		120	49.25	5,791,477	5,844,120	
2011/01		0.80	0.9198	0.9198		120	49.25	5,829,636	5,897,880	
2011/07		0.75	0.9028	0.9028		120	49.19	5,864,939	5,951,160	
2012/01		0.75	0.3865	0.3865		120	52.34	5,881,119	5,974,200	
2012/07		0.70	0.9417	0.9417		120	52.34	5,918,012	6,030,480	
2013/01		0.70	0.4901	0.4901		120	52.34	5,937,335	6,060,000	
2013/07		0.65	0.6196	0.6196		120	52.34	5,960,088	6,097,560	
2014/01		0.65	0.8564	0.8564		120	52.34	5,991,663	6,149,760	
2014/07		0.60	1.2383	1.2383		120	52.34	6,034,028	6,225,960	
2015/01		0.60	0.7571	0.7571		120	57.24	6,061,441	6,273,120	
2015/09		0.55	1.5736	1.5736		120	57.24	6,113,903	6,371,880	
2016/09		0.50	1.9890	1.9890		120	56.39	6,174,706	6,498,600	

Message Code:

- | |
|--|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |
| 8 Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
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211.96

The Parks Healthcare and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
9311 S ORANGE BLOSSOM TRL	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
ORLANDO, FL 32837-8301	Days in CR 365	Maximum: 43,800	Standard: 366
County: Orange [48]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 41,896	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,771	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 29,371	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	70.10454%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.65297%	Cost: 1.07573004
Open Date: 09/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 09/01/1984	Low Occupancy Adjustment Factor:	120.96946%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 259934			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,471,980	2,103,044	1,231,686	324,550		5,131,260	
1a	Audit Adjustments							
2	Cost Per Diem	50.1168	71.6027	41.9354	11.0500		174.7049	
3	Cost Per Diem Inflated	53.9121	76.0014	45.1112				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.9121	76.0014	45.1112	11.0500		186.0747	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.6398		61.7136				
7	Provider Target Rate	65.0687		65.1466				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	57.5386		67.9586				
10b	Base for line 10a	54.5065		64.3774				
11	Lesser of 5,7,8,10, 10a	53.9121	76.0014	45.1112	11.0500		186.0747	
12/13	Medicaid Adjustment Rate		1.7190	1.0203				
14	Prospective Per Diem 11	53.9121	77.7204	46.1315	11.0500		188.8140	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Computation of Nursing Home Medicaid Reimbursement Rate

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The Parks Healthcare and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/01/2012		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,286,250.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Variable	80% Capital(1):	4,848,845	9.2508
Indexed Asset Value	6,061,056	<60% of Base:	False	20% ROE(2):	1,212,211	0.6984
FRVS Base Asset:	2,893,663	Interest Rate:	4.3900%	Insurance Cost(3):	31,589	0.7540
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	60,742	1.4498
ROE Factor	0.022710	Amortization Rate:	4.3900%	Home Office(3):	44,110	1.0528
		Interest Only:	False	Replacement(3&4):	36,998	0.0000
		Yearly Payment:	364,668	Total FRVS PD:		13.2058

(1) 80% Capital (\$4,848,845) amortized at 4.3900 % for 20 years Principal & Interest of \$364,668 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.2508

(2) 20% ROE (\$1,212,211) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6984

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.9121	53.9121	2.4460	51.4661
Direct Care	77.7204	77.7204	3.5261	74.1943
Indirect Care	46.1315	46.1315	2.0930	44.0385
Property	11.0500	13.2058	0.5991	12.6067
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.4704
Supplemental Rate				8.1814
Totals	188.8140	190.9698	8.6642	211.9574

Medicaid Trend Adjustment



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 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 043850-00 - 2016/09

211.96

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	2,888,568	0.00	1.9179	1.9179		120	43.69	2,888,568	3,352,680	
1985/01		0.10	1.1471	1.1471		120	43.69	2,891,200	3,391,080	
1985/10		0.10	0.8522	0.8522		120	100.00	2,893,663	3,420,000	
1986/01		0.20	0.8299	0.8299		120	100.00	2,898,466	3,448,440	
1986/07		0.20	0.2974	0.2974		120	100.00	2,900,191	3,441,840	
1987/01		0.30	1.0091	1.0091		120	100.00	2,908,970	3,503,400	
1987/07		0.30	0.9007	0.9007		120	57.21	2,916,830	3,530,760	
1988/01		0.40	0.9007	0.9007		120	57.21	2,927,339	3,559,440	
1988/07		0.40	0.5899	0.5899		120	67.14	2,934,248	3,557,520	
1989/01	16,737	0.50	0.5899	0.5899		120	67.14	2,959,641	3,578,520	
1989/07		0.50	0.5899	0.5899		120	67.16	2,968,372	3,602,760	
1990/01		0.60	0.5899	0.5899		120	67.16	2,978,877	3,620,880	
1990/07		0.60	0.5899	0.5899		120	59.41	2,989,419	3,642,240	
1991/01		0.70	0.5899	0.5899		120	59.41	3,001,762	3,663,600	
1991/07		0.70	1.4932	1.4932		120	67.98	3,033,136	3,718,320	
1992/01		0.80	2.0117	2.0117		120	67.98	3,081,951	3,793,080	
1992/07		0.80	1.8152	1.8152		120	67.06	3,126,707	3,861,960	
1993/01		0.90	1.7710	1.7710		120	67.06	3,176,544	3,930,360	
1993/07		0.90	1.5329	1.5329		120	62.46	3,220,368	3,990,600	
1994/01		1.00	1.6983	1.6983		120	62.46	3,275,060	4,058,400	
1994/07		1.00	1.5991	1.5991		120	60.74	3,327,431	4,123,320	
1995/01		1.00	1.5812	1.5812		120	60.74	3,380,044	4,188,480	
1995/07	40,928	1.00	1.5250	1.5250		120	54.54	3,472,087	4,252,320	
1996/01		1.00	1.7228	1.7228		120	54.54	3,531,404	4,325,640	
1996/07		1.00	1.3294	1.3294		120	54.54	3,577,958	4,383,120	
1997/01	315,572	1.00	1.4109	1.4109		120	54.75	3,943,782	4,444,920	
1997/07		1.00	1.0917	1.0917		120	53.14	3,985,380	4,493,400	
1998/01		1.00	1.1663	1.1663		120	53.14	4,030,290	4,545,840	
1998/07	53,765	1.00	1.0794	1.0794		120	55.19	4,127,558	4,594,920	
1999/01		1.00	1.4499	1.4499		120	55.19	4,127,558	4,661,520	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		120	55.19	4,238,904	4,718,880	
2000/01		1.00	1.3356	1.3356		120	57.13	4,295,519	4,781,880	
2000/07		1.00	1.1129	1.1129		120	62.34	4,343,324	4,835,040	
2001/01		1.00	1.2976	1.2976		120	62.34	4,399,683	4,897,800	
2001/07		1.00	0.9615	0.9615		120	73.25	4,441,986	4,944,840	
2002/01	869,785	1.00	1.0301	1.0301		120	76.06	4,995,720	4,995,720	8
2002/07		1.00	0.8337	0.8337		120	76.06	5,037,360	5,037,360	8
2003/01	46,228	1.00	1.3271	1.3271		120	73.30	5,104,200	5,104,200	8
2003/07		1.00	1.1664	1.1664		120	73.30	5,163,720	5,163,720	8
2004/01		1.00	1.1103	1.1103		120	73.30	5,221,053	5,221,080	
2004/07		1.00	0.8378	0.8378		120	73.30	5,264,795	5,264,880	
2005/01		0.95	0.8595	0.8595		120	73.30	5,307,782	5,310,120	
2005/07		0.95	0.7364	0.7364		120	73.30	5,344,915	5,349,240	
2006/01		0.90	0.9068	0.9068		120	73.62	5,388,535	5,397,720	
2006/07		0.90	0.8133	0.8133		120	73.62	5,427,979	5,441,640	
2007/01		0.85	1.0133	1.0133		120	71.98	5,474,730	5,496,720	
2007/07		0.85	1.1050	1.1050		120	71.98	5,526,154	5,557,440	
2008/01		0.80	0.8556	0.8556		120	69.50	5,563,981	5,604,960	
2008/07		0.80	0.6104	0.6104		120	69.50	5,591,150	5,639,160	
2009/01		0.75	1.3268	1.3268		120	69.36	5,646,788	5,714,040	
2009/07		0.75	0.6841	0.6841		120	69.36	5,675,762	5,753,160	
2010/01		0.70	0.8643	0.8643		120	68.82	5,710,100	5,802,840	
2010/07		0.70	0.7107	0.7107		120	68.82	5,738,508	5,844,120	
2011/01		0.65	0.9198	0.9198		120	75.70	5,772,819	5,897,880	
2011/07		0.65	0.9028	0.9028		120	75.70	5,806,694	5,951,160	
2012/01		0.60	0.3865	0.3865		120	75.95	5,820,160	5,974,200	
2012/07		0.60	0.9417	0.9417		120	75.95	5,853,044	6,030,480	
2013/01		0.55	0.4901	0.4901		120	75.95	5,868,824	6,060,000	
2013/07		0.55	0.6196	0.6196		120	75.95	5,888,825	6,097,560	
2014/01		0.50	0.8564	0.8564		120	75.95	5,914,041	6,149,760	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	75.95	5,950,661	6,225,960	
2015/01		0.45	0.7571	0.7571		120	76.12	5,970,935	6,273,120	
2015/09		0.45	1.5736	1.5736		120	76.12	6,013,215	6,371,880	
2016/09		0.40	1.9890	1.9890		120	70.10	6,061,056	6,498,600	

Message Code:

- 5 Uncorrected Licensure Deficiency
- 8 Limited to Current RS Per Bed Standard

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 043850123120140101201411102015123747



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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216.51

Coral Bay Healthcare and Rehabilitation

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2939 S HAVERHILL RD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
WEST PALM BCH, FL 33415-81	Days in CR 365	Maximum: 43,800	Standard: 366
County: Palm Beach [50]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 41,458	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 10,829	Inflation
Current Class South Large	Initial CR? False	Medicaid: 23,979	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	57.83926%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.65297%	Cost: 1.07573004
Open Date: 05/04/1993	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/04/1993	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 05/04/1993	Low Occupancy Adjustment Factor:	119.70479%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 259918			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,309,650	1,705,446	1,068,692	1,171,854		5,255,642	
1a	Audit Adjustments							
2	Cost Per Diem	54.6165	71.1225	44.5678	48.8700		219.1768	
3	Cost Per Diem Inflated	58.7526	75.4917	47.9429				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	58.7526	75.4917	47.9429	48.8700		231.0572	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	62.7342		67.9716				
7	Provider Target Rate	66.2240		71.7527				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	60.8753		73.1758				
10b	Base for line 10a	57.6674		69.3197				
11	Lesser of 5,7,8,10, 10a	58.7526	75.4917	47.9429	13.6500		195.8372	
12/13	Medicaid Adjustment Rate		0.6658	0.4228				
14	Prospective Per Diem 11	58.7526	76.1575	48.3657	13.6500		196.9258	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Coral Bay Healthcare and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/04/1993		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	7,736,250.00		Total Amount	Per Diem
RS to Start Calcs:	1993/01	Type:	Variable	80% Capital(1):	4,954,271	9.4520
Indexed Asset Value	6,192,839	<60% of Base:	False	20% ROE(2):	1,238,568	0.7135
FRVS Base Asset:	3,861,960	Interest Rate:	4.3900%	Insurance Cost(3):	41,697	1.0058
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	94,668	2.2835
ROE Factor	0.022710	Amortization Rate:	4.3900%	Home Office(3):	46,457	1.1206
		Interest Only:	False	Replacement(3&4):	94,263	0.0000
		Yearly Payment:	372,597	Total FRVS PD:		14.5754

(1) 80% Capital (\$4,954,271) amortized at 4.3900 % for 20 years Principal & Interest of \$372,597 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.4520

(2) 20% ROE (\$1,238,568) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7135

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	32,183
Comparison Date: 08/01/1992	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,861,960

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7526	58.7526	2.6656	56.0870
Direct Care	76.1575	76.1575	3.4552	72.7023
Indirect Care	48.3657	48.3657	2.1943	46.1714
Property	13.6500	14.5754	0.6613	13.9141
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.4587
Supplemental Rate				8.1814
Totals	196.9258	197.8512	8.9764	216.5149

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1993/01	5,615,673	0.00	1.7710	1.7710		120	37.72	3,861,960	3,861,960	1
1993/07		0.10	1.5329	1.5329		120	37.72	3,866,020	3,990,600	
1994/01		0.10	1.6983	1.6983		120	37.72	3,870,522	4,058,400	
1994/07		0.20	1.5991	1.5991		120	37.72	3,879,011	4,123,320	
1995/01		0.20	1.5812	1.5812		120	37.72	3,887,423	4,188,480	
1995/07		0.30	1.5250	1.5250		120	37.72	3,887,423	4,252,320	5
1996/01		0.30	1.7228	1.7228		120	37.72	3,913,441	4,325,640	
1996/07	682,650	0.40	1.3294	1.3294		120	32.65	4,608,446	4,383,120	6
1997/01		0.40	1.4109	1.4109		120	32.65	4,608,446	4,444,920	3
1997/07		0.50	1.0917	1.0917		120	30.99	4,608,446	4,493,400	3
1998/01		0.50	1.1663	1.1663		120	30.99	4,608,446	4,545,840	3
1998/07	25,508	0.60	1.0794	1.0794		120	29.65	4,608,446	4,594,920	3
1999/01		0.60	1.4499	1.4499		120	29.65	4,608,446	4,661,520	5
1999/07	23,786	0.70	1.2299	1.2299		120	32.69	4,677,535	4,718,880	
2000/01		0.70	1.3356	1.3356		120	32.69	4,703,527	4,781,880	
2000/07	79,213	0.80	1.1129	1.1129		120	40.28	4,813,408	4,835,040	
2001/01		0.80	1.2976	1.2976		120	40.28	4,850,003	4,897,800	
2001/07		0.90	0.9615	0.9615		120	42.73	4,882,611	4,944,840	
2002/01		0.90	1.0301	1.0301		120	42.28	4,917,409	4,995,720	
2002/07		1.00	0.8337	0.8337		120	42.28	4,948,924	5,037,360	
2003/01	48,701	1.00	1.3271	1.3271		120	50.41	5,057,821	5,104,200	
2003/07	1,078	1.00	1.1664	1.1664		120	50.41	5,112,970	5,163,720	
2004/01		1.00	1.1103	1.1103		120	50.41	5,165,002	5,221,080	
2004/07		1.00	0.8378	0.8378		120	50.41	5,204,663	5,264,880	
2005/01		1.00	0.8595	0.8595		120	50.41	5,245,664	5,310,120	
2005/07		1.00	0.7364	0.7364		120	50.41	5,281,069	5,349,240	
2006/01		1.00	0.9068	0.9068		120	50.30	5,324,865	5,397,720	
2006/07		1.00	0.8133	0.8133		120	50.30	5,364,471	5,441,640	
2007/01		1.00	1.0133	1.0133		120	42.93	5,406,900	5,496,720	
2007/07		1.00	1.1050	1.1050		120	38.66	5,448,896	5,557,440	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2008/01		1.00	0.8556	0.8556		120	38.66	5,481,666	5,604,960	
2008/07		1.00	0.6104	0.6104		120	38.66	5,505,185	5,639,160	
2009/01		1.00	1.3268	1.3268		120	38.51	5,556,328	5,714,040	
2009/07		1.00	0.6841	0.6841		120	38.51	5,582,942	5,753,160	
2010/01		1.00	0.8643	0.8643		120	43.22	5,620,860	5,802,840	
2010/07		1.00	0.7107	0.7107		120	43.22	5,652,251	5,844,120	
2011/01		1.00	0.9198	0.9198		120	46.69	5,696,385	5,897,880	
2011/07		1.00	0.9028	0.9028		120	46.69	5,740,042	5,951,160	
2012/01		1.00	0.3865	0.3865		120	51.02	5,760,622	5,974,200	
2012/07		1.00	0.9417	0.9417		120	51.02	5,810,944	6,030,480	
2013/01		1.00	0.4901	0.4901		120	51.02	5,837,363	6,060,000	
2013/07		0.95	0.6196	0.6196		120	51.02	5,869,235	6,097,560	
2014/01		0.95	0.8564	0.8564		120	51.02	5,913,532	6,149,760	
2014/07		0.90	1.2383	1.2383		120	51.02	5,974,669	6,225,960	
2015/01		0.90	0.7571	0.7571		120	55.37	6,015,380	6,273,120	
2015/09		0.85	1.5736	1.5736		120	55.37	6,095,842	6,371,880	
2016/09		0.80	1.9890	1.9890		120	57.84	6,192,839	6,498,600	

Message Code:

- | | |
|---|---|
| 1 | Per Bed Standard Limitation |
| 3 | Index Cost Limitation - January 1996 |
| 5 | Uncorrected Licensure Deficiency |
| 6 | Not Limited to Current Per Bed Standard |

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 043851123120140101201411102015124123



Florida Agency for Health Care Administration
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203.96

Plantation Bay Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4641 OLD CANOE CREEK ROA	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
SAINT CLOUD, FL 34769	Days in CR 365	Maximum: 43,800	Standard: 366
County: Osceola [49]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 42,895	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 10,121	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,994	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	67.59296%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.93379%	Cost: 1.07573004
Open Date: 07/20/1995	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/20/1995	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 07/20/1995	Low Occupancy Adjustment Factor:	123.85394%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252441			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,236,396	2,130,517	1,193,056	640,767		5,200,736	
1a	Audit Adjustments							
2	Cost Per Diem	42.6432	73.4813	41.1484	22.1000		179.3729	
3	Cost Per Diem Inflated	45.8726	77.9954	44.2646				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.8726	77.9954	44.2646	22.1000		190.2326	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.0343		61.9003				
7	Provider Target Rate	58.0958		65.3437				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	57.5386		67.9586				
10b	Base for line 10a	54.5065		64.3774				
11	Lesser of 5,7,8,10, 10a	45.8726	77.9954	44.2646	13.6500		181.7826	
12/13	Medicaid Adjustment Rate		1.5437	0.8761				
14	Prospective Per Diem 11	45.8726	79.5391	45.1407	13.6500		184.2024	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 043853-00 - 2016/09

203.96

Plantation Bay Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/20/1995		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,216,969.00		Total Amount	Per Diem
RS to Start Calcs:	1995/07	Type:	Fixed	80% Capital(1):	4,204,079	10.5063
Indexed Asset Value	5,255,099	<60% of Base:	False	20% ROE(2):	1,051,020	0.6055
FRVS Base Asset:	3,595,112	Interest Rate:	10.6343%	Insurance Cost(3):	35,730	0.8330
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	72,563	1.6916
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	44,079	1.0276
		Interest Only:	False	Replacement(3&4):	42,521	0.0000
		Yearly Payment:	414,160	Total FRVS PD:		14.6640

(1) 80% Capital (\$4,204,079) amortized at 7.7500 % for 20 years Principal & Interest of \$414,160 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.5063

(2) 20% ROE (\$1,051,020) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6055

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1995	Current RS PBS:	34,904
Comparison Bed	103	Effective PBS Limitation	54,155
			3,595,112

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.8726	45.8726	2.0812	43.7914
Direct Care	79.5391	79.5391	3.6086	75.9305
Indirect Care	45.1407	45.1407	2.0480	43.0927
Property	13.6500	14.6640	0.6653	13.9987
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.9699
Supplemental Rate				8.1814
Totals	184.2024	185.2164	8.4031	203.9646

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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203.96

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1995/07	6,483,985	0.00	1.5250	1.5250		103	52.28	3,595,112	3,595,112	1
1996/01		0.10	1.7228	1.7228		103	52.28	3,601,000	3,712,841	
1996/07		0.10	1.3294	1.3294		103	52.28	3,605,549	3,762,178	
1997/01		0.20	1.4109	1.4109		103	52.28	3,615,221	3,815,223	
1997/07		0.20	1.0917	1.0917		103	52.28	3,622,723	3,856,835	
1998/01	126,450	0.30	1.1663	1.1663		120	62.30	3,761,849	4,545,840	
1998/07		0.30	1.0794	1.0794		120	62.30	3,774,030	4,594,920	
1999/01	59,441	0.40	1.4499	1.4499		120	68.90	3,855,360	4,661,520	
1999/07		0.40	1.2299	1.2299		120	68.90	3,855,360	4,718,880	5
2000/01	53,077	0.50	1.3356	1.3356		120	62.24	3,953,278	4,781,880	
2000/07		0.50	1.1129	1.1129		120	62.24	3,975,278	4,835,040	
2001/01		0.60	1.2976	1.2976		120	62.11	4,006,230	4,897,800	
2001/07		0.60	0.9615	0.9615		120	59.44	4,029,342	4,944,840	
2002/01	24,662	0.70	1.0301	1.0301		120	59.44	4,083,060	4,995,720	
2002/07		0.70	0.8337	0.8337		120	59.44	4,106,889	5,037,360	
2003/01		0.80	1.3271	1.3271		120	59.44	4,150,492	5,104,200	
2003/07		0.80	1.1664	1.1664		120	59.44	4,189,220	5,163,720	
2004/01		0.90	1.1103	1.1103		120	59.44	4,231,083	5,221,080	
2004/07		0.90	0.8378	0.8378		120	57.98	4,262,985	5,264,880	
2005/01		1.00	0.8595	0.8595		120	58.22	4,262,985	5,310,120	5
2005/07		1.00	0.7364	0.7364		120	58.22	4,331,287	5,349,240	
2006/01		1.00	0.9068	0.9068		120	58.22	4,370,563	5,397,720	
2006/07		1.00	0.8133	0.8133		120	56.57	4,406,109	5,441,640	
2007/01		1.00	1.0133	1.0133		120	56.57	4,450,756	5,496,720	
2007/07		1.00	1.1050	1.1050		120	53.46	4,498,560	5,557,440	
2008/01		1.00	0.8556	0.8556		120	55.93	4,537,050	5,604,960	
2008/07		1.00	0.6104	0.6104		120	55.93	4,564,744	5,639,160	
2009/01		1.00	1.3268	1.3268		120	55.93	4,625,309	5,714,040	
2009/07		1.00	0.6841	0.6841		120	58.31	4,656,951	5,753,160	
2010/01		1.00	0.8643	0.8643		120	59.37	4,697,201	5,802,840	



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203.96

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/07		1.00	0.7107	0.7107		120	59.37	4,730,584	5,844,120	
2011/01		1.00	0.9198	0.9198		120	58.78	4,774,096	5,897,880	
2011/07		1.00	0.9028	0.9028		120	58.78	4,817,197	5,951,160	
2012/01		1.00	0.3865	0.3865		120	65.49	4,835,815	5,974,200	
2012/07		1.00	0.9417	0.9417		120	65.49	4,881,354	6,030,480	
2013/01		1.00	0.4901	0.4901		120	65.49	4,905,278	6,060,000	
2013/07		1.00	0.6196	0.6196		120	65.49	4,935,671	6,097,560	
2014/01		1.00	0.8564	0.8564		120	65.49	4,977,940	6,149,760	
2014/07		1.00	1.2383	1.2383		120	65.49	5,039,582	6,225,960	
2015/01		1.00	0.7571	0.7571		120	65.73	5,077,737	6,273,120	
2015/09		1.00	1.5736	1.5736		120	65.73	5,157,640	6,371,880	
2016/09		0.95	1.9890	1.9890		120	67.59	5,255,099	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 09/01/2016 through 08/31/2017

0043854-00 - 2016/09

187.60

Colonial Lakes Health Care

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
15204 W COLONIAL DR	1/1/2015-12/31/2015	Number of Beds: 180	Superior: 0
WINTER GARDEN, FL 34787-60	Days in CR 365	Maximum: 65,700	Standard: 366
County: Orange [48]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 63,020	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,668	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 49,719	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	78.89400%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.92085%	Cost: 1.04651568
Open Date: 06/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 06/01/1984	Low Occupancy Adjustment Factor:	121.30824%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252557			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,146,298	3,093,738	1,791,023	1,576,092		8,607,151	
1a	Audit Adjustments							
2	Cost Per Diem	43.1686	62.2245	36.0229	31.7000		173.1160	
3	Cost Per Diem Inflated	45.1766	64.7562	37.6985				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.1766	64.7562	37.6985	31.7000		179.3313	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.9839		60.5501				
7	Provider Target Rate	56.9869		63.9184				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	54.5052		66.4086				
10b	Base for line 10a	51.6330		62.9091				
11	Lesser of 5,7,8,10, 10a	45.1766	64.7562	37.6985	13.6500		161.2813	
12/13	Medicaid Adjustment Rate		2.1049	1.2254				
14	Prospective Per Diem 11	45.1766	66.8611	38.9239	13.6500		164.6116	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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187.60

Colonial Lakes Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/01/1990		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,100,802.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Fixed	80% Capital(1):	6,999,836	11.6621
Indexed Asset Value	8,749,795	<60% of Base:	False	20% ROE(2):	1,749,959	0.5981
FRVS Base Asset:	3,287,398	Interest Rate:	10.6343%	Insurance Cost(3):	46,994	0.7457
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	70,227	1.1144
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	55,681	0.8835
		Interest Only:	False	Replacement(3&4):	88,935	0.0000
		Yearly Payment:	689,581	Total FRVS PD:		15.0038

(1) 80% Capital (\$6,999,836) amortized at 7.7500 % for 20 years Principal & Interest of \$689,581 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$11.6621

(2) 20% ROE (\$1,749,959) times the ROE factor (0.020210) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.5981

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.1766	45.1766	2.0496	43.1270
Direct Care	66.8611	66.8611	3.0335	63.8276
Indirect Care	38.9239	38.9239	1.7660	37.1579
Property	13.6500	15.0038	0.6807	14.3231
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9793
Supplemental Rate				8.1814
Totals	164.6116	165.9654	7.5298	187.5963

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	3,269,087	0.00	1.2952	1.2952		120	85.31	3,269,087	3,289,560	
1984/07		0.10	1.9179	1.9179		120	85.31	3,275,357	3,352,680	
1985/01	2,692	0.10	1.1471	1.1471		120	85.31	3,281,806	3,391,080	
1985/10		0.20	0.8522	0.8522		120	85.31	3,287,398	3,420,000	
1986/01		0.20	0.8299	0.8299		120	85.31	3,292,855	3,448,440	
1986/07		0.30	0.2974	0.2974		120	85.31	3,295,792	3,441,840	
1987/01	23,165	0.30	1.0091	1.0091		120	93.06	3,328,933	3,503,400	
1987/07		0.40	0.9007	0.9007		120	93.06	3,340,927	3,530,760	
1988/01		0.40	0.9007	0.9007		120	93.39	3,352,964	3,559,440	
1988/07		0.50	0.5899	0.5899		120	93.39	3,362,855	3,557,520	
1989/01		0.50	0.5899	0.5899		120	93.39	3,372,775	3,578,520	
1989/07		0.60	0.5899	0.5899		120	92.60	3,384,711	3,602,760	
1990/01		0.60	0.5899	0.5899		120	77.20	3,396,689	3,620,880	
1990/07		0.70	0.5899	0.5899		120	77.20	3,410,714	3,642,240	
1991/01		0.70	0.5899	0.5899		120	78.17	3,424,797	3,663,600	
1991/07		0.80	1.4932	1.4932		120	78.17	3,465,710	3,718,320	
1992/01		0.80	2.0117	2.0117		120	84.41	3,521,487	3,793,080	
1992/07		0.90	1.8152	1.8152		120	84.41	3,579,018	3,861,960	
1993/01	52,181	0.90	1.7710	1.7710		120	80.38	3,688,245	3,930,360	
1993/07		1.00	1.5329	1.5329		120	80.38	3,744,782	3,990,600	
1994/01		1.00	1.6983	1.6983		120	74.66	3,808,380	4,058,400	
1994/07		1.00	1.5991	1.5991		120	74.66	3,869,280	4,123,320	
1995/01	101,531	1.00	1.5812	1.5812		120	73.54	4,031,992	4,188,480	
1995/07		1.00	1.5250	1.5250		120	73.54	4,093,480	4,252,320	
1996/01		1.00	1.7228	1.7228		120	76.51	4,164,002	4,325,640	
1996/07		1.00	1.3294	1.3294		120	76.51	4,219,358	4,383,120	
1997/01		1.00	1.4109	1.4109		120	80.87	4,278,889	4,444,920	
1997/07		1.00	1.0917	1.0917		120	80.87	4,325,602	4,493,400	
1998/01		1.00	1.1663	1.1663		120	82.09	4,376,051	4,545,840	
1998/07		1.00	1.0794	1.0794		120	82.09	4,423,286	4,594,920	



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187.60

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01	2,232,748	1.00	1.4499	1.4499		180	85.71	6,720,167	6,992,280	
1999/07		1.00	1.2299	1.2299		180	85.71	6,802,818	7,078,320	
2000/01	53,153	1.00	1.3356	1.3356		180	86.82	6,946,829	7,172,820	
2000/07		1.00	1.1129	1.1129		180	86.82	7,024,140	7,252,560	
2001/01		1.00	1.2976	1.2976		180	85.97	7,115,285	7,346,700	
2001/07		1.00	0.9615	0.9615		180	74.03	7,183,698	7,417,260	
2002/01		1.00	1.0301	1.0301		180	74.03	7,257,697	7,493,580	
2002/07		1.00	0.8337	0.8337		180	74.03	7,318,204	7,556,040	
2003/01		1.00	1.3271	1.3271		180	74.03	7,415,324	7,656,300	
2003/07		1.00	1.1664	1.1664		180	74.03	7,501,816	7,745,580	
2004/01		1.00	1.1103	1.1103		180	74.03	7,585,109	7,831,620	
2004/07		0.95	0.8378	0.8378		180	76.09	7,645,479	7,897,320	
2005/01		0.95	0.8595	0.8595		180	76.09	7,707,904	7,965,180	
2005/07		0.90	0.7364	0.7364		180	75.71	7,758,992	8,023,860	
2006/01		0.90	0.9068	0.9068		180	75.71	7,822,313	8,096,580	
2006/07		0.85	0.8133	0.8133		180	73.50	7,876,389	8,162,460	
2007/01		0.85	1.0133	1.0133		180	73.15	7,944,228	8,245,080	
2007/07		0.80	1.1050	1.1050		180	73.15	8,014,455	8,336,160	
2008/01		0.80	0.8556	0.8556		180	70.19	8,069,314	8,407,440	
2008/07		0.75	0.6104	0.6104		180	70.19	8,106,255	8,458,740	
2009/01		0.75	1.3268	1.3268		180	70.19	8,186,920	8,571,060	
2009/07		0.70	0.6841	0.6841		180	68.62	8,226,127	8,629,740	
2010/01		0.70	0.8643	0.8643		180	68.62	8,275,895	8,704,260	
2010/07		0.65	0.7107	0.7107		180	68.75	8,314,130	8,766,180	
2011/01		0.65	0.9198	0.9198		180	68.75	8,363,840	8,846,820	
2011/07		0.60	0.9028	0.9028		180	77.21	8,363,840	8,926,740	5
2012/01		0.60	0.3865	0.3865		180	78.96	8,428,648	8,961,300	
2012/07		0.55	0.9417	0.9417		180	78.96	8,472,300	9,045,720	
2013/01		0.55	0.4901	0.4901		180	78.96	8,495,141	9,090,000	
2013/07		0.50	0.6196	0.6196		180	78.96	8,521,459	9,146,340	



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187.60

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.50	0.8564	0.8564		180	78.96	8,557,948	9,224,640	
2014/07		0.45	1.2383	1.2383		180	78.96	8,605,633	9,338,940	
2015/01		0.45	0.7571	0.7571		180	79.73	8,634,952	9,409,680	
2015/09		0.40	1.5736	1.5736		180	79.73	8,689,300	9,557,820	
2016/09		0.35	1.9890	1.9890		180	78.89	8,749,795	9,747,900	

Message Code:

5 Uncorrected Licensure Deficiency

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Florida Agency for Health Care Administration
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0043856-00 - 2016/09

225.79

Central Park Healthcare and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
702 S KINGS AVE	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
BRANDON, FL 33511-5925	Days in CR 365	Maximum: 43,800	Standard: 334
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 32
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 40,114	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 11,894	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 25,568	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	63.73835%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.58447%	Cost: 1.07573004
Open Date: 02/25/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/25/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 02/25/1991	Low Occupancy Adjustment Factor:	115.82415%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 259900			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,349,851	1,859,528	1,468,401	324,458		5,002,238
1a	Audit Adjustments						
2	Cost Per Diem	52.7945	72.7287	57.4312	12.6900		195.6444
3	Cost Per Diem Inflated	56.7926	77.1966	61.7805			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	56.7926	77.1966	61.7805	12.6900		208.4597
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	62.2614		64.9504			
7	Provider Target Rate	65.7249		68.5635			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	57.3896		67.9586			
10b	Base for line 10a	54.3654		64.3774			
11	Lesser of 5,7,8,10, 10a	56.7926	77.1966	61.7805	12.6900		208.4597
12/13	Medicaid Adjustment Rate		1.0888	0.8714			
14	Prospective Per Diem 11	56.7926	78.2854	62.6519	12.6900		210.4199
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Central Park Healthcare and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/25/1991		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,835,000.00		Total Amount	Per Diem
RS to Start Calcs:	1991/01	Type:	Variable	80% Capital(1):	4,395,069	8.3851
Indexed Asset Value	5,493,836	<60% of Base:	False	20% ROE(2):	1,098,767	0.6330
FRVS Base Asset:	3,642,240	Interest Rate:	4.3900%	Insurance Cost(3):	35,282	0.8795
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	50,288	1.2536
ROE Factor	0.022710	Amortization Rate:	4.3900%	Home Office(3):	49,706	1.2391
		Interest Only:	False	Replacement(3&4):	67,011	0.0000
		Yearly Payment:	330,541	Total FRVS PD:		12.3903

(1) 80% Capital (\$4,395,069) amortized at 4.3900 % for 20 years Principal & Interest of \$330,541 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.3851

(2) 20% ROE (\$1,098,767) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6330

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,352
Comparison Date: 07/01/1990	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.7926	56.7926	2.5767	54.2159
Direct Care	78.2854	78.2854	3.5518	74.7336
Indirect Care	62.6519	62.6519	2.8425	59.8094
Property	12.6900	12.3903	0.5621	11.8282
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.0245
Supplemental Rate				8.1814
Totals	210.4199	210.1202	9.5331	225.7930

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/01	6,603,586	0.00	0.5899	0.5899		120	34.48	3,642,240	3,642,240	1
1991/07		0.10	1.4932	1.4932		120	34.48	3,645,649	3,718,320	
1992/01		0.10	2.0117	2.0117		120	34.48	3,650,247	3,793,080	
1992/07		0.20	1.8152	1.8152		120	34.48	3,658,554	3,861,960	
1993/01		0.20	1.7710	1.7710		120	34.48	3,666,678	3,930,360	
1993/07		0.30	1.5329	1.5329		120	34.48	3,677,250	3,990,600	
1994/01		0.30	1.6983	1.6983		120	34.48	3,688,996	4,058,400	
1994/07		0.40	1.5991	1.5991		120	49.09	3,710,055	4,123,320	
1995/01		0.40	1.5812	1.5812		120	52.52	3,732,463	4,188,480	
1995/07		0.50	1.5250	1.5250		120	52.52	3,759,640	4,252,320	
1996/01		0.50	1.7228	1.7228		120	52.52	3,790,565	4,325,640	
1996/07		0.60	1.3294	1.3294		120	53.73	3,820,100	4,383,120	
1997/01		0.60	1.4109	1.4109		120	42.62	3,845,158	4,444,920	
1997/07	10,068	0.70	1.0917	1.0917		120	47.06	3,880,369	4,493,400	
1998/01		0.70	1.1663	1.1663		120	47.06	3,907,475	4,545,840	
1998/07		0.80	1.0794	1.0794		120	51.15	3,938,854	4,594,920	
1999/01		0.80	1.4499	1.4499		120	51.15	3,981,343	4,661,520	
1999/07		0.90	1.2299	1.2299		120	54.98	4,025,396	4,718,880	
2000/01		0.90	1.3356	1.3356		120	54.98	4,073,764	4,781,880	
2000/07		1.00	1.1129	1.1129		120	64.71	4,119,101	4,835,040	
2001/01		1.00	1.2976	1.2976		120	64.71	4,172,550	4,897,800	
2001/07		1.00	0.9615	0.9615		120	65.12	4,212,669	4,944,840	
2002/01		1.00	1.0301	1.0301		120	64.78	4,256,064	4,995,720	
2002/07		1.00	0.8337	0.8337		120	64.78	4,291,547	5,037,360	
2003/01	46,228	1.00	1.3271	1.3271		120	63.59	4,394,728	5,104,200	
2003/07		1.00	1.1664	1.1664		120	63.59	4,445,988	5,163,720	
2004/01		1.00	1.1103	1.1103		120	63.59	4,495,352	5,221,080	
2004/07		1.00	0.8378	0.8378		120	63.59	4,533,014	5,264,880	
2005/01		1.00	0.8595	0.8595		120	63.59	4,571,975	5,310,120	
2005/07		1.00	0.7364	0.7364		120	63.59	4,605,643	5,349,240	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01		1.00	0.9068	0.9068		120	63.21	4,647,407	5,397,720	
2006/07		1.00	0.8133	0.8133		120	63.21	4,685,204	5,441,640	
2007/01		1.00	1.0133	1.0133		120	61.47	4,732,679	5,496,720	
2007/07		1.00	1.1050	1.1050		120	61.47	4,784,975	5,557,440	
2008/01		1.00	0.8556	0.8556		120	60.83	4,825,915	5,604,960	
2008/07		1.00	0.6104	0.6104		120	60.83	4,855,372	5,639,160	
2009/01		1.00	1.3268	1.3268		120	57.26	4,919,793	5,714,040	
2009/07		1.00	0.6841	0.6841		120	57.26	4,953,449	5,753,160	
2010/01		1.00	0.8643	0.8643		120	62.23	4,996,262	5,802,840	
2010/07		1.00	0.7107	0.7107		120	62.23	5,031,770	5,844,120	
2011/01		1.00	0.9198	0.9198		120	61.96	5,078,052	5,897,880	
2011/07		0.95	0.9028	0.9028		120	61.96	5,121,606	5,951,160	
2012/01		0.95	0.3865	0.3865		120	56.20	5,140,413	5,974,200	
2012/07		0.90	0.9417	0.9417		120	56.20	5,183,978	6,030,480	
2013/01		0.90	0.4901	0.4901		120	56.20	5,206,845	6,060,000	
2013/07		0.85	0.6196	0.6196		120	56.20	5,234,269	6,097,560	
2014/01		0.85	0.8564	0.8564		120	56.20	5,272,369	6,149,760	
2014/07		0.80	1.2383	1.2383		120	56.20	5,324,597	6,225,960	
2015/01		0.80	0.7571	0.7571		120	54.04	5,356,285	6,273,120	
2015/09		0.75	1.5736	1.5736		120	54.04	5,356,285	6,371,880	5
2016/09		0.70	1.9890	1.9890		120	63.74	5,493,836	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 043856123120140101201411102015114858



Florida Agency for Health Care Administration
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Beneva Lakes Healthcare and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
741 SOUTH BENEVA ROAD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
SARASOTA, FL 34232	Days in CR 365	Maximum: 43,800	Standard: 366
County: Sarasota [58]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 41,113	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,322	Inflation
Current Class South Large	Initial CR? False	Medicaid: 32,985	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	80.23010%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.86530%	Cost: 1.04651568
Open Date: 09/01/1982	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1982	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 09/01/1982	Low Occupancy Adjustment Factor:	118.70865%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 259896			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,667,989	2,500,475	1,769,997	565,033		6,503,494	
1a	Audit Adjustments							
2	Cost Per Diem	50.5681	75.8064	53.6607	17.1300		197.1652	
3	Cost Per Diem Inflated	52.9203	78.8907	56.1568				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.9203	78.8907	56.1568	17.1300		205.0978	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.6738		65.2485				
7	Provider Target Rate	65.1046		68.8781				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	56.4609		69.8272				
10b	Base for line 10a	53.4856		66.1475				
11	Lesser of 5,7,8,10, 10a	52.9203	78.8907	56.1568	13.6500		201.6178	
12/13	Medicaid Adjustment Rate		2.6830	1.9098				
14	Prospective Per Diem 11	52.9203	81.5737	58.0666	13.6500		206.2106	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Beneva Lakes Healthcare and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/01/2001		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,118,750.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Variable	80% Capital(1):	4,057,547	7.7412
Indexed Asset Value	5,071,934	<60% of Base:	False	20% ROE(2):	1,014,387	0.5201
FRVS Base Asset:	3,420,000	Interest Rate:	4.3900%	Insurance Cost(3):	30,289	0.7367
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	69,993	1.7025
ROE Factor	0.020210	Amortization Rate:	4.3900%	Home Office(3):	41,824	1.0173
		Interest Only:	False	Replacement(3&4):	44,727	0.0000
		Yearly Payment:	305,157	Total FRVS PD:		11.7178

(1) 80% Capital (\$4,057,547) amortized at 4.3900 % for 20 years Principal & Interest of \$305,157 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.7412

(2) 20% ROE (\$1,014,387) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5201

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.9203	52.9203	2.4010	50.5193
Direct Care	81.5737	81.5737	3.7010	77.8727
Indirect Care	58.0666	58.0666	2.6345	55.4321
Property	13.6500	11.7178	0.5316	11.1862
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9529
Supplemental Rate				8.1814
Totals	206.2106	204.2784	9.2681	224.1446

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1982/07	3,265,687	0.00	2.2977	2.2977		120	96.10	3,265,687	3,043,800	
1983/04	80,494	0.10	2.6288	2.6288		120	96.10	3,354,766	3,123,840	
1983/07	32,867	0.10	3.9578	3.0000	0.9578	120	96.10	3,397,697	3,247,440	
1984/01	18,952	0.20	2.2530	2.2530		120	9.84	3,416,649	3,289,560	
1984/07	7,767	0.20	1.9179	1.9179		120	9.84	3,424,416	3,352,680	
1985/01		0.30	1.1471	1.1471		120	9.84	3,424,416	3,391,080	
1985/10		0.30	0.8522	0.8522		120	9.84	3,420,000	3,420,000	1
1986/01		0.40	0.8299	0.8299		120	9.84	3,420,000	3,448,440	
1986/07		0.40	0.2974	0.2974		120	10.26	3,420,000	3,441,840	
1987/01	53,238	0.50	1.0091	1.0091		120	10.26	3,473,238	3,503,400	
1987/07		0.50	0.9007	0.9007		120	10.26	3,473,238	3,530,760	
1988/01		0.60	0.9007	0.9007		120	10.26	3,473,238	3,559,440	
1988/07		0.60	0.5899	0.5899		120	10.26	3,473,238	3,557,520	
1989/01		0.70	0.5899	0.5899		120	10.26	3,473,238	3,578,520	
1989/07		0.70	0.5899	0.5899		120	16.42	3,473,238	3,602,760	
1990/01		0.80	0.5899	0.5899		120	16.42	3,473,238	3,620,880	
1990/07	17,985	0.80	0.5899	0.5899		120	16.89	3,491,223	3,642,240	
1991/01		0.90	0.5899	0.5899		120	16.89	3,491,223	3,663,600	
1991/07		0.90	1.4932	1.4932		120	20.19	3,491,223	3,718,320	
1992/01		1.00	2.0117	2.0117		120	20.19	3,491,223	3,793,080	
1992/07		1.00	1.8152	1.8152		120	21.34	3,491,223	3,861,960	
1993/01		1.00	1.7710	1.7710		120	21.34	3,491,223	3,930,360	
1993/07	47,481	1.00	1.5329	1.5329		120	24.86	3,538,704	3,990,600	
1994/01		1.00	1.6983	1.6983		120	24.86	3,538,704	4,058,400	
1994/07		1.00	1.5991	1.5991		120	29.90	3,569,467	4,123,320	
1995/01		1.00	1.5812	1.5812		120	29.90	3,600,150	4,188,480	
1995/07		1.00	1.5250	1.5250		120	30.66	3,630,756	4,252,320	
1996/01		1.00	1.7228	1.7228		120	30.66	3,665,625	4,325,640	
1996/07	34,978	1.00	1.3294	1.3294		120	34.65	3,731,303	4,383,120	
1997/01		1.00	1.4109	1.4109		120	34.65	3,764,469	4,444,920	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/07		1.00	1.0917	1.0917		120	48.27	3,800,537	4,493,400	
1998/01		1.00	1.1663	1.1663		120	48.27	3,839,439	4,545,840	
1998/07		1.00	1.0794	1.0794		120	55.06	3,880,882	4,594,920	
1999/01		1.00	1.4499	1.4499		120	55.06	3,937,151	4,661,520	
1999/07		1.00	1.2299	1.2299		120	59.93	3,985,574	4,718,880	
2000/01		1.00	1.3356	1.3356		120	59.93	4,038,805	4,781,880	
2000/07		1.00	1.1129	1.1129		120	60.94	4,083,753	4,835,040	
2001/01		1.00	1.2976	1.2976		120	60.94	4,136,744	4,897,800	
2001/07		1.00	0.9615	0.9615		120	64.69	4,176,519	4,944,840	
2002/01	17,988	1.00	1.0301	1.0301		120	64.81	4,237,529	4,995,720	
2002/07		1.00	0.8337	0.8337		120	64.81	4,272,857	5,037,360	
2003/01	46,228	0.95	1.3271	1.3271		120	68.81	4,372,953	5,104,200	
2003/07		0.95	1.1664	1.1664		120	68.81	4,421,410	5,163,720	
2004/01		0.90	1.1103	1.1103		120	68.81	4,465,593	5,221,080	
2004/07		0.90	0.8378	0.8378		120	68.81	4,499,264	5,264,880	
2005/01		0.85	0.8595	0.8595		120	68.81	4,532,136	5,310,120	
2005/07		0.85	0.7364	0.7364		120	68.81	4,560,503	5,349,240	
2006/01		0.80	0.9068	0.9068		120	64.43	4,593,585	5,397,720	
2006/07		0.80	0.8133	0.8133		120	64.43	4,623,471	5,441,640	
2007/01		0.75	1.0133	1.0133		120	70.45	4,658,609	5,496,720	
2007/07		0.75	1.1050	1.1050		120	65.77	4,697,220	5,557,440	
2008/01		0.70	0.8556	0.8556		120	65.77	4,725,352	5,604,960	
2008/07		0.70	0.6104	0.6104		120	65.77	4,745,543	5,639,160	
2009/01		0.65	1.3268	1.3268		120	65.20	4,786,469	5,714,040	
2009/07		0.65	0.6841	0.6841		120	65.20	4,807,754	5,753,160	
2010/01		0.60	0.8643	0.8643		120	67.76	4,832,687	5,802,840	
2010/07		0.60	0.7107	0.7107		120	66.84	4,853,294	5,844,120	
2011/01		0.55	0.9198	0.9198		120	66.84	4,877,847	5,897,880	
2011/07		0.55	0.9028	0.9028		120	71.25	4,902,066	5,951,160	
2012/01		0.50	0.3865	0.3865		120	71.68	4,911,542	5,974,200	



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224.14

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07		0.50	0.9417	0.9417		120	71.68	4,934,670	6,030,480	
2013/01		0.45	0.4901	0.4901		120	71.68	4,945,551	6,060,000	
2013/07		0.45	0.6196	0.6196		120	71.68	4,959,339	6,097,560	
2014/01		0.40	0.8564	0.8564		120	71.68	4,976,330	6,149,760	
2014/07		0.40	1.2383	1.2383		120	71.68	5,000,978	6,225,960	
2015/01		0.35	0.7571	0.7571		120	76.27	5,014,231	6,273,120	
2015/09		0.35	1.5736	1.5736		120	76.27	5,041,849	6,371,880	
2016/09		0.30	1.9890	1.9890		120	80.23	5,071,934	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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ID: 043857123120150101201504252016144626



Florida Agency for Health Care Administration
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212.24

Bradenton Health Care

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6305 CORTEZ RD W	1/1/2015-12/31/2015	Number of Beds: 105	Superior: 0
BRADENTON, FL 34210-2604	Days in CR 365	Maximum: 38,325	Standard: 366
County: Manatee [41]	First Used : 2016/09	Max Annualized: 38,325	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 37,016	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,197	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 22,299	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	60.24152%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.58447%	Cost: 1.04651568
Open Date: 11/29/1999	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/29/1999	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 12/09/1999	Low Occupancy Adjustment Factor:	122.14750%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252069			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,137,619	1,673,238	1,011,945	889,507		4,712,309
1a	Audit Adjustments						
2	Cost Per Diem	51.0166	75.0365	45.3807	39.8900		211.3238
3	Cost Per Diem Inflated	53.3897	78.0894	47.4916			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	53.3897	78.0894	47.4916	39.8900		218.8607
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	55.0832		65.4221			
7	Provider Target Rate	58.1474		69.0614			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	57.5386		67.9586			
10b	Base for line 10a	54.5065		64.3774			
11	Lesser of 5,7,8,10, 10a	53.3897	78.0894	47.4916	13.6500		192.6207
12/13	Medicaid Adjustment Rate		0.8997	0.5472			
14	Prospective Per Diem 11	53.3897	78.9891	48.0388	13.6500		194.0676
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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212.24

Bradenton Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/09/1999	Amount:	4,325,786.00		Total Amount	Per Diem
RS to Start Calcs:	1999/07	Type:	Fixed	80% Capital(1):	4,136,259	11.8136
Indexed Asset Value	5,170,324	<60% of Base:	False	20% ROE(2):	1,034,065	0.6059
FRVS Base Asset:	4,078,830	Interest Rate:	10.6343%	Insurance Cost(3):	29,053	0.7849
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	99,752	2.6948
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	39,115	1.0567
		Interest Only:	False	Replacement(3&4):	133,661	0.0000
		Yearly Payment:	407,479	Total FRVS PD:		16.9559

(1) 80% Capital (\$4,136,259) amortized at 7.7500 % for 20 years Principal & Interest of \$407,479 divided by annual available days (38325) divided by Occup. Adj. (0.90) = \$11.8136

(2) 20% ROE (\$1,034,065) times the ROE factor (0.020210) divided by annual available days (38325) divided by Occup. Adj. (0.90) = \$0.6059

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	38,846
Comparison Date: 01/01/1999	Current RS PBS:	54,155
Comparison Bed 105	Effective PBS Limitation	4,078,830

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3897	53.3897	2.4223	50.9674
Direct Care	78.9891	78.9891	3.5837	75.4054
Indirect Care	48.0388	48.0388	2.1795	45.8593
Property	13.6500	16.9559	0.7693	16.1866
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.6420
Supplemental Rate				8.1814
Totals	194.0676	197.3735	8.9548	212.2421

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07	5,070,757	0.00	1.2299	1.2299		105	83.27	4,078,830	4,078,830	1
2000/01	455,481	0.10	1.3356	1.3356		105	83.27	4,184,145	4,184,145	8
2000/07		0.10	1.1129	1.1129		105	83.27	4,188,802	4,230,660	
2001/01		0.20	1.2976	1.2976		105	83.27	4,199,672	4,285,575	
2001/07		0.20	0.9615	0.9615		105	76.74	4,207,748	4,326,735	
2002/01		0.30	1.0301	1.0301		105	76.74	4,220,750	4,371,255	
2002/07		0.30	0.8337	0.8337		105	76.74	4,231,306	4,407,690	
2003/01		0.40	1.3271	1.3271		105	76.74	4,253,766	4,466,175	
2003/07		0.40	1.1664	1.1664		105	76.74	4,273,614	4,518,255	
2004/01		0.50	1.1103	1.1103		105	76.74	4,297,341	4,568,445	
2004/07		0.50	0.8378	0.8378		105	75.73	4,315,343	4,606,770	
2005/01		0.60	0.8595	0.8595		105	75.73	4,337,597	4,646,355	
2005/07		0.60	0.7364	0.7364		105	73.31	4,356,761	4,680,585	
2006/01		0.70	0.9068	0.9068		105	73.31	4,384,418	4,723,005	
2006/07		0.70	0.8133	0.8133		105	64.69	4,409,378	4,761,435	
2007/01		0.80	1.0133	1.0133		105	64.69	4,445,120	4,809,630	
2007/07		0.80	1.1050	1.1050		105	59.88	4,484,415	4,862,760	
2008/01		0.90	0.8556	0.8556		105	51.17	4,516,540	4,904,340	
2008/07		0.90	0.6104	0.6104		105	51.17	4,539,626	4,934,265	
2009/01		1.00	1.3268	1.3268		105	51.17	4,595,663	4,999,785	
2009/07		1.00	0.6841	0.6841		105	44.39	4,621,037	5,034,015	
2010/01		1.00	0.8643	0.8643		105	44.39	4,653,272	5,077,485	
2010/07		1.00	0.7107	0.7107		105	43.13	4,679,206	5,113,605	
2011/01		1.00	0.9198	0.9198		105	46.07	4,715,257	5,160,645	
2011/07		1.00	0.9028	0.9028		105	46.07	4,750,915	5,207,265	
2012/01		1.00	0.3865	0.3865		105	50.86	4,767,895	5,227,425	
2012/07		1.00	0.9417	0.9417		105	50.86	4,809,415	5,276,670	
2013/01		1.00	0.4901	0.4901		105	50.86	4,831,212	5,302,500	
2013/07		1.00	0.6196	0.6196		105	50.86	4,858,893	5,335,365	
2014/01		1.00	0.8564	0.8564		105	50.86	4,897,372	5,381,040	



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212.24

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		1.00	1.2383	1.2383		105	50.86	4,953,451	5,447,715	
2015/01		1.00	0.7571	0.7571		105	57.66	4,990,954	5,488,980	
2015/09		1.00	1.5736	1.5736		105	57.66	5,069,492	5,575,395	
2016/09		1.00	1.9890	1.9890		105	60.24	5,170,324	5,686,275	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 8 | Limited to Current RS Per Bed Standard |

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 043859123120150101201504252016105110



Florida Agency for Health Care Administration
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199.30

Brandon Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1465 OAKFIELD DR	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
BRANDON, FL 33511-4854	Days in CR 365	Maximum: 43,800	Standard: 366
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 41,959	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 17,529	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 16,484	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	39.28597%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.79680%	Cost: 1.04651568
Open Date: 05/07/1997	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/07/1997	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 05/07/1997	Low Occupancy Adjustment Factor:	121.15136%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252077			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	706,160	1,153,467	867,941	1,289,543		4,017,111	
1a	Audit Adjustments							
2	Cost Per Diem	42.8391	69.9749	52.6535	78.2300		243.6975	
3	Cost Per Diem Inflated	44.8318	72.8219	55.1027				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.8318	72.8219	55.1027	78.2300		250.9864	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.5943		68.7873				
7	Provider Target Rate	57.6313		72.6138				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	55.7793		67.9586				
10b	Base for line 10a	52.8399		64.3774				
11	Lesser of 5,7,8,10, 10a	44.8318	72.8219	55.1027	13.6500		186.4064	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	44.8318	72.8219	55.1027	13.6500		186.4064	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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199.30

Brandon Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/07/1997		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,680,764.00		Total Amount	Per Diem
RS to Start Calcs:	1997/01	Type:	Fixed	80% Capital(1):	4,321,866	10.8007
Indexed Asset Value	5,402,333	<60% of Base:	False	20% ROE(2):	1,080,467	0.5539
FRVS Base Asset:	4,237,016	Interest Rate:	10.6343%	Insurance Cost(3):	35,894	0.8555
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	108,155	2.5776
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	50,727	1.2090
		Interest Only:	False	Replacement(3&4):	212,339	0.0000
		Yearly Payment:	425,764	Total FRVS PD:		15.9967

(1) 80% Capital (\$4,321,866) amortized at 7.7500 % for 20 years Principal & Interest of \$425,764 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.8007

(2) 20% ROE (\$1,080,467) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5539

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1996	Current RS PBS:	36,526
Comparison Bed	116	Effective PBS Limitation	54,155
			4,237,016

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.8318	44.8318	2.0340	42.7978
Direct Care	72.8219	72.8219	3.3039	69.5180
Indirect Care	55.1027	55.1027	2.5000	52.6027
Property	13.6500	15.9967	0.7258	15.2709
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				10.9294
Supplemental Rate				8.1814
Totals	186.4064	188.7531	8.5637	199.3002

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/01	7,154,639	0.00	1.4109	1.4109		116	62.74	4,237,016	4,237,016	1
1997/07		0.10	1.0917	1.0917		116	62.74	4,241,643	4,343,620	
1998/01		0.10	1.1663	1.1663		116	62.74	4,246,589	4,394,312	
1998/07		0.20	1.0794	1.0794		116	62.74	4,255,757	4,441,756	
1999/01		0.20	1.4499	1.4499		116	62.74	4,268,099	4,506,136	
1999/07		0.30	1.2299	1.2299		116	62.74	4,283,848	4,561,584	
2000/01	37,450	0.30	1.3356	1.3356		116	68.59	4,338,463	4,622,484	
2000/07		0.40	1.1129	1.1129		116	68.59	4,357,778	4,673,872	
2001/01		0.40	1.2976	1.2976		116	71.16	4,380,395	4,734,540	
2001/07		0.50	0.9615	0.9615		120	66.75	4,401,456	4,944,840	
2002/01		0.50	1.0301	1.0301		120	66.75	4,424,128	4,995,720	
2002/07		0.60	0.8337	0.8337		120	66.75	4,446,257	5,037,360	
2003/01		0.60	1.3271	1.3271		120	66.75	4,481,663	5,104,200	
2003/07		0.70	1.1664	1.1664		120	66.75	4,518,256	5,163,720	
2004/01		0.70	1.1103	1.1103		120	66.75	4,553,372	5,221,080	
2004/07		0.80	0.8378	0.8378		120	67.33	4,583,889	5,264,880	
2005/01		0.80	0.8595	0.8595		120	67.33	4,615,408	5,310,120	
2005/07		0.90	0.7364	0.7364		120	61.61	4,645,999	5,349,240	
2006/01		0.90	0.9068	0.9068		120	61.61	4,683,915	5,397,720	
2006/07		1.00	0.8133	0.8133		120	55.84	4,722,009	5,441,640	
2007/01		1.00	1.0133	1.0133		120	46.09	4,762,106	5,496,720	
2007/07		1.00	1.1050	1.1050		120	46.09	4,806,203	5,557,440	
2008/01		1.00	0.8556	0.8556		120	44.28	4,839,310	5,604,960	
2008/07		1.00	0.6104	0.6104		120	44.28	4,863,092	5,639,160	
2009/01		1.00	1.3268	1.3268		120	44.28	4,915,039	5,714,040	
2009/07		1.00	0.6841	0.6841		120	48.39	4,944,622	5,753,160	
2010/01		1.00	0.8643	0.8643		120	48.39	4,982,222	5,802,840	
2010/07		1.00	0.7107	0.7107		120	45.64	5,011,605	5,844,120	
2011/01		1.00	0.9198	0.9198		120	44.59	5,048,977	5,897,880	
2011/07		1.00	0.9028	0.9028		120	44.59	5,085,932	5,951,160	



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199.30

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/01		1.00	0.3865	0.3865		120	37.47	5,099,324	5,974,200	
2012/07		1.00	0.9417	0.9417		120	37.47	5,132,039	6,030,480	
2013/01		1.00	0.4901	0.4901		120	37.47	5,149,174	6,060,000	
2013/07		1.00	0.6196	0.6196		120	37.47	5,170,910	6,097,560	
2014/01		1.00	0.8564	0.8564		120	37.47	5,201,079	6,149,760	
2014/07		1.00	1.2383	1.2383		120	37.47	5,244,956	6,225,960	
2015/01		1.00	0.7571	0.7571		120	36.63	5,271,403	6,273,120	
2015/09		1.00	1.5736	1.5736		120	36.63	5,326,648	6,371,880	
2016/09		1.00	1.9890	1.9890		120	39.29	5,402,333	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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ID: 043860123120150101201504252016105442



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Fort Pierce Health Care

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
611 S 13TH ST	1/1/2015-12/31/2015	Number of Beds: 171	Superior: 0
FORT PIERCE, FL 34950-4054	Days in CR 365	Maximum: 62,415	Standard: 366
County: St Lucie [56]	First Used : 2016/09	Max Annualized: 62,415	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 57,172	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,634	Inflation
Current Class South Large	Initial CR? False	Medicaid: 47,950	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	83.86973%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.59978%	Cost: 1.04651568
Open Date: 06/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 06/01/1984	Low Occupancy Adjustment Factor:	115.84351%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252239			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,371,955	3,488,915	1,854,268	361,543		8,076,681
1a	Audit Adjustments						
2	Cost Per Diem	49.4673	72.7615	38.6709	7.5400		168.4397
3	Cost Per Diem Inflated	51.7683	75.7219	40.4697			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	51.7683	75.7219	40.4697	7.5400		175.4999
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	58.7942		65.1990			
7	Provider Target Rate	62.0648		68.8259			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	60.0532		70.7042			
10b	Base for line 10a	56.8886		66.9783			
11	Lesser of 5,7,8,10, 10a	51.7683	75.7219	40.4697	7.5400		175.4999
12/13	Medicaid Adjustment Rate		2.8853	1.5420			
14	Prospective Per Diem 11	51.7683	78.6072	42.0117	7.5400		179.9272
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.				0.00



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Fort Pierce Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	967,160.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Fixed	80% Capital(1):	4,452,989	9.8557
Indexed Asset Value	5,566,236	<60% of Base:	True	20% ROE(2):	1,113,247	0.4005
FRVS Base Asset:	3,267,919	Interest Rate:	12.5000%	Insurance Cost(3):	43,582	0.7623
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	78,212	1.3680
ROE Factor	0.020210	Amortization Rate:	12.5000%	Home Office(3):	52,089	0.9111
		Interest Only:	True	Replacement(3&4):	65,344	0.0000
		Yearly Payment:	553,629	Total FRVS PD:		13.2976

(1) 80% Capital (\$4,452,989) amortized at 12.5000 % for 20 years Interest of \$553,629 divided by annual available days (62415) divided by Occup. Adj. (0.90) = \$9.8557

(2) 20% ROE (\$1,113,247) times the ROE factor (0.020210) divided by annual available days (62415) divided by Occup. Adj. (0.90) = \$0.4005

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	171	Effective PBS Limitation	54,155
			4,873,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.7683	51.7683	2.3487	49.4196
Direct Care	78.6072	78.6072	3.5664	75.0408
Indirect Care	42.0117	42.0117	1.9060	40.1057
Property	7.5400	13.2976	0.6033	12.6943
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5236
Supplemental Rate				8.1814
Totals	179.9272	185.6848	8.4244	206.9654

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	3,165,086	0.00	1.2952	1.2952		171	70.45	3,165,086	4,687,623	
1984/07		0.10	1.9179	1.9179		171	70.45	3,171,157	4,777,569	
1985/01	87,566	0.10	1.1471	1.1471		171	70.45	3,262,360	4,832,289	
1985/10		0.20	0.8522	0.8522		171	70.45	3,267,919	4,873,500	
1986/01		0.20	0.8299	0.8299		171	70.45	3,273,344	4,914,027	
1986/07		0.30	0.2974	0.2974		171	70.45	3,276,264	4,904,622	
1987/01		0.30	1.0091	1.0091		171	72.44	3,286,181	4,992,345	
1987/07		0.40	0.9007	0.9007		171	72.44	3,298,021	5,031,333	
1988/01		0.40	0.9007	0.9007		171	77.32	3,309,904	5,072,202	
1988/07		0.50	0.5899	0.5899		171	77.32	3,319,668	5,069,466	
1989/01		0.50	0.5899	0.5899		171	79.48	3,329,461	5,099,391	
1989/07		0.60	0.5899	0.5899		171	79.48	3,341,244	5,133,933	
1990/01		0.60	0.5899	0.5899		171	77.48	3,353,069	5,159,754	
1990/07		0.70	0.5899	0.5899		171	77.48	3,366,914	5,190,192	
1991/01		0.70	0.5899	0.5899		171	76.21	3,380,816	5,220,630	
1991/07		0.80	1.4932	1.4932		171	76.21	3,380,816	5,298,606	5
1992/01		0.80	2.0117	2.0117		171	81.52	3,421,203	5,405,139	5
1992/07		0.90	1.8152	1.8152		171	81.52	3,533,056	5,503,293	
1993/01		0.90	1.7710	1.7710		171	84.46	3,589,369	5,600,763	
1993/07		1.00	1.5329	1.5329		171	84.46	3,644,390	5,686,605	
1994/01		1.00	1.6983	1.6983		171	75.78	3,706,283	5,783,220	
1994/07		1.00	1.5991	1.5991		171	75.78	3,765,550	5,875,731	
1995/01		1.00	1.5812	1.5812		171	78.32	3,825,091	5,968,584	
1995/07		1.00	1.5250	1.5250		171	78.32	3,883,424	6,059,556	
1996/01		1.00	1.7228	1.7228		171	80.67	3,950,328	6,164,037	
1996/07		1.00	1.3294	1.3294		171	80.67	3,950,328	6,245,946	5
1997/01		1.00	1.4109	1.4109		171	84.09	4,002,844	6,334,011	5
1997/07		1.00	1.0917	1.0917		171	84.09	4,103,636	6,403,095	
1998/01		1.00	1.1663	1.1663		171	83.51	4,151,497	6,477,822	
1998/07		1.00	1.0794	1.0794		171	83.51	4,196,308	6,547,761	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01		1.00	1.4499	1.4499		171	81.87	4,257,150	6,642,666	
1999/07		1.00	1.2299	1.2299		171	81.87	4,309,509	6,724,404	
2000/01	52,200	1.00	1.3356	1.3356		171	87.14	4,419,267	6,814,179	
2000/07		1.00	1.1129	1.1129		171	87.14	4,468,449	6,889,932	
2001/01		1.00	1.2976	1.2976		171	85.62	4,526,432	6,979,365	
2001/07		1.00	0.9615	0.9615		171	85.29	4,569,954	7,046,397	
2002/01		1.00	1.0301	1.0301		171	85.29	4,569,954	7,118,901	5
2002/07		1.00	0.8337	0.8337		171	85.29	4,655,521	7,178,238	
2003/01		1.00	1.3271	1.3271		171	85.29	4,717,304	7,273,485	
2003/07		1.00	1.1664	1.1664		171	85.29	4,772,327	7,358,301	
2004/01		1.00	1.1103	1.1103		171	85.29	4,825,314	7,440,039	
2004/07		0.95	0.8378	0.8378		171	79.56	4,863,719	7,502,454	
2005/01		0.95	0.8595	0.8595		171	79.14	4,903,431	7,566,921	
2005/07		0.90	0.7364	0.7364		171	79.14	4,935,931	7,622,667	
2006/01		0.90	0.9068	0.9068		171	79.14	4,976,213	7,691,751	
2006/07		0.85	0.8133	0.8133		171	82.61	5,010,614	7,754,337	
2007/01		0.85	1.0133	1.0133		171	82.61	5,053,770	7,832,826	
2007/07		0.80	1.1050	1.1050		171	79.76	5,098,445	7,919,352	
2008/01		0.80	0.8556	0.8556		171	79.76	5,098,445	7,987,068	5
2008/07		0.75	0.6104	0.6104		171	83.31	5,156,844	8,035,803	
2009/01		0.75	1.3268	1.3268		171	83.31	5,208,160	8,142,507	
2009/07		0.70	0.6841	0.6841		171	82.30	5,233,102	8,198,253	
2010/01		0.70	0.8643	0.8643		171	82.30	5,264,762	8,269,047	
2010/07		0.65	0.7107	0.7107		171	85.45	5,289,085	8,327,871	
2011/01		0.65	0.9198	0.9198		171	87.96	5,320,708	8,404,479	
2011/07		0.60	0.9028	0.9028		171	87.96	5,349,530	8,480,403	
2012/01		0.60	0.3865	0.3865		171	85.10	5,361,936	8,513,235	
2012/07		0.55	0.9417	0.9417		171	85.10	5,389,705	8,593,434	
2013/01		0.55	0.4901	0.4901		171	85.10	5,404,236	8,635,500	
2013/07		0.50	0.6196	0.6196		171	85.10	5,420,978	8,689,023	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.50	0.8564	0.8564		171	85.10	5,444,191	8,763,408	
2014/07		0.45	1.2383	1.2383		171	85.10	5,474,526	8,871,993	
2015/01		0.45	0.7571	0.7571		171	83.86	5,493,178	8,939,196	
2015/09		0.40	1.5736	1.5736		171	83.86	5,527,752	9,079,929	
2016/09		0.35	1.9890	1.9890		171	83.87	5,566,236	9,260,505	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Habana Health Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2916 HABANA WAY	1/1/2015-12/31/2015	Number of Beds: 150	Superior: 0
TAMPA, FL 33614	Days in CR 365	Maximum: 54,750	Standard: 366
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 54,750	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 52,255	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,697	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 39,468	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	75.52961%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.44292%	Cost: 1.04651568
Open Date: 06/01/1970	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1970	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 10/01/1980	Low Occupancy Adjustment Factor:	120.70381%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252506			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,028,758	2,892,041	1,681,141	794,096		7,396,036	
1a	Audit Adjustments							
2	Cost Per Diem	51.4026	73.2756	42.5950	20.1200		187.3932	
3	Cost Per Diem Inflated	53.7936	76.2569	44.5763				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.7936	76.2569	44.5763	20.1200		194.7468	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.4865		61.0683				
7	Provider Target Rate	56.4619		64.4654				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	55.7447		67.4206				
10b	Base for line 10a	52.8071		63.8678				
11	Lesser of 5,7,8,10, 10a	53.7936	76.2569	44.5763	13.6500		188.2768	
12/13	Medicaid Adjustment Rate		2.1902	1.2803				
14	Prospective Per Diem 11	53.7936	78.4471	45.8566	13.6500		191.7473	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Habana Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/01/1989		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Fixed	80% Capital(1):	3,576,527	7.1504
Indexed Asset Value	4,470,659	<60% of Base:	False	20% ROE(2):	894,132	0.3667
FRVS Base Asset:	2,111,676	Interest Rate:	10.6343%	Insurance Cost(3):	34,076	0.6521
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	56,790	1.0868
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	49,122	0.9400
		Interest Only:	False	Replacement(3&4):	81,125	0.0000
		Yearly Payment:	352,337	Total FRVS PD:		10.1960

(1) 80% Capital (\$3,576,527) amortized at 7.7500 % for 20 years Principal & Interest of \$352,337 divided by annual available days (54750) divided by Occup. Adj. (0.90) = \$7.1504

(2) 20% ROE (\$894,132) times the ROE factor (0.020210) divided by annual available days (54750) divided by Occup. Adj. (0.90) = \$0.3667

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 150	Effective PBS Limitation	4,275,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.7936	53.7936	2.4406	51.3530
Direct Care	78.4471	78.4471	3.5591	74.8880
Indirect Care	45.8566	45.8566	2.0805	43.7761
Property	13.6500	10.1960	0.4626	9.7334
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.2949
Supplemental Rate				8.1814
Totals	191.7473	188.2933	8.5428	209.2268

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	869,647	0.00				150	100.00	869,647	1,539,150	
1972/01		0.10	3.9787	3.0000	0.9787	150	100.00	872,256	1,600,350	
1972/07		0.10	5.9113	3.0000	2.9113	150	100.00	874,873	1,679,250	
1973/01		0.20	8.0622	3.0000	5.0622	150	100.00	880,122	1,765,800	
1973/07		0.20	10.7186	3.0000	7.7186	150	100.00	885,403	1,865,700	
1974/01		0.30	12.9457	3.0000	9.9457	150	100.00	893,372	1,963,200	
1974/07		0.30	13.0494	3.0000	10.0494	150	100.00	901,412	2,024,100	
1975/01		0.40	13.1399	3.0000	10.1399	150	100.00	912,229	2,086,650	
1975/07		0.40	14.2033	3.0000	11.2033	150	100.00	923,176	2,171,550	
1976/01		0.50	15.2478	3.0000	12.2478	150	100.00	937,024	2,259,300	
1976/07		0.50	15.7330	3.0000	12.7330	150	100.00	951,079	2,338,050	
1977/01		0.60	16.4836	3.0000	13.4836	150	100.00	968,198	2,425,800	
1977/07		0.60	18.5412	3.0000	15.5412	150	100.00	985,626	2,548,350	
1978/01		0.70	20.2809	3.0000	17.2809	150	100.00	1,006,324	2,669,250	
1978/07		0.70	22.8203	3.0000	19.8203	150	100.00	1,027,457	2,817,000	
1979/01		0.80	24.9476	3.0000	21.9476	150	100.00	1,052,116	2,961,450	
1979/07		0.80	26.1458	3.0000	23.1458	150	100.00	1,077,367	3,085,800	
1980/01	28,911	0.90	29.3115	3.0000	26.3115	150	55.00	1,135,367	3,276,150	
1980/07	117,890	0.90	30.1222	3.0000	27.1222	150	84.14	1,283,912	3,400,950	
1981/01		1.00	30.9462	3.0000	27.9462	150	84.14	1,322,429	3,531,000	
1981/07	34,572	1.00	30.5350	3.0000	27.5350	150	84.14	1,396,674	3,622,350	
1982/01		1.00	30.2110	3.0000	27.2110	150	89.38	1,438,574	3,719,400	
1982/07	208,247	1.00	29.5087	3.0000	26.5087	150	100.00	1,689,978	3,804,750	
1983/04	2,732	1.00	29.1375	3.0000	26.1375	150	100.00	1,743,409	3,904,800	
1983/07	27,426	1.00	30.0953	3.0000	27.0953	150	100.00	1,823,137	4,059,300	
1984/01	1,220	1.00	28.3905	3.0000	25.3905	150	100.00	1,879,051	4,111,950	
1984/07	24,094	1.00	27.3084	3.0000	24.3084	150	83.29	1,959,517	4,190,850	
1985/01	504	1.00	25.4555	3.0000	22.4555	150	83.30	2,018,807	4,238,850	
1985/10	32,305	1.00	23.3077	3.0000	20.3077	150	83.30	2,111,676	4,275,000	
1986/01		1.00	21.1376	3.0000	18.1376	150	68.82	2,175,026	4,310,550	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07		1.00	18.4350	3.0000	15.4350	150	68.82	2,240,277	4,302,300	
1987/01	15,842	1.00	16.4441	3.0000	13.4441	150	80.32	2,323,327	4,379,250	
1987/07		1.00	14.3448	3.0000	11.3448	150	80.32	2,393,027	4,413,450	
1988/01		1.00	12.2455	3.0000	9.2455	150	80.92	2,464,818	4,449,300	
1988/07		1.00	9.8354	3.0000	6.8354	150	80.92	2,538,763	4,446,900	
1989/01		1.00	7.4253	3.0000	4.4253	150	81.58	2,614,926	4,473,150	
1989/07		1.00	5.0152	3.0000	2.0152	150	81.58	2,693,374	4,503,450	
1990/01		1.00	2.6051	2.6051		150	79.63	2,693,374	4,526,100	5
1990/07		1.00	0.5899	0.5899		150	79.63	2,763,539	4,552,800	5
1991/01		1.00	0.5899	0.5899		150	74.12	2,779,841	4,579,500	5
1991/07		1.00	1.4932	1.4932		150	74.12	2,796,239	4,647,900	5
1992/01		0.95	2.0117	2.0117		150	80.02	2,837,992	4,741,350	5
1992/07		0.95	1.8152	1.8152		150	80.02	2,892,229	4,827,450	5
1993/01		0.90	1.7710	1.7710		150	79.00	2,988,997	4,912,950	
1993/07		0.90	1.5329	1.5329		150	79.00	3,030,233	4,988,250	
1994/01		0.85	1.6983	1.6983		150	71.25	3,073,977	5,073,000	
1994/07		0.85	1.5991	1.5991		150	71.25	3,115,758	5,154,150	
1995/01		0.80	1.5812	1.5812		150	70.09	3,155,172	5,235,600	
1995/07		0.80	1.5250	1.5250		150	70.09	3,193,665	5,315,400	
1996/01		0.75	1.7228	1.7228		150	75.33	3,234,930	5,407,050	
1996/07		0.75	1.3294	1.3294		150	75.33	3,267,185	5,478,900	
1997/01		0.70	1.4109	1.4109		150	76.32	3,267,185	5,556,150	5
1997/07		0.70	1.0917	1.0917		150	76.32	3,324,666	5,616,750	
1998/01	643,635	0.65	1.1663	1.1663		150	74.92	3,968,301	5,682,300	5
1998/07		0.65	1.0794	1.0794		150	74.92	4,021,523	5,743,650	
1999/01		0.60	1.4499	1.4499		150	79.07	4,056,506	5,826,900	
1999/07		0.60	1.2299	1.2299		150	79.07	4,086,439	5,898,600	
2000/01	60,787	0.55	1.3356	1.3356		150	81.64	4,177,245	5,977,350	
2000/07		0.55	1.1129	1.1129		150	81.64	4,177,245	6,043,800	5
2001/01		0.50	1.2976	1.2976		150	82.55	4,230,082	6,122,250	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		0.50	0.9615	0.9615		150	79.76	4,250,420	6,181,050	
2002/01	30,377	0.45	1.0301	1.0301		150	79.76	4,300,498	6,244,650	
2002/07		0.45	0.8337	0.8337		150	79.76	4,316,633	6,296,700	
2003/01		0.40	1.3271	1.3271		150	79.76	4,339,546	6,380,250	
2003/07		0.40	1.1664	1.1664		150	79.76	4,359,794	6,454,650	
2004/01		0.35	1.1103	1.1103		150	79.76	4,376,736	6,526,350	
2004/07		0.35	0.8378	0.8378		150	77.77	4,389,569	6,581,100	
2005/01		0.30	0.8595	0.8595		150	77.77	4,400,890	6,637,650	
2005/07		0.30	0.7364	0.7364		150	68.72	4,410,612	6,686,550	
2006/01		0.25	0.9068	0.9068		150	68.72	4,420,611	6,747,150	
2006/07		0.25	0.8133	0.8133		150	66.70	4,429,598	6,802,050	
2007/01		0.20	1.0133	1.0133		150	66.70	4,438,577	6,870,900	
2007/07		0.20	1.1050	1.1050		150	65.52	4,448,386	6,946,800	
2008/01		0.15	0.8556	0.8556		150	65.63	4,454,093	7,006,200	
2008/07		0.15	0.6104	0.6104		150	65.63	4,458,173	7,048,950	
2009/01		0.10	1.3268	1.3268		150	67.98	4,464,089	7,142,550	
2009/07		0.10	0.6841	0.6841		150	67.98	4,467,142	7,191,450	
2010/01		0.05	0.8643	0.8643		150	73.56	4,469,072	7,253,550	
2010/07		0.05	0.7107	0.7107		150	73.56	4,470,659	7,305,150	
2011/01		0.00	0.9198	0.9198		150	73.56	4,470,659	7,372,350	
2011/07		0.00	0.9028	0.9028		150	78.11	4,470,659	7,438,950	
2012/01		0.00	0.3865	0.3865		150	84.42	4,470,659	7,467,750	
2012/07		0.00	0.9417	0.9417		150	84.42	4,470,659	7,538,100	
2013/01		0.00	0.4901	0.4901		150	84.42	4,470,659	7,575,000	5
2013/07		0.00	0.6196	0.6196		150	84.42	4,470,659	7,621,950	
2014/01		0.00	0.8564	0.8564		150	84.42	4,470,659	7,687,200	
2014/07		0.00	1.2383	1.2383		150	84.42	4,470,659	7,782,450	
2015/01		0.00	0.7571	0.7571		150	78.42	4,470,659	7,841,400	
2015/09		0.00	1.5736	1.5736		150	78.42	4,470,659	7,964,850	
2016/09		0.00	1.9890	1.9890		150	75.53	4,470,659	8,123,250	

Message Code:

5 Uncorrected Licensure Deficiency



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The Health and Rehabilitation Centre at Dolphins View

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1820 SHORE DR S	1/1/2015-12/31/2015	Number of Beds: 58	Superior: 0
SOUTH PASADENA, FL 33707	Days in CR 365	Maximum: 21,170	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 21,170	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 18,175	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,201	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 9,774	FY Index: 1.37939113
Class at 1/94: North Small	Medicaid Utilization	53.77717%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	85.85262%	Cost: 1.04651568
Open Date: 11/30/1989	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/01/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 04/01/1991	Low Occupancy Adjustment Factor:	108.57525%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 320528			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	578,599	683,771	545,937	707,344		2,515,651	
1a	Audit Adjustments							
2	Cost Per Diem	59.1978	69.9582	55.8560	72.3700		257.3820	
3	Cost Per Diem Inflated	61.9514	72.8045	58.4542				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	61.9514	72.8045	58.4542	72.3700		265.5801	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	71.0722		74.3228				
7	Provider Target Rate	75.0258		78.4572				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500			
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674				
10	Target Rate Class Ceiling	67.5182		79.7567				
10a	New Provider Target Limitation	68.2553		81.2539				
10b	Base for line 10a	64.6585		76.9721				
11	Lesser of 5,7,8,10, 10a	61.9514	72.8045	58.4542	13.6500		206.8601	
12/13	Medicaid Adjustment Rate		0.3094	0.2484				
14	Prospective Per Diem 11	61.9514	73.1139	58.7026	13.6500		207.4179	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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The Health and Rehabilitation Centre at Dolphins View

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/1991	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,100,000.00		Total Amount	Per Diem
RS to Start Calcs:	1991/01	Type:	Fixed	80% Capital(1):	1,444,358	9.2354
Indexed Asset Value	1,805,447	<60% of Base:	False	20% ROE(2):	361,089	0.3830
FRVS Base Asset:	1,250,000	Interest Rate:	10.7500%	Insurance Cost(3):	30,175	1.6602
Occup Adj Factor	0.9000	Chase Rate:	10.5000%	Taxes Cost(3):	28,303	1.5572
ROE Factor	0.020210	Amortization Rate:	10.7500%	Home Office(3):	21,493	1.1826
		Interest Only:	False	Replacement(3&4):	42,622	0.0000
		Yearly Payment:	175,963	Total FRVS PD:		14.0184

(1) 80% Capital (\$1,444,358) amortized at 10.7500 % for 20 years Principal & Interest of \$175,963 divided by annual available days (21170) divided by Occup. Adj. (0.90) = \$9.2354

(2) 20% ROE (\$361,089) times the ROE factor (0.020210) divided by annual available days (21170) divided by Occup. Adj. (0.90) = \$0.3830

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,821
Comparison Date: 01/01/1989	Current RS PBS:	54,155
Comparison Bed 58	Effective PBS Limitation	1,729,618

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	61.9514	61.9514	2.8107	59.1407
Direct Care	73.1139	73.1139	3.3171	69.7968
Indirect Care	58.7026	58.7026	2.6633	56.0393
Property	13.6500	14.0184	0.6360	13.3824
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.1139
Supplemental Rate				8.1814
Totals	207.4179	207.7863	9.4271	224.6545

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/01	1,250,000	0.00	0.5899	0.5899		58	19.37	1,250,000	1,770,740	
1991/07		0.10	1.4932	1.4932		58	19.37	1,250,000	1,797,188	
1992/01		0.10	2.0117	2.0117		58	19.37	1,250,000	1,833,322	5
1992/07		0.20	1.8152	1.8152		58	19.37	1,250,000	1,866,614	5
1993/01		0.20	1.7710	1.7710		58	19.37	1,250,000	1,899,674	
1993/07		0.30	1.5329	1.5329		58	19.37	1,250,000	1,928,790	
1994/01		0.30	1.6983	1.6983		58	27.05	1,253,132	1,961,560	
1994/07		0.40	1.5991	1.5991		58	45.98	1,259,833	1,992,938	
1995/01		0.40	1.5812	1.5812		58	45.98	1,266,495	2,024,432	
1995/07		0.50	1.5250	1.5250		58	47.95	1,274,914	2,055,288	
1996/01		0.50	1.7228	1.7228		58	47.95	1,284,488	2,090,726	
1996/07		0.60	1.3294	1.3294		58	51.17	1,294,020	2,118,508	
1997/01		0.60	1.4109	1.4109		58	51.17	1,304,211	2,148,378	
1997/07		0.70	1.0917	1.0917		58	55.68	1,314,178	2,171,810	
1998/01		0.70	1.1663	1.1663		58	55.68	1,324,907	2,197,156	
1998/07		0.80	1.0794	1.0794		58	57.37	1,336,348	2,220,878	
1999/01		0.80	1.4499	1.4499		58	57.37	1,336,348	2,253,068	5
1999/07		0.90	1.2299	1.2299		58	57.37	1,366,812	2,280,792	
2000/01		0.90	1.3356	1.3356		58	53.41	1,382,766	2,311,242	
2000/07		1.00	1.1129	1.1129		58	53.66	1,397,780	2,336,936	
2001/01		1.00	1.2976	1.2976		58	53.66	1,415,476	2,367,270	
2001/07	12,233	1.00	0.9615	0.9615		58	41.17	1,437,897	2,390,006	
2002/01		1.00	1.0301	1.0301		58	41.17	1,448,984	2,414,598	
2002/07		1.00	0.8337	0.8337		58	45.11	1,458,892	2,434,724	
2003/01		1.00	1.3271	1.3271		58	45.11	1,474,772	2,467,030	
2003/07		1.00	1.1664	1.1664		58	45.11	1,488,881	2,495,798	
2004/01	43,731	1.00	1.1103	1.1103		58	48.00	1,547,039	2,523,522	
2004/07		1.00	0.8378	0.8378		58	45.90	1,557,856	2,544,692	
2005/01		1.00	0.8595	0.8595		58	45.90	1,569,030	2,566,558	
2005/07		1.00	0.7364	0.7364		58	45.90	1,578,673	2,585,466	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01		1.00	0.9068	0.9068		58	48.30	1,591,245	2,608,898	
2006/07		1.00	0.8133	0.8133		58	48.30	1,602,610	2,630,126	
2007/01		1.00	1.0133	1.0133		58	37.85	1,613,786	2,656,748	
2007/07		1.00	1.1050	1.1050		58	37.85	1,626,058	2,686,096	
2008/01		1.00	0.8556	0.8556		58	37.85	1,635,632	2,709,064	
2008/07		1.00	0.6104	0.6104		58	37.85	1,642,503	2,725,594	
2009/01		1.00	1.3268	1.3268		58	37.85	1,657,500	2,761,786	
2009/07		1.00	0.6841	0.6841		58	37.85	1,665,303	2,780,694	
2010/01		1.00	0.8643	0.8643		58	37.57	1,675,135	2,804,706	
2010/07		1.00	0.7107	0.7107		58	37.57	1,683,267	2,824,658	
2011/01		1.00	0.9198	0.9198		58	37.57	1,693,843	2,850,642	
2011/07		0.95	0.9028	0.9028		58	34.68	1,703,004	2,876,394	
2012/01		0.95	0.3865	0.3865		58	41.52	1,707,725	2,887,530	
2012/07		0.90	0.9417	0.9417		58	41.52	1,718,651	2,914,732	
2013/01		0.90	0.4901	0.4901		58	41.52	1,724,374	2,929,000	
2013/07		0.85	0.6196	0.6196		58	41.52	1,731,230	2,947,154	
2014/01		0.85	0.8564	0.8564		58	41.52	1,740,743	2,972,384	
2014/07		0.80	1.2383	1.2383		58	41.52	1,753,761	3,009,214	
2015/01		0.80	0.7571	0.7571		58	48.01	1,763,034	3,032,008	
2015/09		0.75	1.5736	1.5736		58	48.01	1,781,197	3,079,742	
2016/09		0.70	1.9890	1.9890		58	53.78	1,805,447	3,140,990	

Message Code:

5 Uncorrected Licensure Deficiency

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 043863123120150101201504252016144846



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207.78

Grand Oaks Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3001 PALM COAST PARKWAY	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
PALM COAST, FL 32137	Days in CR 365	Maximum: 43,800	Standard: 366
County: Flagler [18]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 42,300	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 18,046	Inflation
Current Class North Large	Initial CR? False	Medicaid: 17,507	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	41.38771%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.57534%	Cost: 1.04651568
Open Date: 05/16/1997	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/16/1997	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 05/16/1997	Low Occupancy Adjustment Factor:	122.13595%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252409			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	843,819	1,269,651	899,568	1,328,781		4,341,819	
1a	Audit Adjustments							
2	Cost Per Diem	48.1989	72.5225	51.3833	75.9000		248.0047	
3	Cost Per Diem Inflated	50.4409	75.4732	53.7734				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.4409	75.4732	53.7734	75.9000		255.5875	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.6671		60.3713				
7	Provider Target Rate	59.8194		63.7296				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	55.4889		65.6137				
10b	Base for line 10a	52.5648		62.1561				
11	Lesser of 5,7,8,10, 10a	50.4409	75.4732	53.7734	13.6500		193.3375	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	50.4409	75.4732	53.7734	13.6500		193.3375	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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Grand Oaks Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/16/1997		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,165,066.00		Total Amount	Per Diem
RS to Start Calcs:	1997/01	Type:	Fixed	80% Capital(1):	4,544,441	11.3569
Indexed Asset Value	5,680,551	<60% of Base:	False	20% ROE(2):	1,136,110	0.5825
FRVS Base Asset:	4,383,120	Interest Rate:	10.6343%	Insurance Cost(3):	37,699	0.8912
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	86,968	2.0560
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	51,570	1.2191
		Interest Only:	False	Replacement(3&4):	66,733	0.0000
		Yearly Payment:	447,690	Total FRVS PD:		16.1057

(1) 80% Capital (\$4,544,441) amortized at 7.7500 % for 20 years Principal & Interest of \$447,690 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.3569

(2) 20% ROE (\$1,136,110) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5825

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1996	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	4,383,120

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.4409	50.4409	2.2885	48.1524
Direct Care	75.4732	75.4732	3.4242	72.0490
Indirect Care	53.7734	53.7734	2.4397	51.3337
Property	13.6500	16.1057	0.7307	15.3750
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				12.6934
Supplemental Rate				8.1814
Totals	193.3375	195.7932	8.8831	207.7849

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/01	6,247,240	0.00	1.4109	1.4109		120	52.41	4,383,120	4,383,120	1
1997/07		0.10	1.0917	1.0917		120	52.41	4,387,681	4,493,400	
1998/01		0.10	1.1663	1.1663		120	52.41	4,392,556	4,545,840	
1998/07		0.20	1.0794	1.0794		120	52.41	4,401,593	4,594,920	
1999/01		0.20	1.4499	1.4499		120	52.41	4,413,757	4,661,520	
1999/07		0.30	1.2299	1.2299		120	52.41	4,429,277	4,718,880	
2000/01	84,685	0.30	1.3356	1.3356		120	59.50	4,531,710	4,781,880	
2000/07		0.40	1.1129	1.1129		120	59.50	4,551,885	4,835,040	
2001/01		0.40	1.2976	1.2976		120	65.72	4,575,509	4,897,800	
2001/07		0.50	0.9615	0.9615		120	62.99	4,597,508	4,944,840	
2002/01		0.50	1.0301	1.0301		120	62.99	4,621,190	4,995,720	
2002/07		0.60	0.8337	0.8337		120	62.99	4,644,305	5,037,360	
2003/01		0.60	1.3271	1.3271		120	62.99	4,681,288	5,104,200	
2003/07		0.70	1.1664	1.1664		120	62.99	4,719,511	5,163,720	
2004/01		0.70	1.1103	1.1103		120	62.99	4,756,191	5,221,080	
2004/07		0.80	0.8378	0.8378		120	61.46	4,788,067	5,264,880	
2005/01		0.80	0.8595	0.8595		120	61.46	4,820,990	5,310,120	
2005/07		0.90	0.7364	0.7364		120	58.68	4,852,944	5,349,240	
2006/01		0.90	0.9068	0.9068		120	58.68	4,892,549	5,397,720	
2006/07		1.00	0.8133	0.8133		120	54.45	4,931,942	5,441,640	
2007/01		1.00	1.0133	1.0133		120	55.67	4,981,917	5,496,720	
2007/07		1.00	1.1050	1.1050		120	55.67	5,036,967	5,557,440	
2008/01		1.00	0.8556	0.8556		120	55.67	5,080,063	5,604,960	
2008/07		1.00	0.6104	0.6104		120	53.30	5,110,113	5,639,160	
2009/01		1.00	1.3268	1.3268		120	47.61	5,168,804	5,714,040	
2009/07		1.00	0.6841	0.6841		120	47.61	5,199,413	5,753,160	
2010/01		1.00	0.8643	0.8643		120	47.61	5,238,313	5,802,840	
2010/07		1.00	0.7107	0.7107		120	43.88	5,268,015	5,844,120	
2011/01		1.00	0.9198	0.9198		120	44.26	5,307,008	5,897,880	
2011/07		1.00	0.9028	0.9028		120	44.26	5,345,564	5,951,160	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/01		1.00	0.3865	0.3865		120	36.69	5,359,347	5,974,200	
2012/07		1.00	0.9417	0.9417		120	36.69	5,393,014	6,030,480	
2013/01		1.00	0.4901	0.4901		120	36.69	5,410,646	6,060,000	
2013/07		1.00	0.6196	0.6196		120	36.69	5,433,010	6,097,560	
2014/01		1.00	0.8564	0.8564		120	36.69	5,464,049	6,149,760	
2014/07		1.00	1.2383	1.2383		120	36.69	5,509,185	6,225,960	
2015/01		1.00	0.7571	0.7571		120	37.39	5,537,540	6,273,120	
2015/09		1.00	1.5736	1.5736		120	37.39	5,596,778	6,371,880	
2016/09		1.00	1.9890	1.9890		120	41.39	5,680,551	6,498,600	

Message Code:

1 Per Bed Standard Limitation

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Harts Harbor Health Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
11565 HARTS RD	1/1/2015-12/31/2015	Number of Beds: 180	Superior: 0
JACKSONVILLE, FL 32218-3777	Days in CR 365	Maximum: 65,700	Standard: 366
County: Duval [16]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 62,514	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,322	Inflation
Current Class North Large	Initial CR? False	Medicaid: 52,341	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	83.72685%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.15068%	Cost: 1.04651568
Open Date: 07/01/1977	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1977	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 06/01/1982	Low Occupancy Adjustment Factor:	120.33423%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252417			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,415,015	3,478,702	1,806,745	1,104,919		8,805,381	
1a	Audit Adjustments							
2	Cost Per Diem	46.1400	66.4623	34.5187	21.1100		168.2310	
3	Cost Per Diem Inflated	48.2862	69.1664	36.1244				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.2862	69.1664	36.1244	21.1100		174.6870	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	49.8806		55.1145				
7	Provider Target Rate	52.6554		58.1804				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.2108		64.3723				
10b	Base for line 10a	51.3541		60.9801				
11	Lesser of 5,7,8,10, 10a	48.2862	69.1664	36.1244	13.6500		167.2270	
12/13	Medicaid Adjustment Rate		2.6244	1.3707				
14	Prospective Per Diem 11	48.2862	71.7908	37.4951	13.6500		171.2221	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Harts Harbor Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/01/2001	Amount:	1,901,700.00		Total Amount	Per Diem
RS to Start Calcs:	1977/07	Type:	Fixed	80% Capital(1):	3,839,832	6.2777
Indexed Asset Value	4,799,790	<60% of Base:	False	20% ROE(2):	959,958	0.3281
FRVS Base Asset:	2,722,556	Interest Rate:	7.5000%	Insurance Cost(3):	45,094	0.7213
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	62,002	0.9918
ROE Factor	0.020210	Amortization Rate:	7.5000%	Home Office(3):	53,885	0.8620
		Interest Only:	False	Replacement(3&4):	290,402	0.0000
		Yearly Payment:	371,201	Total FRVS PD:		9.1809

(1) 80% Capital (\$3,839,832) amortized at 7.5000 % for 20 years Principal & Interest of \$371,201 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$6.2777

(2) 20% ROE (\$959,958) times the ROE factor (0.020210) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.3281

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.2862	48.2862	2.1907	46.0955
Direct Care	71.7908	71.7908	3.2571	68.5337
Indirect Care	37.4951	37.4951	1.7011	35.7940
Property	13.6500	9.1809	0.4165	8.7644
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5068
Supplemental Rate				8.1814
Totals	171.2221	166.7530	7.5654	188.8758

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1977/07	2,132,620	0.00	5.0576	3.0000	2.0576	180	100.00	2,132,620	3,058,020	
1978/01		0.10	6.7973	3.0000	3.7973	180	100.00	2,139,018	3,203,100	
1978/07		0.10	9.3367	3.0000	6.3367	180	100.00	2,145,435	3,380,400	
1979/01		0.20	11.4640	3.0000	8.4640	180	100.00	2,158,308	3,553,740	
1979/07		0.20	12.6622	3.0000	9.6622	180	100.00	2,171,258	3,702,960	
1980/01		0.30	15.8279	3.0000	12.8279	180	100.00	2,190,799	3,931,380	
1980/07		0.30	16.6385	3.0000	13.6385	180	100.00	2,210,516	4,081,140	
1981/01		0.40	17.4626	3.0000	14.4626	180	100.00	2,237,042	4,237,200	
1981/07		0.40	17.0514	3.0000	14.0514	180	100.00	2,263,887	4,346,820	
1982/01		0.50	16.7274	3.0000	13.7274	180	100.00	2,297,845	4,463,280	
1982/07	14,740	0.50	16.0251	3.0000	13.0251	180	100.00	2,347,053	4,565,700	
1983/04	16,022	0.60	15.6539	3.0000	12.6539	180	87.18	2,405,322	4,685,760	
1983/07		0.60	16.6117	3.0000	13.6117	180	87.18	2,448,618	4,871,160	
1984/01	20,415	0.70	14.9069	3.0000	11.9069	180	84.22	2,520,454	4,934,340	
1984/07	7,103	0.70	13.8248	3.0000	10.8248	180	84.22	2,580,487	5,029,020	
1985/01	16,327	0.80	11.9719	3.0000	8.9719	180	84.24	2,658,746	5,086,620	
1985/10		0.80	9.8241	3.0000	6.8241	180	84.24	2,722,556	5,130,000	
1986/01		0.90	7.6540	3.0000	4.6540	180	84.02	2,796,065	5,172,660	
1986/07		0.90	4.9514	3.0000	1.9514	180	84.02	2,871,559	5,162,760	
1987/01	19,216	1.00	2.9605	2.9605		180	86.53	2,975,788	5,255,100	
1987/07		1.00	0.9007	0.9007		180	86.53	3,002,591	5,296,140	
1988/01		1.00	0.9007	0.9007		180	87.38	3,029,635	5,339,160	
1988/07		1.00	0.5899	0.5899		180	87.38	3,047,507	5,336,280	
1989/01		1.00	0.5899	0.5899		180	86.85	3,065,484	5,367,780	
1989/07		1.00	0.5899	0.5899		180	86.85	3,083,567	5,404,140	
1990/01		1.00	0.5899	0.5899		180	81.01	3,101,757	5,431,320	
1990/07		1.00	0.5899	0.5899		180	81.01	3,120,054	5,463,360	
1991/01		1.00	0.5899	0.5899		180	74.92	3,138,459	5,495,400	
1991/07		1.00	1.4932	1.4932		180	74.92	3,185,322	5,577,480	
1992/01		1.00	2.0117	2.0117		180	84.63	3,249,401	5,689,620	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1992/07		1.00	1.8152	1.8152		180	84.63	3,308,384	5,792,940	
1993/01		1.00	1.7710	1.7710		180	80.80	3,366,975	5,895,540	
1993/07		1.00	1.5329	1.5329		180	80.80	3,418,587	5,985,900	
1994/01		1.00	1.6983	1.6983		180	78.43	3,476,645	6,087,600	
1994/07		1.00	1.5991	1.5991		180	78.43	3,532,240	6,184,980	
1995/01		1.00	1.5812	1.5812		180	80.03	3,588,092	6,282,720	
1995/07		1.00	1.5250	1.5250		180	80.03	3,642,810	6,378,480	
1996/01		1.00	1.7228	1.7228		180	83.39	3,705,568	6,488,460	
1996/07		1.00	1.3294	1.3294		180	83.39	3,754,830	6,574,680	
1997/01		1.00	1.4109	1.4109		180	87.94	3,807,807	6,667,380	
1997/07		1.00	1.0917	1.0917		180	87.94	3,849,377	6,740,100	
1998/01		0.95	1.1663	1.1663		180	89.59	3,892,028	6,818,760	
1998/07		0.95	1.0794	1.0794		180	89.59	3,931,937	6,892,380	
1999/01		0.90	1.4499	1.4499		180	93.00	3,983,245	6,992,280	
1999/07		0.90	1.2299	1.2299		180	93.00	4,027,336	7,078,320	
2000/01	106,098	0.85	1.3356	1.3356		180	91.01	4,179,156	7,172,820	
2000/07		0.85	1.1129	1.1129		180	91.01	4,218,691	7,252,560	
2001/01		0.80	1.2976	1.2976		180	92.70	4,262,485	7,346,700	
2001/07		0.80	0.9615	0.9615		180	87.23	4,295,272	7,417,260	
2002/01		0.75	1.0301	1.0301		180	87.23	4,328,457	7,493,580	
2002/07		0.75	0.8337	0.8337		180	87.23	4,355,523	7,556,040	
2003/01		0.70	1.3271	1.3271		180	87.23	4,355,523	7,656,300	5
2003/07		0.70	1.1664	1.1664		180	87.23	4,431,879	7,745,580	
2004/01		0.65	1.1103	1.1103		180	87.23	4,463,864	7,831,620	
2004/07		0.65	0.8378	0.8378		180	87.78	4,488,174	7,897,320	
2005/01		0.60	0.8595	0.8595		180	87.78	4,511,320	7,965,180	
2005/07		0.60	0.7364	0.7364		180	84.87	4,531,251	8,023,860	
2006/01		0.55	0.9068	0.9068		180	84.87	4,553,848	8,096,580	
2006/07		0.55	0.8133	0.8133		180	83.44	4,574,217	8,162,460	
2007/01		0.50	1.0133	1.0133		180	83.44	4,597,395	8,245,080	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/07		0.50	1.1050	1.1050		180	83.24	4,622,796	8,336,160	
2008/01		0.45	0.8556	0.8556		180	83.24	4,640,594	8,407,440	
2008/07		0.45	0.6104	0.6104		180	80.46	4,653,342	8,458,740	
2009/01		0.40	1.3268	1.3268		180	80.46	4,653,342	8,571,060	5
2009/07		0.40	0.6841	0.6841		180	81.73	4,690,836	8,629,740	
2010/01		0.35	0.8643	0.8643		180	84.86	4,705,026	8,704,260	
2010/07		0.35	0.7107	0.7107		180	84.86	4,716,727	8,766,180	
2011/01		0.30	0.9198	0.9198		180	84.86	4,729,740	8,846,820	
2011/07		0.30	0.9028	0.9028		180	85.82	4,742,548	8,926,740	
2012/01		0.25	0.3865	0.3865		180	82.99	4,742,548	8,961,300	5
2012/07		0.25	0.9417	0.9417		180	82.99	4,758,304	9,045,720	
2013/01		0.20	0.4901	0.4901		180	82.99	4,762,967	9,090,000	
2013/07		0.20	0.6196	0.6196		180	82.99	4,768,868	9,146,340	
2014/01		0.15	0.8564	0.8564		180	82.99	4,774,996	9,224,640	
2014/07		0.15	1.2383	1.2383		180	82.99	4,783,863	9,338,940	
2015/01		0.10	0.7571	0.7571		180	81.81	4,787,484	9,409,680	
2015/09		0.10	1.5736	1.5736		180	81.81	4,795,019	9,557,820	
2016/09		0.05	1.9890	1.9890		180	83.73	4,799,790	9,747,900	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 043865123120150101201504252016135142



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0043866-00 - 2016/09

202.68

Fletcher Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
518 W FLETCHER AVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
TAMPA, FL 33612-3419	Days in CR 365	Maximum: 43,800	Standard: 167
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 199
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 40,159	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,601	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 25,128	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	62.57128%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.68721%	Cost: 1.04651568
Open Date: 05/19/1998	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/19/1998	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 05/19/1998	Low Occupancy Adjustment Factor:	115.95408%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252221			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,235,123	1,760,577	1,072,441	1,451,393		5,519,534	
1a	Audit Adjustments							
2	Cost Per Diem	49.1533	70.0644	42.6791	57.7600		219.6568	
3	Cost Per Diem Inflated	51.4397	72.9150	44.6643				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.4397	72.9150	44.6643	57.7600		226.7790	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.9081		59.7555				
7	Provider Target Rate	54.7956		63.0796				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	55.5688		67.9586				
10b	Base for line 10a	52.6405		64.3774				
11	Lesser of 5,7,8,10, 10a	51.4397	72.9150	44.6643	13.6500		182.6690	
12/13	Medicaid Adjustment Rate		0.4705	0.2882				
14	Prospective Per Diem 11	51.4397	73.3855	44.9525	13.6500		183.4277	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



Florida Agency for Health Care Administration

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Fletcher Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/19/1998		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,950,925.00		Total Amount	Per Diem
RS to Start Calcs:	1998/01	Type:	Fixed	80% Capital(1):	4,704,149	11.7561
Indexed Asset Value	5,880,186	<60% of Base:	False	20% ROE(2):	1,176,037	0.6029
FRVS Base Asset:	4,493,400	Interest Rate:	10.6343%	Insurance Cost(3):	30,636	0.7629
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	64,771	1.6129
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	41,560	1.0349
		Interest Only:	False	Replacement(3&4):	50,326	0.0000
		Yearly Payment:	463,424	Total FRVS PD:		15.7697

(1) 80% Capital (\$4,704,149) amortized at 7.7500 % for 20 years Principal & Interest of \$463,424 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.7561

(2) 20% ROE (\$1,176,037) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6029

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1997	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	4,493,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.4397	51.4397	2.3338	49.1059
Direct Care	73.3855	73.3855	3.3295	70.0560
Indirect Care	44.9525	44.9525	2.0395	42.9130
Property	13.6500	15.7697	0.7155	15.0542
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.3693
Supplemental Rate				8.1814
Totals	183.4277	185.5474	8.4183	202.6798

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 043866-00 - 2016/09

202.68

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01	5,117,539	0.00	1.1663	1.1663		120	76.44	4,493,400	4,493,400	1
1998/07	51,570	0.10	1.0794	1.0794		120	76.44	4,544,970	4,594,920	5
1999/01	6,074	0.10	1.4499	1.4499		120	76.44	4,562,489	4,661,520	
1999/07		0.20	1.2299	1.2299		120	76.44	4,573,713	4,718,880	
2000/01		0.20	1.3356	1.3356		120	76.44	4,585,929	4,781,880	
2000/07		0.30	1.1129	1.1129		120	76.44	4,601,241	4,835,040	
2001/01	44,473	0.30	1.2976	1.2976		120	79.22	4,663,627	4,897,800	
2001/07		0.40	0.9615	0.9615		120	79.81	4,681,563	4,944,840	
2002/01		0.40	1.0301	1.0301		120	79.81	4,700,851	4,995,720	
2002/07		0.50	0.8337	0.8337		120	79.81	4,720,449	5,037,360	
2003/01		0.50	1.3271	1.3271		120	79.81	4,751,774	5,104,200	
2003/07		0.60	1.1664	1.1664		120	79.81	4,785,027	5,163,720	
2004/01		0.60	1.1103	1.1103		120	79.81	4,816,905	5,221,080	
2004/07		0.70	0.8378	0.8378		120	80.13	4,845,156	5,264,880	
2005/01		0.70	0.8595	0.8595		120	80.13	4,874,309	5,310,120	
2005/07		0.80	0.7364	0.7364		120	74.19	4,903,024	5,349,240	
2006/01		0.80	0.9068	0.9068		120	74.19	4,938,591	5,397,720	
2006/07		0.90	0.8133	0.8133		120	72.63	4,974,741	5,441,640	
2007/01		0.90	1.0133	1.0133		120	72.63	5,020,111	5,496,720	
2007/07		1.00	1.1050	1.1050		120	66.03	5,075,583	5,557,440	
2008/01		1.00	0.8556	0.8556		120	62.13	5,119,010	5,604,960	
2008/07		1.00	0.6104	0.6104		120	62.13	5,150,256	5,639,160	
2009/01		1.00	1.3268	1.3268		120	53.20	5,216,353	5,714,040	
2009/07		1.00	0.6841	0.6841		120	53.20	5,250,870	5,753,160	
2010/01		1.00	0.8643	0.8643		120	53.20	5,294,768	5,802,840	
2010/07		1.00	0.7107	0.7107		120	52.01	5,330,352	5,844,120	
2011/01		1.00	0.9198	0.9198		120	52.39	5,377,054	5,897,880	
2011/07		1.00	0.9028	0.9028		120	52.39	5,423,294	5,951,160	
2012/01		1.00	0.3865	0.3865		120	46.32	5,440,947	5,974,200	
2012/07		1.00	0.9417	0.9417		120	46.32	5,484,098	6,030,480	



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202.68

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		1.00	0.4901	0.4901		120	46.32	5,506,734	6,060,000	
2013/07		1.00	0.6196	0.6196		120	46.32	5,535,469	6,097,560	
2014/01		1.00	0.8564	0.8564		120	46.32	5,575,393	6,149,760	
2014/07		1.00	1.2383	1.2383		120	46.32	5,633,537	6,225,960	
2015/01		1.00	0.7571	0.7571		120	56.56	5,676,189	6,273,120	
2015/09		1.00	1.5736	1.5736		120	56.56	5,765,510	6,371,880	
2016/09		1.00	1.9890	1.9890		120	62.57	5,880,186	6,498,600	

Message Code:

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| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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201.89

Wedgewood Healthcare Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1010 CARPENTERS WAY	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
LAKELAND, FL 33809-3926	Days in CR 365	Maximum: 43,800	Standard: 341
County: Polk [53]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 25
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 40,377	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 13,348	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 18,291	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	45.30054%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.18493%	Cost: 1.04651568
Open Date: 01/01/1999	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1999	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 03/26/1999	Low Occupancy Adjustment Factor:	116.58353%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252328			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	887,811	1,250,790	877,888	718,836		3,735,325
1a	Audit Adjustments						
2	Cost Per Diem	48.5381	68.3828	47.9956	39.3000		204.2165
3	Cost Per Diem Inflated	50.7959	71.1650	50.2281			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.7959	71.1650	50.2281	39.3000		211.4890
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	55.7503		68.1875			
7	Provider Target Rate	58.8516		71.9806			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	57.5386		68.5725			
10b	Base for line 10a	54.5065		64.9590			
11	Lesser of 5,7,8,10, 10a	50.7959	71.1650	50.2281	13.6500		185.8390
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	50.7959	71.1650	50.2281	13.6500		185.8390
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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201.89

Wedgewood Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 03/26/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,128,040.00		Total Amount	Per Diem
RS to Start Calcs:	1999/01	Type:	Fixed	80% Capital(1):	4,528,049	11.3160
Indexed Asset Value	5,660,061	<60% of Base:	False	20% ROE(2):	1,132,012	0.5804
FRVS Base Asset:	4,594,920	Interest Rate:	10.6343%	Insurance Cost(3):	29,796	0.7379
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	106,185	2.6298
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	43,854	1.0861
		Interest Only:	False	Replacement(3&4):	23,423	0.0000
		Yearly Payment:	446,075	Total FRVS PD:		16.3502

(1) 80% Capital (\$4,528,049) amortized at 7.7500 % for 20 years Principal & Interest of \$446,075 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.3160

(2) 20% ROE (\$1,132,012) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5804

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1998	Current RS PBS:	38,291
Comparison Bed	120	Effective PBS Limitation	54,155
			4,594,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.7959	50.7959	2.3046	48.4913
Direct Care	71.1650	71.1650	3.2287	67.9363
Indirect Care	50.2281	50.2281	2.2788	47.9493
Property	13.6500	16.3502	0.7418	15.6084
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.7271
Supplemental Rate				8.1814
Totals	185.8390	188.5392	8.5539	201.8938

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01	5,061,151	0.00	1.4499	1.4499		120	62.81	4,594,920	4,594,920	1
1999/07	7,871	0.10	1.2299	1.2299		120	62.81	4,608,443	4,718,880	
2000/01	17,785	0.10	1.3356	1.3356		120	62.81	4,632,385	4,781,880	
2000/07		0.20	1.1129	1.1129		120	62.81	4,642,697	4,835,040	
2001/01		0.20	1.2976	1.2976		120	62.81	4,654,745	4,897,800	
2001/07		0.30	0.9615	0.9615		120	67.52	4,668,174	4,944,840	
2002/01	31,903	0.30	1.0301	1.0301		120	67.52	4,714,502	4,995,720	
2002/07		0.40	0.8337	0.8337		120	67.52	4,730,225	5,037,360	
2003/01		0.40	1.3271	1.3271		120	67.52	4,755,333	5,104,200	
2003/07		0.50	1.1664	1.1664		120	67.52	4,783,066	5,163,720	
2004/01		0.50	1.1103	1.1103		120	67.52	4,809,622	5,221,080	
2004/07		0.60	0.8378	0.8378		120	64.37	4,833,800	5,264,880	
2005/01		0.60	0.8595	0.8595		120	59.21	4,858,728	5,310,120	
2005/07		0.70	0.7364	0.7364		120	59.21	4,883,775	5,349,240	
2006/01		0.70	0.9068	0.9068		120	59.21	4,914,777	5,397,720	
2006/07		0.80	0.8133	0.8133		120	60.08	4,946,753	5,441,640	
2007/01		0.80	1.0133	1.0133		120	47.91	4,981,682	5,496,720	
2007/07		0.90	1.1050	1.1050		120	47.91	5,024,838	5,557,440	
2008/01		0.90	0.8556	0.8556		120	42.93	5,055,038	5,604,960	
2008/07		1.00	0.6104	0.6104		120	42.93	5,079,122	5,639,160	
2009/01		1.00	1.3268	1.3268		120	42.93	5,131,723	5,714,040	
2009/07		1.00	0.6841	0.6841		120	35.97	5,154,682	5,753,160	
2010/01		1.00	0.8643	0.8643		120	35.97	5,183,819	5,802,840	
2010/07		1.00	0.7107	0.7107		120	36.36	5,208,175	5,844,120	
2011/01		1.00	0.9198	0.9198		120	36.36	5,239,844	5,897,880	
2011/07		1.00	0.9028	0.9028		120	41.59	5,275,615	5,951,160	
2012/01		1.00	0.3865	0.3865		120	40.10	5,290,481	5,974,200	
2012/07		1.00	0.9417	0.9417		120	40.10	5,326,805	6,030,480	
2013/01		1.00	0.4901	0.4901		120	40.10	5,345,839	6,060,000	
2013/07		1.00	0.6196	0.6196		120	40.10	5,369,989	6,097,560	



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201.89

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		1.00	0.8564	0.8564		120	40.10	5,369,989	6,149,760	5
2014/07		1.00	1.2383	1.2383		120	40.10	5,452,304	6,225,960	
2015/01		1.00	0.7571	0.7571		120	50.20	5,489,981	6,273,120	
2015/09		1.00	1.5736	1.5736		120	50.20	5,568,832	6,371,880	
2016/09		1.00	1.9890	1.9890		120	45.30	5,660,061	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 043867123120150101201504252016125649



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0043868-00 - 2016/09

209.12

Deltona Health Care

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1851 ELKCAM BLVD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
DELTONA, FL 32725-3922	Days in CR 365	Maximum: 43,800	Standard: 366
County: Volusia [64]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 42,014	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 8,057	Inflation
Current Class North Large	Initial CR? False	Medicaid: 26,251	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	62.48155%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.92237%	Cost: 1.04651568
Open Date: 09/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 09/01/1983	Low Occupancy Adjustment Factor:	121.31016%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252158			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,277,765	1,958,775	1,135,099	385,890		4,757,529
1a	Audit Adjustments						
2	Cost Per Diem	48.6749	74.6172	43.2402	14.7000		181.2323
3	Cost Per Diem Inflated	50.9390	77.6531	45.2515			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.9390	77.6531	45.2515	14.7000		188.5436
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	51.7425		61.2911			
7	Provider Target Rate	54.6208		64.7006			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	54.6285		64.4547			
10b	Base for line 10a	51.7498		61.0582			
11	Lesser of 5,7,8,10, 10a	50.9390	77.6531	45.2515	13.6500		187.4936
12/13	Medicaid Adjustment Rate		1.0904	0.6354			
14	Prospective Per Diem 11	50.9390	78.7435	45.8869	13.6500		189.2194
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Deltona Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	05/01/1998	Amount:	4,702,508.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Fixed	80% Capital(1):	4,696,392	11.7367
Indexed Asset Value	5,870,490	<60% of Base:	False	20% ROE(2):	1,174,098	0.6019
FRVS Base Asset:	3,100,660	Interest Rate:	10.6343%	Insurance Cost(3):	30,468	0.7252
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	75,213	1.7902
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	43,739	1.0411
		Interest Only:	False	Replacement(3&4):	31,182	0.0000
		Yearly Payment:	462,660	Total FRVS PD:		15.8951

(1) 80% Capital (\$4,696,392) amortized at 7.7500 % for 20 years Principal & Interest of \$462,660 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.7367

(2) 20% ROE (\$1,174,098) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6019

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.9390	50.9390	2.3111	48.6279
Direct Care	78.7435	78.7435	3.5726	75.1709
Indirect Care	45.8869	45.8869	2.0819	43.8050
Property	13.6500	15.8951	0.7212	15.1739
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.1610
Supplemental Rate				8.1814
Totals	189.2194	191.4645	8.6868	209.1201

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/07	2,999,299	0.00	3.9578	3.0000	0.9578	120	42.79	2,999,299	3,247,440	
1984/01	73,220	0.10	2.2530	2.2530		120	42.79	3,077,776	3,289,560	
1984/07	3,364	0.10	1.9179	1.9179		120	42.79	3,085,733	3,352,680	
1985/01	5,315	0.20	1.1471	1.1471		120	42.79	3,096,555	3,391,080	
1985/10		0.20	0.8522	0.8522		120	42.79	3,100,660	3,420,000	
1986/01		0.30	0.8299	0.8299		120	55.29	3,108,381	3,448,440	
1986/07		0.30	0.2974	0.2974		120	55.29	3,111,154	3,441,840	
1987/01	20,014	0.40	1.0091	1.0091		120	64.90	3,143,725	3,503,400	
1987/07		0.40	0.9007	0.9007		120	64.90	3,155,052	3,530,760	
1988/01		0.50	0.9007	0.9007		120	61.87	3,169,262	3,559,440	
1988/07		0.50	0.5899	0.5899		120	61.87	3,178,611	3,557,520	
1989/01		0.60	0.5899	0.5899		120	61.27	3,189,860	3,578,520	
1989/07		0.60	0.5899	0.5899		120	61.27	3,201,149	3,602,760	
1990/01		0.70	0.5899	0.5899		120	55.68	3,214,367	3,620,880	
1990/07		0.70	0.5899	0.5899		120	55.68	3,227,639	3,642,240	
1991/01		0.80	0.5899	0.5899		120	57.96	3,242,870	3,663,600	
1991/07		0.80	1.4932	1.4932		120	57.96	3,281,609	3,718,320	
1992/01	18,058	0.90	2.0117	2.0117		120	67.09	3,359,081	3,793,080	
1992/07		0.90	1.8152	1.8152		120	67.09	3,413,958	3,861,960	
1993/01		1.00	1.7710	1.7710		120	66.90	3,474,419	3,930,360	
1993/07		1.00	1.5329	1.5329		120	66.90	3,527,678	3,990,600	
1994/01	24,788	1.00	1.6983	1.6983		120	63.56	3,612,377	4,058,400	
1994/07		1.00	1.5991	1.5991		120	63.56	3,670,143	4,123,320	
1995/01	40,504	1.00	1.5812	1.5812		120	61.84	3,768,679	4,188,480	
1995/07		1.00	1.5250	1.5250		120	61.84	3,826,151	4,252,320	
1996/01	201,035	1.00	1.7228	1.7228		120	67.40	4,093,103	4,325,640	
1996/07		1.00	1.3294	1.3294		120	67.40	4,147,517	4,383,120	
1997/01	105,240	1.00	1.4109	1.4109		120	70.67	4,311,274	4,444,920	
1997/07		1.00	1.0917	1.0917		120	70.67	4,358,340	4,493,400	
1998/01		1.00	1.1663	1.1663		120	75.00	4,409,171	4,545,840	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07		1.00	1.0794	1.0794		120	75.00	4,456,764	4,594,920	
1999/01		1.00	1.4499	1.4499		120	76.81	4,521,383	4,661,520	
1999/07		1.00	1.2299	1.2299		120	76.81	4,576,991	4,718,880	
2000/01	22,969	1.00	1.3356	1.3356		120	78.02	4,661,090	4,781,880	
2000/07		1.00	1.1129	1.1129		120	78.02	4,712,963	4,835,040	
2001/01	24,316	1.00	1.2976	1.2976		120	72.84	4,798,434	4,897,800	
2001/07		1.00	0.9615	0.9615		120	71.23	4,844,571	4,944,840	
2002/01		1.00	1.0301	1.0301		120	71.23	4,894,475	4,995,720	
2002/07		1.00	0.8337	0.8337		120	71.23	4,935,280	5,037,360	
2003/01		1.00	1.3271	1.3271		120	71.23	5,000,776	5,104,200	
2003/07		1.00	1.1664	1.1664		120	71.23	5,059,105	5,163,720	
2004/01		0.95	1.1103	1.1103		120	71.23	5,112,468	5,221,080	
2004/07		0.95	0.8378	0.8378		120	74.94	5,153,158	5,264,880	
2005/01		0.90	0.8595	0.8595		120	74.94	5,193,023	5,310,120	
2005/07		0.90	0.7364	0.7364		120	72.54	5,227,442	5,349,240	
2006/01		0.85	0.9068	0.9068		120	72.54	5,267,735	5,397,720	
2006/07		0.85	0.8133	0.8133		120	71.03	5,304,151	5,441,640	
2007/01		0.80	1.0133	1.0133		120	71.03	5,347,146	5,496,720	
2007/07		0.80	1.1050	1.1050		120	69.52	5,394,415	5,557,440	
2008/01		0.75	0.8556	0.8556		120	69.52	5,429,031	5,604,960	
2008/07		0.75	0.6104	0.6104		120	66.81	5,453,885	5,639,160	
2009/01		0.70	1.3268	1.3268		120	62.00	5,504,541	5,714,040	
2009/07		0.70	0.6841	0.6841		120	62.00	5,530,902	5,753,160	
2010/01		0.65	0.8643	0.8643		120	62.00	5,561,975	5,802,840	
2010/07		0.65	0.7107	0.7107		120	59.07	5,587,671	5,844,120	
2011/01		0.60	0.9198	0.9198		120	61.39	5,618,509	5,897,880	
2011/07		0.60	0.9028	0.9028		120	61.39	5,648,944	5,951,160	
2012/01		0.55	0.3865	0.3865		120	59.95	5,660,954	5,974,200	
2012/07		0.55	0.9417	0.9417		120	59.95	5,690,272	6,030,480	
2013/01		0.50	0.4901	0.4901		120	59.95	5,704,219	6,060,000	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		120	59.95	5,721,891	6,097,560	
2014/01		0.45	0.8564	0.8564		120	59.95	5,743,943	6,149,760	
2014/07		0.45	1.2383	1.2383		120	59.95	5,775,948	6,225,960	
2015/01		0.40	0.7571	0.7571		120	62.22	5,793,438	6,273,120	
2015/09		0.40	1.5736	1.5736		120	62.22	5,829,902	6,371,880	
2016/09		0.35	1.9890	1.9890		120	62.48	5,870,490	6,498,600	

Message Code:

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Lake Mary Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
710 NORTH SUN DRIVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
LAKE MARY, FL 32746	Days in CR 365	Maximum: 43,800	Standard: 366
County: Seminole [59]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 42,082	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 15,985	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 17,378	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	41.29557%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.07763%	Cost: 1.04651568
Open Date: 10/16/2000	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/16/2000	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 11/08/2000	Low Occupancy Adjustment Factor:	121.50651%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252310			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	858,864	1,361,094	861,966	1,353,572		4,435,496
1a	Audit Adjustments						
2	Cost Per Diem	49.4225	78.3228	49.6010	77.8900		255.2363
3	Cost Per Diem Inflated	51.7214	81.5094	51.9082			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	51.7214	81.5094	51.9082	77.8900		263.0290
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	52.1400		61.2535			
7	Provider Target Rate	55.0404		64.6609			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	56.6263		67.9586			
10b	Base for line 10a	53.6423		64.3774			
11	Lesser of 5,7,8,10, 10a	51.7214	81.5094	51.9082	13.6500		198.7890
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	51.7214	81.5094	51.9082	13.6500		198.7890
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Lake Mary Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	11/08/2000	Amount:	3,064,996.00		Total Amount	Per Diem
RS to Start Calcs:	2000/07	Type:	Fixed	80% Capital(1):	4,581,057	11.4485
Indexed Asset Value	5,726,321	<60% of Base:	False	20% ROE(2):	1,145,264	0.5872
FRVS Base Asset:	4,781,880	Interest Rate:	10.6343%	Insurance Cost(3):	34,695	0.8245
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	87,909	2.0890
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	51,935	1.2341
		Interest Only:	False	Replacement(3&4):	92,982	0.0000
		Yearly Payment:	451,298	Total FRVS PD:		16.1833

(1) 80% Capital (\$4,581,057) amortized at 7.7500 % for 20 years Principal & Interest of \$451,298 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.4485

(2) 20% ROE (\$1,145,264) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5872

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/2000	Current RS PBS:	39,849
Comparison Bed	120	Effective PBS Limitation	54,155
			4,781,880

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.7214	51.7214	2.3466	49.3748
Direct Care	81.5094	81.5094	3.6980	77.8114
Indirect Care	51.9082	51.9082	2.3550	49.5532
Property	13.6500	16.1833	0.7342	15.4491
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				12.4660
Supplemental Rate				8.1814
Totals	198.7890	201.3223	9.1338	212.8359

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07	8,564,230	0.00	1.1129	1.1129		120	36.93	4,781,880	4,781,880	1
2001/01		0.10	1.2976	1.2976		120	36.93	4,786,048	4,897,800	
2001/07		0.10	0.9615	0.9615		120	59.64	4,790,652	4,944,840	
2002/01		0.20	1.0301	1.0301		120	59.64	4,790,652	4,995,720	5
2002/07		0.20	0.8337	0.8337		120	59.64	4,808,523	5,037,360	
2003/01		0.30	1.3271	1.3271		120	59.64	4,827,666	5,104,200	
2003/07		0.30	1.1664	1.1664		120	59.64	4,844,558	5,163,720	
2004/01		0.40	1.1103	1.1103		120	59.64	4,866,073	5,221,080	
2004/07		0.40	0.8378	0.8378		120	57.11	4,882,379	5,264,880	
2005/01		0.50	0.8595	0.8595		120	57.11	4,903,363	5,310,120	
2005/07		0.50	0.7364	0.7364		120	59.37	4,921,417	5,349,240	
2006/01		0.60	0.9068	0.9068		120	59.37	4,948,194	5,397,720	
2006/07		0.60	0.8133	0.8133		120	60.28	4,972,341	5,441,640	
2007/01		0.70	1.0133	1.0133		120	60.28	5,007,610	5,496,720	
2007/07		0.70	1.1050	1.1050		120	55.77	5,046,344	5,557,440	
2008/01		0.80	0.8556	0.8556		120	53.88	5,080,183	5,604,960	
2008/07		0.80	0.6104	0.6104		120	53.88	5,104,484	5,639,160	
2009/01		0.90	1.3268	1.3268		120	53.98	5,164,306	5,714,040	
2009/07		0.90	0.6841	0.6841		120	53.98	5,195,513	5,753,160	
2010/01		1.00	0.8643	0.8643		120	53.98	5,239,585	5,802,840	
2010/07		1.00	0.7107	0.7107		120	53.59	5,275,868	5,844,120	
2011/01		1.00	0.9198	0.9198		120	48.21	5,318,405	5,897,880	
2011/07		1.00	0.9028	0.9028		120	48.21	5,360,492	5,951,160	
2012/01		1.00	0.3865	0.3865		120	40.37	5,375,699	5,974,200	
2012/07		1.00	0.9417	0.9417		120	40.37	5,412,856	6,030,480	
2013/01		1.00	0.4901	0.4901		120	40.37	5,432,328	6,060,000	
2013/07		1.00	0.6196	0.6196		120	40.37	5,457,033	6,097,560	
2014/01		1.00	0.8564	0.8564		120	40.37	5,491,336	6,149,760	
2014/07		1.00	1.2383	1.2383		120	40.37	5,541,247	6,225,960	
2015/01		1.00	0.7571	0.7571		120	42.76	5,573,863	6,273,120	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		1.00	1.5736	1.5736		120	42.76	5,642,054	6,371,880	
2016/09		1.00	1.9890	1.9890		120	41.30	5,726,321	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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Countryside Rehab and Healthcare Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3825 COUNTRYSIDE BLVD N	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
PALM HARBOR, FL 34684-4928	Days in CR 365	Maximum: 43,800	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 40,492	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,558	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,143	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	67.03299%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.44749%	Cost: 1.07573004
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 10/19/1987	Low Occupancy Adjustment Factor:	116.91558%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252115			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,195,873	1,822,587	1,037,843	2,026,768		6,083,071
1a	Audit Adjustments						
2	Cost Per Diem	44.0582	67.1476	38.2361	74.6700		224.1119
3	Cost Per Diem Inflated	47.3947	71.2726	41.1317			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	47.3947	71.2726	41.1317	74.6700		234.4690
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	55.4556		61.8948			
7	Provider Target Rate	58.5405		65.3379			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	57.4842		68.7704			
10b	Base for line 10a	54.4550		65.1464			
11	Lesser of 5,7,8,10, 10a	47.3947	71.2726	41.1317	13.6500		173.4490
12/13	Medicaid Adjustment Rate		1.3657	0.7882			
14	Prospective Per Diem 11	47.3947	72.6383	41.9199	13.6500		175.6029
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Countryside Rehab and Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/19/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,852,736.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Fixed	80% Capital(1):	4,627,571	11.5647
Indexed Asset Value	5,784,464	<60% of Base:	False	20% ROE(2):	1,156,893	0.6665
FRVS Base Asset:	3,503,400	Interest Rate:	10.6343%	Insurance Cost(3):	37,441	0.9247
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	73,106	1.8054
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	39,675	0.9798
		Interest Only:	False	Replacement(3&4):	55,113	0.0000
		Yearly Payment:	455,880	Total FRVS PD:		15.9411

(1) 80% Capital (\$4,627,571) amortized at 7.7500 % for 20 years Principal & Interest of \$455,880 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.5647

(2) 20% ROE (\$1,156,893) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6665

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1987	Current RS PBS:	29,195
Comparison Bed	120	Effective PBS Limitation	54,155
			3,503,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.3947	47.3947	2.1503	45.2444
Direct Care	72.6383	72.6383	3.2956	69.3427
Indirect Care	41.9199	41.9199	1.9019	40.0180
Property	13.6500	15.9411	0.7232	15.2179
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.0660
Supplemental Rate				8.1814
Totals	175.6029	177.8940	8.0710	197.0704

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	4,222,224	0.00	0.9007	0.9007		120	35.25	3,503,400	3,503,400	1
1988/01		0.10	0.9007	0.9007		120	35.25	3,505,423	3,559,440	
1988/07		0.10	0.5899	0.5899		120	35.25	3,506,749	3,557,520	
1989/01		0.20	0.5899	0.5899		120	35.25	3,509,401	3,578,520	
1989/07		0.20	0.5899	0.5899		120	35.25	3,512,055	3,602,760	
1990/01		0.30	0.5899	0.5899		120	35.25	3,512,055	3,620,880	5
1990/07		0.30	0.5899	0.5899		120	49.55	3,516,039	3,642,240	5
1991/01		0.40	0.5899	0.5899		120	49.55	3,521,646	3,663,600	5
1991/07		0.40	1.4932	1.4932		120	55.25	3,550,214	3,718,320	
1992/01		0.50	2.0117	2.0117		120	61.25	3,585,926	3,793,080	
1992/07		0.50	1.8152	1.8152		120	61.25	3,618,472	3,861,960	
1993/01		0.60	1.7710	1.7710		120	70.78	3,656,922	3,930,360	
1993/07		0.60	1.5329	1.5329		120	70.78	3,690,555	3,990,600	
1994/01		0.70	1.6983	1.6983		120	70.72	3,734,428	4,058,400	
1994/07		0.70	1.5991	1.5991		120	70.72	3,776,231	4,123,320	
1995/01	17,613	0.80	1.5812	1.5812		120	64.23	3,841,613	4,188,480	
1995/07		0.80	1.5250	1.5250		120	64.23	3,888,481	4,252,320	
1996/01	23,381	0.90	1.7228	1.7228		120	59.40	3,972,153	4,325,640	
1996/07		0.90	1.3294	1.3294		120	59.40	4,019,680	4,383,120	
1997/01		1.00	1.4109	1.4109		120	64.91	4,076,394	4,444,920	
1997/07		1.00	1.0917	1.0917		120	64.91	4,120,896	4,493,400	
1998/01		1.00	1.1663	1.1663		120	74.72	4,168,958	4,545,840	
1998/07		1.00	1.0794	1.0794		120	74.72	4,213,958	4,594,920	
1999/01		1.00	1.4499	1.4499		120	78.63	4,275,056	4,661,520	
1999/07		1.00	1.2299	1.2299		120	78.63	4,327,635	4,718,880	
2000/01	47,296	1.00	1.3356	1.3356		120	76.98	4,432,731	4,781,880	
2000/07		1.00	1.1129	1.1129		120	76.98	4,482,063	4,835,040	
2001/01		1.00	1.2976	1.2976		120	81.22	4,540,222	4,897,800	
2001/07		1.00	0.9615	0.9615		120	75.94	4,583,876	4,944,840	
2002/01		1.00	1.0301	1.0301		120	75.94	4,631,095	4,995,720	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		120	75.94	4,669,704	5,037,360	
2003/01		1.00	1.3271	1.3271		120	75.94	4,731,676	5,104,200	
2003/07		1.00	1.1664	1.1664		120	75.94	4,786,866	5,163,720	
2004/01		1.00	1.1103	1.1103		120	75.94	4,840,015	5,221,080	
2004/07		1.00	0.8378	0.8378		120	71.38	4,880,565	5,264,880	
2005/01		1.00	0.8595	0.8595		120	77.68	4,922,513	5,310,120	
2005/07		1.00	0.7364	0.7364		120	77.68	4,958,762	5,349,240	
2006/01		1.00	0.9068	0.9068		120	77.68	5,003,728	5,397,720	
2006/07		1.00	0.8133	0.8133		120	69.74	5,044,423	5,441,640	
2007/01		1.00	1.0133	1.0133		120	69.74	5,095,538	5,496,720	
2007/07		1.00	1.1050	1.1050		120	70.32	5,151,844	5,557,440	
2008/01		0.95	0.8556	0.8556		120	70.19	5,193,718	5,604,960	
2008/07		0.95	0.6104	0.6104		120	70.19	5,223,836	5,639,160	
2009/01		0.90	1.3268	1.3268		120	70.19	5,286,214	5,714,040	
2009/07		0.90	0.6841	0.6841		120	69.21	5,318,761	5,753,160	
2010/01		0.85	0.8643	0.8643		120	69.21	5,357,838	5,802,840	
2010/07		0.85	0.7107	0.7107		120	76.29	5,390,205	5,844,120	
2011/01		0.80	0.9198	0.9198		120	76.29	5,429,866	5,897,880	
2011/07		0.80	0.9028	0.9028		120	77.74	5,469,080	5,951,160	
2012/01		0.75	0.3865	0.3865		120	73.40	5,484,935	5,974,200	
2012/07		0.75	0.9417	0.9417		120	73.40	5,523,675	6,030,480	
2013/01		0.70	0.4901	0.4901		120	73.40	5,542,627	6,060,000	
2013/07		0.70	0.6196	0.6196		120	73.40	5,566,665	6,097,560	
2014/01		0.65	0.8564	0.8564		120	73.40	5,597,655	6,149,760	
2014/07		0.65	1.2383	1.2383		120	73.40	5,642,711	6,225,960	
2015/01		0.60	0.7571	0.7571		120	73.61	5,668,346	6,273,120	
2015/09		0.60	1.5736	1.5736		120	73.61	5,721,867	6,371,880	
2016/09		0.55	1.9890	1.9890		120	67.03	5,784,464	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



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217.00

Harbor Beach Nursing and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1615 MIAMI RD	1/1/2014-12/31/2014	Number of Beds: 59	Superior: 0
FT LAUDERDALE, FL 33316-29	Days in CR 365	Maximum: 21,535	Standard: 366
County: Broward [6]	First Used : 2016/09	Max Annualized: 21,535	Conditional: 0
Region: South Area: 10	Last Used: 2016/09	Total Patient: 19,952	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,379	Inflation
Current Class South Small	Initial CR? False	Medicaid: 14,577	FY Index: 1.34193004
Class at 1/94: South Small	Medicaid Utilization	73.06034%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.64918%	Cost: 1.07573004
Open Date: 12/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 05/01/1986	Low Occupancy Adjustment Factor:	117.17065%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252255			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	820,059	948,164	646,926	621,855		3,037,004	
1a	Audit Adjustments							
2	Cost Per Diem	56.2570	65.0452	44.3799	42.6600		208.3421	
3	Cost Per Diem Inflated	60.5173	69.0411	47.7408				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	60.5173	69.0411	47.7408	42.6600		219.9592	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	69.7828		76.0546				
7	Provider Target Rate	73.6647		80.2854				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	71.4322		83.3111				
10b	Base for line 10a	67.6680		78.9209				
11	Lesser of 5,7,8,10, 10a	60.5173	69.0411	47.7408	13.6500		190.9492	
12/13	Medicaid Adjustment Rate		1.7911	1.2385				
14	Prospective Per Diem 11	60.5173	70.8322	48.9793	13.6500		193.9788	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Harbor Beach Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/28/1986		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,822,258.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	2,295,674	11.6687
Indexed Asset Value	2,869,592	<60% of Base:	False	20% ROE(2):	573,918	0.6725
FRVS Base Asset:	1,938,500	Interest Rate:	10.6343%	Insurance Cost(3):	19,057	0.9551
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	56,219	2.8177
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	20,191	1.0120
		Interest Only:	False	Replacement(3&4):	67,972	0.0000
		Yearly Payment:	226,156	Total FRVS PD:		17.1260

(1) 80% Capital (\$2,295,674) amortized at 7.7500 % for 20 years Principal & Interest of \$226,156 divided by annual available days (21535) divided by Occup. Adj. (0.90) = \$11.6687

(2) 20% ROE (\$573,918) times the ROE factor (0.022710) divided by annual available days (21535) divided by Occup. Adj. (0.90) = \$0.6725

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1984	Current RS PBS:	27,413
Comparison Bed	59	Effective PBS Limitation	54,155
			1,617,367

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	60.5173	60.5173	2.7456	57.7717
Direct Care	70.8322	70.8322	3.2136	67.6186
Indirect Care	48.9793	48.9793	2.2222	46.7571
Property	13.6500	17.1260	0.7770	16.3490
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.3265
Supplemental Rate				8.1814
Totals	193.9788	197.4548	8.9584	217.0043

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	1,938,500	0.00	1.9179	1.9179		59		1,938,500	1,648,401	
1985/01		0.10	1.1471	1.1471		59		1,938,500	1,667,281	
1985/10		0.10	0.8522	0.8522		59		1,938,500	1,681,500	
1986/01		0.20	0.8299	0.8299		59	22.25	1,617,367	1,617,367	1
1986/07	17,721	0.20	0.2974	0.2974		59	22.25	1,635,088	1,692,238	
1987/01		0.30	1.0091	1.0091		59	22.25	1,635,088	1,722,505	
1987/07		0.30	0.9007	0.9007		59	22.25	1,635,088	1,735,957	
1988/01		0.40	0.9007	0.9007		59	22.25	1,635,088	1,750,058	
1988/07		0.40	0.5899	0.5899		59	22.25	1,635,088	1,749,114	
1989/01		0.50	0.5899	0.5899		59	22.25	1,635,088	1,759,439	
1989/07		0.50	0.5899	0.5899		59	51.62	1,639,615	1,771,357	
1990/01	32,037	0.60	0.5899	0.5899		59	54.93	1,677,447	1,780,266	
1990/07		0.60	0.5899	0.5899		59	54.93	1,677,447	1,790,768	5
1991/01		0.70	0.5899	0.5899		59	56.28	1,690,327	1,801,270	
1991/07		0.70	1.4932	1.4932		59	56.28	1,707,994	1,828,174	
1992/01	11,494	0.80	2.0117	2.0117		59	69.01	1,719,488	1,864,931	5
1992/07		0.80	1.8152	1.8152		59	69.01	1,746,976	1,898,797	5
1993/01	8,842	0.90	1.7710	1.7710		59	68.16	1,809,437	1,932,427	
1993/07		0.90	1.5329	1.5329		59	68.16	1,834,400	1,962,045	
1994/01		1.00	1.6983	1.6983		59	65.50	1,865,554	1,995,380	
1994/07		1.00	1.5991	1.5991		59	65.50	1,895,386	2,027,299	
1995/01	12,621	1.00	1.5812	1.5812		59	62.80	1,937,977	2,059,336	
1995/07		1.00	1.5250	1.5250		59	62.80	1,967,531	2,090,724	
1996/01		1.00	1.7228	1.7228		59	64.34	2,001,428	2,126,773	
1996/07		1.00	1.3294	1.3294		59	64.34	2,028,035	2,155,034	
1997/01		1.00	1.4109	1.4109		59	67.90	2,028,035	2,185,419	5
1997/07		1.00	1.0917	1.0917		59	67.90	2,079,101	2,209,255	
1998/01	11,095	1.00	1.1663	1.1663		59	64.70	2,114,445	2,235,038	
1998/07		1.00	1.0794	1.0794		59	64.70	2,137,268	2,259,169	
1999/01		1.00	1.4499	1.4499		59	60.59	2,168,256	2,291,914	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		59	60.59	2,194,923	2,320,116	
2000/01	39,649	1.00	1.3356	1.3356		59	70.12	2,263,887	2,351,091	
2000/07		1.00	1.1129	1.1129		59	70.12	2,289,082	2,377,228	
2001/01		1.00	1.2976	1.2976		59	73.10	2,318,785	2,408,085	
2001/07		1.00	0.9615	0.9615		59	64.43	2,341,080	2,431,213	
2002/01		1.00	1.0301	1.0301		59	64.43	2,365,195	2,456,229	
2002/07		1.00	0.8337	0.8337		59	64.43	2,384,914	2,476,702	
2003/01		1.00	1.3271	1.3271		59	64.43	2,416,564	2,509,565	
2003/07		1.00	1.1664	1.1664		59	64.43	2,444,751	2,538,829	
2004/01		1.00	1.1103	1.1103		59	64.43	2,471,895	2,567,031	
2004/07		1.00	0.8378	0.8378		59	68.51	2,492,605	2,588,566	
2005/01		0.95	0.8595	0.8595		59	68.51	2,512,957	2,610,809	
2005/07		0.95	0.7364	0.7364		59	73.93	2,530,538	2,630,043	
2006/01		0.90	0.9068	0.9068		59	73.93	2,551,190	2,653,879	
2006/07		0.90	0.8133	0.8133		59	65.40	2,569,865	2,675,473	
2007/01		0.85	1.0133	1.0133		59	58.55	2,591,999	2,702,554	
2007/07		0.85	1.1050	1.1050		59	58.55	2,616,346	2,732,408	
2008/01		0.80	0.8556	0.8556		59	58.55	2,634,255	2,755,772	
2008/07		0.80	0.6104	0.6104		59	59.92	2,647,118	2,772,587	
2009/01		0.75	1.3268	1.3268		59	62.94	2,673,459	2,809,403	
2009/07		0.75	0.6841	0.6841		59	62.94	2,687,177	2,828,637	
2010/01		0.70	0.8643	0.8643		59	62.94	2,703,434	2,853,063	
2010/07		0.70	0.7107	0.7107		59	69.65	2,716,884	2,873,359	
2011/01		0.65	0.9198	0.9198		59	72.30	2,733,128	2,899,791	
2011/07		0.65	0.9028	0.9028		59	72.30	2,749,166	2,925,987	
2012/01		0.60	0.3865	0.3865		59	73.19	2,755,541	2,937,315	
2012/07		0.60	0.9417	0.9417		59	73.19	2,771,110	2,964,986	
2013/01		0.55	0.4901	0.4901		59	73.19	2,778,581	2,979,500	
2013/07		0.55	0.6196	0.6196		59	73.19	2,788,050	2,997,967	
2014/01		0.50	0.8564	0.8564		59	73.19	2,799,988	3,023,632	



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0 043873-00 - 2016/09

217.00

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		59	73.19	2,817,326	3,061,097	
2015/01		0.45	0.7571	0.7571		59	75.76	2,826,925	3,084,284	
2015/09		0.45	1.5736	1.5736		59	75.76	2,846,942	3,132,841	
2016/09		0.40	1.9890	1.9890		59	73.06	2,869,592	3,195,145	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 043873123120140101201411102015094623



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0043874-00 - 2016/09

188.22

Health Center at Brentwood

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2333 N BRENTWOOD CIR	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
LECANTO, FL 34461-8536	Days in CR 365	Maximum: 43,800	Standard: 366
County: Citrus [9]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 42,055	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,196	Inflation
Current Class North Large	Initial CR? False	Medicaid: 22,636	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	53.82475%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.01598%	Cost: 1.04651568
Open Date: 04/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 04/01/1984	Low Occupancy Adjustment Factor:	121.42855%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252263			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,002,413	1,505,549	849,805	793,392		4,151,159	
1a	Audit Adjustments							
2	Cost Per Diem	44.2840	66.5113	37.5422	35.0500		183.3875	
3	Cost Per Diem Inflated	46.3439	69.2174	39.2885				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.3439	69.2174	39.2885	35.0500		189.8998	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.2224		54.6639				
7	Provider Target Rate	58.2943		57.7047				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	55.6697		67.3906				
10b	Base for line 10a	52.7361		63.8393				
11	Lesser of 5,7,8,10, 10a	46.3439	69.2174	39.2885	13.6500		168.4998	
12/13	Medicaid Adjustment Rate		0.2978	0.1691				
14	Prospective Per Diem 11	46.3439	69.5152	39.4576	13.6500		168.9667	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Rate Semester 09/01/2016 through 08/31/2017

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188.22

Health Center at Brentwood

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/01/2001	Amount:	4,919,568.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Fixed	80% Capital(1):	4,448,083	11.1161
Indexed Asset Value	5,560,104	<60% of Base:	False	20% ROE(2):	1,112,021	0.5701
FRVS Base Asset:	1,710,000	Interest Rate:	10.6343%	Insurance Cost(3):	30,362	0.7220
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	74,182	1.7639
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	39,804	0.9465
		Interest Only:	False	Replacement(3&4):	109,810	0.0000
		Yearly Payment:	438,198	Total FRVS PD:		15.1186

(1) 80% Capital (\$4,448,083) amortized at 7.7500 % for 20 years Principal & Interest of \$438,198 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.1161

(2) 20% ROE (\$1,112,021) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5701

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	54,155
Comparison Bed	60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.3439	46.3439	2.1026	44.2413
Direct Care	69.5152	69.5152	3.1539	66.3613
Indirect Care	39.4576	39.4576	1.7902	37.6674
Property	13.6500	15.1186	0.6859	14.4327
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.3340
Supplemental Rate				8.1814
Totals	168.9667	170.4353	7.7326	188.2181

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	2,025,342	0.00	1.2952	1.2952		60	33.07	2,025,342	1,644,780	
1984/07		0.10	1.9179	1.9179		60	33.07	2,027,678	1,676,340	
1985/01	19,318	0.10	1.1471	1.1471		60	33.07	2,048,394	1,695,540	
1985/10		0.20	0.8522	0.8522		60	33.07	1,710,000	1,710,000	1
1986/01		0.20	0.8299	0.8299		60	33.07	1,711,707	1,724,220	
1986/07		0.30	0.2974	0.2974		60	33.07	1,712,625	1,720,920	
1987/01		0.30	1.0091	1.0091		60	49.52	1,717,293	1,751,700	
1987/07		0.40	0.9007	0.9007		60	49.52	1,722,864	1,765,380	
1988/01		0.40	0.9007	0.9007		60	49.52	1,728,453	1,779,720	
1988/07		0.50	0.5899	0.5899		60	49.52	1,733,044	1,778,760	
1989/01		0.50	0.5899	0.5899		60	42.54	1,736,998	1,789,260	
1989/07		0.60	0.5899	0.5899		60	38.84	1,741,339	1,801,380	
1990/01		0.60	0.5899	0.5899		60	38.84	1,745,691	1,810,440	
1990/07		0.70	0.5899	0.5899		60	38.84	1,750,781	1,821,120	
1991/01	7,474	0.70	0.5899	0.5899		60	35.84	1,762,966	1,831,800	
1991/07		0.80	1.4932	1.4932		60	45.51	1,780,393	1,859,160	
1992/01		0.80	2.0117	2.0117		60	45.51	1,804,103	1,896,540	
1992/07		0.90	1.8152	1.8152		60	42.18	1,826,707	1,930,980	
1993/01	5,502	0.90	1.7710	1.7710		60	36.23	1,851,388	1,965,180	
1993/07		1.00	1.5329	1.5329		60	43.07	1,873,612	1,995,300	
1994/01		1.00	1.6983	1.6983		60	43.07	1,898,530	2,029,200	
1994/07		1.00	1.5991	1.5991		60	43.07	1,922,304	2,061,660	
1995/01		1.00	1.5812	1.5812		60	43.07	1,946,106	2,094,240	
1995/07		1.00	1.5250	1.5250		60	43.07	1,969,347	2,126,160	
1996/01	33,594	1.00	1.7228	1.7228		60	40.45	2,027,893	2,162,820	
1996/07		1.00	1.3294	1.3294		60	40.45	2,047,720	2,191,560	
1997/01	10,240	1.00	1.4109	1.4109		60	52.36	2,085,464	2,222,460	
1997/07		1.00	1.0917	1.0917		60	52.36	2,107,138	2,246,700	
1998/01		1.00	1.1663	1.1663		60	46.33	2,127,840	2,272,920	
1998/07		1.00	1.0794	1.0794		60	46.33	2,147,187	2,297,460	



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188.22

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01	2,246,700	1.00	1.4499	1.4499		120	39.75	4,416,387	4,661,520	
1999/07		1.00	1.2299	1.2299		120	39.75	4,455,643	4,718,880	
2000/01	71,407	1.00	1.3356	1.3356		120	42.94	4,573,511	4,781,880	
2000/07		1.00	1.1129	1.1129		120	42.94	4,613,249	4,835,040	
2001/01		1.00	1.2976	1.2976		120	54.64	4,672,719	4,897,800	
2001/07		1.00	0.9615	0.9615		120	41.15	4,706,333	4,944,840	
2002/01		1.00	1.0301	1.0301		120	41.15	4,742,605	4,995,720	
2002/07		1.00	0.8337	0.8337		120	41.15	4,772,187	5,037,360	
2003/01		1.00	1.3271	1.3271		120	41.15	4,819,571	5,104,200	
2003/07		1.00	1.1664	1.1664		120	41.15	4,861,630	5,163,720	
2004/01		1.00	1.1103	1.1103		120	41.15	4,902,016	5,221,080	
2004/07		0.95	0.8378	0.8378		120	50.69	4,937,974	5,264,880	
2005/01		0.95	0.8595	0.8595		120	50.69	4,975,133	5,310,120	
2005/07		0.90	0.7364	0.7364		120	53.64	5,007,293	5,349,240	
2006/01		0.90	0.9068	0.9068		120	53.64	5,047,147	5,397,720	
2006/07		0.85	0.8133	0.8133		120	51.85	5,080,040	5,441,640	
2007/01		0.85	1.0133	1.0133		120	45.35	5,116,117	5,496,720	
2007/07		0.80	1.1050	1.1050		120	45.35	5,153,408	5,557,440	
2008/01		0.80	0.8556	0.8556		120	45.35	5,182,494	5,604,960	
2008/07		0.75	0.6104	0.6104		120	44.63	5,201,746	5,639,160	
2009/01		0.75	1.3268	1.3268		120	44.63	5,243,749	5,714,040	
2009/07		0.70	0.6841	0.6841		120	46.63	5,265,040	5,753,160	
2010/01		0.70	0.8643	0.8643		120	53.03	5,295,753	5,802,840	
2010/07		0.65	0.7107	0.7107		120	53.03	5,319,343	5,844,120	
2011/01		0.65	0.9198	0.9198		120	53.03	5,350,008	5,897,880	
2011/07		0.60	0.9028	0.9028		120	47.77	5,375,179	5,951,160	
2012/01		0.60	0.3865	0.3865		120	43.53	5,385,045	5,974,200	
2012/07		0.55	0.9417	0.9417		120	43.53	5,407,118	6,030,480	
2013/01		0.55	0.4901	0.4901		120	43.53	5,418,655	6,060,000	
2013/07		0.50	0.6196	0.6196		120	43.53	5,431,941	6,097,560	



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188.22

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.50	0.8564	0.8564		120	43.53	5,431,941	6,149,760	5
2014/07		0.45	1.2383	1.2383		120	43.53	5,474,386	6,225,960	
2015/01		0.45	0.7571	0.7571		120	49.71	5,491,243	6,273,120	
2015/09		0.40	1.5736	1.5736		120	49.71	5,522,481	6,371,880	
2016/09		0.35	1.9890	1.9890		120	53.82	5,560,104	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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0043875-00 - 2016/09

194.99

Governor's Creek Health and Rehabilitation

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
803 OAK ST	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
GREEN COVE SPRINGS, FL 32	Days in CR 365	Maximum: 43,800	Standard: 366
County: Clay [10]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 41,956	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,411	Inflation
Current Class North Large	Initial CR? False	Medicaid: 32,729	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	78.00791%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.78995%	Cost: 1.04651568
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	121.14269%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252387			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,495,071	2,144,671	1,334,849	503,699		5,478,290
1a	Audit Adjustments						
2	Cost Per Diem	45.6803	65.5282	40.7849	15.3900		167.3834
3	Cost Per Diem Inflated	47.8052	68.1943	42.6820			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	47.8052	68.1943	42.6820	15.3900		174.0715
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	51.4562		59.0896			
7	Provider Target Rate	54.3186		62.3766			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	54.6285		65.6137			
10b	Base for line 10a	51.7498		62.1561			
11	Lesser of 5,7,8,10, 10a	47.8052	68.1943	42.6820	13.6500		172.3315
12/13	Medicaid Adjustment Rate		2.1487	1.3449			
14	Prospective Per Diem 11	47.8052	70.3430	44.0269	13.6500		175.8251
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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194.99

Governor's Creek Health and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	01/01/1997	Amount:	2,253,128.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	3,318,193	8.2924
Indexed Asset Value	4,147,741	<60% of Base:	False	20% ROE(2):	829,548	0.4253
FRVS Base Asset:	2,253,887	Interest Rate:	10.6343%	Insurance Cost(3):	44,091	1.0509
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	30,466	0.7261
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	39,148	0.9331
		Interest Only:	False	Replacement(3&4):	81,027	0.0000
		Yearly Payment:	326,888	Total FRVS PD:		11.4278

(1) 80% Capital (\$3,318,193) amortized at 7.7500 % for 20 years Principal & Interest of \$326,888 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.2924

(2) 20% ROE (\$829,548) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4253

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.8052	47.8052	2.1689	45.6363
Direct Care	70.3430	70.3430	3.1914	67.1516
Indirect Care	44.0269	44.0269	1.9975	42.0294
Property	13.6500	11.4278	0.5185	10.9093
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.0862
Supplemental Rate				8.1814
Totals	175.8251	173.6029	7.8763	194.9942

Medicaid Trend Adjustment



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194.99

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/04	5,492	0.00	2.6288	2.6288		120	86.02	5,492	3,123,840	
1983/07	2,207,250	0.10	3.9578	3.0000	0.9578	120	86.02	2,212,758	3,247,440	
1984/01	3,993	0.10	2.2530	2.2530		120	85.80	2,221,736	3,289,560	
1984/07	5,330	0.20	1.9179	1.9179		120	85.80	2,235,589	3,352,680	
1985/01	7,422	0.20	1.1471	1.1471		120	85.80	2,248,139	3,391,080	
1985/10		0.30	0.8522	0.8522		120	85.80	2,253,887	3,420,000	
1986/01		0.30	0.8299	0.8299		120	86.18	2,259,499	3,448,440	
1986/07		0.40	0.2974	0.2974		120	86.18	2,262,188	3,441,840	
1987/01		0.40	1.0091	1.0091		120	86.31	2,271,318	3,503,400	
1987/07		0.50	0.9007	0.9007		120	86.31	2,281,548	3,530,760	
1988/01		0.50	0.9007	0.9007		120	88.99	2,281,548	3,559,440	5
1988/07		0.60	0.5899	0.5899		120	88.99	2,291,824	3,557,520	5
1989/01		0.60	0.5899	0.5899		120	90.91	2,308,074	3,578,520	
1989/07		0.70	0.5899	0.5899		120	90.91	2,317,604	3,602,760	
1990/01		0.70	0.5899	0.5899		120	92.17	2,327,173	3,620,880	
1990/07		0.80	0.5899	0.5899		120	92.17	2,338,155	3,642,240	
1991/01		0.80	0.5899	0.5899		120	73.22	2,349,189	3,663,600	
1991/07		0.90	1.4932	1.4932		120	73.22	2,380,760	3,718,320	
1992/01	67,124	0.90	2.0117	2.0117		120	84.01	2,490,988	3,793,080	
1992/07		1.00	1.8152	1.8152		120	84.01	2,536,204	3,861,960	
1993/01		1.00	1.7710	1.7710		120	81.07	2,581,120	3,930,360	
1993/07		1.00	1.5329	1.5329		120	81.07	2,620,686	3,990,600	
1994/01	44,185	1.00	1.6983	1.6983		120	78.00	2,709,378	4,058,400	
1994/07		1.00	1.5991	1.5991		120	78.00	2,752,704	4,123,320	
1995/01		1.00	1.5812	1.5812		120	78.74	2,796,230	4,188,480	
1995/07		1.00	1.5250	1.5250		120	78.74	2,838,873	4,252,320	
1996/01		1.00	1.7228	1.7228		120	80.86	2,887,781	4,325,640	
1996/07		1.00	1.3294	1.3294		120	80.86	2,926,171	4,383,120	
1997/01		1.00	1.4109	1.4109		120	82.36	2,967,456	4,444,920	
1997/07		1.00	1.0917	1.0917		120	82.36	2,999,852	4,493,400	



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194.99

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01		1.00	1.1663	1.1663		120	83.00	3,034,839	4,545,840	
1998/07		1.00	1.0794	1.0794		120	83.00	3,067,597	4,594,920	
1999/01	66,411	1.00	1.4499	1.4499		120	84.71	3,178,485	4,661,520	
1999/07		1.00	1.2299	1.2299		120	84.71	3,217,577	4,718,880	
2000/01	72,460	1.00	1.3356	1.3356		120	82.64	3,333,011	4,781,880	
2000/07		1.00	1.1129	1.1129		120	82.64	3,370,104	4,835,040	
2001/01		1.00	1.2976	1.2976		120	83.50	3,413,834	4,897,800	
2001/07		1.00	0.9615	0.9615		120	77.12	3,446,658	4,944,840	
2002/01		1.00	1.0301	1.0301		120	77.12	3,482,162	4,995,720	
2002/07		1.00	0.8337	0.8337		120	77.12	3,511,193	5,037,360	
2003/01		1.00	1.3271	1.3271		120	77.12	3,557,790	5,104,200	
2003/07		0.95	1.1664	1.1664		120	77.12	3,597,214	5,163,720	
2004/01		0.95	1.1103	1.1103		120	77.12	3,635,157	5,221,080	
2004/07		0.90	0.8378	0.8378		120	78.75	3,662,566	5,264,880	
2005/01		0.90	0.8595	0.8595		120	78.75	3,690,900	5,310,120	
2005/07		0.85	0.7364	0.7364		120	80.45	3,714,001	5,349,240	
2006/01		0.85	0.9068	0.9068		120	80.45	3,742,629	5,397,720	
2006/07		0.80	0.8133	0.8133		120	81.48	3,766,979	5,441,640	
2007/01		0.80	1.0133	1.0133		120	81.48	3,797,514	5,496,720	
2007/07		0.75	1.1050	1.1050		120	81.68	3,828,988	5,557,440	
2008/01		0.75	0.8556	0.8556		120	81.68	3,853,559	5,604,960	
2008/07		0.70	0.6104	0.6104		120	80.20	3,853,559	5,639,160	5
2009/01		0.70	1.3268	1.3268		120	85.53	3,905,970	5,714,040	
2009/07		0.65	0.6841	0.6841		120	85.53	3,923,340	5,753,160	
2010/01		0.65	0.8643	0.8643		120	82.76	3,945,381	5,802,840	
2010/07		0.60	0.7107	0.7107		120	82.76	3,962,204	5,844,120	
2011/01		0.60	0.9198	0.9198		120	82.76	3,984,071	5,897,880	
2011/07		0.55	0.9028	0.9028		120	81.86	4,003,852	5,951,160	
2012/01		0.55	0.3865	0.3865		120	79.71	4,003,852	5,974,200	5
2012/07		0.50	0.9417	0.9417		120	79.71	4,031,258	6,030,480	



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194.99

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		0.50	0.4901	0.4901		120	79.71	4,041,139	6,060,000	
2013/07		0.45	0.6196	0.6196		120	79.71	4,052,406	6,097,560	
2014/01		0.45	0.8564	0.8564		120	79.71	4,068,024	6,149,760	
2014/07		0.40	1.2383	1.2383		120	79.71	4,088,173	6,225,960	
2015/01		0.40	0.7571	0.7571		120	79.55	4,100,552	6,273,120	
2015/09		0.35	1.5736	1.5736		120	79.55	4,123,138	6,371,880	
2016/09		0.30	1.9890	1.9890		120	78.01	4,147,741	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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195.87

Largo Health And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
9035 BRYAN DAIRY RD	1/1/2014-12/31/2014	Number of Beds: 158	Superior: 0
LARGO, FL 33777-1104	Days in CR 365	Maximum: 57,670	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 57,670	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 55,552	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 11,671	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 35,887	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	64.60073%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.32738%	Cost: 1.07573004
Open Date: 06/02/1999	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/02/1999	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 06/02/1999	Low Occupancy Adjustment Factor:	121.82236%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252336			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,516,251	2,487,522	1,282,623	2,161,115		7,447,511	
1a	Audit Adjustments							
2	Cost Per Diem	42.2507	69.3154	35.7406	60.2200		207.5267	
3	Cost Per Diem Inflated	45.4503	73.5736	38.4472				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.4503	73.5736	38.4472	60.2200		217.6911	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.8665		61.2072				
7	Provider Target Rate	55.8074		64.6120				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	56.2159		68.3466				
10b	Base for line 10a	53.2535		64.7450				
11	Lesser of 5,7,8,10, 10a	45.4503	73.5736	38.4472	13.6500		171.1211	
12/13	Medicaid Adjustment Rate		1.2085	0.6315				
14	Prospective Per Diem 11	45.4503	74.7821	39.0787	13.6500		172.9611	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Largo Health And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/01/1999	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,478,480.00		Total Amount	Per Diem
RS to Start Calcs:	1999/01	Type:	Fixed	80% Capital(1):	6,146,082	11.6655
Indexed Asset Value	7,682,603	<60% of Base:	False	20% ROE(2):	1,536,521	0.6723
FRVS Base Asset:	6,049,978	Interest Rate:	10.6343%	Insurance Cost(3):	51,315	0.9237
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	141,712	2.5510
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	55,798	1.0044
		Interest Only:	False	Replacement(3&4):	52,999	0.0000
		Yearly Payment:	605,474	Total FRVS PD:		16.8169

(1) 80% Capital (\$6,146,082) amortized at 7.7500 % for 20 years Principal & Interest of \$605,474 divided by annual available days (57670) divided by Occup. Adj. (0.90) = \$11.6655

(2) 20% ROE (\$1,536,521) times the ROE factor (0.022710) divided by annual available days (57670) divided by Occup. Adj. (0.90) = \$0.6723

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	38,291
Comparison Date: 07/01/1998	Current RS PBS:	54,155
Comparison Bed 158	Effective PBS Limitation	6,049,978

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.4503	45.4503	2.0621	43.3882
Direct Care	74.7821	74.7821	3.3928	71.3893
Indirect Care	39.0787	39.0787	1.7730	37.3057
Property	13.6500	16.8169	0.7630	16.0539
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.5479
Supplemental Rate				8.1814
Totals	172.9611	176.1280	7.9909	195.8664

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01	6,686,261	0.00	1.4499	1.4499		158	81.23	6,049,978	6,049,978	1
1999/07	12,835	0.10	1.2299	1.2299		158	81.23	6,070,254	6,213,192	
2000/01	11,056	0.10	1.3356	1.3356		158	81.23	6,089,420	6,296,142	
2000/07		0.20	1.1129	1.1129		158	81.23	6,102,975	6,366,136	
2001/01		0.20	1.2976	1.2976		158	81.23	6,118,812	6,448,770	
2001/07		0.30	0.9615	0.9615		158	80.68	6,136,465	6,510,706	
2002/01		0.30	1.0301	1.0301		158	80.68	6,155,427	6,577,698	
2002/07		0.40	0.8337	0.8337		158	80.68	6,175,955	6,632,524	
2003/01		0.40	1.3271	1.3271		158	80.68	6,208,737	6,720,530	
2003/07		0.50	1.1664	1.1664		158	80.68	6,244,946	6,798,898	
2004/01		0.50	1.1103	1.1103		158	80.68	6,279,618	6,874,422	
2004/07		0.60	0.8378	0.8378		158	78.73	6,311,186	6,932,092	
2005/01		0.60	0.8595	0.8595		158	78.73	6,343,733	6,991,658	
2005/07		0.70	0.7364	0.7364		158	73.92	6,376,435	7,043,166	
2006/01		0.70	0.9068	0.9068		158	73.92	6,416,913	7,106,998	
2006/07		0.80	0.8133	0.8133		158	68.82	6,458,661	7,164,826	
2007/01		0.80	1.0133	1.0133		158	63.99	6,511,015	7,237,348	
2007/07		0.90	1.1050	1.1050		158	63.99	6,575,767	7,317,296	
2008/01		0.90	0.8556	0.8556		158	65.54	6,626,400	7,379,864	
2008/07		1.00	0.6104	0.6104		158	65.54	6,666,848	7,424,894	
2009/01		1.00	1.3268	1.3268		158	65.31	6,755,304	7,523,486	
2009/07		1.00	0.6841	0.6841		158	65.31	6,801,517	7,574,994	
2010/01		1.00	0.8643	0.8643		158	65.31	6,860,303	7,640,406	
2010/07		1.00	0.7107	0.7107		158	58.97	6,909,059	7,694,758	
2011/01		1.00	0.9198	0.9198		158	58.97	6,972,609	7,765,542	
2011/07		1.00	0.9028	0.9028		158	58.03	7,035,558	7,835,694	
2012/01		1.00	0.3865	0.3865		158	65.36	7,062,750	7,866,030	
2012/07		1.00	0.9417	0.9417		158	65.36	7,129,260	7,940,132	
2013/01		1.00	0.4901	0.4901		158	65.36	7,164,201	7,979,000	
2013/07		1.00	0.6196	0.6196		158	65.36	7,208,590	8,028,454	



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195.87

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		1.00	0.8564	0.8564		158	65.36	7,270,324	8,097,184	
2014/07		1.00	1.2383	1.2383		158	65.36	7,360,352	8,197,514	
2015/01		1.00	0.7571	0.7571		158	66.23	7,416,077	8,259,608	
2015/09		1.00	1.5736	1.5736		158	66.23	7,532,776	8,389,642	
2016/09		1.00	1.9890	1.9890		158	64.60	7,682,603	8,556,490	

Message Code:

1 Per Bed Standard Limitation

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208.05

Magnolia Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1507 S TUTTLE AVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
SARASOTA, FL 34239-2608	Days in CR 365	Maximum: 43,800	Standard: 366
County: Sarasota [58]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 41,003	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,869	Inflation
Current Class South Large	Initial CR? False	Medicaid: 29,098	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	70.96554%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.61416%	Cost: 1.04651568
Open Date: 09/14/1994	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/14/1994	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 09/14/1994	Low Occupancy Adjustment Factor:	118.39104%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252182			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,467,232	2,128,004	1,080,174	1,218,915		5,894,325	
1a	Audit Adjustments							
2	Cost Per Diem	50.4238	73.1323	37.1219	41.8900		202.5680	
3	Cost Per Diem Inflated	52.7693	76.1078	38.8487				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.7693	76.1078	38.8487	41.8900		209.6158	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.6800		62.3737				
7	Provider Target Rate	58.7774		65.8434				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	58.2348		70.3746				
10b	Base for line 10a	55.1660		66.6661				
11	Lesser of 5,7,8,10, 10a	52.7693	76.1078	38.8487	13.6500		181.3758	
12/13	Medicaid Adjustment Rate		1.7951	0.9163				
14	Prospective Per Diem 11	52.7693	77.9029	39.7650	13.6500		184.0872	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Magnolia Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	09/14/1994	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,964,729.00		Total Amount	Per Diem
RS to Start Calcs:	1994/07	Type:	Fixed	80% Capital(1):	4,683,011	11.7032
Indexed Asset Value	5,853,764	<60% of Base:	False	20% ROE(2):	1,170,753	0.6002
FRVS Base Asset:	4,058,400	Interest Rate:	10.6343%	Insurance Cost(3):	31,253	0.7622
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	144,757	3.5304
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	39,657	0.9672
		Interest Only:	False	Replacement(3&4):	46,250	0.0000
		Yearly Payment:	461,341	Total FRVS PD:		17.5632

(1) 80% Capital (\$4,683,011) amortized at 7.7500 % for 20 years Principal & Interest of \$461,341 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.7032

(2) 20% ROE (\$1,170,753) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6002

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	33,820
Comparison Date:	01/01/1994	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	4,058,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.7693	52.7693	2.3941	50.3752
Direct Care	77.9029	77.9029	3.5344	74.3685
Indirect Care	39.7650	39.7650	1.8041	37.9609
Property	13.6500	17.5632	0.7968	16.7664
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.3940
Supplemental Rate				8.1814
Totals	184.0872	188.0004	8.5294	208.0464

Medicaid Trend Adjustment



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208.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/07	7,615,390	0.00	1.5991	1.5991		120	5.05	4,058,400	4,058,400	1
1995/01		0.10	1.5812	1.5812		120	5.05	4,058,400	4,188,480	
1995/07		0.10	1.5250	1.5250		120	5.05	4,058,400	4,252,320	
1996/01		0.20	1.7228	1.7228		120	5.05	4,058,400	4,325,640	
1996/07		0.20	1.3294	1.3294		120	5.05	4,058,400	4,383,120	
1997/01	114,616	0.30	1.4109	1.4109		120	33.96	4,173,016	4,444,920	5
1997/07		0.30	1.0917	1.0917		120	33.96	4,192,083	4,493,400	
1998/01		0.40	1.1663	1.1663		120	52.79	4,210,853	4,545,840	
1998/07		0.40	1.0794	1.0794		120	52.79	4,228,305	4,594,920	
1999/01		0.50	1.4499	1.4499		120	48.53	4,255,354	4,661,520	
1999/07		0.50	1.2299	1.2299		120	48.53	4,278,446	4,718,880	
2000/01	59,731	0.60	1.3356	1.3356		120	50.00	4,369,347	4,781,880	
2000/07		0.60	1.1129	1.1129		120	50.00	4,395,869	4,835,040	
2001/01	34,748	0.70	1.2976	1.2976		120	48.25	4,465,644	4,897,800	
2001/07		0.70	0.9615	0.9615		120	61.25	4,495,702	4,944,840	
2002/01		0.80	1.0301	1.0301		120	61.25	4,532,751	4,995,720	
2002/07		0.80	0.8337	0.8337		120	61.25	4,562,984	5,037,360	
2003/01		0.90	1.3271	1.3271		120	61.25	4,617,484	5,104,200	
2003/07		0.90	1.1664	1.1664		120	61.25	4,665,958	5,163,720	
2004/01		1.00	1.1103	1.1103		120	61.25	4,717,764	5,221,080	
2004/07		1.00	0.8378	0.8378		120	66.67	4,757,289	5,264,880	
2005/01		1.00	0.8595	0.8595		120	66.67	4,798,178	5,310,120	
2005/07		1.00	0.7364	0.7364		120	63.02	4,833,512	5,349,240	
2006/01		1.00	0.9068	0.9068		120	58.78	4,877,342	5,397,720	
2006/07		1.00	0.8133	0.8133		120	58.78	4,917,009	5,441,640	
2007/01		1.00	1.0133	1.0133		120	58.78	4,966,833	5,496,720	
2007/07		1.00	1.1050	1.1050		120	63.31	5,021,717	5,557,440	
2008/01		1.00	0.8556	0.8556		120	63.31	5,064,683	5,604,960	
2008/07		1.00	0.6104	0.6104		120	68.27	5,095,598	5,639,160	
2009/01		1.00	1.3268	1.3268		120	68.27	5,163,206	5,714,040	



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208.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07		1.00	0.6841	0.6841		120	67.00	5,198,527	5,753,160	
2010/01		1.00	0.8643	0.8643		120	67.00	5,243,458	5,802,840	
2010/07		1.00	0.7107	0.7107		120	66.10	5,280,723	5,844,120	
2011/01		1.00	0.9198	0.9198		120	68.44	5,329,295	5,897,880	
2011/07		1.00	0.9028	0.9028		120	68.44	5,377,408	5,951,160	
2012/01		1.00	0.3865	0.3865		120	64.76	5,398,192	5,974,200	
2012/07		1.00	0.9417	0.9417		120	64.76	5,449,027	6,030,480	
2013/01		1.00	0.4901	0.4901		120	64.76	5,475,733	6,060,000	
2013/07		1.00	0.6196	0.6196		120	64.76	5,509,661	6,097,560	
2014/01		1.00	0.8564	0.8564		120	64.76	5,556,846	6,149,760	
2014/07		1.00	1.2383	1.2383		120	64.76	5,625,656	6,225,960	
2015/01		0.95	0.7571	0.7571		120	69.00	5,666,116	6,273,120	
2015/09		0.95	1.5736	1.5736		120	69.00	5,750,819	6,371,880	
2016/09		0.90	1.9890	1.9890		120	70.97	5,853,764	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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Marshall Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
207 MARSHALL DR	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
PERRY, FL 32347-1835	Days in CR 365	Maximum: 43,800	Standard: 366
County: Taylor [62]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 38,559	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,156	Inflation
Current Class North Large	Initial CR? False	Medicaid: 32,123	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	83.30870%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	88.03425%	Cost: 1.07573004
Open Date: 09/01/1979	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1979	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 03/01/1984	Low Occupancy Adjustment Factor:	111.33429%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252425			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,402,664	2,108,172	1,191,678	1,053,956		5,756,470
1a	Audit Adjustments						
2	Cost Per Diem	43.6654	65.6281	37.0973	32.8100		179.2008
3	Cost Per Diem Inflated	46.9722	69.6598	39.9067			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.9722	69.6598	39.9067	32.8100		189.3487
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	55.7433		56.4431			
7	Provider Target Rate	58.8442		59.5829			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	54.6285		63.5737			
10b	Base for line 10a	51.7498		60.2236			
11	Lesser of 5,7,8,10, 10a	46.9722	69.6598	39.9067	13.6500		170.1887
12/13	Medicaid Adjustment Rate		2.6103	1.4954			
14	Prospective Per Diem 11	46.9722	72.2701	41.4021	13.6500		174.2944
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.				0.00



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Marshall Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/01/1985		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,901,000.00		Total Amount	Per Diem
RS to Start Calcs:	1979/07	Type:	Fixed	80% Capital(1):	2,872,992	7.1798
Indexed Asset Value	3,591,240	<60% of Base:	False	20% ROE(2):	718,248	0.4138
FRVS Base Asset:	2,027,076	Interest Rate:	10.6343%	Insurance Cost(3):	32,134	0.8334
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	40,299	1.0451
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	34,884	0.9047
		Interest Only:	False	Replacement(3&4):	47,160	0.0000
		Yearly Payment:	283,029	Total FRVS PD:		10.3768

(1) 80% Capital (\$2,872,992) amortized at 7.7500 % for 20 years Principal & Interest of \$283,029 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.1798

(2) 20% ROE (\$718,248) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4138

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.9722	46.9722	2.1311	44.8411
Direct Care	72.2701	72.2701	3.2789	68.9912
Indirect Care	41.4021	41.4021	1.8784	39.5237
Property	13.6500	10.3768	0.4708	9.9060
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.6448
Supplemental Rate				8.1814
Totals	174.2944	171.0212	7.7592	193.0882

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1979/07	1,439,619	0.00	4.1982	3.0000	1.1982	92	100.00	1,439,619	1,892,624	
1980/01		0.10	7.3640	3.0000	4.3640	92	92.69	1,443,938	2,009,372	
1980/07		0.10	8.1746	3.0000	5.1746	92	92.69	1,448,270	2,085,916	
1981/01		0.20	8.9986	3.0000	5.9986	92	88.94	1,456,960	2,165,680	
1981/07		0.20	8.5874	3.0000	5.5874	92	88.94	1,465,702	2,221,708	
1982/01		0.30	8.2634	3.0000	5.2634	92	85.32	1,478,893	2,281,232	
1982/07		0.30	7.5611	3.0000	4.5611	92	85.32	1,492,203	2,333,580	
1983/04		0.40	7.1899	3.0000	4.1899	92	86.83	1,510,109	2,394,944	
1983/07		0.40	8.1477	3.0000	5.1477	92	86.83	1,528,230	2,489,704	
1984/01		0.50	6.4429	3.0000	3.4429	92	88.70	1,551,153	2,521,996	
1984/07	357,737	0.50	5.3608	3.0000	2.3608	92	88.70	1,932,157	2,570,388	
1985/01	43,731	0.60	3.5079	3.0000	0.5079	92	88.70	2,010,667	2,599,828	
1985/10		0.60	1.3601	1.3601		92	88.70	2,027,076	2,622,000	
1986/01		0.70	0.8299	0.8299		92	84.57	2,038,851	2,643,804	
1986/07		0.70	0.2974	0.2974		92	84.57	2,043,096	2,638,744	
1987/01	29,706	0.80	1.0091	1.0091		92	85.38	2,089,296	2,685,940	
1987/07		0.80	0.9007	0.9007		92	85.38	2,104,351	2,706,916	
1988/01		0.90	0.9007	0.9007		92	86.62	2,121,409	2,728,904	
1988/07		0.90	0.5899	0.5899		92	86.62	2,132,672	2,727,432	
1989/01		1.00	0.5899	0.5899		92	89.05	2,145,253	2,743,532	
1989/07		1.00	0.5899	0.5899		92	89.05	2,157,908	2,762,116	
1990/01		1.00	0.5899	0.5899		92	85.57	2,170,637	2,776,008	
1990/07		1.00	0.5899	0.5899		92	85.57	2,183,442	2,792,384	
1991/01		1.00	0.5899	0.5899		92	81.59	2,196,322	2,808,760	
1991/07		1.00	1.4932	1.4932		92	81.59	2,229,117	2,850,712	
1992/01	19,210	1.00	2.0117	2.0117		92	88.52	2,293,170	2,908,028	
1992/07		1.00	1.8152	1.8152		92	88.52	2,334,796	2,960,836	
1993/01		1.00	1.7710	1.7710		92	80.74	2,376,145	3,013,276	
1993/07		1.00	1.5329	1.5329		120	80.74	2,412,569	3,990,600	
1994/01		1.00	1.6983	1.6983		120	79.46	2,453,542	4,058,400	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/07		1.00	1.5991	1.5991		120	79.46	2,492,777	4,123,320	
1995/01	33,865	1.00	1.5812	1.5812		120	78.92	2,566,058	4,188,480	
1995/07		1.00	1.5250	1.5250		120	78.92	2,605,190	4,252,320	
1996/01		1.00	1.7228	1.7228		120	82.20	2,650,072	4,325,640	
1996/07		1.00	1.3294	1.3294		120	82.20	2,685,302	4,383,120	
1997/01	47,072	1.00	1.4109	1.4109		120	78.07	2,770,261	4,444,920	
1997/07		1.00	1.0917	1.0917		120	78.07	2,800,504	4,493,400	
1998/01		1.00	1.1663	1.1663		120	76.83	2,833,166	4,545,840	
1998/07		1.00	1.0794	1.0794		120	76.83	2,863,747	4,594,920	
1999/01		1.00	1.4499	1.4499		120	75.22	2,905,268	4,661,520	
1999/07		1.00	1.2299	1.2299		120	75.22	2,941,000	4,718,880	
2000/01	54,075	0.95	1.3356	1.3356		120	76.95	3,032,390	4,781,880	
2000/07		0.95	1.1129	1.1129		120	76.95	3,064,451	4,835,040	
2001/01		0.90	1.2976	1.2976		120	77.66	3,100,238	4,897,800	
2001/07		0.90	0.9615	0.9615		120	80.62	3,127,067	4,944,840	
2002/01		0.85	1.0301	1.0301		120	80.62	3,154,448	4,995,720	
2002/07		0.85	0.8337	0.8337		120	80.62	3,154,448	5,037,360	5
2003/01		0.80	1.3271	1.3271		120	80.62	3,210,528	5,104,200	
2003/07		0.80	1.1664	1.1664		120	80.62	3,240,485	5,163,720	
2004/01		0.75	1.1103	1.1103		120	80.62	3,267,469	5,221,080	
2004/07		0.75	0.8378	0.8378		120	79.86	3,288,002	5,264,880	
2005/01		0.70	0.8595	0.8595		120	81.58	3,307,786	5,310,120	
2005/07		0.70	0.7364	0.7364		120	81.58	3,324,838	5,349,240	
2006/01		0.65	0.9068	0.9068		120	81.58	3,344,435	5,397,720	
2006/07		0.65	0.8133	0.8133		120	83.53	3,362,114	5,441,640	
2007/01		0.60	1.0133	1.0133		120	86.15	3,382,556	5,496,720	
2007/07		0.60	1.1050	1.1050		120	86.15	3,382,556	5,557,440	5
2008/01		0.55	0.8556	0.8556		120	77.67	3,421,006	5,604,960	
2008/07		0.55	0.6104	0.6104		120	77.67	3,432,490	5,639,160	
2009/01		0.50	1.3268	1.3268		120	77.67	3,455,261	5,714,040	



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193.09

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07		0.50	0.6841	0.6841		120	80.07	3,467,081	5,753,160	
2010/01		0.45	0.8643	0.8643		120	80.07	3,480,564	5,802,840	
2010/07		0.45	0.7107	0.7107		120	72.65	3,491,695	5,844,120	
2011/01		0.40	0.9198	0.9198		120	72.65	3,504,541	5,897,880	
2011/07		0.40	0.9028	0.9028		120	77.04	3,517,196	5,951,160	
2012/01		0.35	0.3865	0.3865		120	75.30	3,521,955	5,974,200	
2012/07		0.35	0.9417	0.9417		120	75.30	3,533,563	6,030,480	
2013/01		0.30	0.4901	0.4901		120	75.30	3,538,757	6,060,000	
2013/07		0.30	0.6196	0.6196		120	75.30	3,545,336	6,097,560	
2014/01		0.25	0.8564	0.8564		120	75.30	3,552,927	6,149,760	
2014/07		0.25	1.2383	1.2383		120	75.30	3,563,927	6,225,960	
2015/01		0.20	0.7571	0.7571		120	81.72	3,569,323	6,273,120	
2015/09		0.20	1.5736	1.5736		120	81.72	3,580,556	6,371,880	
2016/09		0.15	1.9890	1.9890		120	83.31	3,591,240	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

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202.52

North Florida Rehabilitation and Specialty Care

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6700 NW 10TH PLACE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
GAINESVILLE, FL 32605	Days in CR 365	Maximum: 43,800	Standard: 366
County: Alachua [1]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 40,608	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 10,401	Inflation
Current Class North Large	Initial CR? False	Medicaid: 20,871	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	51.39628%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.71233%	Cost: 1.04651568
Open Date: 03/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 03/01/1984	Low Occupancy Adjustment Factor:	117.25052%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252361			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	974,483	1,470,083	961,499	1,312,786		4,718,851	
1a	Audit Adjustments							
2	Cost Per Diem	46.6908	70.4366	46.0687	62.9000		226.0961	
3	Cost Per Diem Inflated	48.8627	73.3024	48.2116				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.8627	73.3024	48.2116	62.9000		233.2767	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.9576		61.3837				
7	Provider Target Rate	53.7923		64.7984				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.6285		67.4426				
10b	Base for line 10a	51.7498		63.8886				
11	Lesser of 5,7,8,10, 10a	48.8627	73.3024	48.2116	13.6500		184.0267	
12/13	Medicaid Adjustment Rate		0.1151	0.0757				
14	Prospective Per Diem 11	48.8627	73.4175	48.2873	13.6500		184.2175	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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North Florida Rehabilitation and Specialty Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/01/2001	Amount:	4,231,418.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Fixed	80% Capital(1):	4,372,973	10.9284
Indexed Asset Value	5,466,216	<60% of Base:	False	20% ROE(2):	1,093,243	0.5605
FRVS Base Asset:	3,420,000	Interest Rate:	10.6343%	Insurance Cost(3):	33,860	0.8338
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	87,572	2.1565
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	44,609	1.0985
		Interest Only:	False	Replacement(3&4):	397,840	0.0000
		Yearly Payment:	430,798	Total FRVS PD:		15.5777

(1) 80% Capital (\$4,372,973) amortized at 7.7500 % for 20 years Principal & Interest of \$430,798 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.9284

(2) 20% ROE (\$1,093,243) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5605

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.8627	48.8627	2.2169	46.6458
Direct Care	73.4175	73.4175	3.3309	70.0866
Indirect Care	48.2873	48.2873	2.1908	46.0965
Property	13.6500	15.5777	0.7068	14.8709
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.6373
Supplemental Rate				8.1814
Totals	184.2175	186.1452	8.4454	202.5185

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	4,503,907	0.00	1.2952	1.2952		120	65.73	4,503,907	3,289,560	
1984/07		0.10	1.9179	1.9179		120	65.73	4,512,545	3,352,680	
1985/01	9,086	0.10	1.1471	1.1471		120	65.73	4,526,807	3,391,080	
1985/10		0.20	0.8522	0.8522		120	65.73	3,420,000	3,420,000	1
1986/01		0.20	0.8299	0.8299		120	65.73	3,425,677	3,448,440	
1986/07		0.30	0.2974	0.2974		120	65.73	3,428,733	3,441,840	
1987/01		0.30	1.0091	1.0091		120	73.34	3,439,112	3,503,400	
1987/07		0.40	0.9007	0.9007		120	73.34	3,451,503	3,530,760	
1988/01		0.40	0.9007	0.9007		120	74.20	3,463,939	3,559,440	
1988/07		0.50	0.5899	0.5899		120	74.20	3,474,158	3,557,520	
1989/01		0.50	0.5899	0.5899		120	72.56	3,484,407	3,578,520	
1989/07		0.60	0.5899	0.5899		120	72.56	3,496,738	3,602,760	
1990/01		0.60	0.5899	0.5899		120	69.38	3,509,113	3,620,880	
1990/07		0.70	0.5899	0.5899		120	69.38	3,523,602	3,642,240	
1991/01		0.70	0.5899	0.5899		120	62.48	3,538,151	3,663,600	
1991/07		0.80	1.4932	1.4932		120	62.48	3,580,418	3,718,320	
1992/01		0.80	2.0117	2.0117		120	66.96	3,638,041	3,793,080	
1992/07		0.90	1.8152	1.8152		120	66.96	3,697,476	3,861,960	
1993/01		0.90	1.7710	1.7710		120	64.63	3,756,410	3,930,360	
1993/07		1.00	1.5329	1.5329		120	64.63	3,813,992	3,990,600	
1994/01		1.00	1.6983	1.6983		120	53.80	3,877,352	4,058,400	
1994/07		1.00	1.5991	1.5991		120	53.80	3,938,002	4,123,320	
1995/01	18,735	1.00	1.5812	1.5812		120	41.22	4,003,404	4,188,480	
1995/07		1.00	1.5250	1.5250		120	41.22	4,049,160	4,252,320	
1996/01		1.00	1.7228	1.7228		120	34.06	4,092,360	4,325,640	
1996/07		1.00	1.3294	1.3294		120	34.06	4,126,051	4,383,120	
1997/01		1.00	1.4109	1.4109		120	31.80	4,126,051	4,444,920	5
1997/07		1.00	1.0917	1.0917		120	31.80	4,185,966	4,493,400	
1998/01	19,730	1.00	1.1663	1.1663		120	32.56	4,234,598	4,545,840	
1998/07		1.00	1.0794	1.0794		120	32.56	4,261,657	4,594,920	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01		1.00	1.4499	1.4499		120	37.50	4,303,786	4,661,520	
1999/07		1.00	1.2299	1.2299		120	37.50	4,339,876	4,718,880	
2000/01	51,958	1.00	1.3356	1.3356		120	41.86	4,435,949	4,781,880	
2000/07		1.00	1.1129	1.1129		120	41.86	4,473,522	4,835,040	
2001/01		1.00	1.2976	1.2976		120	55.90	4,531,570	4,897,800	
2001/07		1.00	0.9615	0.9615		120	54.81	4,574,991	4,944,840	
2002/01		1.00	1.0301	1.0301		120	54.81	4,621,955	4,995,720	
2002/07		1.00	0.8337	0.8337		120	54.81	4,660,355	5,037,360	
2003/01		1.00	1.3271	1.3271		120	54.81	4,721,989	5,104,200	
2003/07		1.00	1.1664	1.1664		120	54.81	4,776,876	5,163,720	
2004/01		1.00	1.1103	1.1103		120	54.81	4,829,730	5,221,080	
2004/07		0.95	0.8378	0.8378		120	54.68	4,867,946	5,264,880	
2005/01		0.95	0.8595	0.8595		120	51.02	4,904,817	5,310,120	
2005/07		0.90	0.7364	0.7364		120	51.02	4,934,974	5,349,240	
2006/01		0.90	0.9068	0.9068		120	51.02	4,972,334	5,397,720	
2006/07		0.85	0.8133	0.8133		120	51.85	5,004,739	5,441,640	
2007/01		0.85	1.0133	1.0133		120	46.53	5,041,207	5,496,720	
2007/07		0.80	1.1050	1.1050		120	46.53	5,078,908	5,557,440	
2008/01		0.80	0.8556	0.8556		120	46.53	5,108,319	5,604,960	
2008/07		0.75	0.6104	0.6104		120	49.54	5,129,383	5,639,160	
2009/01		0.75	1.3268	1.3268		120	47.65	5,173,604	5,714,040	
2009/07		0.70	0.6841	0.6841		120	47.65	5,195,069	5,753,160	
2010/01		0.70	0.8643	0.8643		120	47.65	5,222,299	5,802,840	
2010/07		0.65	0.7107	0.7107		120	44.93	5,242,009	5,844,120	
2011/01		0.65	0.9198	0.9198		120	44.93	5,267,613	5,897,880	
2011/07		0.60	0.9028	0.9028		120	45.89	5,291,421	5,951,160	
2012/01		0.60	0.3865	0.3865		120	41.85	5,300,758	5,974,200	
2012/07		0.55	0.9417	0.9417		120	41.85	5,321,647	6,030,480	
2013/01		0.55	0.4901	0.4901		120	41.85	5,332,564	6,060,000	
2013/07		0.50	0.6196	0.6196		120	41.85	5,345,134	6,097,560	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.50	0.8564	0.8564		120	41.85	5,362,550	6,149,760	
2014/07		0.45	1.2383	1.2383		120	41.85	5,385,286	6,225,960	
2015/01		0.45	0.7571	0.7571		120	47.91	5,401,268	6,273,120	
2015/09		0.40	1.5736	1.5736		120	47.91	5,430,881	6,371,880	
2016/09		0.35	1.9890	1.9890		120	51.40	5,466,216	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 043880123120150101201504252016131242



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Crestview Rehabilitation Center

Type of Cost Report: **Prospective** Type of Cost: **Actual** Type of Rate: **Prospective**

Type of Ownership: **Proprietary : Corporation** CHOW Status based on this Cost Report: **No Change**

Provider Information	Cost Report	Patient Days	Ratings Days
1849 FIRST AVENUE EAST	1/1/2014-12/31/2014	Number of Beds: 180	Superior: 0
CRESTVIEW, FL 32539	Days in CR 365	Maximum: 65,700	Standard: 366
County: Okaloosa [46]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 46,990	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,606	Inflation
Current Class North Large	Initial CR? False	Medicaid: 33,020	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	70.27027%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	71.52207%	Cost: 1.07573004
Open Date: 10/01/1970	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1970	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 05/01/1979	Low Occupancy Adjustment Factor:	90.45183%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 251101			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,235,669	2,458,720	1,186,377	767,385		5,648,151
1a	Audit Adjustments						
2	Cost Per Diem	37.4218	74.4615	35.9290	23.2400		171.0523
3	Cost Per Diem Inflated	40.2558	79.0358	38.6499			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	40.2558	79.0358	38.6499	23.2400		181.1815
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	59.5908		62.5231			
7	Provider Target Rate	62.9057		66.0011			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	54.6858		61.3748			
10b	Base for line 10a	51.8040		58.1406			
11	Lesser of 5,7,8,10, 10a	40.2558	79.0358	38.6499	13.6500		171.5915
12/13	Medicaid Adjustment Rate		1.8023	0.8814			
14	Prospective Per Diem 11	40.2558	80.8381	39.5313	13.6500		174.2752
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Crestview Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/30/1987	Amount:	2,761,778.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Variable	80% Capital(1):	4,083,682	7.9976
Indexed Asset Value	5,104,603	<60% of Base:	False	20% ROE(2):	1,020,921	0.3921
FRVS Base Asset:	2,097,280	Interest Rate:	11.5000%	Insurance Cost(3):	39,903	0.8492
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	25,682	0.5465
ROE Factor	0.022710	Amortization Rate:	10.0000%	Home Office(3):	10,296	0.2191
		Interest Only:	False	Replacement(3&4):	39,005	0.0000
		Yearly Payment:	472,901	Total FRVS PD:		10.0045

(1) 80% Capital (\$4,083,682) amortized at 10.0000 % for 20 years Principal & Interest of \$472,901 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$7.9976

(2) 20% ROE (\$1,020,921) times the ROE factor (0.022710) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.3921

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	40.2558	40.2558	1.8264	38.4294
Direct Care	80.8381	80.8381	3.6676	77.1705
Indirect Care	39.5313	39.5313	1.7935	37.7378
Property	13.6500	10.0045	0.4539	9.5506
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.6217
Supplemental Rate				8.1814
Totals	174.2752	170.6297	7.7414	190.6914

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	468,527	0.00				120	100.00	468,527	1,231,320	
1972/01		0.10	3.9787	3.0000	0.9787	120	100.00	469,933	1,280,280	
1972/07		0.10	5.9113	3.0000	2.9113	120	100.00	471,343	1,343,400	
1973/01		0.20	8.0622	3.0000	5.0622	120	100.00	474,171	1,412,640	
1973/07		0.20	10.7186	3.0000	7.7186	120	100.00	477,016	1,492,560	
1974/01		0.30	12.9457	3.0000	9.9457	120	100.00	481,309	1,570,560	
1974/07		0.30	13.0494	3.0000	10.0494	120	100.00	485,641	1,619,280	
1975/01		0.40	13.1399	3.0000	10.1399	120	100.00	491,469	1,669,320	
1975/07		0.40	14.2033	3.0000	11.2033	120	100.00	497,367	1,737,240	
1976/01		0.50	15.2478	3.0000	12.2478	120	100.00	504,828	1,807,440	
1976/07		0.50	15.7330	3.0000	12.7330	120	100.00	512,400	1,870,440	
1977/01		0.60	16.4836	3.0000	13.4836	120	100.00	521,623	1,940,640	
1977/07		0.60	18.5412	3.0000	15.5412	120	100.00	531,012	2,038,680	
1978/01		0.70	20.2809	3.0000	17.2809	120	100.00	542,163	2,135,400	
1978/07		0.70	22.8203	3.0000	19.8203	120	100.00	553,548	2,253,600	
1979/01		0.80	24.9476	3.0000	21.9476	120	100.00	566,833	2,369,160	
1979/07		0.80	26.1458	3.0000	23.1458	120	100.00	580,437	2,468,640	
1980/01		0.90	29.3115	3.0000	26.3115	120	55.00	596,109	2,620,920	
1980/07		0.90	30.1222	3.0000	27.1222	120	55.00	612,204	2,720,760	
1981/01		1.00	30.9462	3.0000	27.9462	120	84.07	630,570	2,824,800	
1981/07		1.00	30.5350	3.0000	27.5350	120	84.07	649,487	2,897,880	
1982/01		1.00	30.2110	3.0000	27.2110	120	84.29	668,972	2,975,520	
1982/07		1.00	29.5087	3.0000	26.5087	120	84.29	689,041	3,043,800	
1983/04	79,181	1.00	29.1375	3.0000	26.1375	120	83.46	788,893	3,123,840	
1983/07		1.00	30.0953	3.0000	27.0953	120	83.46	812,560	3,247,440	
1984/01	1,082,371	1.00	28.3905	3.0000	25.3905	120	79.62	1,919,308	3,289,560	
1984/07		1.00	27.3084	3.0000	24.3084	120	79.62	1,976,887	3,352,680	
1985/01		1.00	25.4555	3.0000	22.4555	120	83.46	2,036,194	3,391,080	
1985/10		1.00	23.3077	3.0000	20.3077	120	79.62	2,097,280	3,420,000	
1986/01		1.00	21.1376	3.0000	18.1376	120	79.62	2,160,198	3,448,440	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07		1.00	18.4350	3.0000	15.4350	120	79.11	2,225,004	3,441,840	
1987/01		1.00	16.4441	3.0000	13.4441	120	82.41	2,291,754	3,503,400	
1987/07		1.00	14.3448	3.0000	11.3448	120	82.41	2,360,507	3,530,760	
1988/01		1.00	12.2455	3.0000	9.2455	120	82.41	2,431,322	3,559,440	
1988/07		1.00	9.8354	3.0000	6.8354	120	82.41	2,504,262	3,557,520	
1989/01		1.00	7.4253	3.0000	4.4253	120	82.41	2,579,390	3,578,520	
1989/07		1.00	5.0152	3.0000	2.0152	120	81.07	2,656,772	3,602,760	
1990/01		1.00	2.6051	2.6051		120	80.52	2,725,984	3,620,880	
1990/07		1.00	0.5899	0.5899		120	80.52	2,742,065	3,642,240	
1991/01	1,088,011	1.00	0.5899	0.5899		180	81.16	3,846,251	5,495,400	
1991/07		1.00	1.4932	1.4932		180	81.16	3,903,683	5,577,480	
1992/01		0.95	2.0117	2.0117		180	81.16	3,903,683	5,689,620	5
1992/07		0.95	1.8152	1.8152		180	88.18	3,978,286	5,792,940	5
1993/01		0.90	1.7710	1.7710		180	89.01	4,046,888	5,895,540	5
1993/07		0.90	1.5329	1.5329		180	89.01	4,168,112	5,985,900	
1994/01		0.85	1.6983	1.6983		180	89.01	4,228,283	6,087,600	
1994/07		0.85	1.5991	1.5991		180	81.39	4,285,754	6,184,980	
1995/01		0.80	1.5812	1.5812		180	81.39	4,339,969	6,282,720	
1995/07		0.80	1.5250	1.5250		180	81.39	4,392,917	6,378,480	
1996/01		0.75	1.7228	1.7228		180	81.39	4,449,678	6,488,460	
1996/07		0.75	1.3294	1.3294		180	81.69	4,494,046	6,574,680	
1997/01		0.70	1.4109	1.4109		180	81.69	4,538,429	6,667,380	
1997/07		0.70	1.0917	1.0917		180	86.46	4,573,112	6,740,100	
1998/01		0.65	1.1663	1.1663		180	86.46	4,607,781	6,818,760	
1998/07		0.65	1.0794	1.0794		180	85.50	4,640,109	6,892,380	
1999/01		0.60	1.4499	1.4499		180	85.50	4,680,473	6,992,280	
1999/07		0.60	1.2299	1.2299		180	79.10	4,715,010	7,078,320	
2000/01		0.55	1.3356	1.3356		180	79.10	4,749,646	7,172,820	
2000/07		0.55	1.1129	1.1129		180	81.95	4,778,719	7,252,560	
2001/01		0.50	1.2976	1.2976		180	79.87	4,809,723	7,346,700	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		0.50	0.9615	0.9615		180	79.87	4,832,848	7,417,260	
2002/01		0.45	1.0301	1.0301		180	79.87	4,855,248	7,493,580	
2002/07		0.45	0.8337	0.8337		180	79.87	4,873,465	7,556,040	
2003/01		0.40	1.3271	1.3271		180	78.26	4,899,333	7,656,300	
2003/07		0.40	1.1664	1.1664		180	78.26	4,922,193	7,745,580	
2004/01		0.35	1.1103	1.1103		180	79.57	4,941,321	7,831,620	
2004/07		0.35	0.8378	0.8378		180	79.57	4,955,809	7,897,320	
2005/01		0.30	0.8595	0.8595		180	81.05	4,968,590	7,965,180	
2005/07		0.30	0.7364	0.7364		180	81.05	4,979,566	8,023,860	
2006/01		0.25	0.9068	0.9068		180	81.05	4,990,855	8,096,580	
2006/07	56,720	0.25	0.8133	0.8133		180	73.60	5,057,721	8,162,460	
2007/01		0.20	1.0133	1.0133		180	70.38	5,067,973	8,245,080	
2007/07		0.20	1.1050	1.1050		180	70.38	5,079,173	8,336,160	
2008/01		0.15	0.8556	0.8556		180	70.38	5,085,690	8,407,440	
2008/07		0.15	0.6104	0.6104		180	65.30	5,090,348	8,458,740	
2009/01		0.10	1.3268	1.3268		180	69.08	5,097,103	8,571,060	
2009/07		0.10	0.6841	0.6841		180	69.08	5,100,589	8,629,740	
2010/01		0.05	0.8643	0.8643		180	65.66	5,102,792	8,704,260	
2010/07		0.05	0.7107	0.7107		180	65.66	5,104,603	8,766,180	
2011/01		0.00	0.9198	0.9198		180	65.66	5,104,603	8,846,820	
2011/07		0.00	0.9028	0.9028		180	65.28	5,104,603	8,926,740	
2012/01		0.00	0.3865	0.3865		180	69.27	5,104,603	8,961,300	
2012/07		0.00	0.9417	0.9417		180	69.27	5,104,603	9,045,720	
2013/01		0.00	0.4901	0.4901		180	69.27	5,104,603	9,090,000	
2013/07		0.00	0.6196	0.6196		180	69.27	5,104,603	9,146,340	
2014/01		0.00	0.8564	0.8564		180	69.27	5,104,603	9,224,640	
2014/07		0.00	1.2383	1.2383		180	69.27	5,104,603	9,338,940	
2015/01		0.00	0.7571	0.7571		180	73.49	5,104,603	9,409,680	
2015/09		0.00	1.5736	1.5736		180	73.49	5,104,603	9,557,820	
2016/09		0.00	1.9890	1.9890		180	70.27	5,104,603	9,747,900	

Message Code:

5 Uncorrected Licensure Deficiency



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Fort Walton Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1 LBJ SR DRIVE	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
FORT WALTON BEACH, FL 32	Days in CR 365	Maximum: 43,800	Standard: 366
County: Okaloosa [46]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 33,966	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,810	Inflation
Current Class North Large	Initial CR? False	Medicaid: 17,663	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	52.00200%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	77.54795%	Cost: 1.07573004
Open Date: 08/01/1960	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1960	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 03/01/1982	Low Occupancy Adjustment Factor:	98.07258%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 229237			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	730,894	1,432,157	751,738	237,391		3,152,180	
1a	Audit Adjustments							
2	Cost Per Diem	41.3799	81.0823	42.5600	13.4400		178.4622	
3	Cost Per Diem Inflated	44.5136	86.0634	45.7831				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.5136	86.0634	45.7831	13.4400		189.8001	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.5125		63.5224				
7	Provider Target Rate	64.9343		67.0560				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	55.3787		63.9736				
10b	Base for line 10a	52.4604		60.6024				
11	Lesser of 5,7,8,10, 10a	44.5136	86.0634	45.7831	13.4400		189.8001	
12/13	Medicaid Adjustment Rate		0.1938	0.1031				
14	Prospective Per Diem 11	44.5136	86.2572	45.8862	13.4400		190.0970	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Fort Walton Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/08/1987	Amount:	2,880,000.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Variable	80% Capital(1):	4,011,405	12.1915
Indexed Asset Value	5,014,256	<60% of Base:	False	20% ROE(2):	1,002,851	0.5777
FRVS Base Asset:	2,711,737	Interest Rate:	11.5000%	Insurance Cost(3):	31,834	0.9372
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	24,896	0.7330
ROE Factor	0.022710	Amortization Rate:	10.5000%	Home Office(3):	7,442	0.2191
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	480,589	Total FRVS PD:		14.6585

(1) 80% Capital (\$4,011,405) amortized at 10.5000 % for 20 years Principal & Interest of \$480,589 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$12.1915

(2) 20% ROE (\$1,002,851) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5777

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.5136	44.5136	2.0196	42.4940
Direct Care	86.2572	86.2572	3.9134	82.3438
Indirect Care	45.8862	45.8862	2.0818	43.8044
Property	13.4400	14.6585	0.6650	13.9935
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.3762
Supplemental Rate				8.1814
Totals	190.0970	191.3155	8.6798	209.1933

Medicaid Trend Adjustment



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1971/07	1,727,942	0.00				120	100.00	1,727,942	1,231,320	
1972/01		0.10	3.9787	3.0000	0.9787	120	100.00	1,733,126	1,280,280	
1972/07		0.10	5.9113	3.0000	2.9113	120	100.00	1,738,325	1,343,400	
1973/01		0.20	8.0622	3.0000	5.0622	120	100.00	1,748,755	1,412,640	
1973/07		0.20	10.7186	3.0000	7.7186	120	100.00	1,759,248	1,492,560	
1974/01		0.30	12.9457	3.0000	9.9457	120	100.00	1,775,081	1,570,560	
1974/07		0.30	13.0494	3.0000	10.0494	120	100.00	1,791,057	1,619,280	
1975/01		0.40	13.1399	3.0000	10.1399	120	100.00	1,812,550	1,669,320	
1975/07		0.40	14.2033	3.0000	11.2033	120	100.00	1,834,301	1,737,240	
1976/01		0.50	15.2478	3.0000	12.2478	120	100.00	1,861,816	1,807,440	
1976/07		0.50	15.7330	3.0000	12.7330	120	100.00	1,889,743	1,870,440	
1977/01		0.60	16.4836	3.0000	13.4836	120	100.00	1,923,758	1,940,640	
1977/07		0.60	18.5412	3.0000	15.5412	120	100.00	1,958,386	2,038,680	
1978/01		0.70	20.2809	3.0000	17.2809	120	100.00	1,999,512	2,135,400	
1978/07		0.70	22.8203	3.0000	19.8203	120	100.00	2,041,502	2,253,600	
1979/01		0.80	24.9476	3.0000	21.9476	120	100.00	2,090,498	2,369,160	
1979/07		0.80	26.1458	3.0000	23.1458	120	100.00	2,140,670	2,468,640	
1980/01		0.90	29.3115	3.0000	26.3115	120		2,140,670	2,620,920	
1980/07		0.90	30.1222	3.0000	27.1222	120		2,140,670	2,720,760	
1981/01		1.00	30.9462	3.0000	27.9462	120		2,140,670	2,824,800	
1981/07		1.00	30.5350	3.0000	27.5350	120		2,140,670	2,897,880	
1982/01		1.00	30.2110	3.0000	27.2110	120	80.75	2,204,890	2,975,520	
1982/07		1.00	29.5087	3.0000	26.5087	120	80.75	2,271,037	3,043,800	
1983/04		1.00	29.1375	3.0000	26.1375	120	80.75	2,339,168	3,123,840	
1983/07		1.00	30.0953	3.0000	27.0953	120	80.75	2,409,343	3,247,440	
1984/01		1.00	28.3905	3.0000	25.3905	120	79.74	2,481,623	3,289,560	
1984/07		1.00	27.3084	3.0000	24.3084	120	79.74	2,556,072	3,352,680	
1985/01		1.00	25.4555	3.0000	22.4555	120	80.75	2,632,754	3,391,080	
1985/10		1.00	23.3077	3.0000	20.3077	120	75.37	2,711,737	3,420,000	
1986/01		1.00	21.1376	3.0000	18.1376	120	78.26	2,793,089	3,448,440	



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1986/07		1.00	18.4350	3.0000	15.4350	120	75.37	2,876,882	3,441,840	
1987/01		1.00	16.4441	3.0000	13.4441	120	78.26	2,963,188	3,503,400	
1987/07	188,419	1.00	14.3448	3.0000	11.3448	120	78.26	3,240,503	3,530,760	
1988/01		1.00	12.2455	3.0000	9.2455	120	80.04	3,337,718	3,559,440	
1988/07		1.00	9.8354	3.0000	6.8354	120	80.04	3,437,850	3,557,520	
1989/01		1.00	7.4253	3.0000	4.4253	120	80.04	3,540,986	3,578,520	
1989/07	21,089	1.00	5.0152	3.0000	2.0152	120	80.45	3,668,305	3,602,760	
1990/01		1.00	2.6051	2.6051		120	79.21	3,763,868	3,620,880	
1990/07	24,513	1.00	0.5899	0.5899		120	79.21	3,810,584	3,642,240	
1991/01		1.00	0.5899	0.5899		120	79.21	3,833,063	3,663,600	
1991/07		1.00	1.4932	1.4932		120	76.24	3,890,298	3,718,320	
1992/01		0.95	2.0117	2.0117		120	79.88	3,964,645	3,793,080	
1992/07		0.95	1.8152	1.8152		120	79.88	4,033,011	3,861,960	
1993/01		0.90	1.7710	1.7710		120	76.58	4,097,293	3,930,360	
1993/07		0.90	1.5329	1.5329		120	76.58	4,153,819	3,990,600	
1994/01		0.85	1.6983	1.6983		120	76.58	4,213,784	4,058,400	
1994/07	17,949	0.85	1.5991	1.5991		120	71.41	4,289,007	4,123,320	
1995/01		0.80	1.5812	1.5812		120	71.41	4,343,263	4,188,480	
1995/07		0.80	1.5250	1.5250		120	71.41	4,396,251	4,252,320	
1996/01		0.75	1.7228	1.7228		120	71.41	4,453,055	4,325,640	
1996/07		0.75	1.3294	1.3294		120	71.41	4,453,055	4,383,120	3
1997/01		0.70	1.4109	1.4109		120	71.41	4,453,055	4,444,920	3
1997/07		0.70	1.0917	1.0917		120	67.55	4,487,085	4,493,400	
1998/01		0.65	1.1663	1.1663		120	67.55	4,521,102	4,545,840	
1998/07		0.65	1.0794	1.0794		120	74.99	4,552,822	4,594,920	
1999/01		0.60	1.4499	1.4499		120	74.99	4,592,427	4,661,520	
1999/07		0.60	1.2299	1.2299		120	79.47	4,626,315	4,718,880	
2000/01		0.55	1.3356	1.3356		120	79.47	4,660,300	4,781,880	
2000/07		0.55	1.1129	1.1129		120	80.12	4,688,826	4,835,040	
2001/01		0.50	1.2976	1.2976		120	67.26	4,719,247	4,897,800	



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2001/07		0.50	0.9615	0.9615		120	67.26	4,741,937	4,944,840	
2002/01		0.45	1.0301	1.0301		120	67.26	4,763,916	4,995,720	
2002/07		0.45	0.8337	0.8337		120	67.26	4,781,790	5,037,360	
2003/01		0.40	1.3271	1.3271		120	71.13	4,807,172	5,104,200	
2003/07		0.40	1.1664	1.1664		120	71.13	4,829,602	5,163,720	
2004/01		0.35	1.1103	1.1103		120	69.99	4,848,370	5,221,080	
2004/07		0.35	0.8378	0.8378		120	69.99	4,862,585	5,264,880	
2005/01		0.30	0.8595	0.8595		120	57.51	4,875,126	5,310,120	
2005/07		0.30	0.7364	0.7364		120	57.51	4,885,895	5,349,240	
2006/01		0.25	0.9068	0.9068		120	57.51	4,896,971	5,397,720	
2006/07	30,260	0.25	0.8133	0.8133		120	58.01	4,937,187	5,441,640	
2007/01		0.20	1.0133	1.0133		120	59.46	4,947,195	5,496,720	
2007/07		0.20	1.1050	1.1050		120	59.46	4,958,128	5,557,440	
2008/01		0.15	0.8556	0.8556		120	61.21	4,964,489	5,604,960	
2008/07		0.15	0.6104	0.6104		120	61.21	4,969,036	5,639,160	
2009/01		0.10	1.3268	1.3268		120	61.21	4,975,630	5,714,040	
2009/07		0.10	0.6841	0.6841		120	59.11	4,979,033	5,753,160	
2010/01		0.05	0.8643	0.8643		120	59.11	4,981,184	5,802,840	
2010/07		0.05	0.7107	0.7107		120	61.49	4,982,952	5,844,120	
2011/01		0.00	0.9198	0.9198		120	61.49	4,982,952	5,897,880	
2011/07		0.00	0.9028	0.9028		120	62.22	4,982,952	5,951,160	
2012/01		0.00	0.3865	0.3865		120	61.04	4,982,952	5,974,200	
2012/07		0.00	0.9417	0.9417		120	61.04	4,982,952	6,030,480	
2013/01		0.00	0.4901	0.4901		120	61.04	4,982,952	6,060,000	
2013/07		0.00	0.6196	0.6196		120	61.04	4,982,952	6,097,560	
2014/01		0.00	0.8564	0.8564		120	61.04	4,982,952	6,149,760	
2014/07		0.00	1.2383	1.2383		120	61.04	4,982,952	6,225,960	
2015/01	31,304	0.00	0.7571	0.7571		120	55.00	5,014,256	6,273,120	
2015/09		0.00	1.5736	1.5736		120	55.00	5,014,256	6,371,880	
2016/09		0.00	1.9890	1.9890		120	52.00	5,014,256	6,498,600	

Message Code:

3 Index Cost Limitation - January 1996



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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River Valley Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
17884 NE CROZIER ST	1/1/2014-12/31/2014	Number of Beds: 150	Superior: 0
BLOUNTSTOWN, FL 32424	Days in CR 365	Maximum: 54,750	Standard: 366
County: Calhoun [7]	First Used : 2016/09	Max Annualized: 54,750	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 45,383	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,010	Inflation
Current Class North Large	Initial CR? False	Medicaid: 40,352	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	88.91435%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	82.89132%	Cost: 1.07573004
Open Date: 05/01/1974	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/01/1974	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 12/01/1980	Low Occupancy Adjustment Factor:	104.83018%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 251097			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,596,493	2,899,108	1,396,190	970,466		6,862,257	
1a	Audit Adjustments							
2	Cost Per Diem	39.5642	71.8455	34.6003	24.0500		170.0600	
3	Cost Per Diem Inflated	42.5604	76.2591	37.2206				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.5604	76.2591	37.2206	24.0500		180.0901	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.2354		55.9450				
7	Provider Target Rate	56.1968		59.0571				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.3803		60.3780				
10b	Base for line 10a	51.5146		57.1963				
11	Lesser of 5,7,8,10, 10a	42.5604	76.2591	37.2206	13.6500		169.6901	
12/13	Medicaid Adjustment Rate		3.3385	1.6295				
14	Prospective Per Diem 11	42.5604	79.5976	38.8501	13.6500		174.6581	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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River Valley Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/01/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1974/01	Type:	None	80% Capital(1):	3,787,962	9.5575
Indexed Asset Value	4,734,953	<60% of Base:	True	20% ROE(2):	946,991	0.4365
FRVS Base Asset:	2,082,681	Interest Rate:	12.5000%	Insurance Cost(3):	40,128	0.8842
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	28,258	0.6227
ROE Factor	0.022710	Amortization Rate:	12.5000%	Home Office(3):	9,944	0.2191
		Interest Only:	True	Replacement(3&4):	97,150	0.0000
		Yearly Payment:	470,948	Total FRVS PD:		11.7200

(1) 80% Capital (\$3,787,962) amortized at 12.5000 % for 20 years Interest of \$470,948 divided by annual available days (54750) divided by Occup. Adj. (0.90) = \$9.5575

(2) 20% ROE (\$946,991) times the ROE factor (0.022710) divided by annual available days (54750) divided by Occup. Adj. (0.90) = \$0.4365

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.5604	42.5604	1.9309	40.6295
Direct Care	79.5976	79.5976	3.6113	75.9863
Indirect Care	38.8501	38.8501	1.7626	37.0875
Property	13.6500	11.7200	0.5317	11.1883
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.5913
Supplemental Rate				8.1814
Totals	174.6581	172.7281	7.8365	195.6643

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1974/01	174,781	0.00	5.2272	3.0000	2.2272	120	100.00	174,781	1,570,560	
1974/07		0.10	5.3308	3.0000	2.3308	120	100.00	175,305	1,619,280	
1975/01		0.10	5.4213	3.0000	2.4213	120	100.00	175,831	1,669,320	
1975/07	678,476	0.20	6.4847	3.0000	3.4847	120	100.00	855,362	1,737,240	
1976/01		0.20	7.5292	3.0000	4.5292	120	100.00	860,494	1,807,440	
1976/07	4,577	0.30	8.0145	3.0000	5.0145	120	100.00	872,815	1,870,440	
1977/01		0.30	8.7650	3.0000	5.7650	120	100.00	880,670	1,940,640	
1977/07	8,115	0.40	10.8226	3.0000	7.8226	120	100.00	899,353	2,038,680	
1978/01		0.40	12.5623	3.0000	9.5623	120	100.00	910,145	2,135,400	
1978/07	15,500	0.50	15.1018	3.0000	12.1018	120	100.00	939,297	2,253,600	
1979/01	7,630	0.50	17.2290	3.0000	14.2290	120	100.00	961,016	2,369,160	
1979/07		0.60	18.4272	3.0000	15.4272	120	100.00	978,314	2,468,640	
1980/01		0.60	21.5930	3.0000	18.5930	120	55.00	995,924	2,620,920	
1980/07	3,325	0.70	22.4036	3.0000	19.4036	120	55.00	1,020,163	2,720,760	
1981/01		0.70	23.2276	3.0000	20.2276	120	94.58	1,041,586	2,824,800	
1981/07	6,907	0.80	22.8164	3.0000	19.8164	120	94.58	1,073,491	2,897,880	
1982/01	500	0.80	22.4924	3.0000	19.4924	120	90.95	1,099,755	2,975,520	
1982/07		0.90	21.7901	3.0000	18.7901	120	90.95	1,129,448	3,043,800	
1983/04		0.90	21.4189	3.0000	18.4189	120	88.60	1,159,943	3,123,840	
1983/07	59,391	1.00	22.3767	3.0000	19.3767	120	88.60	1,254,132	3,247,440	
1984/01		1.00	20.6719	3.0000	17.6719	120	89.25	1,291,756	3,289,560	
1984/07	632,617	1.00	19.5898	3.0000	16.5898	120	89.25	1,963,126	3,352,680	
1985/01		1.00	17.7369	3.0000	14.7369	120	89.25	2,022,020	3,391,080	
1985/10		1.00	15.5891	3.0000	12.5891	120	89.25	2,082,681	3,420,000	
1986/01		1.00	13.4190	3.0000	10.4190	120	85.21	2,145,161	3,448,440	
1986/07		1.00	10.7164	3.0000	7.7164	120	85.21	2,209,516	3,441,840	
1987/01		1.00	8.7255	3.0000	5.7255	120	85.21	2,275,801	3,503,400	
1987/07		1.00	6.6262	3.0000	3.6262	120	82.33	2,344,075	3,530,760	
1988/01		1.00	4.5269	3.0000	1.5269	120	83.05	2,414,397	3,559,440	
1988/07		1.00	2.1168	2.1168		120	83.05	2,465,505	3,557,520	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1989/01		1.00	0.5899	0.5899		120	83.05	2,480,049	3,578,520	
1989/07		1.00	0.5899	0.5899		120	85.43	2,494,679	3,602,760	
1990/01		1.00	0.5899	0.5899		120	84.61	2,509,395	3,620,880	
1990/07		1.00	0.5899	0.5899		120	84.61	2,524,198	3,642,240	
1991/01	785,777	1.00	0.5899	0.5899		120	82.29	3,324,865	3,663,600	
1991/07		1.00	1.4932	1.4932		120	82.29	3,374,512	3,718,320	
1992/01		1.00	2.0117	2.0117		120	87.24	3,374,512	3,793,080	5
1992/07		1.00	1.8152	1.8152		120	87.24	3,504,883	3,861,960	
1993/01	33,940	1.00	1.7710	1.7710		120	85.37	3,538,823	3,930,360	5
1993/07		1.00	1.5329	1.5329		120	85.37	3,656,092	3,990,600	
1994/01		1.00	1.6983	1.6983		120	85.37	3,718,183	4,058,400	
1994/07		0.95	1.5991	1.5991		120	85.37	3,774,666	4,123,320	
1995/01		0.95	1.5812	1.5812		120	85.37	3,831,365	4,188,480	
1995/07		0.90	1.5250	1.5250		150	85.37	3,883,950	5,315,400	
1996/01		0.90	1.7228	1.7228		150	84.13	3,944,171	5,407,050	
1996/07		0.85	1.3294	1.3294		150	86.54	3,988,740	5,478,900	
1997/01		0.85	1.4109	1.4109		150	86.54	4,036,577	5,556,150	
1997/07		0.80	1.0917	1.0917		150	82.68	4,071,832	5,616,750	
1998/01		0.80	1.1663	1.1663		150	82.68	4,109,822	5,682,300	
1998/07		0.75	1.0794	1.0794		150	82.68	4,143,095	5,743,650	
1999/01		0.75	1.4499	1.4499		150	82.68	4,188,147	5,826,900	
1999/07		0.70	1.2299	1.2299		150	82.68	4,224,203	5,898,600	
2000/01		0.70	1.3356	1.3356		150	82.68	4,263,695	5,977,350	
2000/07		0.65	1.1129	1.1129		150	85.01	4,294,539	6,043,800	
2001/01		0.65	1.2976	1.2976		150	87.87	4,330,759	6,122,250	
2001/07		0.60	0.9615	0.9615		150	87.87	4,355,743	6,181,050	
2002/01		0.60	1.0301	1.0301		150	87.87	4,382,666	6,244,650	
2002/07		0.55	0.8337	0.8337		150	87.87	4,402,761	6,296,700	
2003/01	30,389	0.55	1.3271	1.3271		150	85.13	4,465,286	6,380,250	
2003/07		0.50	1.1664	1.1664		150	85.13	4,491,328	6,454,650	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2004/01		0.50	1.1103	1.1103		150	86.92	4,516,264	6,526,350	
2004/07		0.45	0.8378	0.8378		150	86.92	4,533,290	6,581,100	
2005/01		0.45	0.8595	0.8595		150	85.74	4,550,825	6,637,650	
2005/07		0.40	0.7364	0.7364		150	85.74	4,564,232	6,686,550	
2006/01		0.40	0.9068	0.9068		150	85.74	4,580,786	6,747,150	
2006/07	39,046	0.35	0.8133	0.8133		150	84.46	4,632,873	6,802,050	
2007/01		0.35	1.0133	1.0133		150	80.83	4,649,306	6,870,900	
2007/07		0.30	1.1050	1.1050		150	80.83	4,664,718	6,946,800	
2008/01		0.30	0.8556	0.8556		150	80.83	4,676,692	7,006,200	
2008/07		0.25	0.6104	0.6104		150	82.66	4,683,829	7,048,950	
2009/01		0.25	1.3268	1.3268		150	82.66	4,699,365	7,142,550	
2009/07		0.20	0.6841	0.6841		150	81.86	4,705,794	7,191,450	
2010/01		0.20	0.8643	0.8643		150	81.86	4,713,930	7,253,550	
2010/07		0.15	0.7107	0.7107		150	78.14	4,718,955	7,305,150	
2011/01		0.15	0.9198	0.9198		150	78.14	4,725,467	7,372,350	
2011/07		0.10	0.9028	0.9028		150	79.70	4,729,734	7,438,950	
2012/01		0.10	0.3865	0.3865		150	81.56	4,731,564	7,467,750	
2012/07		0.05	0.9417	0.9417		150	81.56	4,733,793	7,538,100	
2013/01		0.05	0.4901	0.4901		150	81.56	4,734,953	7,575,000	
2013/07		0.00	0.6196	0.6196		150	81.56	4,734,953	7,621,950	
2014/01		0.00	0.8564	0.8564		150	81.56	4,734,953	7,687,200	
2014/07		0.00	1.2383	1.2383		150	81.56	4,734,953	7,782,450	
2015/01		0.00	0.7571	0.7571		150	83.66	4,734,953	7,841,400	
2015/09		0.00	1.5736	1.5736		150	83.66	4,734,953	7,964,850	
2016/09		0.00	1.9890	1.9890		150	88.91	4,734,953	8,123,250	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 044889123120140101201403272015153338



Florida Agency for Health Care Administration
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247.52

Plantation Key Nursing Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
48 HIGH POINT ROAD	8/1/2013-7/31/2014	Number of Beds: 120	Superior: 0
TAVERNIER, FL 33070	Days in CR 365	Maximum: 43,800	Standard: 366
County: Monroe [44]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 17,733	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,425	Inflation
Current Class South Large	Initial CR? False	Medicaid: 11,154	FY Index: 1.32622051
Class at 1/94: South Large	Medicaid Utilization	62.89968%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	40.48630%	Cost: 1.08847242
Open Date: 10/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22383277
Entered Medicaid 10/01/1984	Low Occupancy Adjustment Factor:	51.20182%	DC Sem Index: 1.30450000
Med # Active Date: 12/19/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06591361
Previous Med # 208906			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	648,336	819,607	614,444	1,133,358		3,215,745	
1a	Audit Adjustments							
2	Cost Per Diem	58.1259	73.4810	55.0873	101.6100		288.3042	
3	Cost Per Diem Inflated	63.2684	78.3244	59.9610				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	63.2684	78.3244	59.9610	101.6100		303.1638	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	74.4835		85.0080				
7	Provider Target Rate	78.6269		89.7368				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	63.4079		72.8297				
10b	Base for line 10a	60.0665		68.9918				
11	Lesser of 5,7,8,10, 10a	58.7902	78.3244	59.9610	13.6500		210.7256	
12/13	Medicaid Adjustment Rate		1.1367	0.8702				
14	Prospective Per Diem 11	58.7902	79.4611	60.8312	13.6500		212.7325	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Plantation Key Nursing Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/19/2011	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	None	80% Capital(1):	4,529,165	14.8612
Indexed Asset Value	5,661,456	<60% of Base:	True	20% ROE(2):	1,132,291	0.6552
FRVS Base Asset:	0	Interest Rate:	0.0000%	Insurance Cost(3):	210,603	11.8763
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	53,944	3.0420
ROE Factor	0.022810	Amortization Rate:	13.0000%	Home Office(3):	10,195	0.5749
		Interest Only:	True	Replacement(3&4):	0	0.0000
		Yearly Payment:	585,828	Total FRVS PD:		31.0096

(1) 80% Capital (\$4,529,165) amortized at 13.0000 % for 20 years Interest of \$585,828 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$14.8612

(2) 20% ROE (\$1,132,291) times the ROE factor (0.022810) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6552

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	79.4611	79.4611	3.6051	75.8560
Indirect Care	60.8312	60.8312	2.7599	58.0713
Property	13.6500	31.0096	1.4069	29.6027
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.6897
Supplemental Rate				8.1814
Totals	212.7325	230.0921	10.4392	247.5240

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/01	3,271,556	0.00	0.8299	0.8299		120	75.49	3,271,556	3,448,440	
1986/07		0.10	0.2974	0.2974		120	75.49	3,272,528	3,441,840	
1987/01		0.10	1.0091	1.0091		120	75.49	3,275,830	3,503,400	
1987/07		0.20	0.9007	0.9007		120	75.49	3,281,730	3,530,760	
1988/01		0.20	0.9007	0.9007		120	75.49	3,287,640	3,559,440	
1988/07	22,500	0.30	0.5899	0.5899		120	76.45	3,315,959	3,557,520	
1989/01		0.30	0.5899	0.5899		120	76.45	3,321,828	3,578,520	
1989/07	15,000	0.40	0.5899	0.5899		120	83.03	3,344,668	3,602,760	
1990/01		0.40	0.5899	0.5899		120	83.03	3,352,561	3,620,880	
1990/07	78,950	0.50	0.5899	0.5899		120	83.77	3,431,511	3,642,240	5
1991/01		0.50	0.5899	0.5899		120	83.77	3,441,401	3,663,600	5
1991/07	22,000	0.60	1.4932	1.4932		120	86.60	3,473,553	3,718,320	5
1992/01		0.60	2.0117	2.0117		120	86.60	3,504,475	3,793,080	5
1992/07		0.70	1.8152	1.8152		120	87.02	3,546,774	3,861,960	5
1993/01		0.70	1.7710	1.7710		120	87.02	3,591,839	3,930,360	5
1993/07		0.80	1.5329	1.5329		120	81.31	3,680,960	3,990,600	
1994/01		0.80	1.6983	1.6983		120	81.31	3,730,970	4,058,400	
1994/07	58,238	0.90	1.5991	1.5991		120	82.50	3,789,208	4,123,320	5
1995/01		0.90	1.5812	1.5812		120	82.50	3,897,592	4,188,480	
1995/07		1.00	1.5250	1.5250		120	82.50	3,897,592	4,252,320	5
1996/01		1.00	1.7228	1.7228		120	80.84	3,957,030	4,325,640	5
1996/07		1.00	1.3294	1.3294		120	81.31	4,025,202	4,383,120	5
1997/01		1.00	1.4109	1.4109		120	81.31	4,078,713	4,444,920	5
1997/07		1.00	1.0917	1.0917		120	78.52	4,181,416	4,493,400	
1998/01		1.00	1.1663	1.1663		120	78.52	4,181,416	4,545,840	5
1998/07		1.00	1.0794	1.0794		120	78.52	4,230,184	4,594,920	5
1999/01		1.00	1.4499	1.4499		120	79.22	4,337,840	4,661,520	
1999/07		1.00	1.2299	1.2299		120	72.96	4,391,191	4,718,880	
2000/01		1.00	1.3356	1.3356		120	72.96	4,449,840	4,781,880	
2000/07		1.00	1.1129	1.1129		120	72.96	4,499,362	4,835,040	



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247.52

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/01		1.00	1.2976	1.2976		120	82.32	4,557,746	4,897,800	
2001/07		1.00	0.9615	0.9615		120	77.99	4,601,569	4,944,840	
2002/01		1.00	1.0301	1.0301		120	77.99	4,648,970	4,995,720	
2002/07		1.00	0.8337	0.8337		120	75.26	4,687,728	5,037,360	
2003/01		1.00	1.3271	1.3271		120	75.26	4,749,939	5,104,200	
2003/07		1.00	1.1664	1.1664		120	73.45	4,805,342	5,163,720	
2004/01		1.00	1.1103	1.1103		120	73.45	4,858,696	5,221,080	
2004/07		1.00	0.8378	0.8378		120	72.94	4,899,402	5,264,880	
2005/01		1.00	0.8595	0.8595		120	72.94	4,941,512	5,310,120	
2005/07		1.00	0.7364	0.7364		120	72.94	4,977,901	5,349,240	
2006/01		1.00	0.9068	0.9068		120	77.42	5,023,041	5,397,720	
2006/07		0.95	0.8133	0.8133		120	77.42	5,061,849	5,441,640	
2007/01		0.95	1.0133	1.0133		120	77.84	5,061,849	5,496,720	5
2007/07		0.90	1.1050	1.1050		120	77.84	5,161,399	5,557,440	
2008/01		0.90	0.8556	0.8556		120	76.48	5,201,142	5,604,960	
2008/07		0.85	0.6104	0.6104		120	76.48	5,228,126	5,639,160	
2009/01		0.85	1.3268	1.3268		120	74.10	5,287,089	5,714,040	
2009/07		0.80	0.6841	0.6841		120	72.47	5,316,025	5,753,160	
2010/01		0.80	0.8643	0.8643		120	72.47	5,352,780	5,802,840	11
2010/07		0.80	0.8643	0.8643		120	72.47	5,352,780	5,844,120	11
2011/01		0.80	0.8643	0.8643		120	72.47	5,352,780	5,897,880	11
2011/07		0.80	0.9028	0.9028		120	59.28	5,352,780	5,951,160	12
2012/01		0.75	0.3865	0.3865		120	59.28	5,368,298	5,974,200	
2012/07		0.75	0.9417	0.9417		120	59.28	5,406,214	6,030,480	
2013/01		0.70	0.4901	0.4901		120	59.28	5,424,763	6,060,000	
2013/07		0.70	0.6196	0.6196		120	59.28	5,448,290	6,097,560	
2014/01		0.65	0.8564	0.8564		120	59.28	5,478,621	6,149,760	
2014/07		0.65	1.2383	1.2383		120	59.28	5,522,718	6,225,960	
2015/01		0.60	0.7571	0.7571		120	59.28	5,547,808	6,273,120	
2015/09		0.60	1.5736	1.5736		120	59.28	5,600,190	6,371,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2016/09		0.55	1.9890	1.9890		120	62.90	5,661,456	6,498,600	

Message Code:

- 5 Uncorrected Licensure Deficiency
- 11 Not in Medicaid
- 12 Re-Entry to Medicaid

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 044975073120140801201310222015115206



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262.33

Homestead Manor A Palace Community

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1330 NW 1ST AVE	7/1/2014-12/31/2014	Number of Beds: 88	Superior: 0
HOMESTEAD, FL 33030	Days in CR 184	Maximum: 11,824	Standard: 366
County: Dade [13]	First Used : 2015/09	Max Annualized: 32,120	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 11,763	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 658	Inflation
Current Class South Small	Initial CR? False	Medicaid: 8,848	FY Index: 1.35002422
Class at 1/94: South Small	Medicaid Utilization	75.21891%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	99.48410%	Cost: 1.06928041
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	125.81457%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 212121			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	535,665	772,601	554,015	182,269		2,044,550	
1a	Audit Adjustments							
2	Cost Per Diem	60.5408	87.3193	62.6147	20.6000		231.0748	
3	Cost Per Diem Inflated	64.7351	92.2332	66.9527				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	64.7351	92.2332	66.9527	20.6000		244.5210	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	88.8240		74.6481				
7	Provider Target Rate	93.7651		78.8006				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	66.4080		79.5480				
10b	Base for line 10a	62.9085		75.3561				
11	Lesser of 5,7,8,10, 10a	64.7351	92.2332	66.9527	13.6500		237.5710	
12/13	Medicaid Adjustment Rate		2.6168	1.8995				
14	Prospective Per Diem 11	64.7351	94.8500	68.8522	13.6500		242.0873	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Homestead Manor A Palace Community

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 11/01/2011		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	2,891,831	8.3596
Indexed Asset Value	3,614,789	<60% of Base:	False	20% ROE(2):	722,958	0.5522
FRVS Base Asset:	1,361,312	Interest Rate:	5.6500%	Insurance Cost(3):	20,852	1.7727
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	13,906	1.1822
ROE Factor	0.022080	Amortization Rate:	5.6500%	Home Office(3):	17,051	1.4495
		Interest Only:	False	Replacement(3&4):	5,073	0.0000
		Yearly Payment:	241,660	Total FRVS PD:		13.3162

(1) 80% Capital (\$2,891,831) amortized at 5.6500 % for 20 years Principal & Interest of \$241,660 divided by annual available days (32120) divided by Occup. Adj. (0.90) = \$8.3596

(2) 20% ROE (\$722,958) times the ROE factor (0.022080) divided by annual available days (32120) divided by Occup. Adj. (0.90) = \$0.5522

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 54	Effective PBS Limitation	1,539,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	64.7351	64.7351	2.9370	61.7981
Direct Care	94.8500	94.8500	4.3033	90.5467
Indirect Care	68.8522	68.8522	3.1238	65.7284
Property	13.6500	13.3162	0.6041	12.7121
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.3658
Supplemental Rate				8.1814
Totals	242.0873	241.7535	10.9682	262.3325

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/04	1,310,180	0.00	2.6288	2.6288		54	2.93	1,310,180	1,405,728	
1983/07		0.10	3.9578	3.0000	0.9578	54	2.93	1,310,180	1,461,348	
1984/01	40,730	0.10	2.2530	2.2530		54	32.07	1,352,631	1,480,302	
1984/07		0.20	1.9179	1.9179		54	32.07	1,355,656	1,508,706	
1985/01		0.20	1.1471	1.1471		54	47.26	1,358,328	1,525,986	
1985/10		0.30	0.8522	0.8522		54	47.26	1,361,312	1,539,000	
1986/01		0.30	0.8299	0.8299		54	47.26	1,364,225	1,551,798	
1986/07		0.40	0.2974	0.2974		54	47.26	1,365,620	1,548,828	
1987/01		0.40	1.0091	1.0091		54	47.26	1,370,356	1,576,530	
1987/07		0.50	0.9007	0.9007		54	53.00	1,376,304	1,588,842	
1988/01		0.50	0.9007	0.9007		54	53.00	1,382,277	1,601,748	
1988/07		0.60	0.5899	0.5899		54	53.00	1,386,991	1,600,884	
1989/01		0.60	0.5899	0.5899		54	53.00	1,391,721	1,610,334	
1989/07	37,495	0.70	0.5899	0.5899		54	59.49	1,434,962	1,621,242	
1990/01		0.70	0.5899	0.5899		54	59.49	1,440,887	1,629,396	
1990/07		0.80	0.5899	0.5899		54	59.49	1,447,687	1,639,008	
1991/01		0.80	0.5899	0.5899		54	59.49	1,447,687	1,648,620	5
1991/07		0.90	1.4932	1.4932		54	59.49	1,474,066	1,673,244	
1992/01		0.90	2.0117	2.0117		54	59.49	1,474,066	1,706,886	5
1992/07		1.00	1.8152	1.8152		54	69.33	1,527,996	1,737,882	
1993/01	27,448	1.00	1.7710	1.7710		54	64.23	1,582,505	1,768,662	
1993/07		1.00	1.5329	1.5329		54	64.23	1,606,763	1,795,770	
1994/01		1.00	1.6983	1.6983		54	64.23	1,634,051	1,826,280	
1994/07		1.00	1.5991	1.5991		54	64.23	1,660,181	1,855,494	
1995/01		1.00	1.5812	1.5812		54	64.23	1,686,432	1,884,816	
1995/07		1.00	1.5250	1.5250		54	72.54	1,712,150	1,913,544	
1996/01		1.00	1.7228	1.7228		54	72.54	1,741,647	1,946,538	
1996/07		1.00	1.3294	1.3294		54	72.54	1,764,800	1,972,404	
1997/01		1.00	1.4109	1.4109		54	72.54	1,789,700	2,000,214	
1997/07		1.00	1.0917	1.0917		54	72.54	1,809,238	2,022,030	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01		1.00	1.1663	1.1663		54	72.54	1,830,339	2,045,628	
1998/07		1.00	1.0794	1.0794		54	82.67	1,850,096	2,067,714	
1999/01		1.00	1.4499	1.4499		54	82.67	1,876,921	2,097,684	
1999/07		1.00	1.2299	1.2299		54	80.63	1,900,005	2,123,496	
2000/01		1.00	1.3356	1.3356		54	80.63	1,925,381	2,151,846	
2000/07		1.00	1.1129	1.1129		54	78.34	1,946,809	2,175,768	
2001/01		1.00	1.2976	1.2976		54	78.34	1,972,071	2,204,010	
2001/07		1.00	0.9615	0.9615		54	71.60	1,991,032	2,225,178	
2002/01		1.00	1.0301	1.0301		54	71.60	2,011,542	2,248,074	
2002/07		1.00	0.8337	0.8337		54	71.60	2,028,312	2,266,812	
2003/01		1.00	1.3271	1.3271		54	71.60	2,055,230	2,296,890	
2003/07		0.95	1.1664	1.1664		54	70.64	2,078,004	2,323,674	
2004/01		0.95	1.1103	1.1103		54	65.86	2,099,923	2,349,486	
2004/07		0.90	0.8378	0.8378		54	65.86	2,115,756	2,369,196	
2005/01		0.90	0.8595	0.8595		54	65.86	2,132,123	2,389,554	
2005/07	425,350	0.85	0.7364	0.7364		64	66.42	2,570,818	2,852,928	
2006/01		0.85	0.9068	0.9068		64	66.42	2,590,634	2,878,784	
2006/07		0.80	0.8133	0.8133		64	66.80	2,607,489	2,902,208	
2007/01		0.80	1.0133	1.0133		64	66.80	2,628,625	2,931,584	
2007/07		0.75	1.1050	1.1050		64	64.79	2,650,411	2,963,968	
2008/01	41,175	0.75	0.8556	0.8556		64	68.31	2,708,594	2,989,312	
2008/07		0.70	0.6104	0.6104		64	68.31	2,720,168	3,007,552	
2009/01		0.70	1.3268	1.3268		64	68.31	2,745,433	3,047,488	
2009/07		0.65	0.6841	0.6841		64	70.60	2,757,642	3,068,352	
2010/01		0.65	0.8643	0.8643		64	69.16	2,773,134	3,094,848	
2010/07		0.60	0.7107	0.7107		64	69.16	2,784,959	3,116,864	
2011/01		0.60	0.9198	0.9198		64	69.16	2,800,329	3,145,536	
2011/07		0.55	0.9028	0.9028		64	59.76	2,814,233	3,173,952	
2012/01		0.55	0.3865	0.3865		64	59.76	2,820,216	3,186,240	
2012/07		0.50	0.9417	0.9417		64	59.76	2,833,496	3,216,256	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		0.50	0.4901	0.4901		64	59.76	2,840,441	3,232,000	
2013/07		0.45	0.6196	0.6196		64	59.76	2,848,360	3,252,032	
2014/01		0.45	0.8564	0.8564		64	59.76	2,859,338	3,279,872	
2014/07		0.40	1.2383	1.2383		64	64.08	2,873,500	3,320,512	
2015/01		0.40	0.7571	0.7571		64	64.08	2,882,201	3,345,664	
2015/09	695,271	0.35	1.5736	1.5736		88	75.22	3,593,347	4,672,712	
2016/09		0.30	1.9890	1.9890		88	75.22	3,614,789	4,765,640	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 046017123120140701201404202015080945



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251.57

Victoria Nursing and Rehabilitation Center, Inc.

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
955 NW 3RD ST	3/1/2015-2/29/2016	Number of Beds: 264	Superior: 0
MIAMI, FL 33128	Days in CR 366	Maximum: 96,624	Standard: 366
County: Dade [13]	First Used : 2016/09	Max Annualized: 96,360	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 94,112	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 17,076	Inflation
Current Class South Large	Initial CR? False	Medicaid: 58,844	FY Index: 1.38327652
Class at 1/94: South Large	Medicaid Utilization	62.52550%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.40023%	Cost: 1.04357620
Open Date: 11/13/2000	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/13/2000	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25683112
Entered Medicaid 11/13/2000	Low Occupancy Adjustment Factor:	123.17917%	DC Sem Index: 1.30450000
Med # Active Date: 08/19/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03792783
Previous Med # 225177			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	3,384,930	5,758,924	3,956,421	2,312,569		15,412,844	
1a	Audit Adjustments							
2	Cost Per Diem	57.5238	97.8677	67.2358	39.3000		261.9273	
3	Cost Per Diem Inflated	60.0305	101.5796	70.1657				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	60.0305	101.5796	70.1657	39.3000		271.0758	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	62.0810		92.2515				
7	Provider Target Rate	65.5344		97.3833				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	58.7902	101.5796	70.1657	13.6500		244.1855	
12/13	Medicaid Adjustment Rate		1.4314	0.9887				
14	Prospective Per Diem 11	58.7902	103.0110	71.1544	13.6500		246.6056	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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251.57

Victoria Nursing and Rehabilitation Center, Inc.

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	11/13/2000	Amount:	15,121,948.00		Total Amount	Per Diem
RS to Start Calcs:	2000/07	Type:	Variable	80% Capital(1):	11,167,659	15.3663
Indexed Asset Value	13,959,574	<60% of Base:	False	20% ROE(2):	2,791,915	0.6606
FRVS Base Asset:	5,618,709	Interest Rate:	10.5000%	Insurance Cost(3):	154,612	1.6429
Occup Adj Factor	0.9000	Chase Rate:	8.4408%	Taxes Cost(3):	104,705	1.1126
ROE Factor	0.020520	Amortization Rate:	10.4408%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	58,946	0.0000
		Yearly Payment:	1,332,623	Total FRVS PD:		18.7824

(1) 80% Capital (\$11,167,659) amortized at 10.4408 % for 20 years Principal & Interest of \$1,332,623 divided by annual available days (96360) divided by Occup. Adj. (0.90) = \$15.3663

(2) 20% ROE (\$2,791,915) times the ROE factor (0.020520) divided by annual available days (96360) divided by Occup. Adj. (0.90) = \$0.6606

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/2000	Current RS PBS:	39,849
Comparison Bed	141	Effective PBS Limitation	54,155
			5,618,709

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	103.0110	103.0110	4.6736	98.3374
Indirect Care	71.1544	71.1544	3.2282	67.9262
Property	13.6500	18.7824	0.8521	17.9303
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				3.0718
Supplemental Rate				8.1814
Totals	246.6056	251.7380	11.4212	251.5700

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07	7,187,898	0.00	1.1129	1.1129		201	70.70	5,618,709	5,618,709	1
2001/01	2,448,900	0.10	1.2976	1.2976		201	70.70	8,074,902	8,203,815	
2001/07		0.10	0.9615	0.9615		201	70.70	8,082,670	8,282,607	
2002/01		0.20	1.0301	1.0301		201	70.70	8,099,320	8,367,831	
2002/07		0.20	0.8337	0.8337		201	70.70	8,112,822	8,437,578	
2003/01		0.30	1.3271	1.3271		201	70.70	8,145,119	8,549,535	
2003/07		0.30	1.1664	1.1664		201	69.93	8,173,619	8,649,231	
2004/01		0.40	1.1103	1.1103		201	69.93	8,209,918	8,745,309	
2004/07	2,299,481	0.40	0.8378	0.8378		253	64.34	10,536,910	11,100,122	
2005/01		0.50	0.8595	0.8595		253	64.34	10,582,198	11,195,503	
2005/07		0.50	0.7364	0.7364		253	58.96	10,621,162	11,277,981	
2006/01		0.60	0.9068	0.9068		253	58.96	10,678,952	11,380,193	
2006/07		0.60	0.8133	0.8133		253	58.51	10,731,065	11,472,791	
2007/01		0.70	1.0133	1.0133		253	58.51	10,807,180	11,588,918	
2007/07		0.70	1.1050	1.1050		253	55.58	10,890,774	11,716,936	
2008/01		0.80	0.8556	0.8556		253	55.58	10,965,321	11,817,124	
2008/07		0.80	0.6104	0.6104		253	55.58	11,018,865	11,889,229	
2009/01		0.90	1.3268	1.3268		253	56.71	11,150,441	12,047,101	
2009/07		0.90	0.6841	0.6841		253	56.71	11,219,094	12,129,579	
2010/01		1.00	0.8643	0.8643		253	62.02	11,316,061	12,234,321	
2010/07	523,787	1.00	0.7107	0.7107		264	63.86	11,920,271	12,857,064	
2011/01		1.00	0.9198	0.9198		264	63.86	12,029,914	12,975,336	
2011/07		1.00	0.9028	0.9028		264	63.86	12,138,520	13,092,552	
2012/01		1.00	0.3865	0.3865		264	65.36	12,185,435	13,143,240	
2012/07	62,432	1.00	0.9417	0.9417		264	63.02	12,362,617	13,267,056	
2013/01		1.00	0.4901	0.4901		264	63.02	12,423,206	13,332,000	
2013/07		1.00	0.6196	0.6196		264	63.02	12,500,180	13,414,632	
2014/01		1.00	0.8564	0.8564		264	61.21	12,607,232	13,529,472	
2014/07		1.00	1.2383	1.2383		264	64.92	12,763,347	13,697,112	
2015/01		1.00	0.7571	0.7571		264	64.92	12,859,978	13,800,864	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		1.00	1.5736	1.5736		264	64.92	13,062,343	14,018,136	
2016/09	637,421	1.00	1.9890	1.9890		264	62.53	13,959,574	14,296,920	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 046128022920160301201504272016134457



Florida Agency for Health Care Administration
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205.01

Crossbreeze Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1755 18TH ST	2/1/2014-1/31/2015	Number of Beds: 101	Superior: 0
SARASOTA, FL 34234	Days in CR 365	Maximum: 36,865	Standard: 366
County: Sarasota [58]	First Used : 2016/09	Max Annualized: 36,865	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 27,637	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,512	Inflation
Current Class South Large	Initial CR? False	Medicaid: 23,764	FY Index: 1.34462269
Class at 1/94: South Large	Medicaid Utilization	85.98618%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	74.96813%	Cost: 1.07357585
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23099675
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	94.80996%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05971035
Previous Med # 202681			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,095,520	1,877,081	869,494	269,246		4,111,341	
1a	Audit Adjustments							
2	Cost Per Diem	46.1000	78.9884	36.5887	11.3300		173.0071	
3	Cost Per Diem Inflated	49.4918	83.7048	39.2807				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.4918	83.7048	39.2807	11.3300		183.8073	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	69.3387		69.7482				
7	Provider Target Rate	73.1959		73.6282				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	66.4199		70.6306				
10b	Base for line 10a	62.9198		66.9086				
11	Lesser of 5,7,8,10, 10a	49.4918	83.7048	39.2807	11.3300		183.8073	
12/13	Medicaid Adjustment Rate		3.3887	1.5903				
14	Prospective Per Diem 11	49.4918	87.0935	40.8710	11.3300		188.7863	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Crossbreeze Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	None	80% Capital(1):	3,304,787	3.1840
Indexed Asset Value	4,130,984	<60% of Base:	True	20% ROE(2):	826,197	0.5578
FRVS Base Asset:	1,364,843	Interest Rate:	0.0000%	Insurance Cost(3):	32,341	1.1702
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	54,586	1.9751
ROE Factor	0.022400	Amortization Rate:	3.2500%	Home Office(3):	0	0.0000
		Interest Only:	True	Replacement(3&4):	0	0.0000
		Yearly Payment:	105,639	Total FRVS PD:		6.8871

(1) 80% Capital (\$3,304,787) amortized at 3.2500 % for 20 years Interest of \$105,639 divided by annual available days (36865) divided by Occup. Adj. (0.90) = \$3.1840

(2) 20% ROE (\$826,197) times the ROE factor (0.022400) divided by annual available days (36865) divided by Occup. Adj. (0.90) = \$0.5578

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	68	Effective PBS Limitation	54,155
			1,938,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.4918	49.4918	2.2454	47.2464
Direct Care	87.0935	87.0935	3.9514	83.1421
Indirect Care	40.8710	40.8710	1.8543	39.0167
Property	11.3300	6.8871	0.3125	6.5746
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.8534
Supplemental Rate				8.1814
Totals	188.7863	184.3434	8.3636	205.0146

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	175,778	0.00				68	100.00	175,778	697,748	
1972/01		0.10	3.9787	3.0000	0.9787	68	100.00	176,305	725,492	
1972/07		0.10	5.9113	3.0000	2.9113	68	100.00	176,834	761,260	
1973/01	2,660	0.20	8.0622	3.0000	5.0622	68	100.00	180,555	800,496	
1973/07		0.20	10.7186	3.0000	7.7186	68	100.00	181,638	845,784	
1974/01		0.30	12.9457	3.0000	9.9457	68	100.00	183,273	889,984	
1974/07		0.30	13.0494	3.0000	10.0494	68	100.00	184,922	917,592	
1975/01	29,380	0.40	13.1399	3.0000	10.1399	68	100.00	216,521	945,948	
1975/07		0.40	14.2033	3.0000	11.2033	68	100.00	219,119	984,436	
1976/01		0.50	15.2478	3.0000	12.2478	68	100.00	222,406	1,024,216	
1976/07		0.50	15.7330	3.0000	12.7330	68	100.00	225,742	1,059,916	
1977/01	267,323	0.60	16.4836	3.0000	13.4836	68	100.00	497,128	1,099,696	
1977/07		0.60	18.5412	3.0000	15.5412	68	100.00	506,076	1,155,252	
1978/01	4,846	0.70	20.2809	3.0000	17.2809	68	100.00	521,550	1,210,060	
1978/07		0.70	22.8203	3.0000	19.8203	68	100.00	532,503	1,277,040	
1979/01		0.80	24.9476	3.0000	21.9476	68	100.00	545,283	1,342,524	
1979/07		0.80	26.1458	3.0000	23.1458	68	100.00	558,370	1,398,896	
1980/01	8,614	0.90	29.3115	3.0000	26.3115	68	97.91	582,060	1,485,188	
1980/07		0.90	30.1222	3.0000	27.1222	68	97.91	597,776	1,541,764	
1981/01		1.00	30.9462	3.0000	27.9462	68	98.50	615,709	1,600,720	
1981/07		1.00	30.5350	3.0000	27.5350	68	98.50	634,180	1,642,132	
1982/01		1.00	30.2110	3.0000	27.2110	68	98.96	653,205	1,686,128	
1982/07		1.00	29.5087	3.0000	26.5087	68	100.00	672,801	1,724,820	
1983/04	461,096	1.00	29.1375	3.0000	26.1375	68	100.00	1,154,081	1,770,176	
1983/07		1.00	30.0953	3.0000	27.0953	68	98.38	1,188,703	1,840,216	
1984/01	883	1.00	28.3905	3.0000	25.3905	68	100.00	1,225,247	1,864,084	
1984/07		1.00	27.3084	3.0000	24.3084	68	100.00	1,262,004	1,899,852	
1985/01	25,226	1.00	25.4555	3.0000	22.4555	68	98.38	1,325,090	1,921,612	
1985/10		1.00	23.3077	3.0000	20.3077	68	97.04	1,364,843	1,938,000	
1986/01		1.00	21.1376	3.0000	18.1376	68	98.81	1,405,788	1,954,116	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07		1.00	18.4350	3.0000	15.4350	68	98.81	1,447,962	1,950,376	
1987/01		1.00	16.4441	3.0000	13.4441	68	98.26	1,491,401	1,985,260	
1987/07		1.00	14.3448	3.0000	11.3448	68	98.26	1,536,143	2,000,764	
1988/01		1.00	12.2455	3.0000	9.2455	68	97.40	1,582,227	2,017,016	
1988/07		1.00	9.8354	3.0000	6.8354	68	97.40	1,629,694	2,015,928	
1989/01		1.00	7.4253	3.0000	4.4253	68	96.13	1,678,585	2,027,828	
1989/07		1.00	5.0152	3.0000	2.0152	68	96.13	1,728,943	2,041,564	
1990/01		1.00	2.6051	2.6051		68	96.44	1,773,984	2,051,832	
1990/07		1.00	0.5899	0.5899		68	96.44	1,784,449	2,063,936	
1991/01	30,220	1.00	0.5899	0.5899		68	95.34	1,825,195	2,076,040	
1991/07		1.00	1.4932	1.4932		68	95.34	1,852,449	2,107,048	
1992/01	14,573	0.95	2.0117	2.0117		68	97.78	1,902,424	2,149,412	
1992/07		0.95	1.8152	1.8152		68	97.78	1,935,229	2,188,444	
1993/01	42,106	0.90	1.7710	1.7710		68	99.13	2,008,181	2,227,204	
1993/07		0.90	1.5329	1.5329		68	99.13	2,035,886	2,261,340	
1994/01		0.85	1.6983	1.6983		68	96.98	2,065,276	2,299,760	
1994/07		0.85	1.5991	1.5991		68	96.98	2,093,347	2,336,548	
1995/01		0.80	1.5812	1.5812		68	97.12	2,119,828	2,373,472	
1995/07		0.80	1.5250	1.5250		68	97.12	2,145,690	2,409,648	
1996/01	811,681	0.75	1.7228	1.7228		89	96.28	2,985,095	3,208,183	
1996/07		0.75	1.3294	1.3294		89	96.28	3,014,859	3,250,814	
1997/01	446,277	0.70	1.4109	1.4109		101	89.28	3,490,911	3,741,141	
1997/07		0.70	1.0917	1.0917		101	89.28	3,517,589	3,781,945	
1998/01	16,842	0.65	1.1663	1.1663		101	89.53	3,561,098	3,826,082	
1998/07		0.65	1.0794	1.0794		101	89.53	3,586,083	3,867,391	
1999/01	53,003	0.60	1.4499	1.4499		101	87.68	3,670,281	3,923,446	
1999/07		0.60	1.2299	1.2299		101	87.68	3,697,364	3,971,724	
2000/01		0.55	1.3356	1.3356		101	87.68	3,724,525	4,024,749	
2000/07		0.55	1.1129	1.1129		101	88.12	3,747,323	4,069,492	
2001/01	15,974	0.50	1.2976	1.2976		101	88.46	3,787,610	4,122,315	



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205.01

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		0.50	0.9615	0.9615		101	88.46	3,805,821	4,161,907	
2002/01	75,994	0.45	1.0301	1.0301		101	86.88	3,899,455	4,204,731	
2002/07		0.45	0.8337	0.8337		101	86.88	3,914,086	4,239,778	
2003/01		0.40	1.3271	1.3271		101	87.77	3,934,862	4,296,035	
2003/07		0.40	1.1664	1.1664		101	87.77	3,953,222	4,346,131	
2004/01		0.35	1.1103	1.1103		101	91.98	3,968,584	4,394,409	
2004/07		0.35	0.8378	0.8378		101	91.98	3,980,220	4,431,274	
2005/01		0.30	0.8595	0.8595		101	91.98	3,990,485	4,469,351	
2005/07		0.30	0.7364	0.7364		101	90.79	3,999,300	4,502,277	
2006/01		0.25	0.9068	0.9068		101	88.40	4,008,366	4,543,081	
2006/07		0.25	0.8133	0.8133		101	88.40	4,016,515	4,580,047	
2007/01		0.20	1.0133	1.0133		101	88.40	4,024,656	4,626,406	
2007/07		0.20	1.1050	1.1050		101	90.30	4,033,550	4,677,512	
2008/01		0.15	0.8556	0.8556		101	90.30	4,038,725	4,717,508	
2008/07		0.15	0.6104	0.6104		101	85.04	4,042,424	4,746,293	
2009/01	77,126	0.10	1.3268	1.3268		101	78.39	4,124,914	4,809,317	
2009/07		0.10	0.6841	0.6841		101	78.39	4,127,735	4,842,243	
2010/01		0.05	0.8643	0.8643		101	78.39	4,129,518	4,884,057	
2010/07		0.05	0.7107	0.7107		101	80.86	4,130,984	4,918,801	
2011/01		0.00	0.9198	0.9198		101	85.58	4,130,984	4,964,049	
2011/07		0.00	0.9028	0.9028		101	84.80	4,130,984	5,008,893	
2012/01		0.00	0.3865	0.3865		101	84.80	4,130,984	5,028,285	
2012/07		0.00	0.9417	0.9417		101	84.80	4,130,984	5,075,654	
2013/01		0.00	0.4901	0.4901		101	84.80	4,130,984	5,100,500	
2013/07		0.00	0.6196	0.6196		101	84.80	4,130,984	5,132,113	
2014/01		0.00	0.8564	0.8564		101	84.01	4,130,984	5,176,048	
2014/07		0.00	1.2383	1.2383		101	83.75	4,130,984	5,240,183	
2015/01		0.00	0.7571	0.7571		101	83.75	4,130,984	5,279,876	
2015/09		0.00	1.5736	1.5736		101	83.75	4,130,984	5,362,999	
2016/09		0.00	1.9890	1.9890		101	85.99	4,130,984	5,469,655	

Message Code:



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Riverside Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
899 NW 4TH STREET	3/1/2014-2/28/2015	Number of Beds: 120	Superior: 366
MIAMI, FL 33128	Days in CR 365	Maximum: 43,800	Standard: 0
County: Dade [13]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 43,412	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,423	Inflation
Current Class South Large	Initial CR? False	Medicaid: 37,119	FY Index: 1.34732075
Class at 1/94: South Large	Medicaid Utilization	85.50401%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	99.11416%	Cost: 1.07142598
Open Date: 07/01/1975	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1975	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23299675
Entered Medicaid 04/01/1983	Low Occupancy Adjustment Factor:	125.34672%	DC Sem Index: 1.30450000
Med # Active Date: 03/29/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05799143
Previous Med # 207276			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,934,642	3,621,515	2,390,749	507,046		8,453,952
1a	Audit Adjustments						
2	Cost Per Diem	52.1200	97.5650	64.4077	13.6600		227.7527
3	Cost Per Diem Inflated	55.8427	103.2229	69.0081			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	55.8427	103.2229	69.0081	13.6600		241.7337
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	52.1815		77.2684			
7	Provider Target Rate	55.0843		81.5667			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	55.0843	103.2229	69.0081	13.6500		240.9653
12/13	Medicaid Adjustment Rate		4.1229	2.7563			
14	Prospective Per Diem 11	55.0843	107.3458	71.7644	13.6500		247.8445
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Riverside Care Center

FRVS

FRVS Status as of this Semester

Not on FRVS

Began FRVS:	Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:	Amount:	2,500,000.00	Total Amount	Per Diem
RS to Start Calcs:	Type:	Fixed	80% Capital(1):	2,444,851 6.6962
Indexed Asset Value	<60% of Base:	False	20% ROE(2):	611,213 0.3393
FRVS Base Asset:	Interest Rate:	9.0000%	Insurance Cost(3):	29,218 0.6730
Occup Adj Factor	Chase Rate:	8.5000%	Taxes Cost(3):	39,700 0.9145
ROE Factor	Amortization Rate:	9.0000%	Home Office(3):	0 0.0000
	Interest Only:	False	Replacement(3&4):	37,309 0.0000
	Yearly Payment:	263,964	Total FRVS PD:	8.6230

(1) 80% Capital (\$2,444,851) amortized at 9.0000 % for 20 years Principal & Interest of \$263,964 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$6.6962

(2) 20% ROE (\$611,213) times the ROE factor (0.021880) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3393

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 80	Effective PBS Limitation	2,280,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.0843	55.0843	2.4991	52.5852
Direct Care	107.3458	107.3458	4.8702	102.4756
Indirect Care	71.7644	71.7644	3.2559	68.5085
Property	13.6500	8.6230	0.6193	13.0307
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.5654
Supplemental Rate				8.1814
Totals	247.8445	242.8175	11.2445	267.3468

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1975/07	452,491	0.00	4.0634	3.0000	1.0634	80	100.00	452,491	1,158,160	
1976/01		0.10	5.1079	3.0000	2.1079	80	100.00	453,848	1,204,960	
1976/07		0.10	5.5931	3.0000	2.5931	80	100.00	455,210	1,246,960	
1977/01		0.20	6.3437	3.0000	3.3437	80	100.00	457,941	1,293,760	
1977/07		0.20	8.4013	3.0000	5.4013	80	100.00	460,689	1,359,120	
1978/01		0.30	10.1410	3.0000	7.1410	80	100.00	464,835	1,423,600	
1978/07		0.30	12.6805	3.0000	9.6805	80	100.00	469,019	1,502,400	
1979/01		0.40	14.8077	3.0000	11.8077	80	100.00	474,647	1,579,440	
1979/07		0.40	16.0059	3.0000	13.0059	80	100.00	480,343	1,645,760	
1980/01		0.50	19.1716	3.0000	16.1716	80		480,343	1,747,280	
1980/07		0.50	19.9823	3.0000	16.9823	80		480,343	1,813,840	
1981/01		0.60	20.8063	3.0000	17.8063	80		480,343	1,883,200	
1981/07		0.60	20.3951	3.0000	17.3951	80		480,343	1,931,920	
1982/01		0.70	20.0711	3.0000	17.0711	80		480,343	1,983,680	
1982/07		0.70	19.3688	3.0000	16.3688	80		480,343	2,029,200	
1983/04	190,962	0.80	18.9976	3.0000	15.9976	80	55.00	682,833	2,082,560	
1983/07		0.80	19.9554	3.0000	16.9554	80	55.00	699,221	2,164,960	
1984/01		0.90	18.2506	3.0000	15.2506	80	94.36	718,100	2,193,040	
1984/07		0.90	17.1685	3.0000	14.1685	80	94.36	737,489	2,235,120	
1985/01		1.00	15.3156	3.0000	12.3156	80	91.04	759,614	2,260,720	
1985/10		1.00	13.1678	3.0000	10.1678	80	94.36	782,402	2,280,000	
1986/01		1.00	10.9977	3.0000	7.9977	80	94.36	805,874	2,298,960	
1986/07		1.00	8.2951	3.0000	5.2951	80	97.37	830,050	2,294,560	
1987/01		1.00	6.3042	3.0000	3.3042	80	97.37	854,952	2,335,600	
1987/07		1.00	4.2049	3.0000	1.2049	80	97.13	880,601	2,353,840	
1988/01		1.00	2.1056	2.1056		80	97.13	899,143	2,372,960	
1988/07		1.00	0.5899	0.5899		80	97.73	904,447	2,371,680	
1989/01		1.00	0.5899	0.5899		80	97.73	909,782	2,385,680	
1989/07		1.00	0.5899	0.5899		80	98.98	915,149	2,401,840	
1990/01		1.00	0.5899	0.5899		80	98.98	920,547	2,413,920	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1990/07		1.00	0.5899	0.5899		80	95.73	925,977	2,428,160	
1991/01		1.00	0.5899	0.5899		80	95.73	931,439	2,442,400	
1991/07		1.00	1.4932	1.4932		80	96.48	945,347	2,478,880	
1992/01		1.00	2.0117	2.0117		80	96.48	964,365	2,528,720	
1992/07		1.00	1.8152	1.8152		80	97.24	981,870	2,574,640	
1993/01		1.00	1.7710	1.7710		80	97.24	999,259	2,620,240	
1993/07		1.00	1.5329	1.5329		80	98.09	1,014,577	2,660,400	
1994/01		1.00	1.6983	1.6983		80	98.09	1,031,808	2,705,600	
1994/07		1.00	1.5991	1.5991		80	97.62	1,048,308	2,748,880	
1995/01		1.00	1.5812	1.5812		80	97.62	1,064,884	2,792,320	
1995/07		1.00	1.5250	1.5250		80	96.48	1,081,123	2,834,880	
1996/01		0.95	1.7228	1.7228		80	96.48	1,098,818	2,883,760	
1996/07		0.95	1.3294	1.3294		80	96.13	1,112,695	2,922,080	
1997/01		0.90	1.4109	1.4109		80	96.13	1,126,824	2,963,280	
1997/07		0.90	1.0917	1.0917		80	92.77	1,137,895	2,995,600	
1998/01		0.85	1.1663	1.1663		80	92.77	1,149,176	3,030,560	
1998/07	1,481,640	0.85	1.0794	1.0794		120	89.92	2,641,360	4,594,920	
1999/01		0.80	1.4499	1.4499		120	89.92	2,671,997	4,661,520	
1999/07		0.80	1.2299	1.2299		120	85.88	2,698,287	4,718,880	
2000/01		0.75	1.3356	1.3356		120	85.88	2,725,316	4,781,880	
2000/07		0.75	1.1129	1.1129		120	89.28	2,748,064	4,835,040	
2001/01		0.70	1.2976	1.2976		120	89.28	2,773,025	4,897,800	
2001/07		0.70	0.9615	0.9615		120	88.07	2,791,690	4,944,840	
2002/01		0.65	1.0301	1.0301		120	86.61	2,810,383	4,995,720	
2002/07		0.65	0.8337	0.8337		120	86.61	2,825,612	5,037,360	
2003/01		0.60	1.3271	1.3271		120	87.75	2,848,112	5,104,200	
2003/07		0.60	1.1664	1.1664		120	87.75	2,868,043	5,163,720	
2004/01		0.55	1.1103	1.1103		120	87.03	2,885,558	5,221,080	
2004/07		0.55	0.8378	0.8378		120	85.88	2,898,855	5,264,880	
2005/01		0.50	0.8595	0.8595		120	85.88	2,911,314	5,310,120	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2005/07		0.50	0.7364	0.7364		120	85.88	2,922,033	5,349,240	
2006/01		0.45	0.9068	0.9068		120	89.29	2,933,958	5,397,720	
2006/07		0.45	0.8133	0.8133		120	89.29	2,944,696	5,441,640	
2007/01		0.40	1.0133	1.0133		120	88.81	2,956,631	5,496,720	
2007/07		0.40	1.1050	1.1050		120	85.84	2,969,699	5,557,440	
2008/01		0.35	0.8556	0.8556		120	85.84	2,978,593	5,604,960	
2008/07		0.35	0.6104	0.6104		120	85.84	2,984,955	5,639,160	
2009/01		0.30	1.3268	1.3268		120	88.14	2,996,835	5,714,040	
2009/07		0.30	0.6841	0.6841		120	88.14	3,002,985	5,753,160	
2010/01		0.25	0.8643	0.8643		120	84.60	3,009,474	5,802,840	
2010/07		0.25	0.7107	0.7107		120	84.62	3,014,822	5,844,120	
2011/01		0.20	0.9198	0.9198		120	84.62	3,020,369	5,897,880	
2011/07		0.20	0.9028	0.9028		120	84.62	3,025,824	5,951,160	
2012/01		0.15	0.3865	0.3865		120	76.66	3,027,579	5,974,200	
2012/07	17,623	0.15	0.9417	0.9417		120	72.60	3,049,480	6,030,480	
2013/01		0.10	0.4901	0.4901		120	72.60	3,050,974	6,060,000	
2013/07		0.10	0.6196	0.6196		120	72.60	3,052,866	6,097,560	
2014/01		0.05	0.8564	0.8564		120	77.21	3,054,173	6,149,760	
2014/07		0.05	1.2383	1.2383		120	83.67	3,056,064	6,225,960	
2015/01		0.00	0.7571	0.7571		120	83.67	3,056,064	6,273,120	
2015/09		0.00	1.5736	1.5736		120	85.50	3,056,064	6,371,880	
2016/09		0.00	1.9890	1.9890		120	85.50	3,056,064	6,498,600	

Message Code:

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Renaissance Health and Rehabilitation

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5065 WALLIS ROAD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
WEST PALM BEACH, FL 33415	Days in CR 365	Maximum: 43,800	Standard: 366
County: Palm Beach [50]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 42,320	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,213	Inflation
Current Class South Large	Initial CR? False	Medicaid: 34,628	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	81.82420%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.62100%	Cost: 1.04651568
Open Date: 10/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 07/09/1986	Low Occupancy Adjustment Factor:	122.19370%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252549			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,679,400	2,582,460	1,567,141	517,342		6,346,343	
1a	Audit Adjustments							
2	Cost Per Diem	48.4983	74.5772	45.2565	14.9400		183.2720	
3	Cost Per Diem Inflated	50.7542	77.6115	47.3616				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.7542	77.6115	47.3616	14.9400		190.6673	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	60.3281		65.9815				
7	Provider Target Rate	63.6840		69.6519				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	62.1882		70.8384				
10b	Base for line 10a	58.9111		67.1055				
11	Lesser of 5,7,8,10, 10a	50.7542	77.6115	47.3616	13.6500		189.3773	
12/13	Medicaid Adjustment Rate		2.7787	1.6957				
14	Prospective Per Diem 11	50.7542	80.3902	49.0573	13.6500		193.8517	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Renaissance Health and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/09/1986		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,786,919.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	4,434,803	11.0829
Indexed Asset Value	5,543,504	<60% of Base:	False	20% ROE(2):	1,108,701	0.5684
FRVS Base Asset:	3,590,000	Interest Rate:	10.6343%	Insurance Cost(3):	27,890	0.6590
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	79,405	1.8763
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	40,322	0.9528
		Interest Only:	False	Replacement(3&4):	113,196	0.0000
		Yearly Payment:	436,889	Total FRVS PD:		15.1394

(1) 80% Capital (\$4,434,803) amortized at 7.7500 % for 20 years Principal & Interest of \$436,889 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.0829

(2) 20% ROE (\$1,108,701) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5684

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1984	Current RS PBS:	27,413
Comparison Bed	120	Effective PBS Limitation	54,155
			3,289,560

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.7542	50.7542	2.3027	48.4515
Direct Care	80.3902	80.3902	3.6473	76.7429
Indirect Care	49.0573	49.0573	2.2257	46.8316
Property	13.6500	15.1394	0.6869	14.4525
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.0375
Supplemental Rate				8.1814
Totals	193.8517	195.3411	8.8626	216.6974

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	3,590,000	0.00	1.9179	1.9179		120		3,590,000	3,352,680	
1985/01		0.10	1.1471	1.1471		120		3,590,000	3,391,080	
1985/10		0.10	0.8522	0.8522		120		3,590,000	3,420,000	
1986/01		0.20	0.8299	0.8299		120		3,590,000	3,448,440	
1986/07		0.20	0.2974	0.2974		120	62.47	3,289,560	3,289,560	1
1987/01		0.30	1.0091	1.0091		120	62.47	3,299,517	3,503,400	
1987/07	16,039	0.30	0.9007	0.9007		120	62.47	3,324,471	3,530,760	
1988/01		0.40	0.9007	0.9007		120	62.47	3,336,449	3,559,440	
1988/07		0.40	0.5899	0.5899		120	62.47	3,344,323	3,557,520	
1989/01		0.50	0.5899	0.5899		120	62.47	3,354,189	3,578,520	
1989/07		0.50	0.5899	0.5899		120	76.65	3,364,084	3,602,760	
1990/01		0.60	0.5899	0.5899		120	72.68	3,375,989	3,620,880	
1990/07		0.60	0.5899	0.5899		120	72.68	3,387,937	3,642,240	
1991/01		0.70	0.5899	0.5899		120	72.68	3,401,926	3,663,600	
1991/07		0.70	1.4932	1.4932		120	75.79	3,437,483	3,718,320	
1992/01		0.80	2.0117	2.0117		120	74.89	3,492,806	3,793,080	
1992/07		0.80	1.8152	1.8152		120	74.89	3,543,529	3,861,960	
1993/01		0.90	1.7710	1.7710		120	74.88	3,600,009	3,930,360	
1993/07		0.90	1.5329	1.5329		120	74.88	3,649,675	3,990,600	
1994/01		1.00	1.6983	1.6983		120	70.80	3,711,657	4,058,400	
1994/07		1.00	1.5991	1.5991		120	70.80	3,771,010	4,123,320	
1995/01		1.00	1.5812	1.5812		120	70.34	3,830,637	4,188,480	
1995/07		1.00	1.5250	1.5250		120	70.34	3,889,054	4,252,320	
1996/01		1.00	1.7228	1.7228		120	73.72	3,956,055	4,325,640	
1996/07		1.00	1.3294	1.3294		120	73.72	4,008,647	4,383,120	
1997/01		1.00	1.4109	1.4109		120	69.88	4,065,205	4,444,920	
1997/07		1.00	1.0917	1.0917		120	69.88	4,109,585	4,493,400	
1998/01		1.00	1.1663	1.1663		120	65.85	4,109,585	4,545,840	5
1998/07		1.00	1.0794	1.0794		120	65.85	4,157,515	4,594,920	5
1999/01		1.00	1.4499	1.4499		120	70.53	4,263,321	4,661,520	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		120	70.53	4,263,321	4,718,880	5
2000/01		1.00	1.3356	1.3356		120	78.88	4,373,397	4,781,880	
2000/07		1.00	1.1129	1.1129		120	78.88	4,373,397	4,835,040	5
2001/01		1.00	1.2976	1.2976		120	83.11	4,479,450	4,897,800	
2001/07		1.00	0.9615	0.9615		120	81.43	4,522,520	4,944,840	
2002/01		1.00	1.0301	1.0301		120	81.43	4,569,106	4,995,720	
2002/07		1.00	0.8337	0.8337		120	81.43	4,607,199	5,037,360	
2003/01		1.00	1.3271	1.3271		120	81.43	4,668,341	5,104,200	
2003/07		1.00	1.1664	1.1664		120	81.43	4,722,793	5,163,720	
2004/01		1.00	1.1103	1.1103		120	81.43	4,775,230	5,221,080	
2004/07		1.00	0.8378	0.8378		120	79.68	4,815,237	5,264,880	
2005/01		0.95	0.8595	0.8595		120	77.91	4,854,553	5,310,120	
2005/07		0.95	0.7364	0.7364		120	77.91	4,888,515	5,349,240	
2006/01		0.90	0.9068	0.9068		120	77.91	4,888,515	5,397,720	5
2006/07		0.90	0.8133	0.8133		120	80.08	4,964,486	5,441,640	
2007/01		0.85	1.0133	1.0133		120	74.14	5,007,245	5,496,720	
2007/07		0.85	1.1050	1.1050		120	74.14	5,054,278	5,557,440	
2008/01		0.80	0.8556	0.8556		120	74.14	5,088,875	5,604,960	
2008/07		0.80	0.6104	0.6104		120	73.14	5,113,724	5,639,160	
2009/01		0.75	1.3268	1.3268		120	76.99	5,164,611	5,714,040	
2009/07		0.75	0.6841	0.6841		120	76.99	5,191,111	5,753,160	
2010/01		0.70	0.8643	0.8643		120	81.56	5,222,517	5,802,840	
2010/07		0.70	0.7107	0.7107		120	81.56	5,248,499	5,844,120	
2011/01		0.65	0.9198	0.9198		120	81.56	5,279,880	5,897,880	
2011/07		0.65	0.9028	0.9028		120	82.12	5,310,862	5,951,160	
2012/01		0.60	0.3865	0.3865		120	82.88	5,323,178	5,974,200	
2012/07		0.60	0.9417	0.9417		120	82.88	5,353,254	6,030,480	
2013/01		0.55	0.4901	0.4901		120	82.88	5,367,686	6,060,000	
2013/07		0.55	0.6196	0.6196		120	82.88	5,385,979	6,097,560	
2014/01		0.50	0.8564	0.8564		120	82.88	5,409,042	6,149,760	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	82.88	5,442,535	6,225,960	
2015/01		0.45	0.7571	0.7571		120	81.85	5,461,078	6,273,120	
2015/09		0.45	1.5736	1.5736		120	81.85	5,499,748	6,371,880	
2016/09		0.40	1.9890	1.9890		120	81.82	5,543,504	6,498,600	

Message Code:

- | | |
|---|----------------------------------|
| 1 | Per Bed Standard Limitation |
| 5 | Uncorrected Licensure Deficiency |

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 047787123120150101201504252016144134



Florida Agency for Health Care Administration
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Wood Lake Nursing and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6414 13TH RD S	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
GREENACRES, FL 33415-1401	Days in CR 365	Maximum: 43,800	Standard: 366
County: Palm Beach [50]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 41,130	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,808	Inflation
Current Class South Large	Initial CR? False	Medicaid: 31,267	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	76.01994%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.90411%	Cost: 1.07573004
Open Date: 01/01/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 07/11/1988	Low Occupancy Adjustment Factor:	118.75773%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 261599			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,748,342	1,978,852	1,378,916	721,330		5,827,440	
1a	Audit Adjustments							
2	Cost Per Diem	55.9165	63.2888	44.1013	23.0700		186.3766	
3	Cost Per Diem Inflated	60.1511	67.1768	47.4411				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	60.1511	67.1768	47.4411	23.0700		197.8390	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	67.2027		63.5885				
7	Provider Target Rate	70.9411		67.1258				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	65.8408		74.8751				
10b	Base for line 10a	62.3712		70.9294				
11	Lesser of 5,7,8,10, 10a	58.7902	67.1768	47.4411	13.6500		187.0581	
12/13	Medicaid Adjustment Rate		1.9664	1.3887				
14	Prospective Per Diem 11	58.7902	69.1432	48.8298	13.6500		190.4132	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Wood Lake Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	07/11/1988	Amount:	6,825,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/01	Type:	Fixed	80% Capital(1):	5,016,245	15.2454
Indexed Asset Value	6,270,306	<60% of Base:	False	20% ROE(2):	1,254,061	0.7225
FRVS Base Asset:	3,530,760	Interest Rate:	10.9360%	Insurance Cost(3):	33,303	0.8097
Occup Adj Factor	0.9000	Chase Rate:	7.5000%	Taxes Cost(3):	86,474	2.1025
ROE Factor	0.022710	Amortization Rate:	10.5000%	Home Office(3):	42,088	1.0233
		Interest Only:	False	Replacement(3&4):	12,759	0.0000
		Yearly Payment:	600,974	Total FRVS PD:		19.9034

(1) 80% Capital (\$5,016,245) amortized at 10.5000 % for 20 years Principal & Interest of \$600,974 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$15.2454

(2) 20% ROE (\$1,254,061) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7225

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1987	Current RS PBS:	29,423
Comparison Bed	120	Effective PBS Limitation	54,155
			3,530,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	69.1432	69.1432	3.1370	66.0062
Indirect Care	48.8298	48.8298	2.2154	46.6144
Property	13.6500	19.9034	0.9030	19.0004
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.6317
Supplemental Rate				8.1814
Totals	190.4132	196.6666	8.9227	217.5570

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/01	8,657,757	0.00	0.9007	0.9007		120		3,530,760	3,530,760	1
1988/07		0.00	0.5899	0.5899		120	3.21	3,530,760	3,557,520	
1989/01		0.10	0.5899	0.5899		120	3.21	3,530,760	3,578,520	
1989/07		0.10	0.5899	0.5899		120	3.21	3,530,760	3,602,760	
1990/01		0.20	0.5899	0.5899		120	3.21	3,530,760	3,620,880	
1990/07		0.20	0.5899	0.5899		120	3.21	3,530,760	3,642,240	
1991/01		0.30	0.5899	0.5899		120	3.21	3,530,760	3,663,600	
1991/07		0.30	1.4932	1.4932		120	3.21	3,530,760	3,718,320	
1992/01	36,374	0.40	2.0117	2.0117		120	24.68	3,567,134	3,793,080	
1992/07	676,616	0.40	1.8152	1.8152		120	50.35	4,267,461	3,861,960	
1993/01		0.50	1.7710	1.7710		120	50.35	4,302,055	3,930,360	
1993/07		0.50	1.5329	1.5329		120	50.35	4,332,242	3,990,600	
1994/01		0.60	1.6983	1.6983		120	50.35	4,058,400	4,058,400	5
1994/07		0.60	1.5991	1.5991		120	50.35	4,123,320	4,123,320	5
1995/01		0.70	1.5812	1.5812		120	50.35	4,455,757	4,188,480	
1995/07		0.70	1.5250	1.5250		120	51.70	4,500,468	4,252,320	
1996/01		0.80	1.7228	1.7228		120	51.70	4,325,640	4,325,640	5
1996/07	29,155	0.80	1.3294	1.3294		120	53.59	4,383,120	4,383,120	
1997/01		0.90	1.4109	1.4109		120	53.59	4,437,350	4,444,920	
1997/07	44,475	0.90	1.0917	1.0917		120	53.24	4,493,400	4,493,400	8
1998/01		1.00	1.1663	1.1663		120	53.24	4,544,130	4,545,840	
1998/07		1.00	1.0794	1.0794		120	45.26	4,584,493	4,594,920	
1999/01		1.00	1.4499	1.4499		120	45.26	4,639,192	4,661,520	
1999/07		1.00	1.2299	1.2299		120	45.26	4,686,145	4,718,880	
2000/01	69,196	1.00	1.3356	1.3356		120	43.38	4,781,880	4,781,880	8
2000/07		1.00	1.1129	1.1129		120	43.73	4,824,193	4,835,040	
2001/01		1.00	1.2976	1.2976		120	43.73	4,873,965	4,897,800	
2001/07		1.00	0.9615	0.9615		120	49.17	4,915,861	4,944,840	
2002/01		1.00	1.0301	1.0301		120	49.17	4,961,132	4,995,720	
2002/07		1.00	0.8337	0.8337		120	53.41	5,001,297	5,037,360	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/01		1.00	1.3271	1.3271		120	53.41	5,065,750	5,104,200	
2003/07	23,766	1.00	1.1664	1.1664		120	62.11	5,148,603	5,163,720	
2004/01		1.00	1.1103	1.1103		120	62.11	5,205,768	5,221,080	
2004/07		1.00	0.8378	0.8378		120	62.11	5,249,382	5,264,880	
2005/01		1.00	0.8595	0.8595		120	62.11	5,294,500	5,310,120	
2005/07		1.00	0.7364	0.7364		120	62.11	5,333,489	5,349,240	
2006/01		1.00	0.9068	0.9068		120	61.01	5,381,853	5,397,720	
2006/07		1.00	0.8133	0.8133		120	61.01	5,425,624	5,441,640	
2007/01		1.00	1.0133	1.0133		120	65.32	5,480,602	5,496,720	
2007/07		1.00	1.1050	1.1050		120	65.32	5,541,163	5,557,440	
2008/01		1.00	0.8556	0.8556		120	78.39	5,588,573	5,604,960	
2008/07		1.00	0.6104	0.6104		120	78.39	5,622,686	5,639,160	
2009/01		0.95	1.3268	1.3268		120	74.49	5,693,560	5,714,040	
2009/07		0.95	0.6841	0.6841		120	74.49	5,730,562	5,753,160	
2010/01		0.90	0.8643	0.8643		120	64.39	5,775,140	5,802,840	
2010/07		0.90	0.7107	0.7107		120	64.39	5,812,078	5,844,120	
2011/01		0.85	0.9198	0.9198		120	71.62	5,857,517	5,897,880	
2011/07		0.85	0.9028	0.9028		120	71.62	5,902,468	5,951,160	
2012/01		0.80	0.3865	0.3865		120	73.09	5,920,718	5,974,200	
2012/07		0.80	0.9417	0.9417		120	73.09	5,965,325	6,030,480	
2013/01		0.75	0.4901	0.4901		120	73.09	5,987,254	6,060,000	
2013/07		0.75	0.6196	0.6196		120	73.09	6,015,077	6,097,560	
2014/01		0.70	0.8564	0.8564		120	73.09	6,051,137	6,149,760	
2014/07		0.70	1.2383	1.2383		120	73.09	6,103,588	6,225,960	
2015/01		0.65	0.7571	0.7571		120	72.49	6,133,624	6,273,120	
2015/09		0.65	1.5736	1.5736		120	72.49	6,196,359	6,371,880	
2016/09		0.60	1.9890	1.9890		120	76.02	6,270,306	6,498,600	

Message Code:

- | |
|--|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |
| 8 Limited to Current RS Per Bed Standard |



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193.86

Hillcrest Health Care And Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4200 WASHINGTON ST HOLLYWOOD, FL 33021-7353	1/1/2015-12/31/2015	Number of Beds: 240	Superior: 0
County: Broward [6]	Days in CR 365	Maximum: 87,600	Standard: 366
Region: South Area: 10	First Used : 2016/09	Max Annualized: 87,600	Conditional: 0
Control: Proprietary : Corporation	Last Used: 2016/09	Total Patient: 83,680	Total: 366
Current Class South Large	Unaudited	Medicare: 10,664	Inflation
Class at 1/94: South Large	Initial CR? False	Medicaid: 54,120	FY Index: 1.37939113
Operating Ex > 18 months	Medicaid Utilization	64.67495%	Semester Index: 1.44355445
Open Date: 01/01/1986	Occupancy:	95.52511%	Cost: 1.04651568
Acquired Date: 01/01/1986	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 06/27/1989	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Med # Active Date: 02/01/2012	Low Occupancy Adjustment Factor:	120.80776%	DC Sem Index: 1.30450000
Previous Med # 252531	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,442,356	3,999,241	2,520,107	986,066		9,947,770	
1a	Audit Adjustments							
2	Cost Per Diem	45.1285	73.8958	46.5652	18.2200		183.8095	
3	Cost Per Diem Inflated	47.2277	76.9023	48.7312				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.2277	76.9023	48.7312	18.2200		191.0812	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.1190		63.0546				
7	Provider Target Rate	58.1852		66.5622				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	60.0532		70.3746				
10b	Base for line 10a	56.8886		66.6661				
11	Lesser of 5,7,8,10, 10a	47.2277	76.9023	48.7312	13.6500		186.5112	
12/13	Medicaid Adjustment Rate		1.2696	0.8045				
14	Prospective Per Diem 11	47.2277	78.1719	49.5357	13.6500		188.5853	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Hillcrest Health Care And Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/27/1989		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,780,937.00		Total Amount	Per Diem
RS to Start Calcs:	1986/01	Type:	Fixed	80% Capital(1):	9,028,643	11.2817
Indexed Asset Value	11,285,804	<60% of Base:	False	20% ROE(2):	2,257,161	0.5786
FRVS Base Asset:	6,840,000	Interest Rate:	10.6343%	Insurance Cost(3):	60,776	0.7263
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	201,089	2.4031
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	77,902	0.9310
		Interest Only:	False	Replacement(3&4):	94,182	0.0000
		Yearly Payment:	889,446	Total FRVS PD:		15.9207

(1) 80% Capital (\$9,028,643) amortized at 7.7500 % for 20 years Principal & Interest of \$889,446 divided by annual available days (87600) divided by Occup. Adj. (0.90) = \$11.2817

(2) 20% ROE (\$2,257,161) times the ROE factor (0.020210) divided by annual available days (87600) divided by Occup. Adj. (0.90) = \$0.5786

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 240	Effective PBS Limitation	6,840,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.2277	47.2277	2.1427	45.0850
Direct Care	78.1719	78.1719	3.5466	74.6253
Indirect Care	49.5357	49.5357	2.2474	47.2883
Property	13.6500	15.9207	0.7223	15.1984
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				3.4862
Supplemental Rate				8.1814
Totals	188.5853	190.8560	8.6590	193.8646

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/01	12,125,940	0.00	0.8299	0.8299		240		6,840,000	6,840,000	1
1986/07		0.10	0.2974	0.2974		240		6,840,000	6,883,680	
1987/01		0.10	1.0091	1.0091		240		6,840,000	7,006,800	
1987/07		0.20	0.9007	0.9007		240		6,840,000	7,061,520	
1988/01		0.20	0.9007	0.9007		240		6,840,000	7,118,880	
1988/07		0.30	0.5899	0.5899		240		6,840,000	7,115,040	
1989/01		0.30	0.5899	0.5899		240	16.11	6,840,000	7,157,040	
1989/07		0.40	0.5899	0.5899		240	16.11	6,840,000	7,205,520	
1990/01		0.40	0.5899	0.5899		240	16.11	6,840,000	7,241,760	
1990/07		0.50	0.5899	0.5899		240	16.11	6,840,000	7,284,480	
1991/01		0.50	0.5899	0.5899		240	16.11	6,840,000	7,327,200	
1991/07		0.60	1.4932	1.4932		240	16.11	6,840,000	7,436,640	
1992/01		0.60	2.0117	2.0117		240	34.20	6,891,337	7,586,160	
1992/07		0.70	1.8152	1.8152		240	34.20	6,945,784	7,723,920	
1993/01		0.70	1.7710	1.7710		240	41.19	7,010,270	7,860,720	
1993/07		0.80	1.5329	1.5329		240	41.19	7,074,651	7,981,200	
1994/01	58,106	0.80	1.6983	1.6983		240	36.67	7,196,840	8,116,800	
1994/07		0.90	1.5991	1.5991		240	36.67	7,265,898	8,246,640	
1995/01	39,125	0.90	1.5812	1.5812		240	37.45	7,375,430	8,376,960	
1995/07		1.00	1.5250	1.5250		240	37.45	7,452,015	8,504,640	
1996/01	72,848	1.00	1.7228	1.7228		240	39.59	7,617,276	8,651,280	
1996/07		1.00	1.3294	1.3294		240	39.59	7,690,168	8,766,240	
1997/01	45,412	1.00	1.4109	1.4109		240	43.86	7,822,104	8,889,840	
1997/07		1.00	1.0917	1.0917		240	43.86	7,890,202	8,986,800	
1998/01		1.00	1.1663	1.1663		240	50.97	7,975,483	9,091,680	
1998/07		1.00	1.0794	1.0794		240	50.97	8,055,263	9,189,840	
1999/01	212,819	1.00	1.4499	1.4499		240	60.23	8,268,082	9,323,040	5
1999/07		1.00	1.2299	1.2299		240	60.23	8,488,001	9,437,760	
2000/01	129,860	1.00	1.3356	1.3356		240	65.73	8,731,227	9,563,760	
2000/07		1.00	1.1129	1.1129		240	65.73	8,828,397	9,670,080	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/01	43,814	1.00	1.2976	1.2976		240	71.64	8,986,768	9,795,600	
2001/07		1.00	0.9615	0.9615		240	64.20	9,073,176	9,889,680	
2002/01		1.00	1.0301	1.0301		240	64.20	9,166,639	9,991,440	
2002/07		1.00	0.8337	0.8337		240	64.20	9,243,061	10,074,720	
2003/01		1.00	1.3271	1.3271		240	64.20	9,365,726	10,208,400	
2003/07		1.00	1.1664	1.1664		240	64.20	9,474,968	10,327,440	
2004/01		1.00	1.1103	1.1103		240	64.20	9,580,169	10,442,160	
2004/07		1.00	0.8378	0.8378		240	72.07	9,660,432	10,529,760	
2005/01		1.00	0.8595	0.8595		240	72.07	9,743,463	10,620,240	
2005/07		1.00	0.7364	0.7364		240	71.65	9,815,214	10,698,480	
2006/01		1.00	0.9068	0.9068		240	68.63	9,904,218	10,795,440	
2006/07		0.95	0.8133	0.8133		240	68.63	9,980,738	10,883,280	
2007/01		0.95	1.0133	1.0133		240	64.34	10,076,813	10,993,440	
2007/07		0.90	1.1050	1.1050		240	64.34	10,177,027	11,114,880	
2008/01		0.90	0.8556	0.8556		240	64.34	10,255,390	11,209,920	
2008/07		0.85	0.6104	0.6104		240	64.30	10,308,595	11,278,320	
2009/01		0.85	1.3268	1.3268		240	60.70	10,424,855	11,428,080	
2009/07		0.80	0.6841	0.6841		240	60.70	10,481,910	11,506,320	
2010/01		0.80	0.8643	0.8643		240	60.70	10,554,382	11,605,680	
2010/07		0.75	0.7107	0.7107		240	62.01	10,610,637	11,688,240	
2011/01		0.75	0.9198	0.9198		240	57.87	10,683,840	11,795,760	
2011/07		0.70	0.9028	0.9028		240	57.87	10,751,362	11,902,320	
2012/01		0.70	0.3865	0.3865		240	65.79	10,780,455	11,948,400	
2012/07		0.65	0.9417	0.9417		240	65.79	10,846,442	12,060,960	
2013/01		0.65	0.4901	0.4901		240	65.79	10,880,999	12,120,000	
2013/07		0.60	0.6196	0.6196		240	65.79	10,921,455	12,195,120	
2014/01		0.60	0.8564	0.8564		240	65.79	10,977,569	12,299,520	
2014/07		0.55	1.2383	1.2383		240	65.79	11,052,337	12,451,920	
2015/01		0.55	0.7571	0.7571		240	66.76	11,098,359	12,546,240	
2015/09		0.50	1.5736	1.5736		240	66.76	11,185,681	12,743,760	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2016/09		0.45	1.9890	1.9890		240	64.67	11,285,804	12,997,200	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Health Central Park

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : Other CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
411 NORTH DILLARD STREET	10/1/2014-9/30/2015	Number of Beds: 228	Superior: 0
WINTER GARDEN, FL 34787	Days in CR 365	Maximum: 83,220	Standard: 366
County: Orange [48]	First Used : 2016/09	Max Annualized: 83,220	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 75,778	Total: 366
Control: Nonprofit : Other	Unaudited	Medicare: 8,282	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 54,314	FY Index: 1.36985926
Class at 1/94: North Large	Medicaid Utilization	71.67516%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.05744%	Cost: 1.05379764
Open Date: 10/01/1977	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1977	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24600000
Entered Medicaid 11/01/1977	Low Occupancy Adjustment Factor:	115.15763%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04695024
Previous Med # 204811			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,984,047	5,186,994	2,680,127	376,396		11,227,564	
1a	Audit Adjustments							
2	Cost Per Diem	54.9407	95.5001	49.3450	6.9300		206.7158	
3	Cost Per Diem Inflated	57.8964	99.9839	51.9996				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.8964	99.9839	51.9996	6.9300		216.8099	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.8710		59.7125				
7	Provider Target Rate	56.8677		63.0342				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	56.8063	99.9839	51.9996	6.9300		215.7198	
12/13	Medicaid Adjustment Rate		2.4381	1.2680				
14	Prospective Per Diem 11	56.8063	102.4220	53.2676	6.9300		219.4259	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Health Central Park

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	5,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1977/07	Type:	Fixed	80% Capital(1):	8,908,486	13.7197
Indexed Asset Value	11,135,607	<60% of Base:	False	20% ROE(2):	2,227,121	0.6072
FRVS Base Asset:	1,411,740	Interest Rate:	9.9428%	Insurance Cost(3):	53,321	0.7036
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	0	0.0000
ROE Factor	0.020420	Amortization Rate:	9.9428%	Home Office(3):	51,096	0.6743
		Interest Only:	False	Replacement(3&4):	252,816	0.0000
		Yearly Payment:	1,027,578	Total FRVS PD:		15.7048

(1) 80% Capital (\$8,908,486) amortized at 9.9428 % for 20 years Principal & Interest of \$1,027,578 divided by annual available days (83220) divided by Occup. Adj. (0.90) = \$13.7197

(2) 20% ROE (\$2,227,121) times the ROE factor (0.020420) divided by annual available days (83220) divided by Occup. Adj. (0.90) = \$0.6072

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	118	Effective PBS Limitation	54,155
			3,363,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	102.4220	102.4220	4.6468	97.7752
Indirect Care	53.2676	53.2676	2.4167	50.8509
Property	6.9300	15.7048	0.7125	14.9923
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				4.0585
Supplemental Rate				8.1814
Totals	219.4259	228.2007	10.3533	230.0873

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1977/07	957,119	0.00	5.0576	3.0000	2.0576	118	100.00	957,119	2,004,702	
1978/01		0.10	6.7973	3.0000	3.7973	118	100.00	959,990	2,099,810	
1978/07		0.10	9.3367	3.0000	6.3367	118	100.00	962,870	2,216,040	
1979/01	9,555	0.20	11.4640	3.0000	8.4640	118	100.00	978,202	2,329,674	
1979/07	107	0.20	12.6622	3.0000	9.6622	118	100.00	984,178	2,427,496	
1980/01		0.30	15.8279	3.0000	12.8279	118	55.00	993,036	2,577,238	
1980/07	47,495	0.30	16.6385	3.0000	13.6385	118	55.00	1,049,468	2,675,414	
1981/01		0.40	17.4626	3.0000	14.4626	118	55.00	1,062,062	2,777,720	
1981/07	35,845	0.40	17.0514	3.0000	14.0514	118	55.00	1,110,652	2,849,582	
1982/01	792	0.50	16.7274	3.0000	13.7274	118	72.07	1,128,104	2,925,928	
1982/07	77,661	0.50	16.0251	3.0000	13.0251	118	72.07	1,222,687	2,993,070	
1983/04		0.60	15.6539	3.0000	12.6539	118	75.34	1,244,695	3,071,776	
1983/07	4,799	0.60	16.6117	3.0000	13.6117	118	75.34	1,271,899	3,193,316	
1984/01		0.70	14.9069	3.0000	11.9069	118	74.10	1,298,609	3,234,734	
1984/07	1,675	0.70	13.8248	3.0000	10.8248	118	74.10	1,327,555	3,296,802	
1985/01		0.80	11.9719	3.0000	8.9719	118	74.10	1,359,416	3,334,562	
1985/10	19,698	0.80	9.8241	3.0000	6.8241	118	74.10	1,411,740	3,363,000	
1986/01		0.90	7.6540	3.0000	4.6540	118	74.10	1,449,857	3,390,966	
1986/07		0.90	4.9514	3.0000	1.9514	118	74.09	1,489,003	3,384,476	
1987/01		1.00	2.9605	2.9605		118	73.48	1,533,085	3,445,010	
1987/07		1.00	0.9007	0.9007		118	73.48	1,546,893	3,471,914	
1988/01	113,307	1.00	0.9007	0.9007		228	77.86	1,674,133	6,762,936	
1988/07	3,571,844	1.00	0.5899	0.5899		228	77.86	5,255,853	6,759,288	
1989/01	820,527	1.00	0.5899	0.5899		228	76.98	6,107,384	6,799,188	
1989/07		1.00	0.5899	0.5899		228	76.98	6,143,411	6,845,244	
1990/01		1.00	0.5899	0.5899		228	76.98	6,179,651	6,879,672	
1990/07	237,896	1.00	0.5899	0.5899		228	76.33	6,454,001	6,920,256	
1991/01		1.00	0.5899	0.5899		228	76.33	6,492,073	6,960,840	
1991/07	97,433	1.00	1.4932	1.4932		228	77.39	6,686,446	7,064,808	
1992/01		1.00	2.0117	2.0117		228	77.39	6,820,957	7,206,852	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1992/07		1.00	1.8152	1.8152		228	78.34	6,944,771	7,337,724	
1993/01		1.00	1.7710	1.7710		228	78.34	7,067,763	7,467,684	
1993/07		1.00	1.5329	1.5329		228	76.84	7,176,105	7,582,140	
1994/01	936,966	1.00	1.6983	1.6983		228	76.87	8,234,943	7,710,960	
1994/07		1.00	1.5991	1.5991		228	76.87	8,366,628	7,834,308	
1995/01		1.00	1.5812	1.5812		228	76.87	8,498,921	7,958,112	
1995/07	155,151	1.00	1.5250	1.5250		228	80.21	8,783,681	8,079,408	
1996/01		1.00	1.7228	1.7228		228	80.21	8,935,006	8,218,716	
1996/07	55,572	1.00	1.3294	1.3294		228	79.64	8,935,006	8,327,928	3
1997/01		1.00	1.4109	1.4109		228	79.64	8,935,006	8,445,348	3
1997/07		1.00	1.0917	1.0917		228	78.07	8,935,006	8,537,460	3
1998/01		0.95	1.1663	1.1663		228	78.07	8,935,006	8,637,096	3
1998/07		0.95	1.0794	1.0794		228	80.77	8,935,006	8,730,348	3
1999/01	350,718	0.90	1.4499	1.4499		228	77.22	8,935,006	8,856,888	3
1999/07		0.90	1.2299	1.2299		228	77.22	8,965,872	8,965,872	8
2000/01		0.85	1.3356	1.3356		228	77.22	8,965,872	9,085,572	5
2000/07		0.85	1.1129	1.1129		228	79.97	9,153,442	9,186,576	
2001/01		0.80	1.2976	1.2976		228	79.97	9,153,442	9,305,820	5
2001/07	42,217	0.80	0.9615	0.9615		228	80.93	9,361,820	9,395,196	
2002/01		0.75	1.0301	1.0301		228	80.93	9,434,149	9,491,868	
2002/07		0.75	0.8337	0.8337		228	81.80	9,493,141	9,570,984	
2003/01		0.70	1.3271	1.3271		228	81.80	9,581,332	9,697,980	
2003/07	29,875	0.70	1.1664	1.1664		228	80.46	9,689,439	9,811,068	
2004/01		0.65	1.1103	1.1103		228	77.52	9,759,368	9,920,052	
2004/07		0.65	0.8378	0.8378		228	77.52	9,812,518	10,003,272	
2005/01	61,379	0.60	0.8595	0.8595		228	75.57	9,924,500	10,089,228	
2005/07		0.60	0.7364	0.7364		228	75.57	9,968,346	10,163,556	
2006/01		0.55	0.9068	0.9068		228	75.57	10,018,058	10,255,668	
2006/07	152,893	0.55	0.8133	0.8133		228	70.47	10,215,762	10,339,116	
2007/01		0.50	1.0133	1.0133		228	70.33	10,267,525	10,443,768	



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 9/30/2015

0 048441-00 - 2016/09

230.09

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/07		0.50	1.1050	1.1050		228	70.33	10,324,253	10,559,136	
2008/01		0.45	0.8556	0.8556		228	70.33	10,364,001	10,649,424	
2008/07	65,589	0.45	0.6104	0.6104		228	67.83	10,458,060	10,714,404	
2009/01		0.40	1.3268	1.3268		228	64.65	10,513,561	10,856,676	
2009/07		0.40	0.6841	0.6841		228	64.65	10,542,326	10,931,004	
2010/01		0.35	0.8643	0.8643		228	64.65	10,574,217	11,025,396	
2010/07	129,517	0.35	0.7107	0.7107		228	65.56	10,730,032	11,103,828	
2011/01		0.30	0.9198	0.9198		228	65.56	10,759,636	11,205,972	
2011/07		0.30	0.9028	0.9028		228	65.24	10,788,773	11,307,204	
2012/01		0.25	0.3865	0.3865		228	68.65	10,799,195	11,350,980	
2012/07		0.25	0.9417	0.9417		228	68.65	10,824,616	11,457,912	
2013/01		0.20	0.4901	0.4901		228	68.65	10,835,224	11,514,000	
2013/07	110,220	0.20	0.6196	0.6196		228	65.26	10,958,869	11,585,364	
2014/01		0.15	0.8564	0.8564		228	65.26	10,972,951	11,684,544	
2014/07	52,435	0.15	1.2383	1.2383		228	67.00	11,045,763	11,829,324	
2015/01	52,930	0.10	0.7571	0.7571		228	72.07	11,107,055	11,918,928	
2015/09		0.10	1.5736	1.5736		228	72.07	11,124,538	12,106,572	
2016/09		0.05	1.9890	1.9890		228	71.68	11,135,607	12,347,340	

Message Code:

- | | |
|---|--|
| 3 | Index Cost Limitation - January 1996 |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 048441093020151001201402252016100607



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0048611-00 - 2016/09

210.68

Ocala Oaks Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3930 E SILVER SPRINGS BLVD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 366
OCALA, FL 34470-5006	Days in CR 365	Maximum: 43,800	Standard: 0
County: Marion [42]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 39,651	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,571	Inflation
Current Class North Large	Initial CR? False	Medicaid: 28,169	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	71.04234%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	90.52740%	Cost: 1.07573004
Open Date: 04/04/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/04/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 04/18/1991	Low Occupancy Adjustment Factor:	114.48730%	DC Sem Index: 1.30450000
Med # Active Date: 06/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 214043			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,175,162	2,226,024	1,107,113	886,760		5,395,059	
1a	Audit Adjustments							
2	Cost Per Diem	41.7183	79.0239	39.3025	31.4800		191.5247	
3	Cost Per Diem Inflated	44.8776	83.8785	42.2789				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.8776	83.8785	42.2789	31.4800		202.5150	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.5568		61.2278				
7	Provider Target Rate	57.5917		64.6338				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	57.9006		71.3634				
10b	Base for line 10a	54.8494		67.6028				
11	Lesser of 5,7,8,10, 10a	44.8776	83.8785	42.2789	13.6500		184.6850	
12/13	Medicaid Adjustment Rate		1.9856	1.0009				
14	Prospective Per Diem 11	44.8776	85.8641	43.2798	13.6500		187.6715	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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210.68

Ocala Oaks Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 04/18/1991		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,899,145.00		Total Amount	Per Diem
RS to Start Calcs:	1991/01	Type:	Fixed	80% Capital(1):	4,476,710	13.8353
Indexed Asset Value	5,595,887	<60% of Base:	False	20% ROE(2):	1,119,177	0.6448
FRVS Base Asset:	3,642,240	Interest Rate:	10.7500%	Insurance Cost(3):	42,773	1.0787
Occup Adj Factor	0.9000	Chase Rate:	10.0000%	Taxes Cost(3):	64,760	1.6333
ROE Factor	0.022710	Amortization Rate:	10.7500%	Home Office(3):	8,688	0.2191
		Interest Only:	False	Replacement(3&4):	67,616	0.0000
		Yearly Payment:	545,386	Total FRVS PD:		17.4112

(1) 80% Capital (\$4,476,710) amortized at 10.7500 % for 20 years Principal & Interest of \$545,386 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$13.8353

(2) 20% ROE (\$1,119,177) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6448

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1990	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.8776	44.8776	2.0361	42.8415
Direct Care	85.8641	85.8641	3.8956	81.9685
Indirect Care	43.2798	43.2798	1.9636	41.3162
Property	13.6500	17.4112	0.7899	16.6213
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7559
Supplemental Rate				8.1814
Totals	187.6715	191.4327	8.6852	210.6848

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 048611-00 - 2016/09

210.68

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/01	5,853,321	0.00	0.5899	0.5899		120	36.37	3,642,240	3,642,240	1
1991/07		0.10	1.4932	1.4932		120	36.37	3,645,836	3,718,320	
1992/01		0.10	2.0117	2.0117		120	36.37	3,650,687	3,793,080	
1992/07		0.20	1.8152	1.8152		120	36.37	3,659,450	3,861,960	
1993/01		0.20	1.7710	1.7710		120	36.37	3,659,450	3,930,360	5
1993/07		0.30	1.5329	1.5329		120	36.37	3,668,021	3,990,600	5
1994/01		0.30	1.6983	1.6983		120	36.37	3,691,572	4,058,400	
1994/07		0.40	1.5991	1.5991		120	55.85	3,715,183	4,123,320	
1995/01		0.40	1.5812	1.5812		120	60.14	3,738,682	4,188,480	
1995/07		0.50	1.5250	1.5250		120	60.14	3,767,189	4,252,320	
1996/01		0.50	1.7228	1.7228		120	60.14	3,799,640	4,325,640	
1996/07		0.60	1.3294	1.3294		120	55.93	3,829,946	4,383,120	
1997/01		0.60	1.4109	1.4109		120	55.93	3,829,946	4,444,920	5
1997/07		0.70	1.0917	1.0917		120	54.16	3,891,431	4,493,400	
1998/01		0.70	1.1663	1.1663		120	60.63	3,923,201	4,545,840	
1998/07		0.80	1.0794	1.0794		120	60.63	3,957,078	4,594,920	
1999/01		0.80	1.4499	1.4499		120	60.63	4,002,976	4,661,520	
1999/07		0.90	1.2299	1.2299		120	69.59	4,047,285	4,718,880	
2000/01		0.90	1.3356	1.3356		120	70.95	4,095,933	4,781,880	
2000/07		1.00	1.1129	1.1129		120	70.95	4,141,517	4,835,040	
2001/01		1.00	1.2976	1.2976		120	66.16	4,195,257	4,897,800	
2001/07		1.00	0.9615	0.9615		120	66.16	4,235,594	4,944,840	
2002/01	29,291	1.00	1.0301	1.0301		120	67.54	4,308,516	4,995,720	
2002/07		1.00	0.8337	0.8337		120	67.54	4,344,436	5,037,360	
2003/01		1.00	1.3271	1.3271		120	68.29	4,402,091	5,104,200	
2003/07		1.00	1.1664	1.1664		120	68.29	4,453,437	5,163,720	
2004/01		1.00	1.1103	1.1103		120	70.29	4,502,884	5,221,080	
2004/07		1.00	0.8378	0.8378		120	70.29	4,540,609	5,264,880	
2005/01		1.00	0.8595	0.8595		120	64.01	4,579,636	5,310,120	
2005/07		1.00	0.7364	0.7364		120	64.01	4,613,360	5,349,240	



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210.68

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01		1.00	0.9068	0.9068		120	65.02	4,655,194	5,397,720	
2006/07		1.00	0.8133	0.8133		120	65.02	4,693,055	5,441,640	
2007/01		1.00	1.0133	1.0133		120	65.02	4,740,610	5,496,720	
2007/07		1.00	1.1050	1.1050		120	63.94	4,792,994	5,557,440	
2008/01		1.00	0.8556	0.8556		120	63.94	4,834,003	5,604,960	
2008/07		1.00	0.6104	0.6104		120	62.73	4,863,510	5,639,160	
2009/01		1.00	1.3268	1.3268		120	62.36	4,928,039	5,714,040	
2009/07		1.00	0.6841	0.6841		120	62.36	4,961,752	5,753,160	
2010/01		1.00	0.8643	0.8643		120	62.36	5,004,636	5,802,840	
2010/07		1.00	0.7107	0.7107		120	67.34	5,040,204	5,844,120	
2011/01	18,412	1.00	0.9198	0.9198		120	72.05	5,104,976	5,897,880	
2011/07		0.95	0.9028	0.9028		120	72.05	5,148,761	5,951,160	
2012/01		0.95	0.3865	0.3865		120	68.86	5,167,667	5,974,200	
2012/07		0.90	0.9417	0.9417		120	68.86	5,211,463	6,030,480	
2013/01		0.90	0.4901	0.4901		120	68.86	5,234,451	6,060,000	
2013/07		0.85	0.6196	0.6196		120	68.86	5,262,021	6,097,560	
2014/01		0.85	0.8564	0.8564		120	68.86	5,300,323	6,149,760	
2014/07		0.80	1.2383	1.2383		120	68.86	5,352,828	6,225,960	
2015/01	69,419	0.80	0.7571	0.7571		120	69.46	5,454,669	6,273,120	
2015/09		0.75	1.5736	1.5736		120	69.46	5,519,045	6,371,880	
2016/09		0.70	1.9890	1.9890		120	71.04	5,595,887	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 048611123120140101201403272015153558



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0048807-00 - 2016/09

264.60

Riviera Health Resort

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6901 YUMURI STREET	12/1/2013-2/28/2015	Number of Beds: 223	Superior: 0
CORAL GABLES, FL 33146	Days in CR 455	Maximum: 101,465	Standard: 366
County: Dade [13]	First Used : 2016/09	Max Annualized: 81,395	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 96,896	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 35,164	Inflation
Current Class South Large	Initial CR? False	Medicaid: 44,094	FY Index: 1.34462269
Class at 1/94: South Large	Medicaid Utilization	45.50652%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.49697%	Cost: 1.07357585
Open Date: 04/24/2012	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/24/2012	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23099675
Entered Medicaid 06/14/2012	Low Occupancy Adjustment Factor:	120.77217%	DC Sem Index: 1.30450000
Med # Active Date: 06/14/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05971035
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,704,150	4,763,733	2,873,190	2,102,402		12,443,475
1a	Audit Adjustments						
2	Cost Per Diem	61.3269	108.0359	65.1606	47.6800		282.2034
3	Cost Per Diem Inflated	65.8391	114.4868	69.9548			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	65.8391	114.4868	69.9548	47.6800		297.9607
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	69.0994		89.2182			
7	Provider Target Rate	72.9433		94.1812			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	62.0020		72.1739			
10b	Base for line 10a	58.7347		68.3706			
11	Lesser of 5,7,8,10, 10a	58.7902	104.3884	69.9548	13.6500		246.7834
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	58.7902	104.3884	69.9548	13.6500		246.7834
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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264.60

Riviera Health Resort

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/14/2012		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	31,500,000.00		Total Amount	Per Diem
RS to Start Calcs:	2012/01	Type:	Fixed	80% Capital(1):	9,253,719	11.0798
Indexed Asset Value	11,567,149	<60% of Base:	False	20% ROE(2):	2,313,430	0.7001
FRVS Base Asset:	11,102,055	Interest Rate:	6.9000%	Insurance Cost(3):	560,866	5.7883
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	410,888	4.2405
ROE Factor	0.022170	Amortization Rate:	6.2500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	811,657	Total FRVS PD:		21.8087

(1) 80% Capital (\$9,253,719) amortized at 6.2500 % for 20 years Principal & Interest of \$811,657 divided by annual available days (81395) divided by Occup. Adj. (0.90) = \$11.0798

(2) 20% ROE (\$2,313,430) times the ROE factor (0.022170) divided by annual available days (81395) divided by Occup. Adj. (0.90) = \$0.7001

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/2011	Current RS PBS:	49,593
Comparison Bed	223	Effective PBS Limitation	54,155
			11,059,239

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	104.3884	104.3884	4.7360	99.6524
Indirect Care	69.9548	69.9548	3.1738	66.7810
Property	13.6500	21.8087	0.9894	20.8193
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.0456
Supplemental Rate				8.1814
Totals	246.7834	254.9421	11.5665	264.6026

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 2/28/2015

0 048807-00 - 2016/09
264.60

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/01	46,076,969	0.00	0.3865	0.3865		223	35.93	11,102,055	11,102,055	8
2012/07	80,808	0.10	0.9417	0.9417		223	35.93	11,189,695	11,206,642	
2013/01	74,283	0.10	0.4901	0.4901		223	35.93	11,261,500	11,261,500	8
2013/07	39,712	0.20	0.6196	0.6196		223	35.93	11,310,327	11,331,299	
2014/01		0.20	0.8564	0.8564		223	35.93	11,322,984	11,428,304	
2014/07		0.30	1.2383	1.2383		223	35.93	11,350,464	11,569,909	
2015/01		0.30	0.7571	0.7571		223	35.93	11,367,303	11,657,548	
2015/09		0.40	1.5736	1.5736		223	35.93	11,414,042	11,841,077	
2016/09	59,180	0.50	1.9890	1.9890		223	45.51	11,567,149	12,076,565	

Message Code:

8 Limited to Current RS Per Bed Standard
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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
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204.85

South Dade Nursing and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
17475 S DIXIE HWY	1/1/2015-12/31/2015	Number of Beds: 180	Superior: 0
MIAMI, FL 33157	Days in CR 365	Maximum: 65,700	Standard: 366
County: Dade [13]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 65,562	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 13,224	Inflation
Current Class South Large	Initial CR? False	Medicaid: 46,646	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	71.14792%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	99.78995%	Cost: 1.04651568
Open Date: 01/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 01/01/1985	Low Occupancy Adjustment Factor:	126.20137%	DC Sem Index: 1.30450000
Med # Active Date: 06/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 214027			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,308,844	2,990,803	2,044,235	1,137,229		8,481,111
1a	Audit Adjustments						
2	Cost Per Diem	49.4971	64.1170	43.8244	24.3800		181.8185
3	Cost Per Diem Inflated	51.7995	66.7257	45.8629			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	51.7995	66.7257	45.8629	24.3800		188.7681
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	50.3128		58.5405			
7	Provider Target Rate	53.1116		61.7970			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	55.5897		67.5321			
10b	Base for line 10a	52.6603		63.9734			
11	Lesser of 5,7,8,10, 10a	51.7995	66.7257	45.8629	13.6500		178.0381
12/13	Medicaid Adjustment Rate		1.5875	1.0911			
14	Prospective Per Diem 11	51.7995	68.3132	46.9540	13.6500		180.7167
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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204.85

South Dade Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:	04/01/2004	Amount:	6,105,900.00	Total Amount	Per Diem
RS to Start Calcs:	1985/01	Type:	Fixed	80% Capital(1):	6,861,631 14.3734
Indexed Asset Value	8,577,039	<60% of Base:	False	20% ROE(2):	1,715,408 0.5863
FRVS Base Asset:	5,130,000	Interest Rate:	11.0000%	Insurance Cost(3):	148,902 2.2712
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	160,322 2.4453
ROE Factor	0.020210	Amortization Rate:	11.0000%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	196,909 0.0000
		Yearly Payment:	849,900	Total FRVS PD:	19.6762

(1) 80% Capital (\$6,861,631) amortized at 11.0000 % for 20 years Principal & Interest of \$849,900 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$14.3734

(2) 20% ROE (\$1,715,408) times the ROE factor (0.020210) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.5863

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.7995	51.7995	2.3501	49.4494
Direct Care	68.3132	68.3132	3.0993	65.2139
Indirect Care	46.9540	46.9540	2.1303	44.8237
Property	13.6500	19.6762	0.8927	18.7835
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.3977
Supplemental Rate				8.1814
Totals	180.7167	186.7429	8.4724	204.8496

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/01	6,600,374	0.00	1.1471	1.1471		180	69.32	6,600,374	5,086,620	
1985/10		0.10	0.8522	0.8522		180	69.32	5,130,000	5,130,000	1
1986/01		0.10	0.8299	0.8299		180	69.32	5,134,258	5,172,660	
1986/07		0.20	0.2974	0.2974		180	69.32	5,137,313	5,162,760	
1987/01		0.20	1.0091	1.0091		180	69.32	5,147,680	5,255,100	
1987/07		0.30	0.9007	0.9007		180	86.04	5,161,589	5,296,140	
1988/01		0.30	0.9007	0.9007		180	86.04	5,175,536	5,339,160	
1988/07		0.40	0.5899	0.5899		180	86.91	5,187,750	5,336,280	
1989/01		0.40	0.5899	0.5899		180	86.91	5,199,993	5,367,780	
1989/07		0.50	0.5899	0.5899		180	87.27	5,215,333	5,404,140	
1990/01		0.50	0.5899	0.5899		180	87.27	5,230,718	5,431,320	
1990/07		0.60	0.5899	0.5899		180	81.97	5,249,230	5,463,360	
1991/01		0.60	0.5899	0.5899		180	81.97	5,267,807	5,495,400	
1991/07		0.70	1.4932	1.4932		180	81.97	5,322,866	5,577,480	
1992/01		0.70	2.0117	2.0117		180	84.41	5,322,866	5,689,620	5
1992/07		0.80	1.8152	1.8152		180	79.97	5,397,823	5,792,940	5
1993/01		0.80	1.7710	1.7710		180	79.97	5,476,210	5,895,540	5
1993/07		0.90	1.5329	1.5329		180	70.92	5,553,797	5,985,900	5
1994/01		0.90	1.6983	1.6983		180	70.92	5,630,417	6,087,600	5
1994/07		1.00	1.5991	1.5991		180	70.92	5,716,478	6,184,980	5
1995/01		1.00	1.5812	1.5812		180	70.92	5,807,890	6,282,720	5
1995/07		1.00	1.5250	1.5250		180	70.92	5,899,724	6,378,480	5
1996/01		1.00	1.7228	1.7228		180	70.92	5,989,695	6,488,460	5
1996/07		1.00	1.3294	1.3294		180	70.82	6,092,885	6,574,680	5
1997/01		1.00	1.4109	1.4109		180	70.82	6,173,884	6,667,380	5
1997/07		1.00	1.0917	1.0917		180	71.70	6,329,342	6,740,100	
1998/01		1.00	1.1663	1.1663		180	71.70	6,403,161	6,818,760	
1998/07		1.00	1.0794	1.0794		180	71.88	6,472,277	6,892,380	
1999/01		1.00	1.4499	1.4499		180	78.25	6,472,277	6,992,280	5
1999/07		1.00	1.2299	1.2299		180	78.25	6,566,119	7,078,320	5



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204.85

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/01		1.00	1.3356	1.3356		180	81.27	6,735,652	7,172,820	
2000/07		1.00	1.1129	1.1129		180	81.27	6,810,613	7,252,560	
2001/01		1.00	1.2976	1.2976		180	81.27	6,898,988	7,346,700	
2001/07		1.00	0.9615	0.9615		180	80.40	6,965,322	7,417,260	
2002/01		1.00	1.0301	1.0301		180	85.53	7,037,072	7,493,580	
2002/07		1.00	0.8337	0.8337		180	85.53	7,095,740	7,556,040	
2003/01		1.00	1.3271	1.3271		180	86.10	7,189,908	7,656,300	
2003/07		1.00	1.1664	1.1664		180	86.10	7,273,771	7,745,580	
2004/01		1.00	1.1103	1.1103		180	84.03	7,354,532	7,831,620	
2004/07		1.00	0.8378	0.8378		180	84.03	7,416,148	7,897,320	
2005/01		1.00	0.8595	0.8595		180	84.03	7,479,890	7,965,180	
2005/07		0.95	0.7364	0.7364		180	79.17	7,532,219	8,023,860	
2006/01		0.95	0.9068	0.9068		180	78.32	7,597,109	8,096,580	
2006/07		0.90	0.8133	0.8133		180	78.32	7,652,720	8,162,460	
2007/01		0.90	1.0133	1.0133		180	80.21	7,722,513	8,245,080	
2007/07		0.85	1.1050	1.1050		180	80.21	7,795,051	8,336,160	
2008/01		0.85	0.8556	0.8556		180	80.21	7,851,744	8,407,440	
2008/07		0.80	0.6104	0.6104		180	76.50	7,890,084	8,458,740	
2009/01		0.80	1.3268	1.3268		180	71.26	7,973,829	8,571,060	
2009/07		0.75	0.6841	0.6841		180	71.26	8,014,743	8,629,740	
2010/01		0.75	0.8643	0.8643		180	76.99	8,066,695	8,704,260	
2010/07		0.70	0.7107	0.7107		180	76.99	8,106,827	8,766,180	
2011/01		0.70	0.9198	0.9198		180	76.99	8,159,027	8,846,820	
2011/07		0.65	0.9028	0.9028		180	81.52	8,206,904	8,926,740	
2012/01		0.65	0.3865	0.3865		180	61.01	8,227,520	8,961,300	
2012/07		0.60	0.9417	0.9417		180	61.01	8,274,005	9,045,720	
2013/01		0.60	0.4901	0.4901		180	61.01	8,298,339	9,090,000	
2013/07		0.55	0.6196	0.6196		180	61.01	8,326,620	9,146,340	
2014/01		0.55	0.8564	0.8564		180	61.01	8,365,838	9,224,640	
2014/07		0.50	1.2383	1.2383		180	61.01	8,417,639	9,338,940	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/01		0.50	0.7571	0.7571		180	66.40	8,449,508	9,409,680	
2015/09		0.45	1.5736	1.5736		180	66.40	8,509,339	9,557,820	
2016/09		0.40	1.9890	1.9890		180	71.15	8,577,039	9,747,900	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 054789123120150101201504282016164511



Florida Agency for Health Care Administration
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215.59

Golden Glades Nursing and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
220 SIERRA DRIVE	1/1/2014-12/31/2014	Number of Beds: 180	Superior: 0
MIAMI, FL 33179	Days in CR 365	Maximum: 65,700	Standard: 335
County: Dade [13]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 31
Region: South Area: 11	Last Used: 2016/09	Total Patient: 65,575	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 14,727	Inflation
Current Class South Large	Initial CR? False	Medicaid: 47,023	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	71.70873%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	99.80974%	Cost: 1.07573004
Open Date: 09/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 09/01/1984	Low Occupancy Adjustment Factor:	126.22640%	DC Sem Index: 1.30450000
Med # Active Date: 06/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 207993			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,316,880	3,241,980	2,039,937	833,718		8,432,515
1a	Audit Adjustments						
2	Cost Per Diem	49.2712	68.9446	43.3817	17.7300		179.3275
3	Cost Per Diem Inflated	53.0025	73.1800	46.6670			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	53.0025	73.1800	46.6670	17.7300		190.5795
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	53.1208		71.7988			
7	Provider Target Rate	56.0758		75.7928			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	56.5440		73.2875			
10b	Base for line 10a	53.5643		69.4255			
11	Lesser of 5,7,8,10, 10a	53.0025	73.1800	46.6670	13.6500		186.4995
12/13	Medicaid Adjustment Rate		1.6358	1.0432			
14	Prospective Per Diem 11	53.0025	74.8158	47.7102	13.6500		189.1785
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Golden Glades Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1998	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,469,400.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	7,359,889	16.0832
Indexed Asset Value	9,199,861	<60% of Base:	False	20% ROE(2):	1,839,972	0.7067
FRVS Base Asset:	5,130,000	Interest Rate:	11.6500%	Insurance Cost(3):	170,583	2.6013
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	142,972	2.1803
ROE Factor	0.022710	Amortization Rate:	11.6500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	77,962	0.0000
		Yearly Payment:	951,001	Total FRVS PD:		21.5715

(1) 80% Capital (\$7,359,889) amortized at 11.6500 % for 20 years Principal & Interest of \$951,001 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$16.0832

(2) 20% ROE (\$1,839,972) times the ROE factor (0.022710) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.7067

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.0025	53.0025	2.4047	50.5978
Direct Care	74.8158	74.8158	3.3944	71.4214
Indirect Care	47.7102	47.7102	2.1646	45.5456
Property	13.6500	21.5715	0.9787	20.5928
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.2556
Supplemental Rate				8.1814
Totals	189.1785	197.1000	8.9424	215.5946

Medicaid Trend Adjustment



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215.59

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	7,752,047	0.00	1.9179	1.9179		180	67.50	7,752,047	5,029,020	
1985/01	6,835	0.10	1.1471	1.1471		180	67.50	7,767,774	5,086,620	
1985/10		0.10	0.8522	0.8522		180	67.50	5,130,000	5,130,000	1
1986/01		0.20	0.8299	0.8299		180	67.50	5,138,516	5,172,660	
1986/07		0.20	0.2974	0.2974		180	67.50	5,141,573	5,162,760	
1987/01		0.30	1.0091	1.0091		180	67.50	5,157,137	5,255,100	
1987/07		0.30	0.9007	0.9007		180	76.71	5,171,072	5,296,140	
1988/01		0.40	0.9007	0.9007		180	76.71	5,189,703	5,339,160	
1988/07		0.40	0.5899	0.5899		180	78.58	5,201,951	5,336,280	
1989/01		0.50	0.5899	0.5899		180	78.58	5,217,297	5,367,780	
1989/07		0.50	0.5899	0.5899		180	80.14	5,232,688	5,404,140	
1990/01		0.60	0.5899	0.5899		180	80.14	5,251,206	5,431,320	
1990/07		0.60	0.5899	0.5899		180	77.87	5,269,790	5,463,360	
1991/01		0.70	0.5899	0.5899		180	77.87	5,291,549	5,495,400	
1991/07	148,648	0.70	1.4932	1.4932		180	78.97	5,495,504	5,577,480	
1992/01		0.80	2.0117	2.0117		180	78.97	5,583,949	5,689,620	
1992/07		0.80	1.8152	1.8152		180	70.88	5,665,039	5,792,940	
1993/01		0.90	1.7710	1.7710		180	70.88	5,755,334	5,895,540	
1993/07		0.90	1.5329	1.5329		180	70.94	5,834,735	5,985,900	
1994/01		1.00	1.6983	1.6983		180	70.94	5,933,826	6,087,600	
1994/07	89,800	1.00	1.5991	1.5991		180	74.85	6,118,514	6,184,980	
1995/01		1.00	1.5812	1.5812		180	74.85	6,215,260	6,282,720	
1995/07		1.00	1.5250	1.5250		180	77.51	6,310,043	6,378,480	
1996/01		1.00	1.7228	1.7228		180	77.51	6,418,752	6,488,460	
1996/07		1.00	1.3294	1.3294		180	76.85	6,504,083	6,574,680	
1997/01		1.00	1.4109	1.4109		180	76.85	6,595,849	6,667,380	
1997/07	33,943	1.00	1.0917	1.0917		180	80.43	6,701,799	6,740,100	
1998/01		1.00	1.1663	1.1663		180	80.43	6,779,962	6,818,760	
1998/07		1.00	1.0794	1.0794		180	79.56	6,779,962	6,892,380	5
1999/01		1.00	1.4499	1.4499		180	79.56	6,952,509	6,992,280	



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215.59

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		180	82.76	7,038,018	7,078,320	
2000/01		1.00	1.3356	1.3356		180	82.76	7,132,018	7,172,820	
2000/07		1.00	1.1129	1.1129		180	84.89	7,211,390	7,252,560	
2001/01		1.00	1.2976	1.2976		180	83.10	7,304,965	7,346,700	
2001/07		1.00	0.9615	0.9615		180	83.10	7,375,202	7,417,260	
2002/01		1.00	1.0301	1.0301		180	86.61	7,451,174	7,493,580	
2002/07		1.00	0.8337	0.8337		180	86.61	7,513,294	7,556,040	
2003/01		1.00	1.3271	1.3271		180	89.37	7,613,003	7,656,300	
2003/07		1.00	1.1664	1.1664		180	89.37	7,701,801	7,745,580	
2004/01		1.00	1.1103	1.1103		180	86.89	7,787,314	7,831,620	
2004/07		1.00	0.8378	0.8378		180	86.89	7,852,556	7,897,320	
2005/01		0.95	0.8595	0.8595		180	86.89	7,916,672	7,965,180	
2005/07	78,157	0.95	0.7364	0.7364		180	86.89	8,023,860	8,023,860	8
2006/01	53,817	0.90	0.9068	0.9068		180	92.91	8,096,580	8,096,580	8
2006/07		0.90	0.8133	0.8133		180	92.91	8,155,847	8,162,460	
2007/01	51,565	0.85	1.0133	1.0133		180	91.59	8,245,080	8,245,080	8
2007/07		0.85	1.1050	1.1050		180	91.59	8,322,526	8,336,160	
2008/01		0.80	0.8556	0.8556		180	91.59	8,379,494	8,407,440	
2008/07	41,944	0.80	0.6104	0.6104		180	88.85	8,458,740	8,458,740	8
2009/01	32,921	0.75	1.3268	1.3268		180	87.96	8,571,060	8,571,060	8
2009/07		0.75	0.6841	0.6841		180	87.96	8,615,038	8,629,740	
2010/01		0.70	0.8643	0.8643		180	87.96	8,667,159	8,704,260	
2010/07		0.70	0.7107	0.7107		180	95.36	8,710,278	8,766,180	
2011/01		0.65	0.9198	0.9198		180	95.36	8,762,357	8,846,820	
2011/07		0.65	0.9028	0.9028		180	93.86	8,813,775	8,926,740	
2012/01		0.60	0.3865	0.3865		180	77.90	8,834,214	8,961,300	
2012/07		0.60	0.9417	0.9417		180	77.90	8,884,127	9,045,720	
2013/01		0.55	0.4901	0.4901		180	77.90	8,908,079	9,090,000	
2013/07		0.55	0.6196	0.6196		180	77.90	8,938,438	9,146,340	
2014/01		0.50	0.8564	0.8564		180	77.90	8,976,712	9,224,640	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		180	77.90	9,032,296	9,338,940	
2015/01		0.45	0.7571	0.7571		180	76.97	9,063,069	9,409,680	
2015/09		0.45	1.5736	1.5736		180	76.97	9,127,245	9,557,820	
2016/09		0.40	1.9890	1.9890		180	71.71	9,199,861	9,747,900	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency
- 8 Limited to Current RS Per Bed Standard

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 054790123120140101201407282015090524



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264.35

Calusa Harbour

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2525 FIRST ST	7/1/2014-12/31/2014	Number of Beds: 60	Superior: 0
FORT MYERS, FL 33901	Days in CR 184	Maximum: 11,040	Standard: 366
County: Lee [36]	First Used : 2015/09	Max Annualized: 21,900	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 9,850	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,388	Inflation
Current Class South Small	Initial CR? False	Medicaid: 2,964	FY Index: 1.35002422
Class at 1/94: South Small	Medicaid Utilization	30.09137%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.22101%	Cost: 1.06928041
Open Date: 06/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 06/01/1984	Low Occupancy Adjustment Factor:	112.83515%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 221473			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	151,806	290,014	294,463	15,620		751,903	
1a	Audit Adjustments							
2	Cost Per Diem	51.2166	97.8455	99.3465	5.2699		253.6785	
3	Cost Per Diem Inflated	54.7649	103.3518	106.2293				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.7649	103.3518	106.2293	5.2699		269.6159	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.6041		94.0978				
7	Provider Target Rate	55.5304		99.3323				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	78.5078		87.8208				
10b	Base for line 10a	74.3707		83.1929				
11	Lesser of 5,7,8,10, 10a	54.7649	103.3518	87.8208	5.2699		251.2074	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	54.7649	103.3518	87.8208	5.2699		251.2074	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Calusa Harbour

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/01/2012		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,120,000.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Variable	80% Capital(1):	1,592,020	8.2673
Indexed Asset Value	1,990,025	<60% of Base:	False	20% ROE(2):	398,005	0.4459
FRVS Base Asset:	1,177,008	Interest Rate:	8.2640%	Insurance Cost(3):	2,057	0.2088
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	12,680	1.2873
ROE Factor	0.022080	Amortization Rate:	8.2640%	Home Office(3):	1,477	0.1499
		Interest Only:	False	Replacement(3&4):	429,361	0.0000
		Yearly Payment:	162,949	Total FRVS PD:		10.3592

(1) 80% Capital (\$1,592,020) amortized at 8.2640 % for 20 years Principal & Interest of \$162,949 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$8.2673

(2) 20% ROE (\$398,005) times the ROE factor (0.022080) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.4459

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 100	Effective PBS Limitation	2,850,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.7649	54.7649	2.4847	52.2802
Direct Care	103.3518	103.3518	4.6890	98.6628
Indirect Care	87.8208	87.8208	3.9844	83.8364
Property	5.2699	10.3592	0.4700	9.8892
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				11.5030
Supplemental Rate				8.1814
Totals	251.2074	256.2967	11.6281	264.3530

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	1,133,399	0.00	1.2952	1.2952		100	20.81	1,133,399	2,741,300	
1984/07		0.10	1.9179	1.9179		100	20.81	1,133,399	2,793,900	
1985/01	43,609	0.10	1.1471	1.1471		100	21.44	1,177,008	2,825,900	
1985/10		0.20	0.8522	0.8522		100	21.44	1,177,008	2,850,000	
1986/01		0.20	0.8299	0.8299		100	21.44	1,177,008	2,873,700	
1986/07		0.30	0.2974	0.2974		100	21.44	1,177,008	2,868,200	
1987/01		0.30	1.0091	1.0091		100	21.44	1,177,008	2,919,500	
1987/07		0.40	0.9007	0.9007		100	24.98	1,177,008	2,942,300	
1988/01		0.40	0.9007	0.9007		100	24.98	1,177,008	2,966,200	
1988/07		0.50	0.5899	0.5899		100	24.98	1,177,008	2,964,600	
1989/01	20,674	0.50	0.5899	0.5899		100	25.10	1,199,267	2,982,100	
1989/07	66,741	0.60	0.5899	0.5899		100	22.42	1,266,008	3,002,300	
1990/01		0.60	0.5899	0.5899		100	22.42	1,266,008	3,017,400	
1990/07		0.70	0.5899	0.5899		100	22.42	1,266,008	3,035,200	
1991/01		0.70	0.5899	0.5899		100	22.42	1,266,008	3,053,000	
1991/07		0.80	1.4932	1.4932		100	22.42	1,266,008	3,098,600	
1992/01		0.80	2.0117	2.0117		100	22.42	1,266,008	3,160,900	
1992/07		0.90	1.8152	1.8152		100	27.24	1,276,252	3,218,300	
1993/01		0.90	1.7710	1.7710		100	27.24	1,286,327	3,275,300	
1993/07		1.00	1.5329	1.5329		100	30.06	1,297,104	3,325,500	
1994/01		1.00	1.6983	1.6983		100	30.06	1,309,144	3,382,000	
1994/07		1.00	1.5991	1.5991		100	36.22	1,322,930	3,436,100	
1995/01		1.00	1.5812	1.5812		100	36.22	1,336,706	3,490,400	
1995/07		1.00	1.5250	1.5250		100	38.51	1,350,979	3,543,600	
1996/01		1.00	1.7228	1.7228		100	38.51	1,367,275	3,604,700	
1996/07		1.00	1.3294	1.3294		100	37.54	1,379,681	3,652,600	
1997/01		1.00	1.4109	1.4109		100	37.54	1,392,967	3,704,100	
1997/07		1.00	1.0917	1.0917		100	42.80	1,404,801	3,744,500	
1998/01		1.00	1.1663	1.1663		100	42.80	1,417,551	3,788,200	
1998/07		1.00	1.0794	1.0794		100	42.80	1,429,458	3,829,100	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01		1.00	1.4499	1.4499		100	40.98	1,444,901	3,884,600	
1999/07		1.00	1.2299	1.2299		100	38.91	1,444,901	3,932,400	5
2000/01		1.00	1.3356	1.3356		100	38.91	1,457,473	3,984,900	5
2000/07		1.00	1.1129	1.1129		100	37.59	1,482,435	4,029,200	
2001/01		1.00	1.2976	1.2976		100	37.59	1,495,582	4,081,500	
2001/07	25,639	1.00	0.9615	0.9615		100	51.34	1,534,644	4,120,700	
2002/01		1.00	1.0301	1.0301		100	51.34	1,549,400	4,163,100	
2002/07	16,018	1.00	0.8337	0.8337		100	52.06	1,577,645	4,197,800	
2003/01		1.00	1.3271	1.3271		100	52.06	1,597,463	4,253,500	
2003/07	33,827	1.00	1.1664	1.1664		100	42.24	1,645,600	4,303,100	
2004/01		1.00	1.1103	1.1103		100	42.24	1,659,632	4,350,900	
2004/07	20,413	0.95	0.8378	0.8378		100	53.14	1,692,807	4,387,400	
2005/01		0.95	0.8595	0.8595		100	53.14	1,706,161	4,425,100	
2005/07		0.90	0.7364	0.7364		60	55.08	1,717,469	2,674,620	
2006/01		0.90	0.9068	0.9068		60	55.08	1,731,485	2,698,860	
2006/07		0.85	0.8133	0.8133		60	55.08	1,743,455	2,720,820	
2007/01	28,566	0.85	1.0133	1.0133		60	34.21	1,781,361	2,748,360	
2007/07		0.80	1.1050	1.1050		60	34.21	1,791,156	2,778,720	
2008/01		0.80	0.8556	0.8556		60	34.66	1,798,882	2,802,480	
2008/07	21,206	0.75	0.6104	0.6104		60	25.07	1,823,842	2,819,580	
2009/01		0.75	1.3268	1.3268		60	25.07	1,832,115	2,857,020	
2009/07		0.70	0.6841	0.6841		60	25.07	1,836,114	2,876,580	
2010/01	16,345	0.70	0.8643	0.8643		60	34.36	1,859,399	2,901,420	
2010/07		0.65	0.7107	0.7107		60	38.63	1,865,433	2,922,060	
2011/01		0.65	0.9198	0.9198		60	38.63	1,873,267	2,948,940	
2011/07	67,620	0.60	0.9028	0.9028		60	28.87	1,946,214	2,975,580	
2012/01		0.60	0.3865	0.3865		60	28.87	1,948,583	2,987,100	
2012/07		0.55	0.9417	0.9417		60	31.37	1,954,339	3,015,240	
2013/01		0.55	0.4901	0.4901		60	31.37	1,957,344	3,030,000	
2013/07		0.50	0.6196	0.6196		60	31.37	1,960,803	3,048,780	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.50	0.8564	0.8564		60	31.37	1,965,592	3,074,880	
2014/07		0.45	1.2383	1.2383		60	31.37	1,971,839	3,112,980	
2015/01		0.45	0.7571	0.7571		60	31.37	1,975,671	3,136,560	
2015/09		0.40	1.5736	1.5736		60	30.09	1,982,474	3,185,940	
2016/09		0.35	1.9890	1.9890		60	30.09	1,990,025	3,249,300	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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255.31

Stratford Court of Palm Harbor

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
45 KATHERINE BLVD	7/1/2014-12/31/2014	Number of Beds: 60	Superior: 0
PALM HARBOR, FL 34684	Days in CR 184	Maximum: 11,040	Standard: 366
County: Pinellas [52]	First Used : 2015/09	Max Annualized: 21,900	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 9,842	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,080	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 2,617	FY Index: 1.35002422
Class at 1/94: North Small	Medicaid Utilization	26.59012%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.14855%	Cost: 1.06928041
Open Date: 01/15/1992	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/15/1992	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 02/12/1992	Low Occupancy Adjustment Factor:	112.74351%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 210943			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	152,208	213,586	263,198	21,302		650,294	
1a	Audit Adjustments							
2	Cost Per Diem	58.1613	81.6148	100.5724	8.1399		248.4884	
3	Cost Per Diem Inflated	62.1907	86.2077	107.5401				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	62.1907	86.2077	107.5401	8.1399		264.0784	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	60.4309		109.1757				
7	Provider Target Rate	63.7926		115.2489				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500			
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674				
10	Target Rate Class Ceiling	67.5182		79.7567				
10a	New Provider Target Limitation	68.7772		82.1861				
10b	Base for line 10a	65.1529		77.8552				
11	Lesser of 5,7,8,10, 10a	62.1907	86.2077	79.7567	8.1399		236.2950	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	62.1907	86.2077	79.7567	8.1399		236.2950	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration
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255.31

Stratford Court of Palm Harbor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/12/1992		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,493,048.00		Total Amount	Per Diem
RS to Start Calcs:	1992/01	Type:	Fixed	80% Capital(1):	2,002,838	11.3663
Indexed Asset Value	2,503,548	<60% of Base:	False	20% ROE(2):	500,710	0.5609
FRVS Base Asset:	1,859,160	Interest Rate:	10.2000%	Insurance Cost(3):	1,178	0.1197
Occup Adj Factor	0.9000	Chase Rate:	6.5000%	Taxes Cost(3):	15,208	1.5452
ROE Factor	0.022080	Amortization Rate:	9.5000%	Home Office(3):	1,429	0.1452
		Interest Only:	False	Replacement(3&4):	119,843	0.0000
		Yearly Payment:	224,029	Total FRVS PD:		13.7373

(1) 80% Capital (\$2,002,838) amortized at 9.5000 % for 20 years Principal & Interest of \$224,029 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$11.3663

(2) 20% ROE (\$500,710) times the ROE factor (0.022080) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.5609

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,986
Comparison Date: 07/01/1991	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,859,160

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	62.1907	62.1907	2.8216	59.3691
Direct Care	86.2077	86.2077	3.9112	82.2965
Indirect Care	79.7567	79.7567	3.6185	76.1382
Property	8.1399	13.7373	0.6233	13.1140
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.2128
Supplemental Rate				8.1814
Totals	236.2950	241.8924	10.9746	255.3120

Medicaid Trend Adjustment



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255.31

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1992/01	4,493,048	0.00	2.0117	2.0117		60	18.60	1,859,160	1,859,160	1
1992/07		0.10	1.8152	1.8152		60	18.60	1,859,160	1,930,980	
1993/01		0.10	1.7710	1.7710		60	18.60	1,859,160	1,965,180	
1993/07		0.20	1.5329	1.5329		60	18.60	1,859,160	1,995,300	
1994/01		0.20	1.6983	1.6983		60	18.60	1,859,160	2,029,200	
1994/07		0.30	1.5991	1.5991		60	39.31	1,865,534	2,061,660	
1995/01		0.30	1.5812	1.5812		60	39.31	1,871,859	2,094,240	
1995/07		0.40	1.5250	1.5250		60	45.07	1,881,216	2,126,160	
1996/01		0.40	1.7228	1.7228		60	45.07	1,891,839	2,162,820	
1996/07		0.50	1.3294	1.3294		60	47.38	1,902,672	2,191,560	
1997/01		0.50	1.4109	1.4109		60	47.38	1,914,236	2,222,460	
1997/07		0.60	1.0917	1.0917		60	42.13	1,923,840	2,246,700	
1998/01		0.60	1.1663	1.1663		60	42.13	1,934,153	2,272,920	
1998/07		0.70	1.0794	1.0794		60	40.53	1,944,923	2,297,460	
1999/01		0.70	1.4499	1.4499		60	40.53	1,959,469	2,330,760	
1999/07		0.80	1.2299	1.2299		60	39.41	1,973,283	2,359,440	
2000/01		0.80	1.3356	1.3356		60	39.41	1,988,391	2,390,940	
2000/07		0.90	1.1129	1.1129		60	26.95	1,998,150	2,417,520	
2001/01		0.90	1.2976	1.2976		60	26.95	2,009,584	2,448,900	
2001/07		1.00	0.9615	0.9615		60	25.36	2,018,493	2,472,420	
2002/01		1.00	1.0301	1.0301		60	25.36	2,028,080	2,497,860	
2002/07	10,430	1.00	0.8337	0.8337		60	33.50	2,048,809	2,518,680	
2003/01		1.00	1.3271	1.3271		60	33.50	2,065,370	2,552,100	
2003/07	51,544	1.00	1.1664	1.1664		60	32.75	2,131,259	2,581,860	
2004/01		1.00	1.1103	1.1103		60	32.75	2,145,349	2,610,540	
2004/07		1.00	0.8378	0.8378		60	34.42	2,156,597	2,632,440	
2005/01		1.00	0.8595	0.8595		60	34.42	2,168,197	2,655,060	
2005/07		1.00	0.7364	0.7364		60	36.42	2,178,770	2,674,620	
2006/01		1.00	0.9068	0.9068		60	36.42	2,191,853	2,698,860	
2006/07		1.00	0.8133	0.8133		60	36.42	2,203,657	2,720,820	



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255.31

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/01	41,711	1.00	1.0133	1.0133		60	35.93	2,259,955	2,748,360	
2007/07		1.00	1.1050	1.1050		60	39.30	2,277,799	2,778,720	
2008/01		1.00	0.8556	0.8556		60	39.30	2,291,725	2,802,480	
2008/07		1.00	0.6104	0.6104		60	39.30	2,301,721	2,819,580	
2009/01		1.00	1.3268	1.3268		60	40.41	2,324,159	2,857,020	
2009/07		1.00	0.6841	0.6841		60	40.41	2,335,841	2,876,580	
2010/01		1.00	0.8643	0.8643		60	26.89	2,345,711	2,901,420	
2010/07		1.00	0.7107	0.7107		60	26.89	2,353,862	2,922,060	
2011/01		1.00	0.9198	0.9198		60	34.82	2,367,569	2,948,940	
2011/07		1.00	0.9028	0.9028		60	31.54	2,379,826	2,975,580	
2012/01		1.00	0.3865	0.3865		60	31.54	2,385,101	2,987,100	
2012/07		0.95	0.9417	0.9417		60	44.31	2,402,291	3,015,240	
2013/01		0.95	0.4901	0.4901		60	44.31	2,411,302	3,030,000	
2013/07		0.90	0.6196	0.6196		60	44.31	2,422,134	3,048,780	
2014/01		0.90	0.8564	0.8564		60	44.31	2,437,175	3,074,880	
2014/07		0.85	1.2383	1.2383		60	44.31	2,457,843	3,112,980	
2015/01		0.85	0.7571	0.7571		60	44.31	2,470,585	3,136,560	
2015/09		0.80	1.5736	1.5736		60	26.59	2,485,621	3,185,940	
2016/09		0.75	1.9890	1.9890		60	26.59	2,503,548	3,249,300	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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266.28

Gardens of Port St. Lucie

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1699 SE LYNNGATE DRIVE	1/1/2015-12/31/2015	Number of Beds: 30	Superior: 0
PORT SAINT LUCIE, FL 34952	Days in CR 365	Maximum: 10,950	Standard: 366
County: St Lucie [56]	First Used : 2016/09	Max Annualized: 10,950	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 10,028	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,835	Inflation
Current Class South Small	Initial CR? False	Medicaid: 4,013	FY Index: 1.37939113
Class at 1/94: South Small	Medicaid Utilization	40.01795%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.57991%	Cost: 1.04651568
Open Date: 10/13/1993	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/13/1993	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 10/18/1993	Low Occupancy Adjustment Factor:	115.81838%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 210781			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	248,405	416,013	342,024	73,879		1,080,321	
1a	Audit Adjustments							
2	Cost Per Diem	61.9001	103.6663	85.2290	18.4099		269.2053	
3	Cost Per Diem Inflated	64.7794	107.8841	89.1935				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	64.7794	107.8841	89.1935	18.4099		280.2669	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.8830		89.8332				
7	Provider Target Rate	55.8248		94.8304				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	71.6326		89.5643				
10b	Base for line 10a	67.8578		84.8446				
11	Lesser of 5,7,8,10, 10a	55.8248	107.8841	88.3937	13.6500		265.7526	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	55.8248	107.8841	88.3937	13.6500		265.7526	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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266.28

Gardens of Port St. Lucie

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/18/1993	Amount:	1,968,820.00		Total Amount	Per Diem
RS to Start Calcs:	1993/07	Type:	Fixed	80% Capital(1):	1,163,510	13.2060
Indexed Asset Value	1,454,387	<60% of Base:	False	20% ROE(2):	290,877	0.5965
FRVS Base Asset:	982,590	Interest Rate:	10.0000%	Insurance Cost(3):	5,863	0.5847
Occup Adj Factor	0.9000	Chase Rate:	6.5000%	Taxes Cost(3):	35,270	3.5172
ROE Factor	0.020210	Amortization Rate:	9.5000%	Home Office(3):	3,560	0.3550
		Interest Only:	False	Replacement(3&4):	144,391	0.0000
		Yearly Payment:	130,145	Total FRVS PD:		18.2594

(1) 80% Capital (\$1,163,510) amortized at 9.5000 % for 20 years Principal & Interest of \$130,145 divided by annual available days (10950) divided by Occup. Adj. (0.90) = \$13.2060

(2) 20% ROE (\$290,877) times the ROE factor (0.020210) divided by annual available days (10950) divided by Occup. Adj. (0.90) = \$0.5965

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1993	Current RS PBS:	32,753
Comparison Bed	30	Effective PBS Limitation	54,155
			982,590

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.8248	55.8248	2.5327	53.2921
Direct Care	107.8841	107.8841	4.8946	102.9895
Indirect Care	88.3937	88.3937	4.0104	84.3833
Property	13.6500	18.2594	0.8284	17.4310
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	265.7526	270.3620	12.2661	266.2773

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1993/07	1,968,828	0.00	1.5329	1.5329		30	32.10	982,590	982,590	1
1994/01		0.10	1.6983	1.6983		30	32.10	983,564	1,014,600	
1994/07		0.10	1.5991	1.5991		30	32.10	984,482	1,030,830	
1995/01		0.20	1.5812	1.5812		30	32.10	986,299	1,047,120	
1995/07		0.20	1.5250	1.5250		30	32.10	988,055	1,063,080	
1996/01		0.30	1.7228	1.7228		30	32.10	991,035	1,081,410	
1996/07		0.30	1.3294	1.3294		30	38.51	993,802	1,095,780	
1997/01		0.40	1.4109	1.4109		30	38.51	997,729	1,111,230	
1997/07		0.40	1.0917	1.0917		30	42.73	1,001,114	1,123,350	
1998/01		0.50	1.1663	1.1663		30	42.73	1,005,650	1,136,460	
1998/07		0.50	1.0794	1.0794		30	44.42	1,010,033	1,148,730	
1999/01		0.60	1.4499	1.4499		30	44.42	1,017,129	1,165,380	
1999/07	12,701	0.60	1.2299	1.2299		30	47.57	1,036,321	1,179,720	
2000/01		0.70	1.3356	1.3356		30	47.57	1,044,701	1,195,470	
2000/07	24,610	0.70	1.1129	1.1129		30	44.55	1,075,903	1,208,760	
2001/01		0.80	1.2976	1.2976		30	44.55	1,084,950	1,224,450	
2001/07		0.80	0.9615	0.9615		30	45.71	1,091,886	1,236,210	
2002/01		0.90	1.0301	1.0301		30	45.71	1,100,299	1,248,930	
2002/07		0.90	0.8337	0.8337		30	37.07	1,105,863	1,259,340	
2003/01		1.00	1.3271	1.3271		30	37.07	1,115,755	1,276,050	
2003/07		1.00	1.1664	1.1664		30	43.10	1,125,953	1,290,930	
2004/01		1.00	1.1103	1.1103		30	43.10	1,135,750	1,305,270	
2004/07	8,352	1.00	0.8378	0.8378		30	51.14	1,152,950	1,316,220	
2005/01		1.00	0.8595	0.8595		30	51.14	1,162,164	1,327,530	
2005/07		1.00	0.7364	0.7364		30	54.15	1,170,590	1,337,310	
2006/01		1.00	0.9068	0.9068		30	54.15	1,181,041	1,349,430	
2006/07	4,601	1.00	0.8133	0.8133		30	59.40	1,195,247	1,360,410	
2007/01		1.00	1.0133	1.0133		30	59.40	1,207,358	1,374,180	
2007/07		1.00	1.1050	1.1050		30	59.40	1,220,699	1,389,360	
2008/01	19,842	1.00	0.8556	0.8556		30	47.64	1,249,588	1,401,240	



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266.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2008/07		1.00	0.6104	0.6104		30	47.64	1,256,195	1,409,790	
2009/01	20,051	1.00	1.3268	1.3268		30	39.96	1,288,355	1,428,510	
2009/07	25,034	1.00	0.6841	0.6841		30	42.19	1,320,150	1,438,290	
2010/01		1.00	0.8643	0.8643		30	42.19	1,328,903	1,450,710	
2010/07		1.00	0.7107	0.7107		30	41.45	1,336,021	1,461,030	
2011/01		1.00	0.9198	0.9198		30	41.45	1,345,282	1,474,470	
2011/07		1.00	0.9028	0.9028		30	41.45	1,354,435	1,487,790	
2012/01	11,858	1.00	0.3865	0.3865		30	44.69	1,370,547	1,493,550	
2012/07	18,477	1.00	0.9417	0.9417		30	28.08	1,395,613	1,507,620	
2013/01		1.00	0.4901	0.4901		30	28.08	1,399,105	1,515,000	
2013/07		1.00	0.6196	0.6196		30	28.08	1,403,531	1,524,390	
2014/01		0.95	0.8564	0.8564		30	28.08	1,409,361	1,537,440	
2014/07		0.95	1.2383	1.2383		30	28.08	1,417,826	1,556,490	
2015/01		0.90	0.7571	0.7571		30	28.08	1,422,758	1,568,280	
2015/09		0.90	1.5736	1.5736		30	38.09	1,436,712	1,592,970	
2016/09		0.85	1.9890	1.9890		30	40.02	1,454,387	1,624,650	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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189.00

Summer Brook Health Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5377 MONCRIEF ROAD	7/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
JACKSONVILLE, FL 32209	Days in CR 184	Maximum: 22,080	Standard: 366
County: Duval [16]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 21,298	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,296	Inflation
Current Class North Large	Initial CR? False	Medicaid: 18,004	FY Index: 1.35002422
Class at 1/94: North Large	Medicaid Utilization	84.53376%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.45833%	Cost: 1.06928041
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	121.98797%	DC Sem Index: 1.30450000
Med # Active Date: 07/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 265721			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	810,694	1,136,061	631,169	512,394		3,090,318	
1a	Audit Adjustments							
2	Cost Per Diem	45.0285	63.1005	35.0572	28.4600		171.6462	
3	Cost Per Diem Inflated	48.1481	66.6515	37.4860				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.1481	66.6515	37.4860	28.4600		180.7456	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.2463		51.9693				
7	Provider Target Rate	56.2083		54.8603				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	58.5136		56.2084				
10b	Base for line 10a	55.4301		53.2464				
11	Lesser of 5,7,8,10, 10a	48.1481	66.6515	37.4860	13.6500		165.9356	
12/13	Medicaid Adjustment Rate		2.5894	1.4563				
14	Prospective Per Diem 11	48.1481	69.2409	38.9423	13.6500		169.9813	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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189.00

Summer Brook Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/01/1985		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,232,000.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Variable	80% Capital(1):	2,745,753	5.9883
Indexed Asset Value	3,432,191	<60% of Base:	False	20% ROE(2):	686,438	0.3845
FRVS Base Asset:	1,522,570	Interest Rate:	6.0000%	Insurance Cost(3):	22,233	1.0439
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	27,508	1.2916
ROE Factor	0.022080	Amortization Rate:	6.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	71,080	0.0000
		Yearly Payment:	236,057	Total FRVS PD:		8.7083

(1) 80% Capital (\$2,745,753) amortized at 6.0000 % for 20 years Principal & Interest of \$236,057 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$5.9883

(2) 20% ROE (\$686,438) times the ROE factor (0.022080) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3845

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.1481	48.1481	2.1845	45.9636
Direct Care	69.2409	69.2409	3.1414	66.0995
Indirect Care	38.9423	38.9423	1.7668	37.1755
Property	13.6500	8.7083	0.3951	8.3132
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.2717
Supplemental Rate				8.1814
Totals	169.9813	165.0396	7.4878	189.0049

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	836,608	0.00				120	100.00	836,608	1,231,320	
1972/01		0.10	3.9787	3.0000	0.9787	120	100.00	839,118	1,280,280	
1972/07		0.10	5.9113	3.0000	2.9113	120	100.00	841,635	1,343,400	
1973/01		0.20	8.0622	3.0000	5.0622	120	100.00	846,685	1,412,640	
1973/07		0.20	10.7186	3.0000	7.7186	120	100.00	851,765	1,492,560	
1974/01		0.30	12.9457	3.0000	9.9457	120	100.00	859,431	1,570,560	
1974/07		0.30	13.0494	3.0000	10.0494	120	100.00	867,166	1,619,280	
1975/01		0.40	13.1399	3.0000	10.1399	120	100.00	877,572	1,669,320	
1975/07		0.40	14.2033	3.0000	11.2033	120	100.00	888,103	1,737,240	
1976/01		0.50	15.2478	3.0000	12.2478	120	100.00	901,425	1,807,440	
1976/07		0.50	15.7330	3.0000	12.7330	120	100.00	914,946	1,870,440	
1977/01		0.60	16.4836	3.0000	13.4836	120	100.00	931,415	1,940,640	
1977/07		0.60	18.5412	3.0000	15.5412	120	100.00	948,180	2,038,680	
1978/01		0.70	20.2809	3.0000	17.2809	120	100.00	968,092	2,135,400	
1978/07		0.70	22.8203	3.0000	19.8203	120	100.00	988,422	2,253,600	
1979/01		0.80	24.9476	3.0000	21.9476	120	100.00	1,012,144	2,369,160	
1979/07		0.80	26.1458	3.0000	23.1458	120	100.00	1,036,435	2,468,640	
1980/01		0.90	29.3115	3.0000	26.3115	120	93.12	1,064,419	2,620,920	
1980/07		0.90	30.1222	3.0000	27.1222	120	93.12	1,093,158	2,720,760	
1981/01	10,968	1.00	30.9462	3.0000	27.9462	120	94.18	1,136,921	2,824,800	
1981/07		1.00	30.5350	3.0000	27.5350	120	94.18	1,171,029	2,897,880	
1982/01		1.00	30.2110	3.0000	27.2110	120	81.42	1,206,160	2,975,520	
1982/07		1.00	29.5087	3.0000	26.5087	120	81.42	1,242,345	3,043,800	
1983/04	1,078	1.00	29.1375	3.0000	26.1375	120	89.09	1,280,693	3,123,840	
1983/07		1.00	30.0953	3.0000	27.0953	120	89.09	1,319,114	3,247,440	
1984/01	2,225	1.00	28.3905	3.0000	25.3905	120	94.15	1,360,912	3,289,560	
1984/07		1.00	27.3084	3.0000	24.3084	120	94.15	1,401,739	3,352,680	
1985/01	34,432	1.00	25.4555	3.0000	22.4555	120	89.09	1,478,223	3,391,080	
1985/10		1.00	23.3077	3.0000	20.3077	120	94.15	1,522,570	3,420,000	
1986/01		1.00	21.1376	3.0000	18.1376	120	94.15	1,568,247	3,448,440	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07		1.00	18.4350	3.0000	15.4350	120	94.15	1,615,294	3,441,840	
1987/01		1.00	16.4441	3.0000	13.4441	120	94.54	1,663,753	3,503,400	
1987/07		1.00	14.3448	3.0000	11.3448	120	95.89	1,713,666	3,530,760	
1988/01		1.00	12.2455	3.0000	9.2455	120	95.89	1,765,076	3,559,440	
1988/07		1.00	9.8354	3.0000	6.8354	120	95.89	1,818,028	3,557,520	
1989/01		1.00	7.4253	3.0000	4.4253	120	97.21	1,872,569	3,578,520	
1989/07		1.00	5.0152	3.0000	2.0152	120	97.21	1,928,746	3,602,760	
1990/01		1.00	2.6051	2.6051		120	97.21	1,978,992	3,620,880	
1990/07		1.00	0.5899	0.5899		120	93.90	1,990,666	3,642,240	
1991/01		1.00	0.5899	0.5899		120	93.90	2,002,409	3,663,600	
1991/07		1.00	1.4932	1.4932		120	93.45	2,032,309	3,718,320	
1992/01		0.95	2.0117	2.0117		120	93.45	2,071,148	3,793,080	
1992/07		0.95	1.8152	1.8152		120	95.94	2,106,863	3,861,960	
1993/01		0.90	1.7710	1.7710		120	95.94	2,140,444	3,930,360	
1993/07		0.90	1.5329	1.5329		120	94.23	2,169,974	3,990,600	
1994/01		0.85	1.6983	1.6983		120	94.23	2,201,300	4,058,400	
1994/07	130,877	0.85	1.5991	1.5991		120	93.32	2,362,097	4,123,320	
1995/01		0.80	1.5812	1.5812		120	93.32	2,391,978	4,188,480	
1995/07	96,978	0.80	1.5250	1.5250		120	91.91	2,518,138	4,252,320	
1996/01		0.75	1.7228	1.7228		120	91.91	2,550,675	4,325,640	
1996/07	34,008	0.75	1.3294	1.3294		120	86.13	2,610,116	4,383,120	
1997/01		0.70	1.4109	1.4109		120	86.13	2,635,894	4,444,920	
1997/07		0.70	1.0917	1.0917		120	87.23	2,656,038	4,493,400	
1998/01		0.65	1.1663	1.1663		120	87.23	2,676,173	4,545,840	
1998/07		0.65	1.0794	1.0794		120	87.23	2,694,949	4,594,920	
1999/01		0.60	1.4499	1.4499		120	93.02	2,718,392	4,661,520	
1999/07		0.60	1.2299	1.2299		120	91.43	2,738,451	4,718,880	
2000/01		0.55	1.3356	1.3356		120	85.09	2,758,568	4,781,880	
2000/07		0.55	1.1129	1.1129		120	85.09	2,775,453	4,835,040	
2001/01		0.50	1.2976	1.2976		120	85.09	2,793,460	4,897,800	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		0.50	0.9615	0.9615		120	88.60	2,806,891	4,944,840	
2002/01		0.45	1.0301	1.0301		120	89.79	2,819,901	4,995,720	
2002/07		0.45	0.8337	0.8337		120	89.79	2,830,481	5,037,360	
2003/01	41,986	0.40	1.3271	1.3271		120	89.46	2,887,491	5,104,200	
2003/07		0.40	1.1664	1.1664		120	83.30	2,900,964	5,163,720	
2004/01	270,371	0.35	1.1103	1.1103		120	83.30	3,182,608	5,221,080	
2004/07		0.35	0.8378	0.8378		120	83.30	3,191,939	5,264,880	
2005/01		0.30	0.8595	0.8595		120	83.30	3,200,171	5,310,120	
2005/07		0.30	0.7364	0.7364		120	83.30	3,207,240	5,349,240	
2006/01		0.25	0.9068	0.9068		120	83.30	3,207,240	5,397,720	5
2006/07		0.25	0.8133	0.8133		120	89.36	3,221,046	5,441,640	
2007/01		0.20	1.0133	1.0133		120	89.36	3,227,575	5,496,720	
2007/07		0.20	1.1050	1.1050		120	89.36	3,234,708	5,557,440	
2008/01		0.15	0.8556	0.8556		120	90.25	3,238,858	5,604,960	
2008/07		0.15	0.6104	0.6104		120	85.67	3,241,825	5,639,160	
2009/01		0.10	1.3268	1.3268		120	85.67	3,246,127	5,714,040	
2009/07		0.10	0.6841	0.6841		120	85.67	3,248,347	5,753,160	
2010/01		0.05	0.8643	0.8643		120	85.67	3,249,750	5,802,840	
2010/07	71,288	0.05	0.7107	0.7107		120	90.96	3,322,192	5,844,120	
2011/01		0.00	0.9198	0.9198		120	90.96	3,322,192	5,897,880	
2011/07	54,240	0.00	0.9028	0.9028		120	86.61	3,376,432	5,951,160	
2012/01		0.00	0.3865	0.3865		120	86.61	3,376,432	5,974,200	5
2012/07	55,759	0.00	0.9417	0.9417		120	90.07	3,432,191	6,030,480	
2013/01		0.00	0.4901	0.4901		120	90.07	3,432,191	6,060,000	
2013/07		0.00	0.6196	0.6196		120	90.07	3,432,191	6,097,560	
2014/01		0.00	0.8564	0.8564		120	90.07	3,432,191	6,149,760	
2014/07		0.00	1.2383	1.2383		120	90.07	3,432,191	6,225,960	
2015/01		0.00	0.7571	0.7571		120	90.07	3,432,191	6,273,120	
2015/09		0.00	1.5736	1.5736		120	89.86	3,432,191	6,371,880	
2016/09		0.00	1.9890	1.9890		120	84.53	3,432,191	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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187.72

Shoal Creek Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
500 HOSPITAL DRIVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
CRESTVIEW, FL 32539	Days in CR 365	Maximum: 43,800	Standard: 366
County: Okaloosa [46]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 41,363	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 8,562	Inflation
Current Class North Large	Initial CR? False	Medicaid: 28,433	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	68.74018%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.43607%	Cost: 1.04651568
Open Date: 04/05/2000	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/05/2000	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 04/27/2000	Low Occupancy Adjustment Factor:	119.43048%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252379			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,262,774	1,766,541	1,066,121	1,602,200		5,697,636	
1a	Audit Adjustments							
2	Cost Per Diem	44.4123	62.1300	37.4959	56.3500		200.3882	
3	Cost Per Diem Inflated	46.4782	64.6578	39.2400				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.4782	64.6578	39.2400	56.3500		206.7260	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.5581		58.0789				
7	Provider Target Rate	54.4262		61.3097				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	53.9183		63.1686				
10b	Base for line 10a	51.0770		59.8398				
11	Lesser of 5,7,8,10, 10a	46.4782	64.6578	39.2400	13.6500		164.0260	
12/13	Medicaid Adjustment Rate		1.3632	0.8273				
14	Prospective Per Diem 11	46.4782	66.0210	40.0673	13.6500		166.2165	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Shoal Creek Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/27/2000	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,919,915.00		Total Amount	Per Diem
RS to Start Calcs:	2000/01	Type:	Fixed	80% Capital(1):	4,678,722	11.6925
Indexed Asset Value	5,848,403	<60% of Base:	False	20% ROE(2):	1,169,681	0.5997
FRVS Base Asset:	4,718,880	Interest Rate:	10.6343%	Insurance Cost(3):	33,068	0.7995
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	59,673	1.4427
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	37,400	0.9042
		Interest Only:	False	Replacement(3&4):	59,905	0.0000
		Yearly Payment:	460,919	Total FRVS PD:		15.4386

(1) 80% Capital (\$4,678,722) amortized at 7.7500 % for 20 years Principal & Interest of \$460,919 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.6925

(2) 20% ROE (\$1,169,681) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5997

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	39,324
Comparison Date: 07/01/1999	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	4,718,880

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.4782	46.4782	2.1087	44.3695
Direct Care	66.0210	66.0210	2.9953	63.0257
Indirect Care	40.0673	40.0673	1.8178	38.2495
Property	13.6500	15.4386	0.7004	14.7382
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1555
Supplemental Rate				8.1814
Totals	166.2165	168.0051	7.6222	187.7198

Medicaid Trend Adjustment



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187.72

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/01	8,094,232	0.00	1.3356	1.3356		120	87.96	4,718,880	4,718,880	1
2000/07		0.10	1.1129	1.1129		120	87.96	4,724,132	4,835,040	
2001/01		0.10	1.2976	1.2976		120	87.96	4,730,264	4,897,800	
2001/07		0.20	0.9615	0.9615		120	76.95	4,739,360	4,944,840	
2002/01		0.20	1.0301	1.0301		120	76.95	4,749,123	4,995,720	
2002/07		0.30	0.8337	0.8337		120	76.95	4,749,123	5,037,360	5
2003/01		0.30	1.3271	1.3271		120	76.95	4,761,001	5,104,200	5
2003/07		0.40	1.1664	1.1664		120	76.95	4,779,955	5,163,720	5
2004/01		0.40	1.1103	1.1103		120	76.95	4,802,258	5,221,080	5
2004/07		0.50	0.8378	0.8378		120	78.10	4,823,585	5,264,880	5
2005/01		0.50	0.8595	0.8595		120	78.10	4,843,791	5,310,120	5
2005/07		0.60	0.7364	0.7364		120	76.24	4,886,102	5,349,240	
2006/01		0.60	0.9068	0.9068		120	76.24	4,912,687	5,397,720	
2006/07		0.70	0.8133	0.8133		120	69.62	4,940,655	5,441,640	
2007/01		0.70	1.0133	1.0133		120	69.62	4,975,699	5,496,720	
2007/07		0.80	1.1050	1.1050		120	68.08	5,019,684	5,557,440	
2008/01		0.80	0.8556	0.8556		120	66.44	5,054,044	5,604,960	
2008/07		0.90	0.6104	0.6104		120	66.44	5,081,811	5,639,160	
2009/01		0.90	1.3268	1.3268		120	69.71	5,142,493	5,714,040	
2009/07		1.00	0.6841	0.6841		120	69.71	5,177,673	5,753,160	
2010/01		1.00	0.8643	0.8643		120	69.71	5,222,424	5,802,840	
2010/07		1.00	0.7107	0.7107		120	66.18	5,259,540	5,844,120	
2011/01		1.00	0.9198	0.9198		120	66.18	5,307,917	5,897,880	
2011/07		1.00	0.9028	0.9028		120	68.45	5,355,837	5,951,160	
2012/01		1.00	0.3865	0.3865		120	64.07	5,376,537	5,974,200	
2012/07		1.00	0.9417	0.9417		120	64.07	5,427,168	6,030,480	
2013/01		1.00	0.4901	0.4901		120	64.07	5,453,767	6,060,000	
2013/07		1.00	0.6196	0.6196		120	64.07	5,487,559	6,097,560	
2014/01		1.00	0.8564	0.8564		120	64.07	5,534,554	6,149,760	
2014/07		1.00	1.2383	1.2383		120	64.07	5,603,088	6,225,960	



Florida Agency for Health Care Administration
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Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

0 059852-00 - 2016/09

187.72

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/01		1.00	0.7571	0.7571		120	66.74	5,645,509	6,273,120	
2015/09		1.00	1.5736	1.5736		120	66.74	5,734,347	6,371,880	
2016/09		1.00	1.9890	1.9890		120	68.74	5,848,403	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 059852123120150101201504252016131532



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0059855-00 - 2016/09

200.75

Englewood Healthcare & Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1111 DRURY LN	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
ENGLEWOOD, FL 34224-4545	Days in CR 365	Maximum: 43,800	Standard: 366
County: Charlotte [8]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 41,182	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,578	Inflation
Current Class South Large	Initial CR? False	Medicaid: 23,272	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	56.51013%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.02283%	Cost: 1.04651568
Open Date: 09/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 09/01/1983	Low Occupancy Adjustment Factor:	118.90787%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252204			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,062,671	1,776,054	892,306	1,156,153		4,887,184
1a	Audit Adjustments						
2	Cost Per Diem	45.6631	76.3172	38.3425	49.6800		210.0028
3	Cost Per Diem Inflated	47.7872	79.4222	40.1260			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	47.7872	79.4222	40.1260	49.6800		217.0154
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	55.8526		62.1325			
7	Provider Target Rate	58.9596		65.5888			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	56.8676		67.8776			
10b	Base for line 10a	53.8709		64.3007			
11	Lesser of 5,7,8,10, 10a	47.7872	79.4222	40.1260	13.6500		180.9854
12/13	Medicaid Adjustment Rate		0.5817	0.2939			
14	Prospective Per Diem 11	47.7872	80.0039	40.4199	13.6500		181.8610
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 059855-00 - 2016/09

200.75

Englewood Healthcare & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/01/1993		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,801,353.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Fixed	80% Capital(1):	4,358,019	10.8910
Indexed Asset Value	5,447,524	<60% of Base:	False	20% ROE(2):	1,089,505	0.5586
FRVS Base Asset:	3,190,349	Interest Rate:	10.6343%	Insurance Cost(3):	35,437	0.8605
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	78,373	1.9031
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	41,335	1.0037
		Interest Only:	False	Replacement(3&4):	45,400	0.0000
		Yearly Payment:	429,325	Total FRVS PD:		15.2169

(1) 80% Capital (\$4,358,019) amortized at 7.7500 % for 20 years Principal & Interest of \$429,325 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.8910

(2) 20% ROE (\$1,089,505) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5586

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.7872	47.7872	2.1681	45.6191
Direct Care	80.0039	80.0039	3.6297	76.3742
Indirect Care	40.4199	40.4199	1.8338	38.5861
Property	13.6500	15.2169	0.6904	14.5265
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.4578
Supplemental Rate				8.1814
Totals	181.8610	183.4279	8.3220	200.7451

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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200.75

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/07	2,912,399	0.00	3.9578	3.0000	0.9578	120	71.74	2,912,399	3,247,440	
1984/01	241,791	0.10	2.2530	2.2530		120	71.74	3,160,752	3,289,560	
1984/07	1,919	0.10	1.9179	1.9179		120	71.74	3,168,733	3,352,680	
1985/01	6,990	0.20	1.1471	1.1471		120	71.74	3,182,992	3,391,080	
1985/10	1,933	0.20	0.8522	0.8522		120	71.74	3,190,349	3,420,000	
1986/01		0.30	0.8299	0.8299		120	79.30	3,198,293	3,448,440	
1986/07		0.30	0.2974	0.2974		120	79.30	3,201,146	3,441,840	
1987/01		0.40	1.0091	1.0091		120	77.47	3,214,066	3,503,400	
1987/07		0.40	0.9007	0.9007		120	77.47	3,225,646	3,530,760	
1988/01		0.50	0.9007	0.9007		120	73.23	3,240,174	3,559,440	
1988/07		0.50	0.5899	0.5899		120	73.23	3,249,733	3,557,520	
1989/01		0.60	0.5899	0.5899		120	70.46	3,261,234	3,578,520	
1989/07		0.60	0.5899	0.5899		120	70.46	3,272,776	3,602,760	
1990/01		0.70	0.5899	0.5899		120	66.26	3,286,289	3,620,880	
1990/07		0.70	0.5899	0.5899		120	66.26	3,299,858	3,642,240	
1991/01		0.80	0.5899	0.5899		120	67.38	3,315,430	3,663,600	
1991/07		0.80	1.4932	1.4932		120	67.38	3,355,036	3,718,320	
1992/01		0.90	2.0117	2.0117		120	79.00	3,415,779	3,793,080	
1992/07		0.90	1.8152	1.8152		120	79.00	3,471,583	3,861,960	
1993/01		1.00	1.7710	1.7710		120	73.29	3,471,583	3,930,360	5
1993/07		1.00	1.5329	1.5329		120	73.29	3,587,223	3,990,600	
1994/01		1.00	1.6983	1.6983		120	74.16	3,648,145	4,058,400	
1994/07		1.00	1.5991	1.5991		120	74.16	3,706,482	4,123,320	
1995/01		1.00	1.5812	1.5812		120	72.01	3,765,089	4,188,480	
1995/07		1.00	1.5250	1.5250		120	72.01	3,822,507	4,252,320	
1996/01	30,354	1.00	1.7228	1.7228		120	73.74	3,918,715	4,325,640	
1996/07		1.00	1.3294	1.3294		120	73.74	3,970,810	4,383,120	
1997/01	27,768	1.00	1.4109	1.4109		120	71.04	4,054,602	4,444,920	
1997/07		1.00	1.0917	1.0917		120	71.04	4,098,866	4,493,400	
1998/01		1.00	1.1663	1.1663		120	70.95	4,146,671	4,545,840	



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200.75

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07		1.00	1.0794	1.0794		120	70.95	4,191,430	4,594,920	
1999/01		1.00	1.4499	1.4499		120	67.34	4,252,202	4,661,520	
1999/07		1.00	1.2299	1.2299		120	67.34	4,252,202	4,718,880	5
2000/01		1.00	1.3356	1.3356		120	64.57	4,361,991	4,781,880	
2000/07		1.00	1.1129	1.1129		120	64.57	4,410,536	4,835,040	
2001/01		1.00	1.2976	1.2976		120	68.19	4,467,767	4,897,800	
2001/07		1.00	0.9615	0.9615		120	71.68	4,510,725	4,944,840	
2002/01		1.00	1.0301	1.0301		120	71.68	4,557,190	4,995,720	
2002/07		1.00	0.8337	0.8337		120	71.68	4,557,190	5,037,360	5
2003/01		1.00	1.3271	1.3271		120	71.68	4,656,166	5,104,200	
2003/07		1.00	1.1664	1.1664		120	71.68	4,710,476	5,163,720	
2004/01		0.95	1.1103	1.1103		120	71.68	4,760,162	5,221,080	
2004/07		0.95	0.8378	0.8378		120	67.70	4,798,048	5,264,880	
2005/01		0.90	0.8595	0.8595		120	67.70	4,835,166	5,310,120	
2005/07		0.90	0.7364	0.7364		120	62.19	4,867,213	5,349,240	
2006/01		0.85	0.9068	0.9068		120	62.19	4,904,729	5,397,720	
2006/07		0.85	0.8133	0.8133		120	58.76	4,938,635	5,441,640	
2007/01		0.80	1.0133	1.0133		120	58.76	4,978,668	5,496,720	
2007/07		0.80	1.1050	1.1050		120	53.13	5,021,183	5,557,440	
2008/01		0.75	0.8556	0.8556		120	53.13	5,052,308	5,604,960	
2008/07		0.75	0.6104	0.6104		120	55.15	5,075,437	5,639,160	
2009/01		0.70	1.3268	1.3268		120	55.15	5,122,578	5,714,040	
2009/07		0.70	0.6841	0.6841		120	57.71	5,147,110	5,753,160	
2010/01		0.65	0.8643	0.8643		120	51.49	5,174,181	5,802,840	
2010/07		0.65	0.7107	0.7107		120	51.49	5,196,560	5,844,120	
2011/01		0.60	0.9198	0.9198		120	51.49	5,223,410	5,897,880	
2011/07		0.60	0.9028	0.9028		120	56.43	5,251,705	5,951,160	
2012/01		0.55	0.3865	0.3865		120	51.32	5,262,123	5,974,200	
2012/07		0.55	0.9417	0.9417		120	51.32	5,287,552	6,030,480	
2013/01		0.50	0.4901	0.4901		120	51.32	5,299,645	6,060,000	



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200.75

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		120	51.32	5,314,965	6,097,560	
2014/01		0.45	0.8564	0.8564		120	51.32	5,334,078	6,149,760	
2014/07		0.45	1.2383	1.2383		120	51.32	5,361,811	6,225,960	
2015/01		0.40	0.7571	0.7571		120	52.77	5,377,388	6,273,120	
2015/09		0.40	1.5736	1.5736		120	52.77	5,409,861	6,371,880	
2016/09		0.35	1.9890	1.9890		120	56.51	5,447,524	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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0059866-00 - 2016/09

203.38

Island Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
125 ALMA BLVD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
MERRITT IS, FL 32953-4345	Days in CR 365	Maximum: 43,800	Standard: 366
County: Brevard [5]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 42,235	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,876	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 29,919	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	70.83935%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.42694%	Cost: 1.04651568
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	121.94827%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252352			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,459,234	2,171,152	1,265,910	1,221,892		6,118,188	
1a	Audit Adjustments							
2	Cost Per Diem	48.7728	72.5677	42.3112	40.8400		204.4917	
3	Cost Per Diem Inflated	51.0415	75.5202	44.2793				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.0415	75.5202	44.2793	40.8400		211.6810	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.0590		61.0453				
7	Provider Target Rate	59.1775		64.4411				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	56.9329		66.7906				
10b	Base for line 10a	53.9327		63.2710				
11	Lesser of 5,7,8,10, 10a	51.0415	75.5202	44.2793	13.6500		184.4910	
12/13	Medicaid Adjustment Rate		1.7705	1.0381				
14	Prospective Per Diem 11	51.0415	77.2907	45.3174	13.6500		187.2996	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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203.38

Island Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 04/01/1996		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,854,663.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	3,039,171	7.5951
Indexed Asset Value	3,798,964	<60% of Base:	False	20% ROE(2):	759,793	0.3895
FRVS Base Asset:	2,166,208	Interest Rate:	10.6343%	Insurance Cost(3):	28,792	0.6817
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	33,955	0.8040
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	43,203	1.0229
		Interest Only:	False	Replacement(3&4):	113,061	0.0000
		Yearly Payment:	299,400	Total FRVS PD:		10.4932

(1) 80% Capital (\$3,039,171) amortized at 7.7500 % for 20 years Principal & Interest of \$299,400 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.5951

(2) 20% ROE (\$759,793) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3895

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.0415	51.0415	2.3157	48.7258
Direct Care	77.2907	77.2907	3.5066	73.7841
Indirect Care	45.3174	45.3174	2.0560	43.2614
Property	13.6500	10.4932	0.4761	10.0171
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.4065
Supplemental Rate				8.1814
Totals	187.2996	184.1428	8.3544	203.3763

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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203.38

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/04	2,125,573	0.00	2.6288	2.6288		120	79.14	2,125,573	3,123,840	
1983/07	533	0.10	3.9578	3.0000	0.9578	120	79.14	2,132,483	3,247,440	
1984/01	1,730	0.10	2.2530	2.2530		120	75.99	2,139,017	3,289,560	
1984/07		0.20	1.9179	1.9179		120	75.99	2,147,222	3,352,680	
1985/01	5,452	0.20	1.1471	1.1471		120	76.12	2,157,600	3,391,080	
1985/10	3,091	0.30	0.8522	0.8522		120	75.99	2,166,208	3,420,000	
1986/01		0.30	0.8299	0.8299		120	76.12	2,171,602	3,448,440	
1986/07		0.40	0.2974	0.2974		120	76.12	2,174,186	3,441,840	
1987/01		0.40	1.0091	1.0091		120	78.72	2,182,961	3,503,400	
1987/07		0.50	0.9007	0.9007		120	78.72	2,192,793	3,530,760	
1988/01		0.50	0.9007	0.9007		120	77.20	2,202,669	3,559,440	
1988/07		0.60	0.5899	0.5899		120	77.20	2,210,464	3,557,520	
1989/01		0.60	0.5899	0.5899		120	76.56	2,218,287	3,578,520	
1989/07		0.70	0.5899	0.5899		120	76.56	2,227,446	3,602,760	
1990/01		0.70	0.5899	0.5899		120	75.95	2,236,643	3,620,880	
1990/07		0.80	0.5899	0.5899		120	75.95	2,247,198	3,642,240	
1991/01		0.80	0.5899	0.5899		120	75.20	2,257,803	3,663,600	
1991/07		0.90	1.4932	1.4932		120	75.20	2,288,146	3,718,320	
1992/01		0.90	2.0117	2.0117		120	79.14	2,329,573	3,793,080	
1992/07		1.00	1.8152	1.8152		120	79.14	2,371,859	3,861,960	
1993/01	20,015	1.00	1.7710	1.7710		120	76.48	2,433,880	3,930,360	
1993/07		1.00	1.5329	1.5329		120	76.48	2,471,189	3,990,600	
1994/01		1.00	1.6983	1.6983		120	71.91	2,513,157	4,058,400	
1994/07		1.00	1.5991	1.5991		120	71.91	2,553,345	4,123,320	
1995/01		1.00	1.5812	1.5812		120	70.23	2,593,718	4,188,480	
1995/07		1.00	1.5250	1.5250		120	70.23	2,633,272	4,252,320	
1996/01	37,823	1.00	1.7228	1.7228		120	66.95	2,716,461	4,325,640	
1996/07		1.00	1.3294	1.3294		120	66.95	2,752,574	4,383,120	
1997/01		1.00	1.4109	1.4109		120	63.88	2,791,410	4,444,920	
1997/07		1.00	1.0917	1.0917		120	63.88	2,821,884	4,493,400	



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203.38

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01	27,570	1.00	1.1663	1.1663		120	67.69	2,882,366	4,545,840	
1998/07		1.00	1.0794	1.0794		120	67.69	2,913,478	4,594,920	
1999/01		1.00	1.4499	1.4499		120	72.04	2,913,478	4,661,520	5
1999/07		1.00	1.2299	1.2299		120	72.04	2,992,073	4,718,880	
2000/01	20,708	1.00	1.3356	1.3356		120	70.47	3,052,743	4,781,880	
2000/07		1.00	1.1129	1.1129		120	70.47	3,086,717	4,835,040	
2001/01		1.00	1.2976	1.2976		120	67.36	3,126,770	4,897,800	
2001/07		1.00	0.9615	0.9615		120	64.73	3,156,834	4,944,840	
2002/01		1.00	1.0301	1.0301		120	64.73	3,189,353	4,995,720	
2002/07		1.00	0.8337	0.8337		120	64.73	3,215,943	5,037,360	
2003/01		1.00	1.3271	1.3271		120	64.73	3,258,622	5,104,200	
2003/07		0.95	1.1664	1.1664		120	64.73	3,294,731	5,163,720	
2004/01		0.95	1.1103	1.1103		120	64.73	3,329,484	5,221,080	
2004/07		0.90	0.8378	0.8378		120	57.11	3,354,588	5,264,880	
2005/01		0.90	0.8595	0.8595		120	60.49	3,380,539	5,310,120	
2005/07		0.85	0.7364	0.7364		120	60.49	3,401,698	5,349,240	
2006/01		0.85	0.9068	0.9068		120	61.15	3,427,918	5,397,720	
2006/07		0.80	0.8133	0.8133		120	61.15	3,450,220	5,441,640	
2007/01		0.80	1.0133	1.0133		120	57.96	3,478,187	5,496,720	
2007/07		0.75	1.1050	1.1050		120	57.96	3,507,014	5,557,440	
2008/01		0.75	0.8556	0.8556		120	57.96	3,529,519	5,604,960	
2008/07		0.70	0.6104	0.6104		120	61.90	3,544,601	5,639,160	
2009/01		0.70	1.3268	1.3268		120	61.90	3,577,523	5,714,040	
2009/07		0.65	0.6841	0.6841		120	61.16	3,593,432	5,753,160	
2010/01		0.65	0.8643	0.8643		120	61.16	3,613,620	5,802,840	
2010/07		0.60	0.7107	0.7107		120	57.97	3,629,028	5,844,120	
2011/01		0.60	0.9198	0.9198		120	57.97	3,649,057	5,897,880	
2011/07		0.55	0.9028	0.9028		120	61.73	3,667,175	5,951,160	
2012/01		0.55	0.3865	0.3865		120	61.92	3,674,971	5,974,200	
2012/07		0.50	0.9417	0.9417		120	61.92	3,692,276	6,030,480	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		0.50	0.4901	0.4901		120	61.92	3,701,326	6,060,000	
2013/07		0.45	0.6196	0.6196		120	61.92	3,711,645	6,097,560	
2014/01		0.45	0.8564	0.8564		120	61.92	3,725,950	6,149,760	
2014/07		0.40	1.2383	1.2383		120	61.92	3,744,405	6,225,960	
2015/01		0.40	0.7571	0.7571		120	67.27	3,755,743	6,273,120	
2015/09		0.35	1.5736	1.5736		120	67.27	3,776,430	6,371,880	
2016/09		0.30	1.9890	1.9890		120	70.84	3,798,964	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Florida Agency for Health Care Administration
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206.33

Rosewood Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3920 ROSEWOOD WAY	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
ORLANDO, FL 32808	Days in CR 365	Maximum: 43,800	Standard: 366
County: Orange [48]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 41,691	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,480	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 31,056	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	74.49090%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.18493%	Cost: 1.04651568
Open Date: 11/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 11/01/1984	Low Occupancy Adjustment Factor:	120.37754%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252468			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,510,361	2,185,207	1,262,533	1,376,402		6,334,503	
1a	Audit Adjustments							
2	Cost Per Diem	48.6335	70.3634	40.6534	44.3200		203.9703	
3	Cost Per Diem Inflated	50.8957	73.2262	42.5444				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.8957	73.2262	42.5444	44.3200		210.9863	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.4092		60.2648				
7	Provider Target Rate	57.4359		63.6172				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	57.5386		66.1281				
10b	Base for line 10a	54.5065		62.6434				
11	Lesser of 5,7,8,10, 10a	50.8957	73.2262	42.5444	13.6500		180.3163	
12/13	Medicaid Adjustment Rate		2.0175	1.1722				
14	Prospective Per Diem 11	50.8957	75.2437	43.7166	13.6500		183.5060	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rosewood Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/01/2001	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,140,025.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	4,815,546	12.0344
Indexed Asset Value	6,019,433	<60% of Base:	False	20% ROE(2):	1,203,887	0.6172
FRVS Base Asset:	3,420,000	Interest Rate:	10.6343%	Insurance Cost(3):	32,375	0.7765
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	62,951	1.5099
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	39,557	0.9488
		Interest Only:	False	Replacement(3&4):	79,905	0.0000
		Yearly Payment:	474,398	Total FRVS PD:		15.8868

(1) 80% Capital (\$4,815,546) amortized at 7.7500 % for 20 years Principal & Interest of \$474,398 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$12.0344

(2) 20% ROE (\$1,203,887) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6172

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.8957	50.8957	2.3091	48.5866
Direct Care	75.2437	75.2437	3.4138	71.8299
Indirect Care	43.7166	43.7166	1.9834	41.7332
Property	13.6500	15.8868	0.7208	15.1660
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.8302
Supplemental Rate				8.1814
Totals	183.5060	185.7428	8.4271	206.3273

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	3,067,975	0.00	1.9179	1.9179		120	86.56	3,067,975	3,352,680	
1985/01	489,837	0.10	1.1471	1.1471		120	86.56	3,561,331	3,391,080	
1985/10		0.10	0.8522	0.8522		120	86.56	3,420,000	3,420,000	1
1986/01		0.20	0.8299	0.8299		120	86.56	3,425,677	3,448,440	
1986/07		0.20	0.2974	0.2974		120	86.56	3,427,715	3,441,840	
1987/01		0.30	1.0091	1.0091		120	79.41	3,438,091	3,503,400	
1987/07		0.30	0.9007	0.9007		120	79.41	3,447,381	3,530,760	
1988/01		0.40	0.9007	0.9007		120	84.02	3,459,802	3,559,440	
1988/07		0.40	0.5899	0.5899		120	84.02	3,467,967	3,557,520	
1989/01		0.50	0.5899	0.5899		120	81.55	3,478,198	3,578,520	
1989/07		0.50	0.5899	0.5899		120	81.55	3,488,459	3,602,760	
1990/01		0.60	0.5899	0.5899		120	65.24	3,500,805	3,620,880	
1990/07		0.60	0.5899	0.5899		120	65.24	3,513,194	3,642,240	
1991/01		0.70	0.5899	0.5899		120	60.88	3,527,700	3,663,600	
1991/07		0.70	1.4932	1.4932		120	60.88	3,564,572	3,718,320	
1992/01		0.80	2.0117	2.0117		120	71.45	3,621,940	3,793,080	
1992/07		0.80	1.8152	1.8152		120	71.45	3,674,538	3,861,960	
1993/01		0.90	1.7710	1.7710		120	67.55	3,733,106	3,930,360	
1993/07		0.90	1.5329	1.5329		120	67.55	3,733,106	3,990,600	5
1994/01	77,441	1.00	1.6983	1.6983		120	59.39	3,926,323	4,058,400	
1994/07		1.00	1.5991	1.5991		120	59.39	3,989,109	4,123,320	
1995/01	19,581	1.00	1.5812	1.5812		120	60.78	4,071,766	4,188,480	
1995/07		1.00	1.5250	1.5250		120	60.78	4,071,766	4,252,320	5
1996/01	31,939	1.00	1.7228	1.7228		120	63.86	4,165,799	4,325,640	5
1996/07		1.00	1.3294	1.3294		120	63.86	4,293,344	4,383,120	
1997/01	28,087	1.00	1.4109	1.4109		120	69.90	4,382,006	4,444,920	
1997/07		1.00	1.0917	1.0917		120	69.90	4,382,006	4,493,400	5
1998/01		1.00	1.1663	1.1663		120	72.55	4,481,509	4,545,840	
1998/07		1.00	1.0794	1.0794		120	72.55	4,529,882	4,594,920	
1999/01		1.00	1.4499	1.4499		120	82.37	4,595,561	4,661,520	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		120	82.37	4,652,082	4,718,880	
2000/01	34,655	1.00	1.3356	1.3356		120	76.82	4,748,870	4,781,880	
2000/07		1.00	1.1129	1.1129		120	76.82	4,801,720	4,835,040	
2001/01		1.00	1.2976	1.2976		120	83.52	4,864,027	4,897,800	
2001/07		1.00	0.9615	0.9615		120	72.52	4,910,795	4,944,840	
2002/01		1.00	1.0301	1.0301		120	72.52	4,961,381	4,995,720	
2002/07		1.00	0.8337	0.8337		120	72.52	5,002,744	5,037,360	
2003/01		1.00	1.3271	1.3271		120	72.52	5,069,135	5,104,200	
2003/07		1.00	1.1664	1.1664		120	72.52	5,128,261	5,163,720	
2004/01		1.00	1.1103	1.1103		120	72.52	5,185,200	5,221,080	
2004/07		1.00	0.8378	0.8378		120	66.92	5,228,642	5,264,880	
2005/01		0.95	0.8595	0.8595		120	67.26	5,271,334	5,310,120	
2005/07		0.95	0.7364	0.7364		120	67.26	5,308,212	5,349,240	
2006/01		0.90	0.9068	0.9068		120	67.26	5,351,532	5,397,720	
2006/07		0.90	0.8133	0.8133		120	66.55	5,390,705	5,441,640	
2007/01		0.85	1.0133	1.0133		120	66.55	5,437,135	5,496,720	
2007/07		0.85	1.1050	1.1050		120	60.69	5,488,206	5,557,440	
2008/01		0.80	0.8556	0.8556		120	60.69	5,525,773	5,604,960	
2008/07		0.80	0.6104	0.6104		120	61.60	5,552,755	5,639,160	
2009/01		0.75	1.3268	1.3268		120	69.05	5,608,010	5,714,040	
2009/07		0.75	0.6841	0.6841		120	69.05	5,636,785	5,753,160	
2010/01		0.70	0.8643	0.8643		120	69.05	5,670,888	5,802,840	
2010/07		0.70	0.7107	0.7107		120	73.91	5,699,101	5,844,120	
2011/01		0.65	0.9198	0.9198		120	73.91	5,733,176	5,897,880	
2011/07		0.65	0.9028	0.9028		120	76.11	5,766,818	5,951,160	
2012/01		0.60	0.3865	0.3865		120	70.51	5,780,191	5,974,200	
2012/07		0.60	0.9417	0.9417		120	70.51	5,812,849	6,030,480	
2013/01		0.55	0.4901	0.4901		120	70.51	5,828,520	6,060,000	
2013/07		0.55	0.6196	0.6196		120	70.51	5,848,384	6,097,560	
2014/01		0.50	0.8564	0.8564		120	70.51	5,873,427	6,149,760	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	70.51	5,909,795	6,225,960	
2015/01		0.45	0.7571	0.7571		120	71.73	5,929,930	6,273,120	
2015/09		0.45	1.5736	1.5736		120	71.73	5,971,920	6,371,880	
2016/09		0.40	1.9890	1.9890		120	74.49	6,019,433	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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Report Printed: 6/30/2016 ID: 059869123120150101201504252016140100



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204.56

Evans Health Care

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3735 EVANS AVE	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
FORT MYERS, FL 33901-9302	Days in CR 365	Maximum: 43,800	Standard: 366
County: Lee [36]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 42,312	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 10,368	Inflation
Current Class South Large	Initial CR? False	Medicaid: 29,863	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	70.57809%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.60274%	Cost: 1.07573004
Open Date: 12/03/1998	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/03/1998	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 12/14/1998	Low Occupancy Adjustment Factor:	122.17060%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252212			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,260,228	2,234,524	1,203,204	1,004,890		5,702,846	
1a	Audit Adjustments							
2	Cost Per Diem	42.2003	74.8258	40.2908	33.6500		190.9669	
3	Cost Per Diem Inflated	45.3961	79.4225	43.3420				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.3961	79.4225	43.3420	33.6500		201.8106	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.2294		62.4958				
7	Provider Target Rate	62.5242		65.9723				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	60.0105		69.7569				
10b	Base for line 10a	56.8481		66.0809				
11	Lesser of 5,7,8,10, 10a	45.3961	79.4225	43.3420	13.6500		181.8106	
12/13	Medicaid Adjustment Rate		1.8387	1.0034				
14	Prospective Per Diem 11	45.3961	81.2612	44.3454	13.6500		184.6527	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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204.56

Evans Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/14/1998	Amount:	3,725,244.00		Total Amount	Per Diem
RS to Start Calcs:	1998/07	Type:	Fixed	80% Capital(1):	4,034,268	10.0820
Indexed Asset Value	5,042,835	<60% of Base:	False	20% ROE(2):	1,008,567	0.5810
FRVS Base Asset:	3,977,610	Interest Rate:	10.6343%	Insurance Cost(3):	35,699	0.8437
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	97,383	2.3015
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	42,785	1.0112
		Interest Only:	False	Replacement(3&4):	63,217	0.0000
		Yearly Payment:	397,431	Total FRVS PD:		14.8194

(1) 80% Capital (\$4,034,268) amortized at 7.7500 % for 20 years Principal & Interest of \$397,431 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.0820

(2) 20% ROE (\$1,008,567) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5810

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	37,882
Comparison Date: 01/01/1998	Current RS PBS:	54,155
Comparison Bed 105	Effective PBS Limitation	3,977,610

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.3961	45.3961	2.0596	43.3365
Direct Care	81.2612	81.2612	3.6868	77.5744
Indirect Care	44.3454	44.3454	2.0119	42.3335
Property	13.6500	14.8194	0.6723	14.1471
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.9918
Supplemental Rate				8.1814
Totals	184.6527	185.8221	8.4306	204.5647

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07	7,172,844	0.00	1.0794	1.0794		105	70.54	3,977,610	3,977,610	1
1999/01	29,005	0.10	1.4499	1.4499		105	70.54	4,012,383	4,078,830	
1999/07		0.10	1.2299	1.2299		105	70.54	4,017,318	4,129,020	
2000/01		0.20	1.3356	1.3356		105	70.54	4,028,048	4,184,145	
2000/07		0.20	1.1129	1.1129		105	70.54	4,037,014	4,230,660	
2001/01		0.30	1.2976	1.2976		120	67.60	4,052,730	4,897,800	
2001/07		0.30	0.9615	0.9615		120	69.20	4,064,422	4,944,840	
2002/01		0.40	1.0301	1.0301		120	69.20	4,081,167	4,995,720	
2002/07		0.40	0.8337	0.8337		120	69.20	4,094,778	5,037,360	
2003/01		0.50	1.3271	1.3271		120	69.20	4,121,951	5,104,200	
2003/07		0.50	1.1664	1.1664		120	69.20	4,145,990	5,163,720	
2004/01		0.60	1.1103	1.1103		120	69.20	4,173,611	5,221,080	
2004/07		0.60	0.8378	0.8378		120	80.34	4,194,592	5,264,880	
2005/01		0.70	0.8595	0.8595		120	80.34	4,219,831	5,310,120	
2005/07		0.70	0.7364	0.7364		120	80.76	4,241,584	5,349,240	
2006/01		0.80	0.9068	0.9068		120	80.76	4,272,352	5,397,720	
2006/07		0.80	0.8133	0.8133		120	75.27	4,300,148	5,441,640	
2007/01		0.90	1.0133	1.0133		120	75.27	4,339,365	5,496,720	
2007/07		0.90	1.1050	1.1050		120	67.41	4,382,520	5,557,440	
2008/01		1.00	0.8556	0.8556		120	64.80	4,420,017	5,604,960	
2008/07		1.00	0.6104	0.6104		120	64.80	4,446,997	5,639,160	
2009/01		1.00	1.3268	1.3268		120	64.80	4,506,000	5,714,040	
2009/07		1.00	0.6841	0.6841		120	47.91	4,532,852	5,753,160	
2010/01		1.00	0.8643	0.8643		120	44.36	4,564,450	5,802,840	
2010/07		1.00	0.7107	0.7107		120	44.36	4,590,614	5,844,120	
2011/01		1.00	0.9198	0.9198		120	47.18	4,626,835	5,897,880	
2011/07		1.00	0.9028	0.9028		120	47.18	4,662,667	5,951,160	
2012/01		1.00	0.3865	0.3865		120	43.26	4,676,841	5,974,200	
2012/07		1.00	0.9417	0.9417		120	43.26	4,711,482	6,030,480	
2013/01		1.00	0.4901	0.4901		120	43.26	4,729,644	6,060,000	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		1.00	0.6196	0.6196		120	43.26	4,729,644	6,097,560	5
2014/01		1.00	0.8564	0.8564		120	43.26	4,784,708	6,149,760	
2014/07		1.00	1.2383	1.2383		120	43.26	4,831,310	6,225,960	
2015/01		1.00	0.7571	0.7571		120	55.19	4,867,888	6,273,120	
2015/09		1.00	1.5736	1.5736		120	55.19	4,944,489	6,371,880	
2016/09		1.00	1.9890	1.9890		120	70.58	5,042,835	6,498,600	

Message Code:

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|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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Report Calculated: 6/30/2016 8:16:40 AM

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Sea Breeze Health Care

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1937 JENKS AVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
PANAMA CITY, FL 32405-4510	Days in CR 365	Maximum: 43,800	Standard: 366
County: Bay [3]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 39,823	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,365	Inflation
Current Class North Large	Initial CR? False	Medicaid: 28,800	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	72.32002%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	90.92009%	Cost: 1.04651568
Open Date: 12/01/1979	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/01/1979	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 06/01/1980	Low Occupancy Adjustment Factor:	114.98393%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252247			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,311,892	1,894,871	1,033,369	722,592		4,962,724	
1a	Audit Adjustments							
2	Cost Per Diem	45.5518	65.7941	35.8809	25.0900		172.3168	
3	Cost Per Diem Inflated	47.6707	68.4710	37.5499				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.6707	68.4710	37.5499	25.0900		178.7816	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.3929		55.2693				
7	Provider Target Rate	51.0849		58.3438				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	52.7109		61.0065				
10b	Base for line 10a	49.9332		57.7917				
11	Lesser of 5,7,8,10, 10a	47.6707	68.4710	37.5499	13.6500		167.3416	
12/13	Medicaid Adjustment Rate		1.7193	0.9429				
14	Prospective Per Diem 11	47.6707	70.1903	38.4928	13.6500		170.0038	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Sea Breeze Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 12/01/2001		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,500,000.00		Total Amount	Per Diem
RS to Start Calcs:	1979/07	Type:	Fixed	80% Capital(1):	2,493,146	7.3240
Indexed Asset Value	3,116,432	<60% of Base:	False	20% ROE(2):	623,286	0.3195
FRVS Base Asset:	1,814,520	Interest Rate:	10.0000%	Insurance Cost(3):	31,752	0.7973
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	27,568	0.6923
ROE Factor	0.020210	Amortization Rate:	10.0000%	Home Office(3):	35,683	0.8960
		Interest Only:	False	Replacement(3&4):	47,543	0.0000
		Yearly Payment:	288,713	Total FRVS PD:		10.0291

(1) 80% Capital (\$2,493,146) amortized at 10.0000 % for 20 years Principal & Interest of \$288,713 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.3240

(2) 20% ROE (\$623,286) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3195

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.6707	47.6707	2.1628	45.5079
Direct Care	70.1903	70.1903	3.1845	67.0058
Indirect Care	38.4928	38.4928	1.7464	36.7464
Property	13.6500	10.0291	0.4550	9.5741
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9427
Supplemental Rate				8.1814
Totals	170.0038	166.3829	7.5487	187.9583

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1979/07	855,134	0.00	4.1982	3.0000	1.1982	120	100.00	855,134	2,468,640	
1980/01		0.10	7.3640	3.0000	4.3640	120	84.19	857,699	2,620,920	
1980/07	703,499	0.10	8.1746	3.0000	5.1746	120	84.19	1,563,771	2,720,760	
1981/01	8,551	0.20	8.9986	3.0000	5.9986	120	87.80	1,581,705	2,824,800	
1981/07	13,787	0.20	8.5874	3.0000	5.5874	120	87.80	1,604,982	2,897,880	
1982/01	1,917	0.30	8.2634	3.0000	5.2634	120	73.57	1,621,344	2,975,520	
1982/07	632	0.30	7.5611	3.0000	4.5611	120	87.90	1,636,568	3,043,800	
1983/04	825	0.40	7.1899	3.0000	4.1899	120	87.90	1,657,032	3,123,840	
1983/07	14,883	0.40	8.1477	3.0000	5.1477	120	87.90	1,691,799	3,247,440	
1984/01	1,905	0.50	6.4429	3.0000	3.4429	120	87.90	1,719,081	3,289,560	
1984/07	18,964	0.50	5.3608	3.0000	2.3608	120	69.67	1,763,831	3,352,680	
1985/01	1,110	0.60	3.5079	3.0000	0.5079	120	69.67	1,796,690	3,391,080	
1985/10	3,167	0.60	1.3601	1.3601		120	69.67	1,814,520	3,420,000	
1986/01		0.70	0.8299	0.8299		120	71.97	1,825,061	3,448,440	
1986/07		0.70	0.2974	0.2974		120	71.97	1,828,861	3,441,840	
1987/01		0.80	1.0091	1.0091		120	70.40	1,843,625	3,503,400	
1987/07		0.80	0.9007	0.9007		120	70.40	1,856,910	3,530,760	
1988/01		0.90	0.9007	0.9007		120	81.69	1,871,962	3,559,440	
1988/07		0.90	0.5899	0.5899		120	81.69	1,881,900	3,557,520	
1989/01		1.00	0.5899	0.5899		120	72.28	1,893,001	3,578,520	
1989/07		1.00	0.5899	0.5899		120	72.28	1,904,168	3,602,760	
1990/01		1.00	0.5899	0.5899		120	72.28	1,915,401	3,620,880	
1990/07		1.00	0.5899	0.5899		120	65.23	1,926,700	3,642,240	
1991/01		1.00	0.5899	0.5899		120	63.07	1,938,066	3,663,600	
1991/07		1.00	1.4932	1.4932		120	63.07	1,967,005	3,718,320	
1992/01		1.00	2.0117	2.0117		120	72.09	2,006,575	3,793,080	
1992/07		1.00	1.8152	1.8152		120	72.09	2,042,998	3,861,960	
1993/01		1.00	1.7710	1.7710		120	71.32	2,079,179	3,930,360	
1993/07		1.00	1.5329	1.5329		120	71.32	2,111,051	3,990,600	
1994/01		1.00	1.6983	1.6983		120	72.01	2,146,903	4,058,400	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/07		1.00	1.5991	1.5991		120	72.01	2,181,234	4,123,320	
1995/01		1.00	1.5812	1.5812		120	74.03	2,215,724	4,188,480	
1995/07		1.00	1.5250	1.5250		120	74.03	2,249,514	4,252,320	
1996/01	28,232	1.00	1.7228	1.7228		120	75.80	2,316,501	4,325,640	
1996/07		1.00	1.3294	1.3294		120	75.80	2,347,297	4,383,120	
1997/01	19,113	1.00	1.4109	1.4109		120	75.30	2,399,528	4,444,920	
1997/07		1.00	1.0917	1.0917		120	75.30	2,425,724	4,493,400	
1998/01		1.00	1.1663	1.1663		120	78.95	2,454,015	4,545,840	
1998/07		1.00	1.0794	1.0794		120	78.95	2,480,504	4,594,920	
1999/01		1.00	1.4499	1.4499		120	81.77	2,516,469	4,661,520	
1999/07		1.00	1.2299	1.2299		120	81.77	2,547,419	4,718,880	
2000/01	51,726	0.95	1.3356	1.3356		120	84.51	2,599,145	4,781,880	5
2000/07		0.95	1.1129	1.1129		120	84.51	2,659,290	4,835,040	
2001/01		0.90	1.2976	1.2976		120	82.53	2,690,345	4,897,800	
2001/07		0.90	0.9615	0.9615		120	80.89	2,713,627	4,944,840	
2002/01		0.85	1.0301	1.0301		120	80.89	2,737,388	4,995,720	
2002/07		0.85	0.8337	0.8337		120	80.89	2,756,785	5,037,360	
2003/01		0.80	1.3271	1.3271		120	80.89	2,786,054	5,104,200	
2003/07		0.80	1.1664	1.1664		120	80.89	2,812,051	5,163,720	
2004/01		0.75	1.1103	1.1103		120	80.89	2,835,467	5,221,080	
2004/07		0.75	0.8378	0.8378		120	80.32	2,853,285	5,264,880	
2005/01		0.70	0.8595	0.8595		120	77.69	2,870,453	5,310,120	
2005/07		0.70	0.7364	0.7364		120	77.69	2,885,250	5,349,240	
2006/01		0.65	0.9068	0.9068		120	77.69	2,902,256	5,397,720	
2006/07		0.65	0.8133	0.8133		120	76.93	2,917,597	5,441,640	
2007/01		0.60	1.0133	1.0133		120	75.02	2,935,336	5,496,720	
2007/07		0.60	1.1050	1.1050		120	75.02	2,954,797	5,557,440	
2008/01		0.55	0.8556	0.8556		120	75.02	2,968,702	5,604,960	
2008/07		0.55	0.6104	0.6104		120	66.87	2,978,668	5,639,160	
2009/01		0.50	1.3268	1.3268		120	66.87	2,998,428	5,714,040	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07		0.50	0.6841	0.6841		120	71.00	3,008,686	5,753,160	
2010/01		0.45	0.8643	0.8643		120	71.00	3,020,387	5,802,840	
2010/07		0.45	0.7107	0.7107		120	75.77	3,030,046	5,844,120	
2011/01		0.40	0.9198	0.9198		120	75.77	3,041,194	5,897,880	
2011/07		0.40	0.9028	0.9028		120	77.15	3,052,176	5,951,160	
2012/01		0.35	0.3865	0.3865		120	72.91	3,056,306	5,974,200	
2012/07		0.35	0.9417	0.9417		120	72.91	3,066,380	6,030,480	
2013/01		0.30	0.4901	0.4901		120	72.91	3,070,888	6,060,000	
2013/07		0.30	0.6196	0.6196		120	72.91	3,076,597	6,097,560	
2014/01		0.25	0.8564	0.8564		120	72.91	3,083,184	6,149,760	
2014/07		0.25	1.2383	1.2383		120	72.91	3,092,730	6,225,960	
2015/01		0.20	0.7571	0.7571		120	71.07	3,097,412	6,273,120	
2015/09		0.20	1.5736	1.5736		120	71.07	3,107,160	6,371,880	
2016/09		0.15	1.9890	1.9890		120	72.32	3,116,432	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

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 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0059877-00 - 2016/09

197.70

Spring Hill Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
12170 CORTEZ BLVD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
BROOKSVILLE, FL 34613-5578	Days in CR 365	Maximum: 43,800	Standard: 366
County: Hernando [27]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 42,780	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 14,239	Inflation
Current Class North Large	Initial CR? False	Medicaid: 18,252	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	42.66480%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.67123%	Cost: 1.04651568
Open Date: 07/11/1997	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/11/1997	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 08/01/1997	Low Occupancy Adjustment Factor:	123.52189%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252492			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	808,863	1,295,922	874,432	852,003		3,831,220	
1a	Audit Adjustments							
2	Cost Per Diem	44.3164	71.0016	47.9088	46.6800		209.9068	
3	Cost Per Diem Inflated	46.3778	73.8904	50.1373				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.3778	73.8904	50.1373	46.6800		217.0855	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.8210		66.4182				
7	Provider Target Rate	53.6481		70.1129				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.2632		65.6137				
10b	Base for line 10a	51.4037		62.1561				
11	Lesser of 5,7,8,10, 10a	46.3778	73.8904	50.1373	13.6500		184.0555	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	46.3778	73.8904	50.1373	13.6500		184.0555	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Rate Semester 09/01/2016 through 08/31/2017

0 059877-00 - 2016/09

197.70

Spring Hill Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	08/01/1997	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,919,949.00		Total Amount	Per Diem
RS to Start Calcs:	1997/07	Type:	Fixed	80% Capital(1):	4,552,227	11.3764
Indexed Asset Value	5,690,284	<60% of Base:	False	20% ROE(2):	1,138,057	0.5835
FRVS Base Asset:	4,444,920	Interest Rate:	10.6343%	Insurance Cost(3):	33,167	0.7753
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	98,561	2.3039
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	46,616	1.0897
		Interest Only:	False	Replacement(3&4):	79,427	0.0000
		Yearly Payment:	448,457	Total FRVS PD:		16.1288

(1) 80% Capital (\$4,552,227) amortized at 7.7500 % for 20 years Principal & Interest of \$448,457 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.3764

(2) 20% ROE (\$1,138,057) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5835

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	37,041
Comparison Date: 01/01/1997	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	4,444,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.3778	46.3778	2.1041	44.2737
Direct Care	73.8904	73.8904	3.3524	70.5380
Indirect Care	50.1373	50.1373	2.2747	47.8626
Property	13.6500	16.1288	0.7318	15.3970
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				11.4480
Supplemental Rate				8.1814
Totals	184.0555	186.5343	8.4630	197.7007

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

0 059877-00 - 2016/09

197.70

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/07	6,874,770	0.00	1.0917	1.0917		120	32.55	4,444,920	4,444,920	1
1998/01		0.10	1.1663	1.1663		120	32.55	4,447,987	4,545,840	
1998/07		0.10	1.0794	1.0794		120	32.55	4,450,827	4,594,920	
1999/01		0.20	1.4499	1.4499		120	32.55	4,450,827	4,661,520	5
1999/07		0.20	1.2299	1.2299		120	32.55	4,464,957	4,718,880	
2000/01	37,303	0.30	1.3356	1.3356		120	56.28	4,520,151	4,781,880	
2000/07		0.30	1.1129	1.1129		120	56.28	4,535,244	4,835,040	
2001/01		0.40	1.2976	1.2976		120	56.70	4,558,782	4,897,800	
2001/07		0.40	0.9615	0.9615		120	51.52	4,575,206	4,944,840	
2002/01		0.50	1.0301	1.0301		120	51.52	4,597,282	4,995,720	
2002/07		0.50	0.8337	0.8337		120	51.52	4,615,235	5,037,360	
2003/01		0.60	1.3271	1.3271		120	51.52	4,649,661	5,104,200	
2003/07		0.60	1.1664	1.1664		120	51.52	4,680,141	5,163,720	
2004/01		0.70	1.1103	1.1103		120	51.52	4,714,214	5,221,080	
2004/07		0.70	0.8378	0.8378		120	58.10	4,741,863	5,264,880	
2005/01		0.80	0.8595	0.8595		120	58.10	4,774,468	5,310,120	
2005/07		0.80	0.7364	0.7364		120	56.81	4,802,594	5,349,240	
2006/01		0.90	0.9068	0.9068		120	56.81	4,841,788	5,397,720	
2006/07		0.90	0.8133	0.8133		120	54.34	4,876,805	5,441,640	
2007/01		1.00	1.0133	1.0133		120	54.36	4,925,647	5,496,720	
2007/07		1.00	1.1050	1.1050		120	54.36	4,979,442	5,557,440	
2008/01		1.00	0.8556	0.8556		120	54.36	5,021,550	5,604,960	
2008/07		1.00	0.6104	0.6104		120	43.17	5,045,609	5,639,160	
2009/01		1.00	1.3268	1.3268		120	40.42	5,094,808	5,714,040	
2009/07		1.00	0.6841	0.6841		120	40.42	5,120,422	5,753,160	
2010/01		1.00	0.8643	0.8643		120	40.42	5,152,946	5,802,840	
2010/07		1.00	0.7107	0.7107		120	46.18	5,183,695	5,844,120	
2011/01		1.00	0.9198	0.9198		120	45.85	5,223,442	5,897,880	
2011/07		1.00	0.9028	0.9028		120	45.85	5,262,754	5,951,160	
2012/01		1.00	0.3865	0.3865		120	49.46	5,281,046	5,974,200	



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197.70

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07		1.00	0.9417	0.9417		120	49.46	5,325,768	6,030,480	
2013/01		1.00	0.4901	0.4901		120	49.46	5,349,240	6,060,000	
2013/07		1.00	0.6196	0.6196		120	49.46	5,379,045	6,097,560	
2014/01		1.00	0.8564	0.8564		120	49.46	5,420,471	6,149,760	
2014/07		1.00	1.2383	1.2383		120	49.46	5,480,832	6,225,960	
2015/01		1.00	0.7571	0.7571		120	52.70	5,520,592	6,273,120	
2015/09		1.00	1.5736	1.5736		120	52.70	5,603,831	6,371,880	
2016/09		1.00	1.9890	1.9890		120	42.66	5,690,284	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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ID: 059877123120150101201504252016143007



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0060972-00 - 2016/09

198.11

Emerald Shores Health and Rehabilitation

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
626 N TYNDALL PKWY CALLAWAY, FL 32404-6132	1/1/2015-12/31/2015	Number of Beds: 77	Superior: 0
County: Bay [3]	Days in CR 365	Maximum: 28,105	Standard: 366
Region: North Area: 2	First Used : 2016/09	Max Annualized: 28,105	Conditional: 0
Control: Proprietary : Corporation	Last Used: 2016/09	Total Patient: 26,770	Total: 366
Current Class North Small	Unaudited	Medicare: 7,820	Inflation
Class at 1/94: North Small	Initial CR? False	Medicaid: 15,152	FY Index: 1.37939113
Operating Ex > 18 months	Medicaid Utilization	56.60067%	Semester Index: 1.44355445
Open Date: 08/30/2000	Occupancy:	95.24996%	Cost: 1.04651568
Acquired Date: 08/30/2000	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 08/30/2000	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Med # Active Date: 02/01/2012	Low Occupancy Adjustment Factor:	120.45978%	DC Sem Index: 1.30450000
Previous Med # 252191	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	783,796	994,104	633,736	618,050		3,029,686	
1a	Audit Adjustments							
2	Cost Per Diem	51.7289	65.6088	41.8252	40.7900		199.9529	
3	Cost Per Diem Inflated	54.1351	68.2782	43.7707				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.1351	68.2782	43.7707	40.7900		206.9740	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.7803		65.2147				
7	Provider Target Rate	60.9945		68.8425				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	60.7205		72.2027				
10b	Base for line 10a	57.5207		68.3979				
11	Lesser of 5,7,8,10, 10a	54.1351	68.2782	43.7707	13.6500		179.8340	
12/13	Medicaid Adjustment Rate		0.5070	0.3250				
14	Prospective Per Diem 11	54.1351	68.7852	44.0957	13.6500		180.6660	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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198.11

Emerald Shores Health and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/30/2000		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,094,140.00		Total Amount	Per Diem
RS to Start Calcs:	2000/07	Type:	Fixed	80% Capital(1):	2,959,848	11.5276
Indexed Asset Value	3,699,810	<60% of Base:	False	20% ROE(2):	739,962	0.5912
FRVS Base Asset:	3,068,373	Interest Rate:	10.6343%	Insurance Cost(3):	19,622	0.7330
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	35,976	1.3439
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	28,027	1.0470
		Interest Only:	False	Replacement(3&4):	30,981	0.0000
		Yearly Payment:	291,586	Total FRVS PD:		15.2427

(1) 80% Capital (\$2,959,848) amortized at 7.7500 % for 20 years Principal & Interest of \$291,586 divided by annual available days (28105) divided by Occup. Adj. (0.90) = \$11.5276

(2) 20% ROE (\$739,962) times the ROE factor (0.020210) divided by annual available days (28105) divided by Occup. Adj. (0.90) = \$0.5912

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/2000	Current RS PBS:	39,849
Comparison Bed	77	Effective PBS Limitation	54,155
			3,068,373

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.1351	54.1351	2.4561	51.6790
Direct Care	68.7852	68.7852	3.1208	65.6644
Indirect Care	44.0957	44.0957	2.0006	42.0951
Property	13.6500	15.2427	0.6916	14.5511
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.9389
Supplemental Rate				8.1814
Totals	180.6660	182.2587	8.2691	198.1099

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07	5,793,974	0.00	1.1129	1.1129		77	63.85	3,068,373	3,068,373	1
2001/01		0.10	1.2976	1.2976		77	63.85	3,072,356	3,142,755	
2001/07		0.10	0.9615	0.9615		77	62.71	3,075,312	3,172,939	
2002/01		0.20	1.0301	1.0301		77	62.71	3,081,647	3,205,587	
2002/07		0.20	0.8337	0.8337		77	62.71	3,081,647	3,232,306	5
2003/01		0.30	1.3271	1.3271		77	62.71	3,086,784	3,275,195	5
2003/07		0.30	1.1664	1.1664		77	62.71	3,109,916	3,313,387	
2004/01		0.40	1.1103	1.1103		77	62.71	3,123,727	3,350,193	
2004/07		0.40	0.8378	0.8378		77	61.95	3,134,195	3,378,298	
2005/01		0.50	0.8595	0.8595		77	61.95	3,147,666	3,407,327	
2005/07		0.50	0.7364	0.7364		77	63.89	3,159,256	3,432,429	
2006/01		0.60	0.9068	0.9068		77	63.89	3,176,446	3,463,537	
2006/07		0.60	0.8133	0.8133		77	67.28	3,191,947	3,491,719	
2007/01		0.70	1.0133	1.0133		77	60.63	3,214,587	3,527,062	
2007/07		0.70	1.1050	1.1050		77	60.63	3,214,587	3,566,024	5
2008/01		0.80	0.8556	0.8556		77	60.63	3,261,626	3,596,516	
2008/07		0.80	0.6104	0.6104		77	50.03	3,276,113	3,618,461	
2009/01		0.90	1.3268	1.3268		77	50.03	3,311,698	3,666,509	
2009/07		0.90	0.6841	0.6841		77	48.95	3,329,845	3,691,611	
2010/01		1.00	0.8643	0.8643		77	48.95	3,355,459	3,723,489	
2010/07		1.00	0.7107	0.7107		77	45.60	3,375,231	3,749,977	
2011/01		1.00	0.9198	0.9198		77	49.63	3,403,245	3,784,473	
2011/07		1.00	0.9028	0.9028		77	49.63	3,430,970	3,818,661	
2012/01		1.00	0.3865	0.3865		77	44.28	3,441,646	3,833,445	
2012/07		1.00	0.9417	0.9417		77	44.28	3,467,739	3,869,558	
2013/01		1.00	0.4901	0.4901		77	44.28	3,481,422	3,888,500	
2013/07		1.00	0.6196	0.6196		77	44.28	3,498,789	3,912,601	
2014/01		1.00	0.8564	0.8564		77	44.28	3,522,912	3,946,096	
2014/07		1.00	1.2383	1.2383		77	44.28	3,558,033	3,994,991	
2015/01		1.00	0.7571	0.7571		77	45.98	3,580,553	4,025,252	



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198.11

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		1.00	1.5736	1.5736		77	45.98	3,627,656	4,088,623	
2016/09		1.00	1.9890	1.9890		77	56.60	3,699,810	4,169,935	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0060993-00 - 2016/09

195.00

University Hills Health and Rehabilitation

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
10040 HILLVIEW ROAD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
PENSACOLA, FL 32514	Days in CR 365	Maximum: 43,800	Standard: 366
County: Escambia [17]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 42,534	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,099	Inflation
Current Class North Large	Initial CR? False	Medicaid: 32,742	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	76.97842%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.10959%	Cost: 1.04651568
Open Date: 08/01/1982	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1982	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 08/01/1982	Low Occupancy Adjustment Factor:	122.81160%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252123			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,410,757	2,136,556	1,347,253	539,261		5,433,827	
1a	Audit Adjustments							
2	Cost Per Diem	43.0871	65.2543	41.1475	16.4700		165.9589	
3	Cost Per Diem Inflated	45.0913	67.9092	43.0615				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.0913	67.9092	43.0615	16.4700		172.5320	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.1008		56.2697				
7	Provider Target Rate	54.9991		59.3999				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	55.2060		65.6137				
10b	Base for line 10a	52.2968		62.1561				
11	Lesser of 5,7,8,10, 10a	45.0913	67.9092	43.0615	13.6500		169.7120	
12/13	Medicaid Adjustment Rate		2.0611	1.3069				
14	Prospective Per Diem 11	45.0913	69.9703	44.3684	13.6500		173.0800	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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University Hills Health and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	3,105,912.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	4,504,343	11.2567
Indexed Asset Value	5,630,429	<60% of Base:	False	20% ROE(2):	1,126,086	0.5773
FRVS Base Asset:	3,249,000	Interest Rate:	10.6343%	Insurance Cost(3):	28,082	0.6602
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	42,085	0.9894
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	38,374	0.9022
		Interest Only:	False	Replacement(3&4):	52,536	0.0000
		Yearly Payment:	443,740	Total FRVS PD:		14.3858

(1) 80% Capital (\$4,504,343) amortized at 7.7500 % for 20 years Principal & Interest of \$443,740 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.2567

(2) 20% ROE (\$1,126,086) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5773

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 114	Effective PBS Limitation	3,249,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.0913	45.0913	2.0458	43.0455
Direct Care	69.9703	69.9703	3.1745	66.7958
Indirect Care	44.3684	44.3684	2.0130	42.3554
Property	13.6500	14.3858	0.6527	13.7331
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.8839
Supplemental Rate				8.1814
Totals	173.0800	173.8158	7.8860	194.9951

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1982/07	163,686	0.00	2.2977	2.2977		114		163,686	2,891,610	
1983/04		0.10	2.6288	2.6288		114		163,686	2,967,648	
1983/07	30,847	0.10	3.9578	3.0000	0.9578	114		194,533	3,085,068	
1984/01	3,208,184	0.20	2.2530	2.2530		114	78.79	3,403,594	3,125,082	
1984/07	2,333	0.20	1.9179	1.9179		114	78.79	3,418,983	3,185,046	
1985/01	6,207	0.30	1.1471	1.1471		114	78.79	3,436,955	3,221,526	
1985/10		0.30	0.8522	0.8522		114	78.79	3,249,000	3,249,000	1
1986/01		0.40	0.8299	0.8299		114	78.79	3,259,787	3,276,018	
1986/07		0.40	0.2974	0.2974		114	78.79	3,263,666	3,269,748	
1987/01		0.50	1.0091	1.0091		114	77.55	3,280,134	3,328,230	
1987/07		0.50	0.9007	0.9007		114	77.55	3,294,908	3,354,222	
1988/01		0.60	0.9007	0.9007		120	75.16	3,312,714	3,559,440	
1988/07		0.60	0.5899	0.5899		120	75.16	3,324,438	3,557,520	
1989/01		0.70	0.5899	0.5899		120	76.84	3,338,165	3,578,520	
1989/07		0.70	0.5899	0.5899		120	76.84	3,351,948	3,602,760	
1990/01		0.80	0.5899	0.5899		120	73.94	3,367,766	3,620,880	
1990/07		0.80	0.5899	0.5899		120	73.94	3,383,658	3,642,240	
1991/01		0.90	0.5899	0.5899		120	70.98	3,401,622	3,663,600	
1991/07		0.90	1.4932	1.4932		120	70.98	3,447,336	3,718,320	
1992/01		1.00	2.0117	2.0117		120	79.99	3,447,336	3,793,080	5
1992/07		1.00	1.8152	1.8152		120	79.99	3,580,521	3,861,960	
1993/01	32,537	1.00	1.7710	1.7710		120	78.93	3,676,469	3,930,360	
1993/07		1.00	1.5329	1.5329		120	78.93	3,676,469	3,990,600	5
1994/01	22,838	1.00	1.6983	1.6983		120	72.50	3,755,664	4,058,400	5
1994/07		1.00	1.5991	1.5991		120	72.50	3,819,059	4,123,320	5
1995/01		1.00	1.5812	1.5812		120	75.14	3,880,130	4,188,480	5
1995/07		1.00	1.5250	1.5250		120	75.14	3,941,483	4,252,320	5
1996/01		1.00	1.7228	1.7228		120	76.47	4,001,591	4,325,640	5
1996/07		1.00	1.3294	1.3294		120	76.47	4,124,644	4,383,120	
1997/01		1.00	1.4109	1.4109		120	73.61	4,182,839	4,444,920	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/07		1.00	1.0917	1.0917		120	73.61	4,228,503	4,493,400	
1998/01	25,901	1.00	1.1663	1.1663		120	77.87	4,303,721	4,545,840	
1998/07		1.00	1.0794	1.0794		120	77.87	4,350,175	4,594,920	
1999/01		1.00	1.4499	1.4499		120	80.64	4,413,248	4,661,520	
1999/07		1.00	1.2299	1.2299		120	80.64	4,467,527	4,718,880	
2000/01	23,567	1.00	1.3356	1.3356		120	79.96	4,550,762	4,781,880	
2000/07		1.00	1.1129	1.1129		120	79.96	4,601,407	4,835,040	
2001/01		1.00	1.2976	1.2976		120	81.64	4,661,115	4,897,800	
2001/07		1.00	0.9615	0.9615		120	72.97	4,705,932	4,944,840	
2002/01		1.00	1.0301	1.0301		120	72.97	4,754,408	4,995,720	
2002/07		1.00	0.8337	0.8337		120	72.97	4,794,045	5,037,360	
2003/01		0.95	1.3271	1.3271		120	72.97	4,854,484	5,104,200	
2003/07		0.95	1.1664	1.1664		120	72.97	4,908,277	5,163,720	
2004/01		0.90	1.1103	1.1103		120	72.97	4,957,325	5,221,080	
2004/07		0.90	0.8378	0.8378		120	72.90	4,994,703	5,264,880	
2005/01		0.85	0.8595	0.8595		120	72.90	5,031,194	5,310,120	
2005/07		0.85	0.7364	0.7364		120	72.58	5,062,684	5,349,240	
2006/01		0.80	0.9068	0.9068		120	72.58	5,099,409	5,397,720	
2006/07		0.80	0.8133	0.8133		120	66.87	5,132,586	5,441,640	
2007/01		0.75	1.0133	1.0133		120	66.09	5,171,594	5,496,720	
2007/07		0.75	1.1050	1.1050		120	66.09	5,214,456	5,557,440	
2008/01		0.70	0.8556	0.8556		120	66.09	5,245,685	5,604,960	
2008/07		0.70	0.6104	0.6104		120	65.04	5,268,100	5,639,160	
2009/01		0.65	1.3268	1.3268		120	70.70	5,313,532	5,714,040	
2009/07		0.65	0.6841	0.6841		120	70.70	5,337,161	5,753,160	
2010/01		0.60	0.8643	0.8643		120	70.70	5,364,840	5,802,840	
2010/07		0.60	0.7107	0.7107		120	75.92	5,387,716	5,844,120	
2011/01		0.55	0.9198	0.9198		120	75.92	5,414,972	5,897,880	
2011/07		0.55	0.9028	0.9028		120	77.09	5,441,857	5,951,160	
2012/01		0.50	0.3865	0.3865		120	73.61	5,452,376	5,974,200	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07		0.50	0.9417	0.9417		120	73.61	5,478,051	6,030,480	
2013/01		0.45	0.4901	0.4901		120	73.61	5,490,130	6,060,000	
2013/07		0.45	0.6196	0.6196		120	73.61	5,505,436	6,097,560	
2014/01		0.40	0.8564	0.8564		120	73.61	5,524,298	6,149,760	
2014/07		0.40	1.2383	1.2383		120	73.61	5,551,660	6,225,960	
2015/01		0.35	0.7571	0.7571		120	72.57	5,566,372	6,273,120	
2015/09		0.35	1.5736	1.5736		120	72.57	5,597,032	6,371,880	
2016/09		0.30	1.9890	1.9890		120	76.98	5,630,429	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Heritage Park Rehabilitation and Healthcare

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2826 CLEVELAND AVE	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
FORT MYERS, FL 33901-6001	Days in CR 365	Maximum: 43,800	Standard: 366
County: Lee [36]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 42,797	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,613	Inflation
Current Class South Large	Initial CR? False	Medicaid: 33,331	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	77.88163%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.71005%	Cost: 1.07573004
Open Date: 11/01/1981	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1981	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 10/01/1982	Low Occupancy Adjustment Factor:	123.57099%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252344			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,555,165	2,283,279	1,123,007	839,608		5,801,059	
1a	Audit Adjustments							
2	Cost Per Diem	46.6582	68.5032	33.6926	25.1900		174.0440	
3	Cost Per Diem Inflated	50.1916	72.7115	36.2441				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.1916	72.7115	36.2441	25.1900		184.3372	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	58.5673		60.9554				
7	Provider Target Rate	61.8253		64.3462				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	63.3494		69.1715				
10b	Base for line 10a	60.0111		65.5264				
11	Lesser of 5,7,8,10, 10a	50.1916	72.7115	36.2441	13.6500		172.7972	
12/13	Medicaid Adjustment Rate		2.2807	1.1369				
14	Prospective Per Diem 11	50.1916	74.9922	37.3810	13.6500		176.2148	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Heritage Park Rehabilitation and Healthcare

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,912,669.00		Total Amount	Per Diem
RS to Start Calcs:	1981/07	Type:	Fixed	80% Capital(1):	4,166,833	10.4133
Indexed Asset Value	5,208,541	<60% of Base:	False	20% ROE(2):	1,041,708	0.6001
FRVS Base Asset:	3,026,907	Interest Rate:	10.6343%	Insurance Cost(3):	32,404	0.7572
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	58,680	1.3711
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	39,888	0.9320
		Interest Only:	False	Replacement(3&4):	71,764	0.0000
		Yearly Payment:	410,491	Total FRVS PD:		14.0737

(1) 80% Capital (\$4,166,833) amortized at 7.7500 % for 20 years Principal & Interest of \$410,491 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.4133

(2) 20% ROE (\$1,041,708) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6001

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 146	Effective PBS Limitation	4,161,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.1916	50.1916	2.2772	47.9144
Direct Care	74.9922	74.9922	3.4024	71.5898
Indirect Care	37.3810	37.3810	1.6960	35.6850
Property	13.6500	14.0737	0.6385	13.4352
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7400
Supplemental Rate				8.1814
Totals	176.2148	176.6385	8.0141	196.5458

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1981/07	2,638,852	0.00	2.5888	2.5888		146		2,638,852	3,525,754	
1982/01	167,315	0.10	2.6760	2.6760		146		2,806,167	3,620,216	
1982/07	88,617	0.10	2.2977	2.2977		146	55.00	2,901,233	3,703,290	
1983/04	10,268	0.20	2.6288	2.6288		146	88.91	2,926,756	3,800,672	
1983/07	5,145	0.20	3.9578	3.0000	0.9578	146	88.91	2,949,462	3,951,052	
1984/01		0.30	2.2530	2.2530		146	88.45	2,969,397	4,002,298	
1984/07	16,363	0.30	1.9179	1.9179		146	88.45	3,002,846	4,079,094	
1985/01		0.40	1.1471	1.1471		146	88.45	3,016,623	4,125,814	
1985/10		0.40	0.8522	0.8522		146	88.45	3,026,907	4,161,000	
1986/01		0.50	0.8299	0.8299		146	87.00	3,039,469	4,195,602	
1986/07		0.50	0.2974	0.2974		146	87.00	3,043,989	4,187,572	
1987/01	15,314	0.60	1.0091	1.0091		146	84.98	3,077,734	4,262,470	
1987/07		0.60	0.9007	0.9007		146	84.98	3,094,366	4,295,758	
1988/01		0.70	0.9007	0.9007		146	84.47	3,113,876	4,330,652	
1988/07		0.70	0.5899	0.5899		146	84.47	3,126,733	4,328,316	
1989/01		0.80	0.5899	0.5899		146	81.35	3,141,488	4,353,866	
1989/07		0.80	0.5899	0.5899		146	81.35	3,156,313	4,383,358	
1990/01		0.90	0.5899	0.5899		146	81.37	3,173,070	4,405,404	
1990/07		0.90	0.5899	0.5899		146	81.37	3,189,916	4,431,392	
1991/01		1.00	0.5899	0.5899		146	83.44	3,208,733	4,457,380	
1991/07		1.00	1.4932	1.4932		146	83.44	3,256,646	4,523,956	
1992/01	41,422	1.00	2.0117	2.0117		146	82.31	3,363,582	4,614,914	
1992/07		1.00	1.8152	1.8152		146	82.31	3,424,638	4,698,718	
1993/01	22,341	1.00	1.7710	1.7710		146	75.96	3,507,629	4,781,938	
1993/07		1.00	1.5329	1.5329		146	75.96	3,561,397	4,855,230	
1994/01		1.00	1.6983	1.6983		146	69.35	3,621,880	4,937,720	
1994/07		1.00	1.5991	1.5991		146	69.35	3,679,797	5,016,706	
1995/01		1.00	1.5812	1.5812		146	66.03	3,737,982	5,095,984	
1995/07		1.00	1.5250	1.5250		146	66.03	3,794,986	5,173,656	
1996/01		1.00	1.7228	1.7228		146	67.46	3,860,366	5,262,862	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/07		1.00	1.3294	1.3294		146	67.46	3,911,686	5,332,796	
1997/01		1.00	1.4109	1.4109		146	69.72	3,966,876	5,407,986	
1997/07		1.00	1.0917	1.0917		146	69.72	4,010,182	5,466,970	
1998/01		1.00	1.1663	1.1663		146	73.54	4,056,953	5,530,772	
1998/07		1.00	1.0794	1.0794		146	73.54	4,100,744	5,590,486	
1999/01		1.00	1.4499	1.4499		146	74.84	4,160,201	5,671,516	
1999/07		1.00	1.2299	1.2299		146	74.84	4,211,367	5,741,304	
2000/01		1.00	1.3356	1.3356		146	84.45	4,267,614	5,817,954	
2000/07		1.00	1.1129	1.1129		146	84.45	4,315,108	5,882,632	
2001/01		1.00	1.2976	1.2976		146	88.02	4,371,101	5,958,990	
2001/07		1.00	0.9615	0.9615		120	77.28	4,413,129	4,944,840	
2002/01		0.95	1.0301	1.0301		120	77.28	4,456,316	4,995,720	
2002/07		0.95	0.8337	0.8337		120	77.28	4,491,610	5,037,360	
2003/01		0.90	1.3271	1.3271		120	77.28	4,545,258	5,104,200	
2003/07		0.90	1.1664	1.1664		120	77.28	4,592,974	5,163,720	
2004/01		0.85	1.1103	1.1103		120	77.28	4,636,322	5,221,080	
2004/07		0.85	0.8378	0.8378		120	76.42	4,669,337	5,264,880	
2005/01		0.80	0.8595	0.8595		120	76.42	4,701,443	5,310,120	
2005/07		0.80	0.7364	0.7364		120	74.75	4,729,139	5,349,240	
2006/01		0.75	0.9068	0.9068		120	78.12	4,761,302	5,397,720	
2006/07		0.75	0.8133	0.8133		120	78.12	4,790,346	5,441,640	
2007/01		0.70	1.0133	1.0133		120	78.12	4,824,324	5,496,720	
2007/07		0.70	1.1050	1.1050		120	74.68	4,861,640	5,557,440	
2008/01		0.65	0.8556	0.8556		120	74.68	4,888,676	5,604,960	
2008/07		0.65	0.6104	0.6104		120	71.55	4,908,074	5,639,160	
2009/01		0.60	1.3268	1.3268		120	68.94	4,947,147	5,714,040	
2009/07		0.60	0.6841	0.6841		120	68.94	4,967,455	5,753,160	
2010/01		0.55	0.8643	0.8643		120	68.94	4,991,070	5,802,840	
2010/07		0.55	0.7107	0.7107		120	63.60	5,010,580	5,844,120	
2011/01		0.50	0.9198	0.9198		120	63.60	5,033,624	5,897,880	



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196.55

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07		0.50	0.9028	0.9028		120	65.31	5,056,346	5,951,160	
2012/01		0.45	0.3865	0.3865		120	69.77	5,065,139	5,974,200	
2012/07		0.45	0.9417	0.9417		120	69.77	5,086,605	6,030,480	
2013/01		0.40	0.4901	0.4901		120	69.77	5,096,575	6,060,000	
2013/07		0.40	0.6196	0.6196		120	69.77	5,109,204	6,097,560	
2014/01		0.35	0.8564	0.8564		120	69.77	5,124,516	6,149,760	
2014/07		0.35	1.2383	1.2383		120	69.77	5,146,726	6,225,960	
2015/01		0.30	0.7571	0.7571		120	73.76	5,158,414	6,273,120	
2015/09		0.30	1.5736	1.5736		120	73.76	5,182,767	6,371,880	
2016/09		0.25	1.9890	1.9890		120	77.88	5,208,541	6,498,600	

Message Code:

2Z0S4

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0061101-00 - 2016/09

200.04

Destin Healthcare and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
195 MATTIE M KELLY BLVD	1/1/2014-12/31/2014	Number of Beds: 119	Superior: 0
DESTIN, FL 32541-2811	Days in CR 365	Maximum: 43,435	Standard: 366
County: Okaloosa [46]	First Used : 2016/09	Max Annualized: 43,435	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 40,981	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,385	Inflation
Current Class North Large	Initial CR? False	Medicaid: 24,587	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	59.99610%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.35018%	Cost: 1.07573004
Open Date: 07/14/1994	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/11/1994	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 08/11/1994	Low Occupancy Adjustment Factor:	119.32186%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 252166			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	958,935	1,782,384	1,001,915	898,409		4,641,643	
1a	Audit Adjustments							
2	Cost Per Diem	39.0017	72.4929	40.7498	36.5400		188.7844	
3	Cost Per Diem Inflated	41.9553	76.9463	43.8358				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	41.9553	76.9463	43.8358	36.5400		199.2774	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.8527		58.2002				
7	Provider Target Rate	54.7372		61.4378				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.6285		65.6137				
10b	Base for line 10a	51.7498		62.1561				
11	Lesser of 5,7,8,10, 10a	41.9553	76.9463	43.8358	13.6500		176.3874	
12/13	Medicaid Adjustment Rate		0.8653	0.4930				
14	Prospective Per Diem 11	41.9553	77.8116	44.3288	13.6500		177.7457	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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200.04

Destin Healthcare and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/11/1994		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,618,367.00		Total Amount	Per Diem
RS to Start Calcs:	1994/07	Type:	Fixed	80% Capital(1):	4,679,509	11.7927
Indexed Asset Value	5,849,386	<60% of Base:	False	20% ROE(2):	1,169,877	0.6796
FRVS Base Asset:	2,976,160	Interest Rate:	10.6343%	Insurance Cost(3):	32,234	0.7866
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	49,224	1.2011
ROE Factor	0.022710	Amortization Rate:	7.7500%	Home Office(3):	40,063	0.9776
		Interest Only:	False	Replacement(3&4):	47,478	0.0000
		Yearly Payment:	460,996	Total FRVS PD:		15.4376

(1) 80% Capital (\$4,679,509) amortized at 7.7500 % for 20 years Principal & Interest of \$460,996 divided by annual available days (43435) divided by Occup. Adj. (0.90) = \$11.7927

(2) 20% ROE (\$1,169,877) times the ROE factor (0.022710) divided by annual available days (43435) divided by Occup. Adj. (0.90) = \$0.6796

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1994	Current RS PBS:	33,820
Comparison Bed	88	Effective PBS Limitation	54,155
			2,976,160

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	41.9553	41.9553	1.9035	40.0518
Direct Care	77.8116	77.8116	3.5303	74.2813
Indirect Care	44.3288	44.3288	2.0112	42.3176
Property	13.6500	15.4376	0.7004	14.7372
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.4670
Supplemental Rate				8.1814
Totals	177.7457	179.5333	8.1454	200.0363

Medicaid Trend Adjustment



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200.04

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/07	4,769,233	0.00	1.5991	1.5991		88	29.66	2,976,160	2,976,160	1
1995/01		0.10	1.5812	1.5812		88	29.66	2,978,697	3,071,552	
1995/07		0.10	1.5250	1.5250		88	29.66	2,981,147	3,118,368	
1996/01		0.20	1.7228	1.7228		88	29.66	2,986,687	3,172,136	
1996/07		0.20	1.3294	1.3294		88	29.66	2,990,970	3,214,288	
1997/01		0.30	1.4109	1.4109		88	47.26	3,001,849	3,259,608	
1997/07		0.30	1.0917	1.0917		88	47.26	3,010,297	3,295,160	
1998/01	1,132,306	0.40	1.1663	1.1663		119	56.07	4,156,646	4,507,958	
1998/07		0.40	1.0794	1.0794		119	56.07	4,174,594	4,556,629	
1999/01	87,759	0.50	1.4499	1.4499		119	53.90	4,292,013	4,622,674	
1999/07		0.50	1.2299	1.2299		119	53.90	4,317,881	4,679,556	
2000/01	40,323	0.60	1.3356	1.3356		119	63.28	4,392,807	4,742,031	
2000/07		0.60	1.1129	1.1129		119	63.28	4,422,138	4,794,748	
2001/01		0.70	1.2976	1.2976		119	64.15	4,462,304	4,856,985	
2001/07		0.70	0.9615	0.9615		119	59.35	4,492,340	4,903,633	
2002/01		0.80	1.0301	1.0301		119	59.35	4,529,361	4,954,089	
2002/07		0.80	0.8337	0.8337		119	59.35	4,559,572	4,995,382	
2003/01		0.90	1.3271	1.3271		119	59.35	4,614,032	5,061,665	
2003/07		0.90	1.1664	1.1664		119	59.35	4,662,470	5,120,689	
2004/01		1.00	1.1103	1.1103		119	59.35	4,714,237	5,177,571	
2004/07		1.00	0.8378	0.8378		119	58.53	4,753,733	5,221,006	
2005/01		1.00	0.8595	0.8595		119	58.53	4,794,591	5,265,869	
2005/07		1.00	0.7364	0.7364		119	63.66	4,829,898	5,304,663	
2006/01		1.00	0.9068	0.9068		119	63.66	4,873,696	5,352,739	
2006/07		1.00	0.8133	0.8133		119	60.35	4,913,334	5,396,293	
2007/01		1.00	1.0133	1.0133		119	60.35	4,963,121	5,450,914	
2007/07		1.00	1.1050	1.1050		119	57.30	5,017,963	5,511,128	
2008/01		1.00	0.8556	0.8556		119	63.36	5,060,897	5,558,252	
2008/07		1.00	0.6104	0.6104		119	63.36	5,091,789	5,592,167	
2009/01		1.00	1.3268	1.3268		119	63.36	5,159,347	5,666,423	



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200.04

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07		1.00	0.6841	0.6841		119	64.89	5,194,642	5,705,217	
2010/01		1.00	0.8643	0.8643		119	59.39	5,239,539	5,754,483	
2010/07		1.00	0.7107	0.7107		119	59.39	5,276,776	5,795,419	
2011/01		1.00	0.9198	0.9198		119	60.30	5,325,312	5,848,731	
2011/07		1.00	0.9028	0.9028		119	60.30	5,373,389	5,901,567	
2012/01		1.00	0.3865	0.3865		119	60.04	5,394,157	5,924,415	
2012/07		1.00	0.9417	0.9417		119	60.04	5,444,954	5,980,226	
2013/01		1.00	0.4901	0.4901		119	60.04	5,471,640	6,009,500	
2013/07		1.00	0.6196	0.6196		119	60.04	5,505,542	6,046,747	
2014/01		1.00	0.8564	0.8564		119	60.04	5,552,691	6,098,512	
2014/07		1.00	1.2383	1.2383		119	60.04	5,621,450	6,174,077	
2015/01		0.95	0.7571	0.7571		119	57.43	5,661,879	6,220,844	
2015/09		0.95	1.5736	1.5736		119	57.43	5,746,518	6,318,781	
2016/09		0.90	1.9890	1.9890		119	60.00	5,849,386	6,444,445	

Message Code:

1 Per Bed Standard Limitation

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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0061102-00 - 2016/09

191.47

San Jose Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
9355 SAN JOSE BLVD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
JACKSONVILLE, FL 32257	Days in CR 365	Maximum: 43,800	Standard: 366
County: Duval [16]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 42,260	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,535	Inflation
Current Class North Large	Initial CR? False	Medicaid: 30,904	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	73.12825%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.48402%	Cost: 1.04651568
Open Date: 12/20/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/20/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 12/20/1985	Low Occupancy Adjustment Factor:	122.02046%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252051			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,463,305	1,930,331	1,139,291	954,006		5,486,933	
1a	Audit Adjustments							
2	Cost Per Diem	47.3500	62.4622	36.8655	30.8700		177.5477	
3	Cost Per Diem Inflated	49.5525	65.0035	38.5803				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.5525	65.0035	38.5803	30.8700		184.0063	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.3198		60.7481				
7	Provider Target Rate	55.2302		64.1274				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.6285		65.6137				
10b	Base for line 10a	51.7498		62.1561				
11	Lesser of 5,7,8,10, 10a	49.5525	65.0035	38.5803	13.6500		166.7863	
12/13	Medicaid Adjustment Rate		1.6913	1.0038				
14	Prospective Per Diem 11	49.5525	66.6948	39.5841	13.6500		169.4814	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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191.47

San Jose Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 12/01/2001		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,339,377.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Fixed	80% Capital(1):	4,131,478	10.3249
Indexed Asset Value	5,164,347	<60% of Base:	False	20% ROE(2):	1,032,869	0.5295
FRVS Base Asset:	3,051,972	Interest Rate:	10.6343%	Insurance Cost(3):	29,833	0.7059
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	84,083	1.9897
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	37,728	0.8928
		Interest Only:	False	Replacement(3&4):	67,576	0.0000
		Yearly Payment:	407,008	Total FRVS PD:		14.4428

(1) 80% Capital (\$4,131,478) amortized at 7.7500 % for 20 years Principal & Interest of \$407,008 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.3249

(2) 20% ROE (\$1,032,869) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5295

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,259
Comparison Date: 01/01/1985	Current RS PBS:	54,155
Comparison Bed 108	Effective PBS Limitation	3,051,972

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.5525	49.5525	2.2482	47.3043
Direct Care	66.6948	66.6948	3.0259	63.6689
Indirect Care	39.5841	39.5841	1.7959	37.7882
Property	13.6500	14.4428	0.6553	13.7875
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.7364
Supplemental Rate				8.1814
Totals	169.4814	170.2742	7.7253	191.4667

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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191.47

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	3,892,768	0.00	0.8522	0.8522		108	52.72	3,051,972	3,051,972	1
1986/01		0.10	0.8299	0.8299		108	52.72	3,054,400	3,103,596	
1986/07		0.10	0.2974	0.2974		108	52.72	3,055,270	3,097,656	
1987/01		0.20	1.0091	1.0091		108	52.72	3,061,180	3,153,060	
1987/07		0.20	0.9007	0.9007		108	52.72	3,066,465	3,177,684	
1988/01		0.30	0.9007	0.9007		108	65.60	3,074,751	3,203,496	
1988/07		0.30	0.5899	0.5899		108	65.60	3,080,193	3,201,768	
1989/01		0.40	0.5899	0.5899		120	75.32	3,087,462	3,578,520	
1989/07		0.40	0.5899	0.5899		120	75.32	3,094,748	3,602,760	
1990/01		0.50	0.5899	0.5899		120	66.38	3,103,878	3,620,880	
1990/07		0.50	0.5899	0.5899		120	66.38	3,103,878	3,642,240	5
1991/01		0.60	0.5899	0.5899		120	62.09	3,124,051	3,663,600	
1991/07		0.60	1.4932	1.4932		120	62.09	3,152,039	3,718,320	
1992/01	18,685	0.70	2.0117	2.0117		120	73.98	3,215,111	3,793,080	
1992/07		0.70	1.8152	1.8152		120	73.98	3,255,962	3,861,960	
1993/01		0.80	1.7710	1.7710		120	70.47	3,302,092	3,930,360	
1993/07		0.80	1.5329	1.5329		120	70.47	3,342,586	3,990,600	
1994/01		0.90	1.6983	1.6983		120	65.90	3,393,677	4,058,400	
1994/07		0.90	1.5991	1.5991		120	65.90	3,442,519	4,123,320	
1995/01		1.00	1.5812	1.5812		120	61.07	3,496,952	4,188,480	
1995/07		1.00	1.5250	1.5250		120	61.07	3,550,281	4,252,320	
1996/01		1.00	1.7228	1.7228		120	59.32	3,611,445	4,325,640	
1996/07		1.00	1.3294	1.3294		120	59.32	3,659,456	4,383,120	
1997/01		1.00	1.4109	1.4109		120	55.17	3,711,087	4,444,920	
1997/07		1.00	1.0917	1.0917		120	55.17	3,751,601	4,493,400	
1998/01		1.00	1.1663	1.1663		120	56.70	3,795,356	4,545,840	
1998/07		1.00	1.0794	1.0794		120	56.70	3,836,323	4,594,920	
1999/01		1.00	1.4499	1.4499		120	62.85	3,891,946	4,661,520	
1999/07		1.00	1.2299	1.2299		120	62.85	3,939,813	4,718,880	
2000/01	39,248	1.00	1.3356	1.3356		120	73.43	4,031,681	4,781,880	



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191.47

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		120	73.43	4,076,550	4,835,040	
2001/01		1.00	1.2976	1.2976		120	74.34	4,129,447	4,897,800	
2001/07		1.00	0.9615	0.9615		120	77.50	4,169,152	4,944,840	
2002/01		1.00	1.0301	1.0301		120	77.50	4,212,098	4,995,720	
2002/07		1.00	0.8337	0.8337		120	77.50	4,247,214	5,037,360	
2003/01		1.00	1.3271	1.3271		120	77.50	4,303,579	5,104,200	
2003/07		1.00	1.1664	1.1664		120	77.50	4,353,776	5,163,720	
2004/01		1.00	1.1103	1.1103		120	77.50	4,402,116	5,221,080	
2004/07		1.00	0.8378	0.8378		120	71.77	4,438,997	5,264,880	
2005/01		1.00	0.8595	0.8595		120	71.77	4,477,150	5,310,120	
2005/07		1.00	0.7364	0.7364		120	68.79	4,510,120	5,349,240	
2006/01		0.95	0.9068	0.9068		120	68.79	4,548,975	5,397,720	
2006/07		0.95	0.8133	0.8133		120	65.53	4,584,120	5,441,640	
2007/01		0.90	1.0133	1.0133		120	69.91	4,625,927	5,496,720	
2007/07		0.90	1.1050	1.1050		120	69.91	4,671,932	5,557,440	
2008/01		0.85	0.8556	0.8556		120	69.91	4,705,911	5,604,960	
2008/07		0.85	0.6104	0.6104		120	72.66	4,730,325	5,639,160	
2009/01		0.80	1.3268	1.3268		120	66.74	4,780,533	5,714,040	
2009/07		0.80	0.6841	0.6841		120	66.74	4,806,697	5,753,160	
2010/01		0.75	0.8643	0.8643		120	73.97	4,837,854	5,802,840	
2010/07		0.75	0.7107	0.7107		120	73.97	4,863,640	5,844,120	
2011/01		0.70	0.9198	0.9198		120	77.36	4,894,957	5,897,880	
2011/07		0.70	0.9028	0.9028		120	77.36	4,925,893	5,951,160	
2012/01		0.65	0.3865	0.3865		120	74.46	4,938,267	5,974,200	
2012/07		0.65	0.9417	0.9417		120	74.46	4,968,494	6,030,480	
2013/01		0.60	0.4901	0.4901		120	74.46	4,983,106	6,060,000	
2013/07		0.60	0.6196	0.6196		120	74.46	5,001,633	6,097,560	
2014/01		0.55	0.8564	0.8564		120	74.46	5,025,191	6,149,760	
2014/07		0.55	1.2383	1.2383		120	74.46	5,059,418	6,225,960	
2015/01		0.50	0.7571	0.7571		120	73.22	5,078,573	6,273,120	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		120	73.22	5,118,531	6,371,880	
2016/09		0.45	1.9890	1.9890		120	73.13	5,164,347	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 061102123120150101201504252016103613



Florida Agency for Health Care Administration
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0061107-00 - 2016/09

205.74

SeaView Nursing and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2401 NE 2ND STREET	1/1/2015-12/31/2015	Number of Beds: 83	Superior: 0
POMPANO BEACH, FL 33062	Days in CR 365	Maximum: 30,295	Standard: 366
County: Broward [6]	First Used : 2016/09	Max Annualized: 30,295	Conditional: 0
Region: South Area: 10	Last Used: 2016/09	Total Patient: 28,712	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,031	Inflation
Current Class South Small	Initial CR? False	Medicaid: 23,971	FY Index: 1.37939113
Class at 1/94: South Small	Medicaid Utilization	83.48774%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.77472%	Cost: 1.04651568
Open Date: 08/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 08/01/1983	Low Occupancy Adjustment Factor:	119.85876%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252433			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,280,149	1,658,224	919,848	526,883		4,385,104	
1a	Audit Adjustments							
2	Cost Per Diem	53.4041	69.1763	38.3734	21.9800		182.9338	
3	Cost Per Diem Inflated	55.8882	71.9908	40.1584				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.8882	71.9908	40.1584	21.9800		190.0174	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	64.0392		74.1431				
7	Provider Target Rate	67.6016		78.2675				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	69.3366		80.9277				
10b	Base for line 10a	65.6828		76.6631				
11	Lesser of 5,7,8,10, 10a	55.8882	71.9908	40.1584	13.6500		181.6874	
12/13	Medicaid Adjustment Rate		2.7122	1.5129				
14	Prospective Per Diem 11	55.8882	74.7030	41.6713	13.6500		185.9125	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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SeaView Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	1,234,273.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Fixed	80% Capital(1):	1,812,911	6.5503
Indexed Asset Value	2,266,139	<60% of Base:	False	20% ROE(2):	453,228	0.3359
FRVS Base Asset:	1,201,038	Interest Rate:	10.6343%	Insurance Cost(3):	22,298	0.7766
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	55,684	1.9394
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	25,086	0.8737
		Interest Only:	False	Replacement(3&4):	68,525	0.0000
		Yearly Payment:	178,597	Total FRVS PD:		10.4759

(1) 80% Capital (\$1,812,911) amortized at 7.7500 % for 20 years Principal & Interest of \$178,597 divided by annual available days (30295) divided by Occup. Adj. (0.90) = \$6.5503

(2) 20% ROE (\$453,228) times the ROE factor (0.020210) divided by annual available days (30295) divided by Occup. Adj. (0.90) = \$0.3359

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	83	Effective PBS Limitation	54,155
			2,365,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.8882	55.8882	2.5356	53.3526
Direct Care	74.7030	74.7030	3.3892	71.3138
Indirect Care	41.6713	41.6713	1.8906	39.7807
Property	13.6500	10.4759	0.4753	10.0006
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.1083
Supplemental Rate				8.1814
Totals	185.9125	182.7384	8.2907	205.7374

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1983/07	1,151,377	0.00	3.9578	3.0000	0.9578	83	18.97	1,151,377	2,246,146	
1984/01	19,845	0.10	2.2530	2.2530		83	18.97	1,171,222	2,275,279	
1984/07	4,259	0.10	1.9179	1.9179		83	18.97	1,175,481	2,318,937	
1985/01		0.20	1.1471	1.1471		83	18.97	1,175,481	2,345,497	
1985/10	25,557	0.20	0.8522	0.8522		83	18.97	1,201,038	2,365,500	
1986/01		0.30	0.8299	0.8299		83	34.49	1,202,913	2,385,171	
1986/07		0.30	0.2974	0.2974		83	34.49	1,203,586	2,380,606	
1987/01	85,208	0.40	1.0091	1.0091		83	46.06	1,292,862	2,423,185	
1987/07		0.40	0.9007	0.9007		83	46.06	1,296,763	2,442,109	
1988/01		0.50	0.9007	0.9007		83	38.76	1,300,879	2,461,946	
1988/07		0.50	0.5899	0.5899		83	38.76	1,303,583	2,460,618	
1989/01		0.60	0.5899	0.5899		83	30.94	1,306,178	2,475,143	
1989/07		0.60	0.5899	0.5899		83	30.94	1,308,778	2,491,909	
1990/01		0.70	0.5899	0.5899		83	31.64	1,311,887	2,504,442	
1990/07		0.70	0.5899	0.5899		83	31.64	1,315,003	2,519,216	
1991/01		0.80	0.5899	0.5899		83	31.64	1,318,573	2,533,990	
1991/07		0.80	1.4932	1.4932		83	38.36	1,318,573	2,571,838	5
1992/01		0.90	2.0117	2.0117		83	51.06	1,329,559	2,623,547	5
1992/07		0.90	1.8152	1.8152		83	51.06	1,351,906	2,671,189	5
1993/01		1.00	1.7710	1.7710		83	50.67	1,394,802	2,718,499	
1993/07		1.00	1.5329	1.5329		83	50.67	1,394,802	2,760,165	5
1994/01		1.00	1.6983	1.6983		83	59.27	1,438,522	2,807,060	
1994/07		1.00	1.5991	1.5991		83	59.27	1,438,522	2,851,963	5
1995/01	17,474	1.00	1.5812	1.5812		83	67.81	1,478,999	2,897,032	5
1995/07		1.00	1.5250	1.5250		83	67.81	1,502,109	2,941,188	5
1996/01	34,630	1.00	1.7228	1.7228		83	65.77	1,585,919	2,991,901	
1996/07		1.00	1.3294	1.3294		83	65.77	1,607,002	3,031,658	
1997/01	33,011	1.00	1.4109	1.4109		83	70.44	1,662,686	3,074,403	
1997/07		1.00	1.0917	1.0917		83	70.44	1,680,838	3,107,935	
1998/01		1.00	1.1663	1.1663		83	58.57	1,700,442	3,144,206	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07		1.00	1.0794	1.0794		83	58.57	1,718,797	3,178,153	
1999/01		1.00	1.4499	1.4499		83	78.28	1,718,797	3,224,218	5
1999/07		1.00	1.2299	1.2299		83	78.28	1,765,164	3,263,892	
2000/01	19,707	1.00	1.3356	1.3356		83	76.59	1,784,871	3,307,467	5
2000/07		1.00	1.1129	1.1129		83	76.59	1,828,573	3,344,236	
2001/01		1.00	1.2976	1.2976		83	84.60	1,852,301	3,387,645	
2001/07		1.00	0.9615	0.9615		83	80.01	1,870,111	3,420,181	
2002/01		1.00	1.0301	1.0301		83	80.01	1,889,375	3,455,373	
2002/07		1.00	0.8337	0.8337		83	80.01	1,905,127	3,484,174	
2003/01		1.00	1.3271	1.3271		83	80.01	1,930,410	3,530,405	
2003/07		1.00	1.1664	1.1664		83	80.01	1,952,926	3,571,573	
2004/01		0.95	1.1103	1.1103		83	80.01	1,973,525	3,611,247	
2004/07		0.95	0.8378	0.8378		83	84.55	1,989,232	3,641,542	
2005/01		0.90	0.8595	0.8595		83	75.14	2,004,621	3,672,833	
2005/07		0.90	0.7364	0.7364		83	75.14	2,017,908	3,699,891	
2006/01		0.85	0.9068	0.9068		83	75.14	2,033,462	3,733,423	
2006/07		0.85	0.8133	0.8133		83	73.57	2,047,519	3,763,801	
2007/01		0.80	1.0133	1.0133		83	75.67	2,064,116	3,801,898	
2007/07		0.80	1.1050	1.1050		83	75.67	2,082,363	3,843,896	
2008/01		0.75	0.8556	0.8556		83	75.67	2,095,726	3,876,764	
2008/07		0.75	0.6104	0.6104		83	78.02	2,105,320	3,900,419	
2009/01		0.70	1.3268	1.3268		83	82.09	2,124,874	3,952,211	
2009/07		0.70	0.6841	0.6841		83	82.09	2,135,050	3,979,269	
2010/01		0.65	0.8643	0.8643		83	82.37	2,147,045	4,013,631	
2010/07		0.65	0.7107	0.7107		83	82.37	2,156,964	4,042,183	
2011/01		0.60	0.9198	0.9198		83	82.37	2,168,868	4,079,367	
2011/07		0.60	0.9028	0.9028		83	85.30	2,180,617	4,116,219	
2012/01		0.55	0.3865	0.3865		83	82.14	2,185,253	4,132,155	
2012/07		0.55	0.9417	0.9417		83	82.14	2,196,570	4,171,082	
2013/01		0.50	0.4901	0.4901		83	82.14	2,201,954	4,191,500	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		0.50	0.6196	0.6196		83	82.14	2,208,776	4,217,479	
2014/01		0.45	0.8564	0.8564		83	82.14	2,217,289	4,253,584	
2014/07		0.45	1.2383	1.2383		83	82.14	2,229,644	4,306,289	
2015/01		0.40	0.7571	0.7571		83	82.58	2,236,395	4,338,908	
2015/09		0.40	1.5736	1.5736		83	82.58	2,250,471	4,407,217	
2016/09		0.35	1.9890	1.9890		83	83.49	2,266,139	4,494,865	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 061107123120150101201504252016135422



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195.83

Vista Manor

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1550 JESS PARRISH CT	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
TITUSVILLE, FL 32796-2147	Days in CR 365	Maximum: 43,800	Standard: 366
County: Brevard [5]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 41,711	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,098	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 25,443	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	60.99830%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.23059%	Cost: 1.04651568
Open Date: 09/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 09/16/1985	Low Occupancy Adjustment Factor:	120.43529%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252522			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,187,623	1,712,202	990,434	784,153		4,674,412
1a	Audit Adjustments						
2	Cost Per Diem	46.6778	67.2956	38.9276	30.8200		183.7210
3	Cost Per Diem Inflated	48.8490	70.0336	40.7383			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.8490	70.0336	40.7383	30.8200		190.4409
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	52.0511		61.8815			
7	Provider Target Rate	54.9466		65.3238			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	56.2940		67.9586			
10b	Base for line 10a	53.3275		64.3774			
11	Lesser of 5,7,8,10, 10a	48.8490	70.0336	40.7383	13.6500		173.2709
12/13	Medicaid Adjustment Rate		0.8665	0.5041			
14	Prospective Per Diem 11	48.8490	70.9001	41.2424	13.6500		174.6415
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Vista Manor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	12/01/2001	Amount:	4,919,889.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Fixed	80% Capital(1):	4,654,130	11.6311
Indexed Asset Value	5,817,662	<60% of Base:	False	20% ROE(2):	1,163,532	0.5965
FRVS Base Asset:	3,420,000	Interest Rate:	10.6343%	Insurance Cost(3):	32,588	0.7813
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	67,749	1.6242
ROE Factor	0.020210	Amortization Rate:	7.7500%	Home Office(3):	39,041	0.9360
		Interest Only:	False	Replacement(3&4):	80,053	0.0000
		Yearly Payment:	458,496	Total FRVS PD:		15.5691

(1) 80% Capital (\$4,654,130) amortized at 7.7500 % for 20 years Principal & Interest of \$458,496 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.6311

(2) 20% ROE (\$1,163,532) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5965

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.8490	48.8490	2.2163	46.6327
Direct Care	70.9001	70.9001	3.2167	67.6834
Indirect Care	41.2424	41.2424	1.8711	39.3713
Property	13.6500	15.5691	0.7064	14.8627
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.0956
Supplemental Rate				8.1814
Totals	174.6415	176.5606	8.0105	195.8271

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	3,536,495	0.00	0.8522	0.8522		120	74.92	3,420,000	3,420,000	1
1986/01		0.10	0.8299	0.8299		120	74.92	3,422,839	3,448,440	
1986/07		0.10	0.2974	0.2974		120	74.92	3,423,856	3,441,840	
1987/01	26,804	0.20	1.0091	1.0091		120	74.92	3,457,569	3,503,400	
1987/07		0.20	0.9007	0.9007		120	74.92	3,463,796	3,530,760	
1988/01		0.30	0.9007	0.9007		120	79.85	3,473,155	3,559,440	
1988/07		0.30	0.5899	0.5899		120	79.85	3,479,302	3,557,520	
1989/01		0.40	0.5899	0.5899		120	84.77	3,487,513	3,578,520	
1989/07		0.40	0.5899	0.5899		120	84.77	3,495,744	3,602,760	
1990/01	16,878	0.50	0.5899	0.5899		120	82.10	3,522,934	3,620,880	
1990/07		0.50	0.5899	0.5899		120	82.10	3,533,327	3,642,240	
1991/01		0.60	0.5899	0.5899		120	72.41	3,545,831	3,663,600	
1991/07		0.60	1.4932	1.4932		120	72.41	3,577,598	3,718,320	
1992/01		0.70	2.0117	2.0117		120	75.78	3,627,978	3,793,080	
1992/07		0.70	1.8152	1.8152		120	75.78	3,674,075	3,861,960	
1993/01		0.80	1.7710	1.7710		120	71.47	3,726,129	3,930,360	
1993/07		0.80	1.5329	1.5329		120	71.47	3,771,823	3,990,600	
1994/01		0.90	1.6983	1.6983		120	62.28	3,771,823	4,058,400	5
1994/07		0.90	1.5991	1.5991		120	62.28	3,829,475	4,123,320	5
1995/01		1.00	1.5812	1.5812		120	58.54	3,946,012	4,188,480	
1995/07		1.00	1.5250	1.5250		120	58.54	4,006,189	4,252,320	
1996/01		1.00	1.7228	1.7228		120	64.36	4,075,208	4,325,640	
1996/07		1.00	1.3294	1.3294		120	64.36	4,129,384	4,383,120	
1997/01		1.00	1.4109	1.4109		120	70.84	4,187,645	4,444,920	
1997/07		1.00	1.0917	1.0917		120	70.84	4,233,362	4,493,400	
1998/01		1.00	1.1663	1.1663		120	72.78	4,282,736	4,545,840	
1998/07		1.00	1.0794	1.0794		120	72.78	4,328,964	4,594,920	
1999/01		1.00	1.4499	1.4499		120	73.73	4,391,730	4,661,520	
1999/07		1.00	1.2299	1.2299		120	73.73	4,445,744	4,718,880	
2000/01	39,010	1.00	1.3356	1.3356		120	73.87	4,544,131	4,781,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		120	73.87	4,594,703	4,835,040	
2001/01		1.00	1.2976	1.2976		120	74.66	4,654,324	4,897,800	
2001/07		1.00	0.9615	0.9615		120	58.35	4,699,075	4,944,840	
2002/01		1.00	1.0301	1.0301		120	58.35	4,747,480	4,995,720	
2002/07		1.00	0.8337	0.8337		120	58.35	4,787,060	5,037,360	
2003/01		1.00	1.3271	1.3271		120	58.35	4,850,589	5,104,200	
2003/07		1.00	1.1664	1.1664		120	58.35	4,907,166	5,163,720	
2004/01		1.00	1.1103	1.1103		120	58.35	4,961,650	5,221,080	
2004/07		1.00	0.8378	0.8378		120	58.41	5,003,219	5,264,880	
2005/01		1.00	0.8595	0.8595		120	58.41	5,046,222	5,310,120	
2005/07		1.00	0.7364	0.7364		120	60.82	5,083,382	5,349,240	
2006/01		0.95	0.9068	0.9068		120	60.82	5,127,175	5,397,720	
2006/07		0.95	0.8133	0.8133		120	60.94	5,166,788	5,441,640	
2007/01		0.90	1.0133	1.0133		120	57.51	5,213,909	5,496,720	
2007/07		0.90	1.1050	1.1050		120	57.51	5,265,761	5,557,440	
2008/01		0.85	0.8556	0.8556		120	57.51	5,304,059	5,604,960	
2008/07		0.85	0.6104	0.6104		120	53.01	5,330,581	5,639,160	
2009/01		0.80	1.3268	1.3268		120	55.77	5,387,160	5,714,040	
2009/07		0.80	0.6841	0.6841		120	55.77	5,416,644	5,753,160	
2010/01		0.75	0.8643	0.8643		120	53.95	5,451,084	5,802,840	
2010/07		0.75	0.7107	0.7107		120	53.95	5,479,584	5,844,120	
2011/01		0.70	0.9198	0.9198		120	53.95	5,514,193	5,897,880	
2011/07		0.70	0.9028	0.9028		120	56.13	5,549,043	5,951,160	
2012/01		0.65	0.3865	0.3865		120	57.79	5,562,982	5,974,200	
2012/07		0.65	0.9417	0.9417		120	57.79	5,597,033	6,030,480	
2013/01		0.60	0.4901	0.4901		120	57.79	5,613,494	6,060,000	
2013/07		0.60	0.6196	0.6196		120	57.79	5,634,365	6,097,560	
2014/01		0.55	0.8564	0.8564		120	57.79	5,660,903	6,149,760	
2014/07		0.55	1.2383	1.2383		120	57.79	5,699,459	6,225,960	
2015/01		0.50	0.7571	0.7571		120	59.77	5,721,037	6,273,120	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		120	59.77	5,766,050	6,371,880	
2016/09		0.45	1.9890	1.9890		120	61.00	5,817,662	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 061109123120150101201504252016143442



Florida Agency for Health Care Administration
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201.41

Lakeside Oaks Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1061 VIRGINIA ST	1/1/2015-12/31/2015	Number of Beds: 93	Superior: 0
DUNEDIN, FL 34698	Days in CR 365	Maximum: 33,945	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 33,945	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 31,298	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,638	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 23,055	FY Index: 1.37939113
Class at 1/94: North Small	Medicaid Utilization	73.66285%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.20209%	Cost: 1.04651568
Open Date: 11/01/1981	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/01/1981	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 10/01/1982	Low Occupancy Adjustment Factor:	116.60523%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 252484			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,148,495	1,564,257	943,796	475,625		4,132,173
1a	Audit Adjustments						
2	Cost Per Diem	49.8154	67.8489	40.9367	20.6300		179.2310
3	Cost Per Diem Inflated	52.1326	70.6094	42.8409			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	52.1326	70.6094	42.8409	20.6300		186.2129
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	60.2144		69.4332			
7	Provider Target Rate	63.5640		73.2956			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500		
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674			
10	Target Rate Class Ceiling	67.5182		79.7567			
10a	New Provider Target Limitation	61.2630		78.3336			
10b	Base for line 10a	58.0346		74.2057			
11	Lesser of 5,7,8,10, 10a	52.1326	70.6094	42.8409	13.6500		179.2329
12/13	Medicaid Adjustment Rate		1.8797	1.1405			
14	Prospective Per Diem 11	52.1326	72.4891	43.9814	13.6500		182.2531
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Lakeside Oaks Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/01/1989		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1981/07	Type:	None	80% Capital(1):	2,282,983	9.2907
Indexed Asset Value	2,853,729	<60% of Base:	True	20% ROE(2):	570,746	0.3776
FRVS Base Asset:	1,628,357	Interest Rate:	12.5000%	Insurance Cost(3):	25,742	0.8225
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	38,781	1.2391
ROE Factor	0.020210	Amortization Rate:	12.5000%	Home Office(3):	29,593	0.9455
		Interest Only:	True	Replacement(3&4):	59,610	0.0000
		Yearly Payment:	283,837	Total FRVS PD:		12.6754

(1) 80% Capital (\$2,282,983) amortized at 12.5000 % for 20 years Interest of \$283,837 divided by annual available days (33945) divided by Occup. Adj. (0.90) = \$9.2907

(2) 20% ROE (\$570,746) times the ROE factor (0.020210) divided by annual available days (33945) divided by Occup. Adj. (0.90) = \$0.3776

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 93	Effective PBS Limitation	2,650,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.1326	52.1326	2.3652	49.7674
Direct Care	72.4891	72.4891	3.2888	69.2003
Indirect Care	43.9814	43.9814	1.9954	41.9860
Property	13.6500	12.6754	0.5751	12.1003
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.1758
Supplemental Rate				8.1814
Totals	182.2531	181.2785	8.2245	201.4112

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1981/07	1,397,866	0.00	2.5888	2.5888		93		1,397,866	2,245,857	
1982/01	659	0.10	2.6760	2.6760		93		1,398,525	2,306,028	
1982/07	125,676	0.10	2.2977	2.2977		93	55.00	1,527,415	2,358,945	
1983/04	16,142	0.20	2.6288	2.6288		93	67.87	1,551,588	2,420,976	
1983/07		0.20	3.9578	3.0000	0.9578	93	67.87	1,560,898	2,516,766	
1984/01	1,400	0.30	2.2530	2.2530		93	73.78	1,572,848	2,549,409	
1984/07	15,880	0.30	1.9179	1.9179		93	73.78	1,597,778	2,598,327	
1985/01	13,055	0.40	1.1471	1.1471		93	73.78	1,618,164	2,628,087	
1985/10	4,677	0.40	0.8522	0.8522		93	73.78	1,628,357	2,650,500	
1986/01		0.50	0.8299	0.8299		93	68.67	1,635,115	2,672,541	
1986/07		0.50	0.2974	0.2974		93	68.67	1,637,546	2,667,426	
1987/01		0.60	1.0091	1.0091		93	67.91	1,647,461	2,715,135	
1987/07		0.60	0.9007	0.9007		93	67.91	1,656,364	2,736,339	
1988/01		0.70	0.9007	0.9007		93	66.48	1,666,807	2,758,566	
1988/07		0.70	0.5899	0.5899		93	66.48	1,673,689	2,757,078	
1989/01		0.80	0.5899	0.5899		93	69.92	1,681,587	2,773,353	
1989/07		0.80	0.5899	0.5899		93	69.92	1,689,522	2,792,139	
1990/01		0.90	0.5899	0.5899		93	65.07	1,698,492	2,806,182	
1990/07		0.90	0.5899	0.5899		93	65.07	1,707,509	2,822,736	
1991/01		1.00	0.5899	0.5899		93	64.05	1,717,582	2,839,290	
1991/07		1.00	1.4932	1.4932		93	64.05	1,717,582	2,881,698	5
1992/01		1.00	2.0117	2.0117		93	71.16	1,778,298	2,939,637	
1992/07		1.00	1.8152	1.8152		93	71.16	1,810,578	2,993,019	
1993/01		1.00	1.7710	1.7710		93	70.91	1,842,643	3,046,029	
1993/07		1.00	1.5329	1.5329		93	70.91	1,870,889	3,092,715	
1994/01		1.00	1.6983	1.6983		93	71.74	1,902,662	3,145,260	
1994/07		1.00	1.5991	1.5991		93	71.74	1,933,087	3,195,573	
1995/01	14,508	1.00	1.5812	1.5812		93	73.72	1,978,161	3,246,072	
1995/07		1.00	1.5250	1.5250		93	73.72	2,008,328	3,295,548	
1996/01	30,264	1.00	1.7228	1.7228		93	68.42	2,073,191	3,352,371	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/07		1.00	1.3294	1.3294		93	68.42	2,100,752	3,396,918	
1997/01		1.00	1.4109	1.4109		93	65.86	2,130,392	3,444,813	
1997/07		1.00	1.0917	1.0917		93	65.86	2,153,649	3,482,385	
1998/01		1.00	1.1663	1.1663		93	62.40	2,178,767	3,523,026	
1998/07		1.00	1.0794	1.0794		93	62.40	2,202,285	3,561,063	
1999/01		1.00	1.4499	1.4499		93	65.87	2,234,216	3,612,678	
1999/07		1.00	1.2299	1.2299		93	65.87	2,261,695	3,657,132	
2000/01	46,298	1.00	1.3356	1.3356		93	68.44	2,338,200	3,705,957	
2000/07		1.00	1.1129	1.1129		93	68.44	2,364,222	3,747,156	
2001/01		1.00	1.2976	1.2976		93	75.84	2,394,900	3,795,795	
2001/07		1.00	0.9615	0.9615		93	74.66	2,417,927	3,832,251	
2002/01		0.95	1.0301	1.0301		93	74.66	2,441,589	3,871,683	
2002/07		0.95	0.8337	0.8337		93	74.66	2,460,926	3,903,954	
2003/01		0.90	1.3271	1.3271		93	74.66	2,490,319	3,955,755	
2003/07		0.90	1.1664	1.1664		93	74.66	2,516,462	4,001,883	
2004/01		0.85	1.1103	1.1103		93	74.66	2,540,212	4,046,337	
2004/07		0.85	0.8378	0.8378		93	75.75	2,558,301	4,080,282	
2005/01		0.80	0.8595	0.8595		93	75.75	2,575,892	4,115,343	
2005/07		0.80	0.7364	0.7364		93	79.22	2,591,067	4,145,661	
2006/01		0.75	0.9068	0.9068		93	79.22	2,608,689	4,183,233	
2006/07		0.75	0.8133	0.8133		93	72.78	2,624,602	4,217,271	
2007/01		0.70	1.0133	1.0133		93	67.36	2,643,218	4,259,958	
2007/07		0.70	1.1050	1.1050		93	67.36	2,663,663	4,307,016	
2008/01		0.65	0.8556	0.8556		93	67.36	2,678,476	4,343,844	
2008/07		0.65	0.6104	0.6104		93	70.34	2,689,104	4,370,349	
2009/01		0.60	1.3268	1.3268		93	70.34	2,710,512	4,428,381	
2009/07		0.60	0.6841	0.6841		93	68.94	2,721,639	4,458,699	
2010/01		0.55	0.8643	0.8643		93	68.94	2,734,578	4,497,201	
2010/07		0.55	0.7107	0.7107		93	67.88	2,745,267	4,529,193	
2011/01		0.50	0.9198	0.9198		93	66.05	2,757,892	4,570,857	



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

0 061140-00 - 2016/09

201.41

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07		0.50	0.9028	0.9028		93	66.05	2,770,341	4,612,149	
2012/01		0.45	0.3865	0.3865		93	59.20	2,775,159	4,630,005	
2012/07		0.45	0.9417	0.9417		93	59.20	2,786,920	4,673,622	
2013/01		0.40	0.4901	0.4901		93	59.20	2,792,382	4,696,500	
2013/07		0.40	0.6196	0.6196		93	59.20	2,799,302	4,725,609	
2014/01		0.35	0.8564	0.8564		93	59.20	2,807,692	4,766,064	
2014/07		0.35	1.2383	1.2383		93	59.20	2,819,861	4,825,119	
2015/01		0.30	0.7571	0.7571		93	68.08	2,826,265	4,861,668	
2015/09		0.30	1.5736	1.5736		93	68.08	2,839,608	4,938,207	
2016/09		0.25	1.9890	1.9890		93	73.66	2,853,729	5,036,415	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0072048-00 - 2016/09

245.06

South Campus Rehabilitation & Nursing Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
715 E DIXIE AVE	7/1/2013-12/31/2014	Number of Beds: 120	Superior: 0
LEESBURG, FL 34748	Days in CR 549	Maximum: 65,880	Standard: 366
County: Lake [35]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 55,693	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 11,054	Inflation
Current Class North Large	Initial CR? False	Medicaid: 39,755	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	71.38240%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	84.53704%	Cost: 1.08180716
Open Date: 01/01/1980	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1980	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 04/01/1982	Low Occupancy Adjustment Factor:	106.91147%	DC Sem Index: 1.30450000
Med # Active Date: 12/28/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 252956			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,077,414	3,489,943	2,723,965	1,631,943		9,923,265	
1a	Audit Adjustments							
2	Cost Per Diem	52.2554	87.7863	68.5188	41.0500		249.6105	
3	Cost Per Diem Inflated	56.5303	93.4453	74.1241				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	56.5303	93.4453	74.1241	41.0500		265.1497	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.4538		72.2087				
7	Provider Target Rate	62.7611		76.2255				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	59.3778		70.8747				
10b	Base for line 10a	56.2488		67.1398				
11	Lesser of 5,7,8,10, 10a	54.8223	93.4453	66.1467	13.6500		228.0643	
12/13	Medicaid Adjustment Rate		2.2478	1.5912				
14	Prospective Per Diem 11	54.8223	95.6931	67.7379	13.6500		231.9033	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



Florida Agency for Health Care Administration

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Rate Semester 09/01/2016 through 08/31/2017

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245.06

South Campus Rehabilitation & Nursing Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/01/1989		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	9,200,000.00		Total Amount	Per Diem
RS to Start Calcs:	1980/01	Type:	Variable	80% Capital(1):	3,041,446	5.8375
Indexed Asset Value	3,801,807	<60% of Base:	False	20% ROE(2):	760,361	0.4340
FRVS Base Asset:	2,210,061	Interest Rate:	4.4600%	Insurance Cost(3):	166,186	2.9840
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	58,488	1.0502
ROE Factor	0.022500	Amortization Rate:	4.4600%	Home Office(3):	16,168	0.2903
		Interest Only:	False	Replacement(3&4):	74,182	0.0000
		Yearly Payment:	230,113	Total FRVS PD:		10.5960

(1) 80% Capital (\$3,041,446) amortized at 4.4600 % for 20 years Principal & Interest of \$230,113 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$5.8375

(2) 20% ROE (\$760,361) times the ROE factor (0.022500) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4340

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	95.6931	95.6931	4.3415	91.3516
Indirect Care	67.7379	67.7379	3.0732	64.6647
Property	13.6500	10.5960	0.4807	10.1153
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.4113
Supplemental Rate				8.1814
Totals	231.9033	228.8493	10.3827	245.0593

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1980/01	1,222,674	0.00	6.1657	3.0000	3.1657	120	46.84	1,222,674	2,620,920	
1980/07		0.10	6.9764	3.0000	3.9764	120	46.84	1,225,798	2,720,760	
1981/01		0.10	7.8004	3.0000	4.8004	120	46.84	1,228,930	2,824,800	
1981/07		0.20	7.3892	3.0000	4.3892	120	46.84	1,235,210	2,897,880	
1982/01		0.20	7.0652	3.0000	4.0652	120	29.58	1,239,196	2,975,520	
1982/07		0.30	6.3629	3.0000	3.3629	120	29.58	1,245,194	3,043,800	
1983/04		0.30	5.9917	3.0000	2.9917	120	46.12	1,254,591	3,123,840	
1983/07		0.40	6.9495	3.0000	3.9495	120	46.12	1,267,215	3,247,440	
1984/01	898,697	0.40	5.2447	3.0000	2.2447	120	35.05	2,175,603	3,289,560	
1984/07		0.50	4.1626	3.0000	1.1626	120	35.05	2,196,400	3,352,680	
1985/01		0.50	2.3097	2.3097		120	29.62	2,210,061	3,391,080	
1985/10		0.60	0.8522	0.8522		120	24.49	2,210,061	3,420,000	
1986/01		0.60	0.8299	0.8299		120	24.49	2,210,061	3,448,440	
1986/07		0.70	0.2974	0.2974		120	27.75	2,212,383	3,441,840	
1987/01		0.70	1.0091	1.0091		120	27.75	2,220,268	3,503,400	
1987/07		0.80	0.9007	0.9007		120	32.03	2,229,585	3,530,760	
1988/01		0.80	0.9007	0.9007		120	32.03	2,238,941	3,559,440	
1988/07	14,856	0.90	0.5899	0.5899		120	37.36	2,261,871	3,557,520	
1989/01		0.90	0.5899	0.5899		120	37.36	2,270,028	3,578,520	
1989/07		1.00	0.5899	0.5899		120	46.10	2,281,252	3,602,760	
1990/01		1.00	0.5899	0.5899		120	46.10	2,292,532	3,620,880	
1990/07		1.00	0.5899	0.5899		120	56.34	2,306,056	3,642,240	
1991/01		1.00	0.5899	0.5899		120	56.34	2,319,659	3,663,600	
1991/07		1.00	1.4932	1.4932		120	61.29	2,354,296	3,718,320	
1992/01		1.00	2.0117	2.0117		120	61.29	2,401,657	3,793,080	
1992/07		1.00	1.8152	1.8152		120	73.12	2,445,252	3,861,960	
1993/01		1.00	1.7710	1.7710		120	73.12	2,488,557	3,930,360	
1993/07		1.00	1.5329	1.5329		120	75.41	2,526,704	3,990,600	
1994/01		1.00	1.6983	1.6983		120	75.41	2,569,615	4,058,400	
1994/07		1.00	1.5991	1.5991		120	74.17	2,610,706	4,123,320	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1995/01		1.00	1.5812	1.5812		120	74.17	2,651,986	4,188,480	
1995/07		1.00	1.5250	1.5250		120	71.18	2,692,429	4,252,320	
1996/01		1.00	1.7228	1.7228		120	71.18	2,738,814	4,325,640	
1996/07		1.00	1.3294	1.3294		120	69.58	2,775,224	4,383,120	
1997/01		1.00	1.4109	1.4109		120	69.58	2,775,224	4,444,920	5
1997/07	22,338	1.00	1.0917	1.0917		120	71.66	2,836,718	4,493,400	5
1998/01		1.00	1.1663	1.1663		120	71.66	2,900,886	4,545,840	
1998/07	20,113	1.00	1.0794	1.0794		120	76.32	2,952,311	4,594,920	
1999/01		1.00	1.4499	1.4499		120	76.32	2,995,117	4,661,520	
1999/07	25,171	1.00	1.2299	1.2299		120	73.60	3,057,125	4,718,880	
2000/01		1.00	1.3356	1.3356		120	73.60	3,097,956	4,781,880	
2000/07		0.95	1.1129	1.1129		120	73.14	3,130,711	4,835,040	
2001/01		0.95	1.2976	1.2976		120	73.14	3,169,303	4,897,800	
2001/07		0.90	0.9615	0.9615		120	63.76	3,196,730	4,944,840	
2002/01	4,210	0.90	1.0301	1.0301		120	63.76	3,230,577	4,995,720	
2002/07	10,248	0.85	0.8337	0.8337		120	63.76	3,263,717	5,037,360	
2003/01	6,875	0.85	1.3271	1.3271		120	63.76	3,307,407	5,104,200	
2003/07		0.80	1.1664	1.1664		120	63.76	3,338,268	5,163,720	
2004/01		0.80	1.1103	1.1103		120	63.76	3,367,918	5,221,080	
2004/07		0.75	0.8378	0.8378		120	62.97	3,389,082	5,264,880	
2005/01		0.75	0.8595	0.8595		120	62.97	3,410,928	5,310,120	
2005/07		0.70	0.7364	0.7364		120	60.18	3,428,511	5,349,240	
2006/01		0.70	0.9068	0.9068		120	60.18	3,450,275	5,397,720	
2006/07		0.65	0.8133	0.8133		120	61.44	3,468,513	5,441,640	
2007/01		0.65	1.0133	1.0133		120	61.44	3,491,357	5,496,720	
2007/07		0.60	1.1050	1.1050		120	61.44	3,514,505	5,557,440	
2008/01		0.60	0.8556	0.8556		120	58.51	3,532,548	5,604,960	
2008/07		0.55	0.6104	0.6104		120	58.51	3,544,407	5,639,160	
2009/01		0.55	1.3268	1.3268		120	48.00	3,566,979	5,714,040	
2009/07		0.50	0.6841	0.6841		120	42.17	3,576,335	5,753,160	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/01		0.50	0.8643	0.8643		120	42.17	3,588,186	5,802,840	
2010/07		0.45	0.7107	0.7107		120	53.59	3,599,367	5,844,120	
2011/01		0.45	0.9198	0.9198		120	53.59	3,613,883	5,897,880	
2011/07		0.40	0.9028	0.9028		120	53.59	3,626,598	5,951,160	
2012/01		0.40	0.3865	0.3865		120	52.91	3,631,992	5,974,200	
2012/07		0.35	0.9417	0.9417		120	70.99	3,643,963	6,030,480	
2013/01	26,324	0.35	0.4901	0.4901		120	70.99	3,676,536	6,060,000	
2013/07		0.30	0.6196	0.6196		120	70.99	3,683,371	6,097,560	
2014/01		0.30	0.8564	0.8564		120	70.99	3,692,834	6,149,760	
2014/07		0.25	1.2383	1.2383		120	70.99	3,704,267	6,225,960	
2015/01		0.25	0.7571	0.7571		120	70.99	3,711,279	6,273,120	
2015/09		0.20	1.5736	1.5736		120	70.99	3,722,958	6,371,880	
2016/09	67,740	0.15	1.9890	1.9890		120	71.38	3,801,807	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

0072054-00 - 2016/09

267.91

Rehabilitation Center of St. Pete

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
435 42ND AVE S	7/1/2014-12/31/2014	Number of Beds: 159	Superior: 0
SAINT PETERSBURG, FL 33705	Days in CR 184	Maximum: 29,256	Standard: 366
County: Pinellas [52]	First Used : 2015/09	Max Annualized: 58,035	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 18,846	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,131	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 17,193	FY Index: 1.35002422
Class at 1/94: North Large	Medicaid Utilization	91.22891%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	64.41756%	Cost: 1.06928041
Open Date: 09/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 09/01/1984	Low Occupancy Adjustment Factor:	81.46697%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 006408			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,028,447	1,890,271	1,096,599	727,264		4,742,581
1a	Audit Adjustments						
2	Cost Per Diem	59.8178	109.9442	63.7817	42.3000		275.8437
3	Cost Per Diem Inflated	63.9620	116.1313	68.2005			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	63.9620	116.1313	68.2005	42.3000		290.5938
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	63.3544		69.9512			
7	Provider Target Rate	66.8787		73.8425			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	61.6101		70.6721			
10b	Base for line 10a	58.3635		66.9479			
11	Lesser of 5,7,8,10, 10a	56.8063	102.9392	68.1848	13.6500		241.5803
12/13	Medicaid Adjustment Rate		4.6323	3.0683			
14	Prospective Per Diem 11	56.8063	107.5715	71.2531	13.6500		249.2809
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Rehabilitation Center of St. Pete

FRVS

FRVS Status as of this Semester

Not on FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	11,552,000.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Variable	80% Capital(1):	2,666,178	3.5525
Indexed Asset Value	3,332,723	<60% of Base:	False	20% ROE(2):	666,545	0.2818
FRVS Base Asset:	1,587,729	Interest Rate:	3.5000%	Insurance Cost(3):	75,540	4.0083
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	30,130	1.5987
ROE Factor	0.022080	Amortization Rate:	3.5000%	Home Office(3):	5,471	0.2903
		Interest Only:	False	Replacement(3&4):	8,833	0.0000
		Yearly Payment:	185,553	Total FRVS PD:		9.7316

(1) 80% Capital (\$2,666,178) amortized at 3.5000 % for 20 years Principal & Interest of \$185,553 divided by annual available days (58035) divided by Occup. Adj. (0.90) = \$3.5525

(2) 20% ROE (\$666,545) times the ROE factor (0.022080) divided by annual available days (58035) divided by Occup. Adj. (0.90) = \$0.2818

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 159	Effective PBS Limitation	4,531,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	107.5715	107.5715	4.8805	102.6910
Indirect Care	71.2531	71.2531	3.2327	68.0204
Property	13.6500	9.7316	0.6193	13.0307
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.7583
Supplemental Rate				8.1814
Totals	249.2809	245.3625	11.3098	267.9108

Medicaid Trend Adjustment



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267.91

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	1,584,560	0.00	1.9179	1.9179		159	64.51	1,584,560	4,442,301	
1985/01		0.10	1.1471	1.1471		159	64.51	1,586,377	4,493,181	
1985/10		0.10	0.8522	0.8522		159	64.51	1,587,729	4,531,500	
1986/01		0.20	0.8299	0.8299		159	64.51	1,590,365	4,569,183	
1986/07		0.20	0.2974	0.2974		159	64.51	1,591,311	4,560,438	
1987/01		0.30	1.0091	1.0091		159	64.51	1,596,128	4,642,005	
1987/07		0.30	0.9007	0.9007		159	70.66	1,600,441	4,678,257	
1988/01		0.40	0.9007	0.9007		159	70.66	1,606,207	4,716,258	
1988/07		0.40	0.5899	0.5899		159	75.34	1,609,998	4,713,714	
1989/01		0.50	0.5899	0.5899		159	75.34	1,614,747	4,741,539	
1989/07		0.50	0.5899	0.5899		159	84.14	1,619,511	4,773,657	
1990/01		0.60	0.5899	0.5899		159	84.14	1,625,242	4,797,666	
1990/07	26,567	0.60	0.5899	0.5899		159	83.61	1,657,561	4,825,968	
1991/01		0.70	0.5899	0.5899		159	83.61	1,664,405	4,854,270	
1991/07		0.70	1.4932	1.4932		159	83.81	1,681,801	4,926,774	
1992/01		0.80	2.0117	2.0117		159	83.81	1,708,868	5,025,831	
1992/07		0.80	1.8152	1.8152		159	83.45	1,733,684	5,117,097	
1993/01		0.90	1.7710	1.7710		159	83.45	1,761,317	5,207,727	
1993/07	73,936	0.90	1.5329	1.5329		159	85.82	1,859,552	5,287,545	
1994/01		1.00	1.6983	1.6983		159	85.82	1,891,133	5,377,380	
1994/07	115,447	1.00	1.5991	1.5991		159	81.80	2,036,821	5,463,399	
1995/01		1.00	1.5812	1.5812		159	81.80	2,069,027	5,549,736	
1995/07	97,656	1.00	1.5250	1.5250		159	80.29	2,198,236	5,634,324	
1996/01		1.00	1.7228	1.7228		159	80.29	2,236,107	5,731,473	
1996/07	26,029	1.00	1.3294	1.3294		159	84.32	2,291,863	5,807,634	
1997/01		1.00	1.4109	1.4109		159	84.32	2,324,199	5,889,519	
1997/07		1.00	1.0917	1.0917		159	85.90	2,349,572	5,953,755	
1998/01		1.00	1.1663	1.1663		159	85.90	2,376,975	6,023,238	
1998/07		1.00	1.0794	1.0794		159	85.90	2,402,632	6,088,269	
1999/01		1.00	1.4499	1.4499		159	86.98	2,437,468	6,176,514	



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267.91

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		159	86.98	2,467,446	6,252,516	
2000/01		1.00	1.3356	1.3356		159	86.98	2,500,401	6,335,991	
2000/07		1.00	1.1129	1.1129		159	86.54	2,528,228	6,406,428	
2001/01		1.00	1.2976	1.2976		159	86.54	2,561,034	6,489,585	
2001/07		1.00	0.9615	0.9615		159	86.54	2,585,658	6,551,913	
2002/01		1.00	1.0301	1.0301		159	86.54	2,612,293	6,619,329	
2002/07		1.00	0.8337	0.8337		159	86.54	2,634,072	6,674,502	
2003/01		1.00	1.3271	1.3271		159	86.54	2,669,029	6,763,065	
2003/07		1.00	1.1664	1.1664		159	84.72	2,700,161	6,841,929	
2004/01		1.00	1.1103	1.1103		159	84.72	2,730,141	6,917,931	
2004/07		1.00	0.8378	0.8378		159	82.75	2,753,014	6,975,966	
2005/01		0.95	0.8595	0.8595		159	82.75	2,775,492	7,035,909	
2005/07		0.95	0.7364	0.7364		159	85.10	2,794,909	7,087,743	
2006/01		0.90	0.9068	0.9068		159	85.10	2,817,718	7,151,979	
2006/07		0.90	0.8133	0.8133		159	85.10	2,838,344	7,210,173	
2007/01		0.85	1.0133	1.0133		159	85.11	2,862,791	7,283,154	
2007/07		0.85	1.1050	1.1050		159	85.11	2,889,681	7,363,608	
2008/01		0.80	0.8556	0.8556		159	83.01	2,909,461	7,426,572	
2008/07	42,522	0.80	0.6104	0.6104		159	79.40	2,966,190	7,471,887	
2009/01		0.75	1.3268	1.3268		159	74.83	2,995,707	7,571,103	
2009/07		0.75	0.6841	0.6841		159	74.83	3,011,078	7,622,937	
2010/01		0.70	0.8643	0.8643		159	74.83	3,029,295	7,688,763	
2010/07		0.70	0.7107	0.7107		159	74.83	3,044,366	7,743,459	
2011/01		0.65	0.9198	0.9198		159	74.83	3,062,568	7,814,691	
2011/07	52,670	0.65	0.9028	0.9028		159	75.79	3,133,209	7,885,287	
2012/01		0.60	0.3865	0.3865		159	75.79	3,140,475	7,915,815	
2012/07		0.60	0.9417	0.9417		159	75.82	3,158,219	7,990,386	
2013/01		0.55	0.4901	0.4901		159	75.50	3,166,734	8,029,500	
2013/07		0.55	0.6196	0.6196		159	75.50	3,177,526	8,079,267	
2014/01		0.50	0.8564	0.8564		159	75.50	3,191,132	8,148,432	



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267.91

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		159	75.50	3,210,891	8,249,397	
2015/01		0.45	0.7571	0.7571		159	75.50	3,210,891	8,311,884	5
2015/09	88,078	0.45	1.5736	1.5736		159	91.23	3,309,909	8,442,741	5
2016/09		0.40	1.9890	1.9890		159	91.23	3,332,723	8,610,645	5

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 072054123120140701201404132015163854



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0072320-00 - 2016/09

243.68

The Club Health and Rehab Center at the Villages

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
16529 SE 86TH BELLE MEADE	9/1/2014-12/31/2015	Number of Beds: 68	Superior: 0
THE VILLAGES, FL 32162-5885	Days in CR 487	Maximum: 30,452	Standard: 366
County: Marion [42]	First Used : 2016/09	Max Annualized: 24,820	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 28,237	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 28,069	Inflation
Current Class North Small	Initial CR? False	Medicaid: 1	FY Index: 1.37302921
Class at 1/94: North Small	Medicaid Utilization	0.00354%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.72626%	Cost: 1.05136470
Open Date: 07/13/2012	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/04/2012	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24849500
Entered Medicaid 07/13/2012	Low Occupancy Adjustment Factor:	117.26814%	DC Sem Index: 1.30450000
Med # Active Date: 07/13/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04485801
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	55	99	75	80	2	311	
1a	Audit Adjustments							
2	Cost Per Diem	55.0000	99.0000	75.0000	80.0000	2.0000	311.0000	
3	Cost Per Diem Inflated	57.8251	103.4409	78.8524				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.8251	103.4409	78.8524	80.0000	2.0000	322.1184	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	81.9000		120.5751				
7	Provider Target Rate	86.4559		127.2825				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	59.8899		69.0279				
10b	Base for line 10a	56.7339		65.3904				
11	Lesser of 5,7,8,10, 10a	57.8251	100.8980	69.0279	13.6500	2.0000	243.4010	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	57.8251	100.8980	69.0279	13.6500	2.0000	243.4010	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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243.68

The Club Health and Rehab Center at the Villages

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	07/13/2012	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	9,470,000.00		Total Amount	Per Diem
RS to Start Calcs:	2012/01	Type:	Variable	80% Capital(1):	2,568,586	8.1337
Indexed Asset Value	3,210,733	<60% of Base:	False	20% ROE(2):	642,147	0.5907
FRVS Base Asset:	0	Interest Rate:	3.6841%	Insurance Cost(3):	82,712	2.9292
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	171,052	6.0577
ROE Factor	0.020550	Amortization Rate:	3.6841%	Home Office(3):	27,272	0.9658
		Interest Only:	False	Replacement(3&4):	122,057	0.0000
		Yearly Payment:	181,691	Total FRVS PD:		18.6771

(1) 80% Capital (\$2,568,586) amortized at 3.6841 % for 20 years Principal & Interest of \$181,691 divided by annual available days (24820) divided by Occup. Adj. (0.90) = \$8.1337

(2) 20% ROE (\$642,147) times the ROE factor (0.020550) divided by annual available days (24820) divided by Occup. Adj. (0.90) = \$0.5907

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	49,785
Comparison Date: 01/01/2012	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	2,987,100

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.8251	57.8251	2.6235	55.2016
Direct Care	100.8980	100.8980	4.5777	96.3203
Indirect Care	69.0279	69.0279	3.1318	65.8961
Property	13.6500	18.6771	0.8474	17.8297
ROE	2.0000	2.0000	0.0907	1.9093
ROE Adjustment	-2.0000	-2.0000	-0.0907	-1.9093
Quality Assess-Medicaid Share				0.2467
Supplemental Rate				8.1814
Totals	241.4010	246.4281	11.1804	243.6758

Medicaid Trend Adjustment



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243.68

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07	10,732,647	0.00	0.9417	0.9417		60	0.00	2,987,100	2,987,100	8
2013/01	29,087	0.10	0.4901	0.4901		60	0.00	3,016,187	3,030,000	
2013/07	196,302	0.10	0.6196	0.6196		60	0.00	3,048,780	3,048,780	8
2014/01		0.20	0.8564	0.8564		60	0.00	3,048,780	3,074,880	
2014/07		0.20	1.2383	1.2383		60	0.00	3,048,780	3,112,980	
2015/01		0.30	0.7571	0.7571		60	0.00	3,048,780	3,136,560	
2015/09	266,955	0.30	1.5736	1.5736		60	0.01	3,185,940	3,185,940	8
2016/09	24,793	0.40	1.9890	1.9890		68	0.00	3,210,733	3,682,540	

Message Code:

8 Limited to Current RS Per Bed Standard
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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0073324-00 - 2016/09

210.44

Bradén River Rehabilitation Center, LLC

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2010 MANATEE AVE E	7/1/2013-12/31/2014	Number of Beds: 208	Superior: 0
BRADENTON, FL 34208-1560	Days in CR 549	Maximum: 114,192	Standard: 366
County: Manatee [41]	First Used : 2016/09	Max Annualized: 75,920	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 86,566	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 15,900	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 61,763	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	71.34787%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	75.80741%	Cost: 1.08180716
Open Date: 01/01/1964	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1964	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 01/01/1971	Low Occupancy Adjustment Factor:	95.87137%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 005021			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,333,003	5,551,732	2,477,003	2,705,837		13,067,575	
1a	Audit Adjustments							
2	Cost Per Diem	37.7735	89.8877	40.1050	43.8100		211.5762	
3	Cost Per Diem Inflated	40.8636	95.6822	43.3859				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	40.8636	95.6822	43.3859	43.8100		223.7417	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.7555		58.5531				
7	Provider Target Rate	56.7458		61.8103				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	54.5057		62.1784				
10b	Base for line 10a	51.6334		58.9018				
11	Lesser of 5,7,8,10, 10a	40.8636	95.6822	43.3859	13.6500		193.5817	
12/13	Medicaid Adjustment Rate		2.2979	1.0420				
14	Prospective Per Diem 11	40.8636	97.9801	44.4279	13.6500		196.9216	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Braden River Rehabilitation Center, LLC

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/01/1994		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,900,000.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Fixed	80% Capital(1):	3,433,402	5.2328
Indexed Asset Value	4,291,752	<60% of Base:	False	20% ROE(2):	858,350	0.2826
FRVS Base Asset:	1,984,948	Interest Rate:	8.5000%	Insurance Cost(3):	103,602	1.1968
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	124,979	1.4437
ROE Factor	0.022500	Amortization Rate:	8.5000%	Home Office(3):	19,215	0.2220
		Interest Only:	False	Replacement(3&4):	69,360	0.0000
		Yearly Payment:	357,550	Total FRVS PD:		8.3779

(1) 80% Capital (\$3,433,402) amortized at 8.5000 % for 20 years Principal & Interest of \$357,550 divided by annual available days (75920) divided by Occup. Adj. (0.90) = \$5.2328

(2) 20% ROE (\$858,350) times the ROE factor (0.022500) divided by annual available days (75920) divided by Occup. Adj. (0.90) = \$0.2826

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	208	Effective PBS Limitation	54,155
			5,928,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	40.8636	40.8636	1.8540	39.0096
Direct Care	97.9801	97.9801	4.4453	93.5348
Indirect Care	44.4279	44.4279	2.0157	42.4122
Property	13.6500	8.3779	0.3801	7.9978
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.3009
Supplemental Rate				8.1814
Totals	196.9216	191.6495	8.6951	210.4367

Medicaid Trend Adjustment



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210.44

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	1,192,462	0.00				208	100.00	1,192,462	2,134,288	
1972/01		0.10	3.9787	3.0000	0.9787	208	100.00	1,196,039	2,219,152	
1972/07	2,046	0.10	5.9113	3.0000	2.9113	208	100.00	1,201,673	2,328,560	
1973/01		0.20	8.0622	3.0000	5.0622	208	100.00	1,208,883	2,448,576	
1973/07	1,291	0.20	10.7186	3.0000	7.7186	208	100.00	1,217,427	2,587,104	
1974/01	874	0.30	12.9457	3.0000	9.9457	208	100.00	1,229,258	2,722,304	
1974/07	4,753	0.30	13.0494	3.0000	10.0494	208	100.00	1,245,074	2,806,752	
1975/01	2,079	0.40	13.1399	3.0000	10.1399	208	100.00	1,262,094	2,893,488	
1975/07	10,215	0.40	14.2033	3.0000	11.2033	208	100.00	1,287,454	3,011,216	
1976/01	2,306	0.50	15.2478	3.0000	12.2478	208	100.00	1,309,072	3,132,896	
1976/07	19,134	0.50	15.7330	3.0000	12.7330	208	100.00	1,347,842	3,242,096	
1977/01	40,548	0.60	16.4836	3.0000	13.4836	208	100.00	1,412,651	3,363,776	
1977/07	12,392	0.60	18.5412	3.0000	15.5412	208	100.00	1,450,471	3,533,712	
1978/01	2,900	0.70	20.2809	3.0000	17.2809	208	100.00	1,483,831	3,701,360	
1978/07	3,961	0.70	22.8203	3.0000	19.8203	208	100.00	1,518,952	3,906,240	
1979/01	7,500	0.80	24.9476	3.0000	21.9476	208	100.00	1,562,907	4,106,544	
1979/07		0.80	26.1458	3.0000	23.1458	208	100.00	1,600,417	4,278,976	
1980/01	5,000	0.90	29.3115	3.0000	26.3115	208	52.02	1,646,287	4,542,928	
1980/07	5,435	0.90	30.1222	3.0000	27.1222	208	52.02	1,693,763	4,715,984	
1981/01	10,500	1.00	30.9462	3.0000	27.9462	208	47.06	1,747,740	4,896,320	
1981/07	2,950	1.00	30.5350	3.0000	27.5350	208	47.06	1,795,553	5,022,992	
1982/01	3,155	1.00	30.2110	3.0000	27.2110	208	33.15	1,831,175	5,157,568	
1982/07	51,600	1.00	29.5087	3.0000	26.5087	208	33.15	1,915,886	5,275,920	
1983/04	3,200	1.00	29.1375	3.0000	26.1375	208	31.22	1,951,712	5,414,656	
1983/07		1.00	30.0953	3.0000	27.0953	208	31.22	1,984,948	5,628,896	
1984/01		1.00	28.3905	3.0000	25.3905	208	20.79	1,984,948	5,701,904	
1984/07		1.00	27.3084	3.0000	24.3084	208	20.79	1,984,948	5,811,312	
1985/01		1.00	25.4555	3.0000	22.4555	208	20.79	1,984,948	5,877,872	
1985/10		1.00	23.3077	3.0000	20.3077	208	20.79	1,984,948	5,928,000	
1986/01		1.00	21.1376	3.0000	18.1376	208	20.79	1,984,948	5,977,296	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07	298,727	1.00	18.4350	3.0000	15.4350	208	20.79	2,283,675	5,965,856	
1987/01		1.00	16.4441	3.0000	13.4441	208	20.79	2,283,675	6,072,560	
1987/07		1.00	14.3448	3.0000	11.3448	208	23.73	2,283,675	6,119,984	
1988/01		1.00	12.2455	3.0000	9.2455	208	23.00	2,283,675	6,169,696	
1988/07		1.00	9.8354	3.0000	6.8354	208	30.29	2,321,405	6,166,368	
1989/01		1.00	7.4253	3.0000	4.4253	208	30.29	2,359,759	6,202,768	
1989/07		1.00	5.0152	3.0000	2.0152	208	47.91	2,421,426	6,244,784	
1990/01		1.00	2.6051	2.6051		208	47.91	2,476,375	6,276,192	
1990/07		1.00	0.5899	0.5899		208	47.91	2,489,100	6,313,216	
1991/01		1.00	0.5899	0.5899		208	47.91	2,501,890	6,350,240	
1991/07		1.00	1.4932	1.4932		208	47.91	2,534,432	6,445,088	
1992/01		0.95	2.0117	2.0117		208	47.91	2,576,624	6,574,672	
1992/07		0.95	1.8152	1.8152		208	47.85	2,615,279	6,694,064	
1993/01		0.90	1.7710	1.7710		208	47.85	2,651,545	6,812,624	
1993/07		0.90	1.5329	1.5329		208	51.06	2,685,505	6,917,040	
1994/01		0.85	1.6983	1.6983		208	51.06	2,721,496	7,034,560	
1994/07	104,449	0.85	1.5991	1.5991		208	51.08	2,860,299	7,147,088	
1995/01		0.80	1.5812	1.5812		208	51.08	2,893,903	7,260,032	
1995/07		0.80	1.5250	1.5250		208	50.70	2,926,448	7,370,688	
1996/01		0.75	1.7228	1.7228		208	50.70	2,961,304	7,497,776	
1996/07		0.75	1.3294	1.3294		208	53.56	2,990,058	7,597,408	
1997/01		0.70	1.4109	1.4109		208	53.56	3,018,815	7,704,528	
1997/07		0.70	1.0917	1.0917		208	59.23	3,041,885	7,788,560	
1998/01		0.65	1.1663	1.1663		208	59.23	3,064,946	7,879,456	
1998/07		0.65	1.0794	1.0794		208	63.01	3,086,450	7,964,528	
1999/01		0.60	1.4499	1.4499		208	68.15	3,113,299	8,079,968	
1999/07		0.60	1.2299	1.2299		208	68.15	3,136,272	8,179,392	
2000/01		0.55	1.3356	1.3356		208	68.15	3,159,311	8,288,592	
2000/07		0.55	1.1129	1.1129		208	68.15	3,178,649	8,380,736	
2001/01		0.50	1.2976	1.2976		208	68.15	3,199,272	8,489,520	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		0.50	0.9615	0.9615		208	68.15	3,214,654	8,571,056	
2002/01		0.45	1.0301	1.0301		208	73.28	3,229,554	8,659,248	
2002/07		0.45	0.8337	0.8337		208	73.28	3,241,671	8,731,424	
2003/01	225,243	0.40	1.3271	1.3271		208	79.11	3,484,121	8,847,280	
2003/07		0.40	1.1664	1.1664		208	76.72	3,500,378	8,950,448	
2004/01		0.35	1.1103	1.1103		208	76.72	3,513,980	9,049,872	
2004/07		0.35	0.8378	0.8378		208	76.72	3,524,283	9,125,792	
2005/01		0.30	0.8595	0.8595		208	76.72	3,533,372	9,204,208	
2005/07	182,031	0.30	0.7364	0.7364		208	74.71	3,723,208	9,272,016	
2006/01		0.25	0.9068	0.9068		208	74.71	3,731,649	9,356,048	
2006/07		0.25	0.8133	0.8133		208	74.71	3,739,235	9,432,176	
2007/01		0.20	1.0133	1.0133		208	71.66	3,746,814	9,527,648	
2007/07		0.20	1.1050	1.1050		208	71.66	3,755,094	9,632,896	
2008/01		0.15	0.8556	0.8556		208	67.82	3,759,912	9,715,264	
2008/07	68,804	0.15	0.6104	0.6104		208	67.48	3,832,160	9,774,544	
2009/01		0.10	1.3268	1.3268		208	67.48	3,837,245	9,904,336	
2009/07		0.10	0.6841	0.6841		208	67.48	3,839,870	9,972,144	
2010/01		0.05	0.8643	0.8643		208	67.48	3,841,529	10,058,256	
2010/07		0.05	0.7107	0.7107		208	67.48	3,842,893	10,129,808	
2011/01	32,314	0.00	0.9198	0.9198		208	70.23	3,875,207	10,222,992	
2011/07	353,347	0.00	0.9028	0.9028		208	70.92	4,228,554	10,315,344	
2012/01		0.00	0.3865	0.3865		208	70.92	4,228,554	10,355,280	
2012/07		0.00	0.9417	0.9417		208	70.92	4,228,554	10,452,832	
2013/01		0.00	0.4901	0.4901		208	67.69	4,228,554	10,504,000	
2013/07		0.00	0.6196	0.6196		208	67.69	4,228,554	10,569,104	
2014/01		0.00	0.8564	0.8564		208	67.69	4,228,554	10,659,584	
2014/07		0.00	1.2383	1.2383		208	67.69	4,228,554	10,791,664	
2015/01		0.00	0.7571	0.7571		208	67.69	4,228,554	10,873,408	
2015/09		0.00	1.5736	1.5736		208	67.69	4,228,554	11,044,592	
2016/09	63,198	0.00	1.9890	1.9890		208	71.35	4,291,752	11,264,240	

Message Code:



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The Groves Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
512 S 11TH ST	3/1/2015-2/29/2016	Number of Beds: 120	Superior: 0
LAKE WALES, FL 33853-4901	Days in CR 366	Maximum: 43,920	Standard: 366
County: Polk [53]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 39,174	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 6,608	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,857	FY Index: 1.38327652
Class at 1/94: South Large	Medicaid Utilization	73.66365%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.19399%	Cost: 1.04357620
Open Date: 10/01/1973	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1973	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25683112
Entered Medicaid 10/01/1973	Low Occupancy Adjustment Factor:	112.80098%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03792783
Previous Med # 212881			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,277,743	2,083,609	1,293,677	554,920		5,209,949
1a	Audit Adjustments						
2	Cost Per Diem	44.2784	72.2046	44.8306	19.2300		180.5436
3	Cost Per Diem Inflated	46.2079	74.9432	46.7841			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.2079	74.9432	46.7841	19.2300		187.1652
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	48.8637		59.0692			
7	Provider Target Rate	51.5819		62.3551			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	46.2079	74.9432	46.7841	13.6500		181.5852
12/13	Medicaid Adjustment Rate		1.9951	1.2455			
14	Prospective Per Diem 11	46.2079	76.9383	48.0296	13.6500		184.8258
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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The Groves Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	2,708,333.00		Total Amount	Per Diem
RS to Start Calcs:	1973/07	Type:	Variable	80% Capital(1):	2,003,438	6.5039
Indexed Asset Value	2,504,298	<60% of Base:	False	20% ROE(2):	500,860	0.2607
FRVS Base Asset:	1,240,145	Interest Rate:	11.5000%	Insurance Cost(3):	68,154	1.7398
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	25,345	0.6470
ROE Factor	0.020520	Amortization Rate:	11.5000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	23,059	0.0000
		Yearly Payment:	256,383	Total FRVS PD:		9.1514

(1) 80% Capital (\$2,003,438) amortized at 11.5000 % for 20 years Principal & Interest of \$256,383 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$6.5039

(2) 20% ROE (\$500,860) times the ROE factor (0.020520) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.2607

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.2079	46.2079	2.0964	44.1115
Direct Care	76.9383	76.9383	3.4907	73.4476
Indirect Care	48.0296	48.0296	2.1791	45.8505
Property	13.6500	9.1514	0.4152	8.7362
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7012
Supplemental Rate				8.1814
Totals	184.8258	180.3272	8.1814	200.0284

Medicaid Trend Adjustment



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1973/07	781,157	0.00	5.6564	3.0000	2.6564	120	100.00	781,157	1,492,560	
1974/01		0.10	7.8836	3.0000	4.8836	120	100.00	783,500	1,570,560	
1974/07		0.10	7.9873	3.0000	4.9873	120	100.00	785,851	1,619,280	
1975/01		0.20	8.0777	3.0000	5.0777	120	100.00	790,566	1,669,320	
1975/07		0.20	9.1411	3.0000	6.1411	120	100.00	795,309	1,737,240	
1976/01		0.30	10.1856	3.0000	7.1856	120	100.00	802,467	1,807,440	
1976/07		0.30	10.6709	3.0000	7.6709	120	100.00	809,689	1,870,440	
1977/01		0.40	11.4215	3.0000	8.4215	120	100.00	819,405	1,940,640	
1977/07		0.40	13.4790	3.0000	10.4790	120	100.00	829,238	2,038,680	
1978/01		0.50	15.2187	3.0000	12.2187	120	100.00	841,677	2,135,400	
1978/07		0.50	17.7582	3.0000	14.7582	120	100.00	854,302	2,253,600	
1979/01		0.60	19.8854	3.0000	16.8854	120	100.00	869,679	2,369,160	
1979/07		0.60	21.0836	3.0000	18.0836	120	100.00	885,333	2,468,640	
1980/01		0.70	24.2494	3.0000	21.2494	120	81.24	903,925	2,620,920	
1980/07		0.70	25.0600	3.0000	22.0600	120	81.24	922,907	2,720,760	
1981/01		0.80	25.8840	3.0000	22.8840	120	78.77	945,057	2,824,800	
1981/07		0.80	25.4728	3.0000	22.4728	120	78.77	967,738	2,897,880	
1982/01		0.90	25.1488	3.0000	22.1488	120	78.01	993,867	2,975,520	
1982/07		0.90	24.4465	3.0000	21.4465	120	78.01	1,020,701	3,043,800	
1983/04		1.00	24.0753	3.0000	21.0753	120	78.68	1,051,322	3,123,840	
1983/07		1.00	25.0331	3.0000	22.0331	120	78.68	1,082,862	3,247,440	
1984/01		1.00	23.3283	3.0000	20.3283	120	77.19	1,115,348	3,289,560	
1984/07		1.00	22.2462	3.0000	19.2462	120	77.19	1,148,808	3,352,680	
1985/01		1.00	20.3933	3.0000	17.3933	120	77.18	1,183,272	3,391,080	
1985/10	21,375	1.00	18.2455	3.0000	15.2455	120	77.18	1,240,145	3,420,000	
1986/01		1.00	16.0754	3.0000	13.0754	120	67.39	1,277,349	3,448,440	
1986/07		1.00	13.3728	3.0000	10.3728	120	67.39	1,315,669	3,441,840	
1987/01		1.00	11.3819	3.0000	8.3819	120	62.96	1,355,139	3,503,400	
1987/07		1.00	9.2826	3.0000	6.2826	120	62.96	1,395,793	3,530,760	
1988/01		1.00	7.1833	3.0000	4.1833	120	62.96	1,437,667	3,559,440	



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1988/07		1.00	4.7732	3.0000	1.7732	120	68.46	1,480,797	3,557,520	
1989/01		1.00	2.3631	2.3631		120	72.89	1,515,790	3,578,520	
1989/07		1.00	0.5899	0.5899		120	72.89	1,524,732	3,602,760	
1990/01		1.00	0.5899	0.5899		120	73.94	1,533,726	3,620,880	
1990/07		1.00	0.5899	0.5899		120	73.94	1,542,773	3,642,240	
1991/01		1.00	0.5899	0.5899		120	73.94	1,551,874	3,663,600	
1991/07		1.00	1.4932	1.4932		120	74.75	1,575,047	3,718,320	
1992/01		1.00	2.0117	2.0117		120	81.78	1,606,732	3,793,080	
1992/07		1.00	1.8152	1.8152		120	81.78	1,635,897	3,861,960	
1993/01		1.00	1.7710	1.7710		120	81.78	1,664,869	3,930,360	
1993/07	(13,844)	1.00	1.5329	1.5329		119	76.66	1,676,546	3,957,345	
1994/01		0.95	1.6983	1.6983		119	76.66	1,703,595	4,024,580	
1994/07		0.95	1.5991	1.5991		119	76.66	1,729,474	4,088,959	
1995/01		0.90	1.5812	1.5812		119	76.66	1,754,086	4,153,576	
1995/07		0.90	1.5250	1.5250		119	76.66	1,778,161	4,216,884	
1996/01		0.85	1.7228	1.7228		119	76.66	1,804,200	4,289,593	
1996/07	16,917	0.85	1.3294	1.3294		119	74.57	1,841,504	4,346,594	
1997/01		0.80	1.4109	1.4109		119	74.57	1,862,289	4,407,879	
1997/07		0.80	1.0917	1.0917		119	74.57	1,878,554	4,455,955	
1998/01		0.75	1.1663	1.1663		119	74.57	1,894,986	4,507,958	
1998/07		0.75	1.0794	1.0794		119	74.57	1,910,328	4,556,629	
1999/01		0.70	1.4499	1.4499		119	76.10	1,929,716	4,622,674	
1999/07		0.70	1.2299	1.2299		119	76.10	1,946,329	4,679,556	
2000/01		0.65	1.3356	1.3356		120	76.13	1,963,225	4,781,880	
2000/07		0.65	1.1129	1.1129		120	76.13	1,977,427	4,835,040	
2001/01		0.60	1.2976	1.2976		120	69.92	1,992,823	4,897,800	
2001/07		0.60	0.9615	0.9615		120	69.92	2,004,320	4,944,840	
2002/01		0.55	1.0301	1.0301		120	82.66	2,015,676	4,995,720	
2002/07		0.55	0.8337	0.8337		120	82.66	2,024,918	5,037,360	
2003/01		0.50	1.3271	1.3271		120	77.64	2,038,355	5,104,200	



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2003/07		0.50	1.1664	1.1664		120	77.64	2,050,243	5,163,720	
2004/01		0.45	1.1103	1.1103		120	78.96	2,060,486	5,221,080	
2004/07		0.45	0.8378	0.8378		120	78.96	2,068,254	5,264,880	
2005/01		0.40	0.8595	0.8595		120	78.83	2,075,365	5,310,120	
2005/07		0.40	0.7364	0.7364		120	78.83	2,081,479	5,349,240	
2006/01		0.35	0.9068	0.9068		120	78.83	2,088,086	5,397,720	
2006/07		0.35	0.8133	0.8133		120	68.02	2,094,031	5,441,640	
2007/01		0.30	1.0133	1.0133		120	68.02	2,100,397	5,496,720	
2007/07		0.30	1.1050	1.1050		120	68.10	2,107,360	5,557,440	
2008/01		0.25	0.8556	0.8556		120	69.84	2,111,868	5,604,960	
2008/07		0.25	0.6104	0.6104		120	69.84	2,115,091	5,639,160	
2009/01		0.20	1.3268	1.3268		120	69.84	2,120,704	5,714,040	
2009/07	39,494	0.20	0.6841	0.6841		120	71.19	2,163,099	5,753,160	
2010/01		0.15	0.8643	0.8643		120	71.19	2,165,902	5,802,840	
2010/07		0.15	0.7107	0.7107		120	74.16	2,168,211	5,844,120	
2011/01		0.10	0.9198	0.9198		120	74.68	2,170,206	5,897,880	
2011/07		0.10	0.9028	0.9028		120	74.68	2,172,166	5,951,160	
2012/01		0.05	0.3865	0.3865		120	74.68	2,172,585	5,974,200	
2012/07	160,149	0.05	0.9417	0.9417		120	73.51	2,333,757	6,030,480	
2013/01		0.00	0.4901	0.4901		120	73.51	2,333,757	6,060,000	
2013/07	91,184	0.00	0.6196	0.6196		120	71.91	2,424,941	6,097,560	
2014/01	79,357	0.00	0.8564	0.8564		120	73.82	2,504,298	6,149,760	
2014/07		0.00	1.2383	1.2383		120	73.82	2,504,298	6,225,960	
2015/01		0.00	0.7571	0.7571		120	75.90	2,504,298	6,273,120	
2015/09		0.00	1.5736	1.5736		120	76.12	2,504,298	6,371,880	
2016/09		0.00	1.9890	1.9890		120	73.66	2,504,298	6,498,600	

Message Code:

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 080062022920160301201504202016115421



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Lakeland Hills Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
610 E BELLA VISTA DR	9/1/2014-2/28/2015	Number of Beds: 120	Superior: 0
LAKELAND, FL 33805	Days in CR 181	Maximum: 21,720	Standard: 366
County: Polk [53]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 19,978	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 3,228	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 15,983	FY Index: 1.35644350
Class at 1/94: South Large	Medicaid Utilization	80.00300%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.97974%	Cost: 1.06422011
Open Date: 08/01/1972	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1972	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23833109
Entered Medicaid 08/01/1972	Low Occupancy Adjustment Factor:	116.32403%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05343394
Previous Med # 212865			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	867,922	1,191,902	712,126	288,014		3,059,964	
1a	Audit Adjustments							
2	Cost Per Diem	54.3028	74.5731	44.5552	18.0200		191.4511	
3	Cost Per Diem Inflated	57.7901	78.5578	47.4165				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.7901	78.5578	47.4165	18.0200		201.7844	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	49.2740		59.1911				
7	Provider Target Rate	52.0150		62.4838				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	52.0150	78.5578	47.4165	13.6500		191.6393	
12/13	Medicaid Adjustment Rate		2.6516	1.6005				
14	Prospective Per Diem 11	52.0150	81.2094	49.0170	13.6500		195.8914	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Lakeland Hills Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	4,583,333.00		Total Amount	Per Diem
RS to Start Calcs:	1972/07	Type:	Variable	80% Capital(1):	2,225,858	5.1521
Indexed Asset Value	2,782,323	<60% of Base:	False	20% ROE(2):	556,465	0.2912
FRVS Base Asset:	1,403,125	Interest Rate:	6.7500%	Insurance Cost(3):	37,199	1.8620
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	14,092	0.7054
ROE Factor	0.020630	Amortization Rate:	6.7500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	7,454	0.0000
		Yearly Payment:	203,096	Total FRVS PD:		8.0107

(1) 80% Capital (\$2,225,858) amortized at 6.7500 % for 20 years Principal & Interest of \$203,096 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$5.1521

(2) 20% ROE (\$556,465) times the ROE factor (0.020630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.2912

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.0150	52.0150	2.3599	49.6551
Direct Care	81.2094	81.2094	3.6844	77.5250
Indirect Care	49.0170	49.0170	2.2239	46.7931
Property	13.6500	8.0107	0.3634	7.6473
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.4458
Supplemental Rate				8.1814
Totals	195.8914	190.2521	8.6316	210.2477

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1972/07	836,125	0.00	4.9326	3.0000	1.9326	120	100.00	836,125	1,343,400	
1973/01		0.10	7.0835	3.0000	4.0835	120	100.00	838,633	1,412,640	
1973/07		0.10	9.7399	3.0000	6.7399	120	100.00	841,149	1,492,560	
1974/01		0.20	11.9670	3.0000	8.9670	120	100.00	846,196	1,570,560	
1974/07		0.20	12.0707	3.0000	9.0707	120	100.00	851,273	1,619,280	
1975/01		0.30	12.1612	3.0000	9.1612	120	100.00	858,934	1,669,320	
1975/07		0.30	13.2246	3.0000	10.2246	120	100.00	866,664	1,737,240	
1976/01		0.40	14.2691	3.0000	11.2691	120	100.00	877,064	1,807,440	
1976/07		0.40	14.7543	3.0000	11.7543	120	100.00	887,589	1,870,440	
1977/01		0.50	15.5049	3.0000	12.5049	120	100.00	900,903	1,940,640	
1977/07		0.50	17.5625	3.0000	14.5625	120	100.00	914,417	2,038,680	
1978/01		0.60	19.3022	3.0000	16.3022	120	100.00	930,877	2,135,400	
1978/07		0.60	21.8416	3.0000	18.8416	120	100.00	947,633	2,253,600	
1979/01		0.70	23.9689	3.0000	20.9689	120	100.00	967,533	2,369,160	
1979/07		0.70	25.1671	3.0000	22.1671	120	100.00	987,851	2,468,640	
1980/01		0.80	28.3328	3.0000	25.3328	120	68.03	1,011,559	2,620,920	
1980/07		0.80	29.1435	3.0000	26.1435	120	68.03	1,035,836	2,720,760	
1981/01		0.90	29.9675	3.0000	26.9675	120	57.16	1,063,804	2,824,800	
1981/07		0.90	29.5563	3.0000	26.5563	120	57.16	1,092,527	2,897,880	
1982/01		1.00	29.2323	3.0000	26.2323	120	56.84	1,125,303	2,975,520	
1982/07		1.00	28.5300	3.0000	25.5300	120	56.84	1,159,062	3,043,800	
1983/04		1.00	28.1588	3.0000	25.1588	120	54.88	1,193,758	3,123,840	
1983/07		1.00	29.1166	3.0000	26.1166	120	54.88	1,229,493	3,247,440	
1984/01		1.00	27.4118	3.0000	24.4118	120	61.23	1,266,378	3,289,560	
1984/07		1.00	26.3297	3.0000	23.3297	120	61.23	1,304,369	3,352,680	
1985/01		1.00	24.4768	3.0000	21.4768	120	61.22	1,343,500	3,391,080	
1985/10	19,320	1.00	22.3290	3.0000	19.3290	120	61.22	1,403,125	3,420,000	
1986/01		1.00	20.1589	3.0000	17.1589	120	53.94	1,444,407	3,448,440	
1986/07		1.00	17.4563	3.0000	14.4563	120	53.94	1,486,904	3,441,840	
1987/01		1.00	15.4654	3.0000	12.4654	120	55.46	1,531,511	3,503,400	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07		1.00	13.3661	3.0000	10.3661	120	55.46	1,577,456	3,530,760	
1988/01		1.00	11.2668	3.0000	8.2668	120	55.46	1,624,780	3,559,440	
1988/07		1.00	8.8567	3.0000	5.8567	120	62.15	1,673,523	3,557,520	
1989/01		1.00	6.4466	3.0000	3.4466	120	64.72	1,723,729	3,578,520	
1989/07		1.00	4.0365	3.0000	1.0365	120	64.72	1,775,441	3,602,760	
1990/01		1.00	1.6264	1.6264		120	66.53	1,804,317	3,620,880	
1990/07		1.00	0.5899	0.5899		120	66.53	1,814,961	3,642,240	
1991/01		1.00	0.5899	0.5899		120	66.53	1,825,667	3,663,600	
1991/07	25,738	1.00	1.4932	1.4932		120	76.41	1,851,405	3,718,320	5
1992/01		1.00	2.0117	2.0117		120	79.00	1,878,666	3,793,080	5
1992/07		1.00	1.8152	1.8152		120	79.00	1,951,247	3,861,960	
1993/01		0.95	1.7710	1.7710		120	79.00	1,984,077	3,930,360	
1993/07		0.95	1.5329	1.5329		120	80.84	2,012,971	3,990,600	
1994/01	33,826	0.90	1.6983	1.6983		120	80.84	2,077,565	4,058,400	
1994/07		0.90	1.5991	1.5991		120	80.84	2,107,465	4,123,320	
1995/01		0.85	1.5812	1.5812		120	80.84	2,135,789	4,188,480	
1995/07		0.85	1.5250	1.5250		120	80.84	2,163,475	4,252,320	
1996/01		0.80	1.7228	1.7228		120	80.84	2,193,292	4,325,640	
1996/07	20,754	0.80	1.3294	1.3294		120	74.18	2,237,372	4,383,120	
1997/01		0.75	1.4109	1.4109		120	74.18	2,261,048	4,444,920	
1997/07		0.75	1.0917	1.0917		120	74.18	2,279,561	4,493,400	
1998/01		0.70	1.1663	1.1663		120	74.18	2,298,171	4,545,840	
1998/07		0.70	1.0794	1.0794		120	74.18	2,315,536	4,594,920	
1999/01		0.65	1.4499	1.4499		120	74.18	2,337,358	4,661,520	
1999/07	25,829	0.65	1.2299	1.2299		120	76.31	2,381,872	4,718,880	
2000/01		0.60	1.3356	1.3356		120	79.60	2,400,960	4,781,880	
2000/07		0.60	1.1129	1.1129		120	79.60	2,416,991	4,835,040	
2001/01		0.55	1.2976	1.2976		120	77.10	2,434,241	4,897,800	
2001/07		0.55	0.9615	0.9615		120	77.10	2,447,113	4,944,840	
2002/01	26,435	0.50	1.0301	1.0301		120	79.02	2,486,153	4,995,720	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		0.50	0.8337	0.8337		120	79.02	2,496,518	5,037,360	
2003/01		0.45	1.3271	1.3271		120	84.46	2,511,427	5,104,200	
2003/07		0.45	1.1664	1.1664		120	84.46	2,524,609	5,163,720	
2004/01	33,910	0.40	1.1103	1.1103		120	71.46	2,569,731	5,221,080	
2004/07		0.40	0.8378	0.8378		120	71.46	2,578,342	5,264,880	
2005/01		0.35	0.8595	0.8595		120	72.02	2,586,098	5,310,120	
2005/07		0.35	0.7364	0.7364		120	72.02	2,592,762	5,349,240	
2006/01		0.30	0.9068	0.9068		120	72.02	2,592,762	5,397,720	5
2006/07		0.30	0.8133	0.8133		120	75.25	2,606,158	5,441,640	
2007/01		0.25	1.0133	1.0133		120	75.25	2,612,759	5,496,720	
2007/07		0.25	1.1050	1.1050		120	76.24	2,619,978	5,557,440	
2008/01		0.20	0.8556	0.8556		120	76.24	2,624,461	5,604,960	
2008/07		0.20	0.6104	0.6104		120	70.40	2,627,665	5,639,160	
2009/01		0.15	1.3268	1.3268		120	70.40	2,632,894	5,714,040	
2009/07	17,634	0.15	0.6841	0.6841		120	70.73	2,653,229	5,753,160	
2010/01		0.10	0.8643	0.8643		120	70.73	2,655,521	5,802,840	
2010/07		0.10	0.7107	0.7107		120	68.01	2,657,409	5,844,120	
2011/01		0.05	0.9198	0.9198		120	68.01	2,658,631	5,897,880	
2011/07		0.05	0.9028	0.9028		120	65.74	2,659,830	5,951,160	
2012/01		0.00	0.3865	0.3865		120	78.53	2,659,830	5,974,200	
2012/07		0.00	0.9417	0.9417		120	78.53	2,659,830	6,030,480	
2013/01		0.00	0.4901	0.4901		120	78.53	2,659,830	6,060,000	
2013/07	59,818	0.00	0.6196	0.6196		120	81.33	2,719,648	6,097,560	
2014/01		0.00	0.8564	0.8564		120	81.33	2,719,648	6,149,760	
2014/07	62,675	0.00	1.2383	1.2383		120	80.73	2,782,323	6,225,960	
2015/01		0.00	0.7571	0.7571		120	81.65	2,782,323	6,273,120	
2015/09		0.00	1.5736	1.5736		120	80.00	2,782,323	6,371,880	
2016/09		0.00	1.9890	1.9890		120	80.00	2,782,323	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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Tarpon Bayou Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
515 CHESAPEAKE DR	9/1/2014-2/28/2015	Number of Beds: 120	Superior: 0
TARPON SPRINGS, FL 34689	Days in CR 181	Maximum: 21,720	Standard: 366
County: Pinellas [52]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 18,531	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 1,728	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 15,796	FY Index: 1.35644350
Class at 1/94: North Large	Medicaid Utilization	85.24095%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	85.31768%	Cost: 1.06422011
Open Date: 07/01/1972	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1972	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23833109
Entered Medicaid 07/01/1972	Low Occupancy Adjustment Factor:	107.89873%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05343394
Previous Med # 212849			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	631,887	1,273,492	710,527	300,914		2,916,820
1a	Audit Adjustments						
2	Cost Per Diem	40.0030	80.6212	44.9815	19.0500		184.6557
3	Cost Per Diem Inflated	42.5720	84.9291	47.8702			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	42.5720	84.9291	47.8702	19.0500		194.4213
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	48.8637		59.0692			
7	Provider Target Rate	51.5819		62.3551			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	42.5720	84.9291	47.8702	13.6500		189.0213
12/13	Medicaid Adjustment Rate		3.3671	1.8979			
14	Prospective Per Diem 11	42.5720	88.2962	49.7681	13.6500		194.2863
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Tarpon Bayou Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	4,166,667.00		Total Amount	Per Diem
RS to Start Calcs:	1972/07	Type:	Variable	80% Capital(1):	3,028,440	8.8965
Indexed Asset Value	3,785,550	<60% of Base:	False	20% ROE(2):	757,110	0.3962
FRVS Base Asset:	1,883,680	Interest Rate:	10.0000%	Insurance Cost(3):	45,668	2.4644
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	18,990	1.0248
ROE Factor	0.020630	Amortization Rate:	10.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	22,386	0.0000
		Yearly Payment:	350,701	Total FRVS PD:		12.7819

(1) 80% Capital (\$3,028,440) amortized at 10.0000 % for 20 years Principal & Interest of \$350,701 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.8965

(2) 20% ROE (\$757,110) times the ROE factor (0.020630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3962

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.5720	42.5720	1.9315	40.6405
Direct Care	88.2962	88.2962	4.0060	84.2902
Indirect Care	49.7681	49.7681	2.2580	47.5101
Property	13.6500	12.7819	0.5799	12.2020
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.1253
Supplemental Rate				8.1814
Totals	194.2863	193.4182	8.7754	213.9495

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1972/07	867,432	0.00	4.9326	3.0000	1.9326	120	100.00	867,432	1,343,400	
1973/01		0.10	7.0835	3.0000	4.0835	120	100.00	870,034	1,412,640	
1973/07	100,000	0.10	9.7399	3.0000	6.7399	120	100.00	972,644	1,492,560	
1974/01	150,000	0.20	11.9670	3.0000	8.9670	120	100.00	1,128,480	1,570,560	
1974/07		0.20	12.0707	3.0000	9.0707	120	100.00	1,135,251	1,619,280	
1975/01		0.30	12.1612	3.0000	9.1612	120	100.00	1,145,468	1,669,320	
1975/07		0.30	13.2246	3.0000	10.2246	120	100.00	1,155,777	1,737,240	
1976/01		0.40	14.2691	3.0000	11.2691	120	100.00	1,169,646	1,807,440	
1976/07		0.40	14.7543	3.0000	11.7543	120	100.00	1,183,682	1,870,440	
1977/01		0.50	15.5049	3.0000	12.5049	120	100.00	1,201,437	1,940,640	
1977/07		0.50	17.5625	3.0000	14.5625	120	100.00	1,219,459	2,038,680	
1978/01		0.60	19.3022	3.0000	16.3022	120	100.00	1,241,409	2,135,400	
1978/07		0.60	21.8416	3.0000	18.8416	120	100.00	1,263,754	2,253,600	
1979/01		0.70	23.9689	3.0000	20.9689	120	100.00	1,290,293	2,369,160	
1979/07		0.70	25.1671	3.0000	22.1671	120	100.00	1,317,389	2,468,640	
1980/01		0.80	28.3328	3.0000	25.3328	120	73.64	1,349,006	2,620,920	
1980/07		0.80	29.1435	3.0000	26.1435	120	73.64	1,381,382	2,720,760	
1981/01		0.90	29.9675	3.0000	26.9675	120	64.52	1,418,679	2,824,800	
1981/07		0.90	29.5563	3.0000	26.5563	120	64.52	1,456,983	2,897,880	
1982/01		1.00	29.2323	3.0000	26.2323	120	67.01	1,500,692	2,975,520	
1982/07		1.00	28.5300	3.0000	25.5300	120	67.01	1,545,713	3,043,800	
1983/04		1.00	28.1588	3.0000	25.1588	120	67.73	1,592,084	3,123,840	
1983/07		1.00	29.1166	3.0000	26.1166	120	67.73	1,639,847	3,247,440	
1984/01		1.00	27.4118	3.0000	24.4118	120	62.96	1,689,042	3,289,560	
1984/07		1.00	26.3297	3.0000	23.3297	120	62.96	1,739,713	3,352,680	
1985/01		1.00	24.4768	3.0000	21.4768	120	62.95	1,791,904	3,391,080	
1985/10	38,019	1.00	22.3290	3.0000	19.3290	120	92.95	1,883,680	3,420,000	
1986/01		1.00	20.1589	3.0000	17.1589	120	59.08	1,940,190	3,448,440	
1986/07		1.00	17.4563	3.0000	14.4563	120	59.08	1,998,396	3,441,840	
1987/01		1.00	15.4654	3.0000	12.4654	120	54.10	2,057,367	3,503,400	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07		1.00	13.3661	3.0000	10.3661	120	54.10	2,118,078	3,530,760	
1988/01	38,349	1.00	11.2668	3.0000	8.2668	120	54.10	2,218,930	3,559,440	
1988/07		1.00	8.8567	3.0000	5.8567	120	55.89	2,285,498	3,557,520	
1989/01		1.00	6.4466	3.0000	3.4466	120	60.90	2,354,063	3,578,520	
1989/07		1.00	4.0365	3.0000	1.0365	120	60.90	2,424,685	3,602,760	
1990/01		1.00	1.6264	1.6264		120	68.81	2,464,120	3,620,880	
1990/07		1.00	0.5899	0.5899		120	68.81	2,478,656	3,642,240	
1991/01		1.00	0.5899	0.5899		120	68.81	2,493,278	3,663,600	
1991/07		1.00	1.4932	1.4932		120	66.35	2,530,508	3,718,320	
1992/01		1.00	2.0117	2.0117		120	63.80	2,581,414	3,793,080	
1992/07		1.00	1.8152	1.8152		120	63.80	2,628,272	3,861,960	
1993/01		0.95	1.7710	1.7710		120	63.80	2,672,493	3,930,360	
1993/07	71,305	0.95	1.5329	1.5329		120	69.39	2,782,718	3,990,600	
1994/01		0.90	1.6983	1.6983		120	69.39	2,782,718	4,058,400	5
1994/07		0.90	1.5991	1.5991		120	69.39	2,865,913	4,123,320	
1995/01		0.85	1.5812	1.5812		120	69.39	2,904,431	4,188,480	
1995/07		0.85	1.5250	1.5250		120	69.39	2,942,081	4,252,320	
1996/01		0.80	1.7228	1.7228		120	69.39	2,982,629	4,325,640	
1996/07	18,279	0.80	1.3294	1.3294		120	68.82	3,032,628	4,383,120	
1997/01	1,461	0.75	1.4109	1.4109		120	68.82	3,066,180	4,444,920	
1997/07		0.75	1.0917	1.0917		120	68.82	3,091,286	4,493,400	
1998/01		0.70	1.1663	1.1663		120	68.82	3,116,523	4,545,840	
1998/07		0.70	1.0794	1.0794		120	68.82	3,140,071	4,594,920	
1999/01		0.65	1.4499	1.4499		120	68.82	3,169,663	4,661,520	
1999/07	33,832	0.65	1.2299	1.2299		120	73.04	3,228,833	4,718,880	
2000/01	19,699	0.60	1.3356	1.3356		120	71.99	3,274,408	4,781,880	
2000/07		0.60	1.1129	1.1129		120	71.99	3,296,271	4,835,040	
2001/01	33,940	0.55	1.2976	1.2976		120	75.84	3,353,736	4,897,800	
2001/07		0.55	0.9615	0.9615		120	75.84	3,371,471	4,944,840	
2002/01	19,656	0.50	1.0301	1.0301		120	75.98	3,408,493	4,995,720	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		0.50	0.8337	0.8337		120	75.98	3,422,703	5,037,360	
2003/01		0.45	1.3271	1.3271		120	74.53	3,443,143	5,104,200	
2003/07		0.45	1.1664	1.1664		120	74.53	3,461,216	5,163,720	
2004/01		0.40	1.1103	1.1103		120	79.88	3,476,587	5,221,080	
2004/07		0.40	0.8378	0.8378		120	79.88	3,488,237	5,264,880	
2005/01		0.35	0.8595	0.8595		120	82.31	3,498,730	5,310,120	
2005/07		0.35	0.7364	0.7364		120	82.31	3,507,746	5,349,240	
2006/01		0.30	0.9068	0.9068		120	82.31	3,517,287	5,397,720	
2006/07		0.30	0.8133	0.8133		120	79.36	3,525,869	5,441,640	
2007/01		0.25	1.0133	1.0133		120	79.36	3,534,800	5,496,720	
2007/07		0.25	1.1050	1.1050		120	81.32	3,544,567	5,557,440	
2008/01		0.20	0.8556	0.8556		120	75.56	3,550,632	5,604,960	
2008/07		0.20	0.6104	0.6104		120	75.56	3,554,967	5,639,160	
2009/01		0.15	1.3268	1.3268		120	75.56	3,562,041	5,714,040	
2009/07		0.15	0.6841	0.6841		120	74.82	3,565,696	5,753,160	
2010/01	51,785	0.10	0.8643	0.8643		120	75.64	3,620,562	5,802,840	
2010/07		0.10	0.7107	0.7107		120	75.64	3,623,136	5,844,120	
2011/01		0.05	0.9198	0.9198		120	75.64	3,624,803	5,897,880	
2011/07	22,668	0.05	0.9028	0.9028		120	76.40	3,649,106	5,951,160	
2012/01		0.00	0.3865	0.3865		120	76.40	3,649,106	5,974,200	
2012/07		0.00	0.9417	0.9417		120	77.16	3,649,106	6,030,480	
2013/01		0.00	0.4901	0.4901		120	77.16	3,649,106	6,060,000	
2013/07	99,944	0.00	0.6196	0.6196		120	80.50	3,749,050	6,097,560	
2014/01	36,500	0.00	0.8564	0.8564		120	77.97	3,785,550	6,149,760	
2014/07		0.00	1.2383	1.2383		120	77.97	3,785,550	6,225,960	
2015/01		0.00	0.7571	0.7571		120	77.97	3,785,550	6,273,120	
2015/09		0.00	1.5736	1.5736		120	85.24	3,785,550	6,371,880	
2016/09		0.00	1.9890	1.9890		120	85.24	3,785,550	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency



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Consulate Health Care of Bayonet Point

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
8132 HUDSON AVENUE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
HUDSON, FL 34667-8571	Days in CR 365	Maximum: 43,800	Standard: 366
County: Pasco [51]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 41,591	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,985	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 22,763	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	54.73059%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.95662%	Cost: 1.04651568
Open Date: 01/29/1993	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/29/1993	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 02/22/1993	Low Occupancy Adjustment Factor:	120.08881%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 319651			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,004,822	1,492,241	1,023,259	1,143,613		4,663,935	
1a	Audit Adjustments							
2	Cost Per Diem	44.1428	65.5556	44.9527	50.2400		204.8911	
3	Cost Per Diem Inflated	46.1961	68.2228	47.0437				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.1961	68.2228	47.0437	50.2400		211.7026	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.6186		59.0692				
7	Provider Target Rate	56.6013		62.3551				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	46.1961	68.2228	47.0437	13.6500		175.1126	
12/13	Medicaid Adjustment Rate		0.3631	0.2504				
14	Prospective Per Diem 11	46.1961	68.5859	47.2941	13.6500		175.7261	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Consulate Health Care of Bayonet Point

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	02/22/1993	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,324,176.00		Total Amount	Per Diem
RS to Start Calcs:	1993/01	Type:	Variable	80% Capital(1):	4,652,127	10.6385
Indexed Asset Value	5,815,159	<60% of Base:	False	20% ROE(2):	1,163,032	0.5963
FRVS Base Asset:	3,861,960	Interest Rate:	7.2655%	Insurance Cost(3):	43,869	1.0548
Occup Adj Factor	0.9000	Chase Rate:	4.5956%	Taxes Cost(3):	74,096	1.7815
ROE Factor	0.020210	Amortization Rate:	6.5956%	Home Office(3):	41,737	1.0035
		Interest Only:	False	Replacement(3&4):	145,557	0.0000
		Yearly Payment:	419,368	Total FRVS PD:		15.0746

(1) 80% Capital (\$4,652,127) amortized at 6.5956 % for 20 years Principal & Interest of \$419,368 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.6385

(2) 20% ROE (\$1,163,032) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5963

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	32,183
Comparison Date: 08/01/1992	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,861,960

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.1961	46.1961	2.0959	44.1002
Direct Care	68.5859	68.5859	3.1117	65.4742
Indirect Care	47.2941	47.2941	2.1457	45.1484
Property	13.6500	15.0746	0.6839	14.3907
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.1448
Supplemental Rate				8.1814
Totals	175.7261	177.1507	8.0372	193.4397

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1993/01	5,154,537	0.00	1.7710	1.7710		120	22.06	3,861,960	3,861,960	1
1993/07		0.10	1.5329	1.5329		120	22.06	3,861,960	3,990,600	
1994/01		0.10	1.6983	1.6983		120	22.06	3,861,960	4,058,400	
1994/07		0.20	1.5991	1.5991		120	22.06	3,861,960	4,123,320	
1995/01		0.20	1.5812	1.5812		120	22.06	3,861,960	4,188,480	5
1995/07		0.30	1.5250	1.5250		120	22.06	3,861,960	4,252,320	
1996/01	165,029	0.30	1.7228	1.7228		120	26.95	4,036,769	4,325,640	
1996/07		0.40	1.3294	1.3294		120	26.95	4,047,288	4,383,120	
1997/01	98,051	0.40	1.4109	1.4109		120	27.48	4,156,752	4,444,920	
1997/07		0.50	1.0917	1.0917		120	27.48	4,168,090	4,493,400	
1998/01	136,564	0.50	1.1663	1.1663		120	29.29	4,317,599	4,545,840	
1998/07		0.60	1.0794	1.0794		120	29.29	4,332,489	4,594,920	
1999/01	41,092	0.60	1.4499	1.4499		120	30.32	4,394,358	4,661,520	
1999/07		0.70	1.2299	1.2299		120	30.32	4,415,213	4,718,880	
2000/01		0.70	1.3356	1.3356		120	29.99	4,437,721	4,781,880	
2000/07		0.80	1.1129	1.1129		120	29.99	4,459,264	4,835,040	
2001/01	46,886	0.80	1.2976	1.2976		120	40.89	4,540,566	4,897,800	
2001/07		0.90	0.9615	0.9615		120	40.89	4,569,779	4,944,840	
2002/01		0.90	1.0301	1.0301		120	40.89	4,569,779	4,995,720	5
2002/07		1.00	0.8337	0.8337		120	40.89	4,629,797	5,037,360	
2003/01		1.00	1.3271	1.3271		120	40.89	4,675,476	5,104,200	
2003/07		1.00	1.1664	1.1664		120	48.55	4,723,615	5,163,720	
2004/01		1.00	1.1103	1.1103		120	48.55	4,769,911	5,221,080	
2004/07		1.00	0.8378	0.8378		120	55.55	4,809,873	5,264,880	
2005/01		1.00	0.8595	0.8595		120	55.55	4,851,214	5,310,120	
2005/07		1.00	0.7364	0.7364		120	55.30	4,886,938	5,349,240	
2006/01		1.00	0.9068	0.9068		120	55.30	4,931,253	5,397,720	
2006/07		1.00	0.8133	0.8133		120	52.95	4,969,864	5,441,640	
2007/01		1.00	1.0133	1.0133		120	52.95	5,018,347	5,496,720	
2007/07		1.00	1.1050	1.1050		120	48.42	5,067,166	5,557,440	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2008/01		1.00	0.8556	0.8556		120	48.42	5,105,334	5,604,960	
2008/07		1.00	0.6104	0.6104		120	43.77	5,130,134	5,639,160	
2009/01		1.00	1.3268	1.3268		120	43.77	5,184,303	5,714,040	
2009/07		1.00	0.6841	0.6841		120	47.86	5,215,165	5,753,160	
2010/01		1.00	0.8643	0.8643		120	47.86	5,254,388	5,802,840	
2010/07		1.00	0.7107	0.7107		120	49.69	5,288,126	5,844,120	
2011/01		1.00	0.9198	0.9198		120	49.69	5,332,070	5,897,880	
2011/07		1.00	0.9028	0.9028		120	49.69	5,375,560	5,951,160	
2012/01		1.00	0.3865	0.3865		120	56.69	5,396,337	5,974,200	
2012/07		1.00	0.9417	0.9417		120	56.69	5,447,154	6,030,480	
2013/01		1.00	0.4901	0.4901		120	53.17	5,472,962	6,060,000	
2013/07		0.95	0.6196	0.6196		120	53.17	5,504,104	6,097,560	
2014/01		0.95	0.8564	0.8564		120	60.91	5,548,885	6,149,760	
2014/07		0.90	1.2383	1.2383		120	60.91	5,610,727	6,225,960	
2015/01		0.90	0.7571	0.7571		120	59.93	5,648,958	6,273,120	
2015/09		0.85	1.5736	1.5736		120	59.93	5,724,518	6,371,880	
2016/09		0.80	1.9890	1.9890		120	54.73	5,815,159	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |

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Report Calculated: 6/30/2016 8:16:40 AM

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ID: 080374123120150101201504252016151239



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Consulate Health Care of Brandon

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
701 VICTORIA ST	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
BRANDON, FL 33510-4100	Days in CR 365	Maximum: 43,800	Standard: 357
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 9
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 42,178	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 14,278	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 24,499	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	58.08478%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.29680%	Cost: 1.07573004
Open Date: 09/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 09/24/1985	Low Occupancy Adjustment Factor:	121.78369%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319660			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,148,093	1,560,825	980,100	944,681		4,633,699	
1a	Audit Adjustments							
2	Cost Per Diem	46.8629	63.7097	40.0057	38.5600		189.1383	
3	Cost Per Diem Inflated	50.4118	67.6235	43.0353				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.4118	67.6235	43.0353	38.5600		199.6306	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.4317		59.4077				
7	Provider Target Rate	64.8490		62.7124				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	50.4118	67.6235	43.0353	13.6500		174.7206	
12/13	Medicaid Adjustment Rate		0.5999	0.3818				
14	Prospective Per Diem 11	50.4118	68.2234	43.4171	13.6500		175.7023	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Consulate Health Care of Brandon

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 03/01/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,316,600.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Fixed	80% Capital(1):	4,902,183	14.7987
Indexed Asset Value	6,127,729	<60% of Base:	False	20% ROE(2):	1,225,546	0.7060
FRVS Base Asset:	3,420,000	Interest Rate:	10.4000%	Insurance Cost(3):	45,589	1.0809
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	92,507	2.1933
ROE Factor	0.022710	Amortization Rate:	10.4000%	Home Office(3):	44,230	1.0487
		Interest Only:	False	Replacement(3&4):	42,267	0.0000
		Yearly Payment:	583,363	Total FRVS PD:		19.8276

(1) 80% Capital (\$4,902,183) amortized at 10.4000 % for 20 years Principal & Interest of \$583,363 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$14.7987

(2) 20% ROE (\$1,225,546) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7060

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.4118	50.4118	2.2872	48.1246
Direct Care	68.2234	68.2234	3.0953	65.1281
Indirect Care	43.4171	43.4171	1.9698	41.4473
Property	13.6500	19.8276	0.8996	18.9280
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.2961
Supplemental Rate				8.1814
Totals	175.7023	181.8799	8.2519	198.1055

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	3,485,796	0.00	0.8522	0.8522		120	2.58	3,420,000	3,420,000	1
1986/01		0.10	0.8299	0.8299		120	2.58	3,420,000	3,448,440	
1986/07		0.10	0.2974	0.2974		120	2.58	3,420,000	3,441,840	
1987/01		0.20	1.0091	1.0091		120	2.58	3,420,000	3,503,400	
1987/07		0.20	0.9007	0.9007		120	2.58	3,420,000	3,530,760	
1988/01		0.30	0.9007	0.9007		120	25.62	3,424,305	3,559,440	
1988/07		0.30	0.5899	0.5899		120	37.36	3,428,422	3,557,520	
1989/01	18,176	0.40	0.5899	0.5899		120	37.36	3,452,094	3,578,520	
1989/07		0.40	0.5899	0.5899		120	42.70	3,452,094	3,602,760	5
1990/01		0.50	0.5899	0.5899		120	42.70	3,466,340	3,620,880	
1990/07	19,729	0.50	0.5899	0.5899		120	32.93	3,492,191	3,642,240	
1991/01		0.60	0.5899	0.5899		120	32.93	3,499,591	3,663,600	
1991/07	24,533	0.60	1.4932	1.4932		120	36.06	3,544,680	3,718,320	
1992/01		0.70	2.0117	2.0117		120	36.06	3,577,407	3,793,080	
1992/07		0.70	1.8152	1.8152		120	38.09	3,608,886	3,861,960	
1993/01		0.80	1.7710	1.7710		120	38.09	3,644,296	3,930,360	
1993/07		0.80	1.5329	1.5329		120	40.66	3,677,334	3,990,600	
1994/01		0.90	1.6983	1.6983		120	40.66	3,718,887	4,058,400	
1994/07	25,711	0.90	1.5991	1.5991		120	45.30	3,788,681	4,123,320	
1995/01	14,040	1.00	1.5812	1.5812		120	41.36	3,847,771	4,188,480	
1995/07		1.00	1.5250	1.5250		120	41.36	3,891,897	4,252,320	
1996/01	35,587	1.00	1.7228	1.7228		120	43.20	3,980,148	4,325,640	
1996/07		1.00	1.3294	1.3294		120	43.20	4,021,708	4,383,120	
1997/01	1,304,224	1.00	1.4109	1.4109		120	41.30	4,444,920	4,444,920	8
1997/07		1.00	1.0917	1.0917		120	41.30	4,481,358	4,493,400	
1998/01	127,338	1.00	1.1663	1.1663		120	44.43	4,545,840	4,545,840	8
1998/07		1.00	1.0794	1.0794		120	44.43	4,585,478	4,594,920	
1999/01	71,995	1.00	1.4499	1.4499		120	50.40	4,661,520	4,661,520	8
1999/07		1.00	1.2299	1.2299		120	58.26	4,718,852	4,718,880	
2000/01		1.00	1.3356	1.3356		120	58.26	4,781,877	4,781,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		120	58.26	4,835,040	4,835,040	8
2001/01		1.00	1.2976	1.2976		120	58.26	4,897,779	4,897,800	
2001/07		1.00	0.9615	0.9615		120	58.26	4,944,840	4,944,840	8
2002/01		1.00	1.0301	1.0301		120	58.26	4,995,720	4,995,720	8
2002/07		1.00	0.8337	0.8337		120	60.17	5,037,360	5,037,360	8
2003/01		1.00	1.3271	1.3271		120	60.17	5,104,200	5,104,200	8
2003/07		1.00	1.1664	1.1664		120	60.17	5,163,720	5,163,720	8
2004/01		1.00	1.1103	1.1103		120	60.17	5,221,053	5,221,080	
2004/07		1.00	0.8378	0.8378		120	67.73	5,264,795	5,264,880	
2005/01		1.00	0.8595	0.8595		120	67.73	5,310,046	5,310,120	
2005/07		1.00	0.7364	0.7364		120	67.73	5,349,149	5,349,240	
2006/01	23,716	0.95	0.9068	0.9068		120	72.62	5,397,720	5,397,720	8
2006/07		0.95	0.8133	0.8133		120	72.62	5,439,423	5,441,640	
2007/01		0.90	1.0133	1.0133		120	69.98	5,489,031	5,496,720	
2007/07		0.90	1.1050	1.1050		120	69.98	5,543,619	5,557,440	
2008/01		0.85	0.8556	0.8556		120	70.47	5,583,938	5,604,960	
2008/07		0.85	0.6104	0.6104		120	70.47	5,612,907	5,639,160	
2009/01		0.80	1.3268	1.3268		120	68.64	5,672,482	5,714,040	
2009/07		0.80	0.6841	0.6841		120	68.64	5,703,527	5,753,160	
2010/01		0.75	0.8643	0.8643		120	63.15	5,740,497	5,802,840	
2010/07		0.75	0.7107	0.7107		120	63.15	5,771,094	5,844,120	
2011/01		0.70	0.9198	0.9198		120	63.15	5,808,254	5,897,880	
2011/07		0.70	0.9028	0.9028		120	57.28	5,844,962	5,951,160	
2012/01		0.65	0.3865	0.3865		120	57.28	5,859,645	5,974,200	
2012/07		0.65	0.9417	0.9417		120	57.28	5,895,512	6,030,480	
2013/01		0.60	0.4901	0.4901		120	57.68	5,912,851	6,060,000	
2013/07		0.60	0.6196	0.6196		120	57.68	5,934,835	6,097,560	
2014/01		0.55	0.8564	0.8564		120	54.86	5,962,717	6,149,760	
2014/07		0.55	1.2383	1.2383		120	54.86	6,003,226	6,225,960	
2015/01		0.50	0.7571	0.7571		120	58.15	6,025,954	6,273,120	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		120	58.15	6,073,366	6,371,880	
2016/09		0.45	1.9890	1.9890		120	58.08	6,127,729	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency
- 8 Limited to Current RS Per Bed Standard

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

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Consulate Health Care of Jacksonville

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4101 SOUTHPOINT DRIVE EAS JACKSONVILLE, FL 32216	1/1/2015-12/31/2015	Number of Beds: 116	Superior: 0
County: Duval [16]	Days in CR 365	Maximum: 42,340	Standard: 366
Region: North Area: 4	First Used : 2016/09	Max Annualized: 42,340	Conditional: 0
Control: Proprietary : Corporation	Last Used: 2016/09	Total Patient: 39,391	Total: 366
Current Class North Large	Unaudited	Medicare: 6,127	Inflation
Class at 1/94: North Large	Initial CR? False	Medicaid: 24,459	FY Index: 1.37939113
Operating Ex > 18 months	Medicaid Utilization	62.09286%	Semester Index: 1.44355445
Open Date: 08/09/1996	Occupancy:	93.03496%	Cost: 1.04651568
Acquired Date: 08/09/1996	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 08/09/1996	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Med # Active Date: 10/01/2012	Low Occupancy Adjustment Factor:	117.65854%	DC Sem Index: 1.30450000
Previous Med # 319503	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,258,500	1,778,575	1,183,678	1,222,461		5,443,214	
1a	Audit Adjustments							
2	Cost Per Diem	51.4535	72.7166	48.3944	49.9800		222.5445	
3	Cost Per Diem Inflated	53.8469	75.6752	50.6455				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.8469	75.6752	50.6455	49.9800		230.1476	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.4612		58.1892				
7	Provider Target Rate	62.7689		61.4262				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	53.8469	75.6752	50.6455	13.6500		193.8176	
12/13	Medicaid Adjustment Rate		1.0295	0.6890				
14	Prospective Per Diem 11	53.8469	76.7047	51.3345	13.6500		195.5361	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Consulate Health Care of Jacksonville

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/09/1996		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,697,802.00		Total Amount	Per Diem
RS to Start Calcs:	1996/07	Type:	Variable	80% Capital(1):	4,515,510	10.6821
Indexed Asset Value	5,644,387	<60% of Base:	False	20% ROE(2):	1,128,877	0.5987
FRVS Base Asset:	4,181,452	Interest Rate:	7.2655%	Insurance Cost(3):	43,760	1.1109
Occup Adj Factor	0.9000	Chase Rate:	4.5956%	Taxes Cost(3):	92,993	2.3608
ROE Factor	0.020210	Amortization Rate:	6.5956%	Home Office(3):	43,927	1.1152
		Interest Only:	False	Replacement(3&4):	78,761	0.0000
		Yearly Payment:	407,053	Total FRVS PD:		15.8677

(1) 80% Capital (\$4,515,510) amortized at 6.5956 % for 20 years Principal & Interest of \$407,053 divided by annual available days (42340) divided by Occup. Adj. (0.90) = \$10.6821

(2) 20% ROE (\$1,128,877) times the ROE factor (0.020210) divided by annual available days (42340) divided by Occup. Adj. (0.90) = \$0.5987

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	36,047
Comparison Date: 01/01/1996	Current RS PBS:	54,155
Comparison Bed 116	Effective PBS Limitation	4,181,452

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.8469	53.8469	2.4430	51.4039
Direct Care	76.7047	76.7047	3.4801	73.2246
Indirect Care	51.3345	51.3345	2.3290	49.0055
Property	13.6500	15.8677	0.7199	15.1478
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.8583
Supplemental Rate				8.1814
Totals	195.5361	197.7538	8.9720	214.8215

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/07	8,046,470	0.00	1.3294	1.3294		116	26.69	4,181,452	4,181,452	1
1997/01	19,750	0.10	1.4109	1.4109		116	26.69	4,204,065	4,296,756	
1997/07		0.10	1.0917	1.0917		116	26.69	4,206,293	4,343,620	
1998/01		0.20	1.1663	1.1663		116	26.69	4,211,055	4,394,312	
1998/07		0.20	1.0794	1.0794		116	26.69	4,215,467	4,441,756	
1999/01	27,001	0.30	1.4499	1.4499		116	34.32	4,253,910	4,506,136	
1999/07		0.30	1.2299	1.2299		116	34.32	4,263,705	4,561,584	
2000/01	74,660	0.40	1.3356	1.3356		116	41.31	4,338,365	4,622,484	5
2000/07		0.40	1.1129	1.1129		116	41.31	4,370,036	4,673,872	
2001/01		0.50	1.2976	1.2976		116	41.87	4,391,620	4,734,540	
2001/07		0.50	0.9615	0.9615		116	41.87	4,407,694	4,780,012	
2002/01		0.60	1.0301	1.0301		116	41.87	4,428,434	4,829,196	
2002/07		0.60	0.8337	0.8337		116	41.87	4,445,297	4,869,448	
2003/01		0.70	1.3271	1.3271		116	41.87	4,476,735	4,934,060	
2003/07	19,850	0.70	1.1664	1.1664		116	43.46	4,525,468	4,991,596	
2004/01		0.80	1.1103	1.1103		116	43.46	4,557,230	5,047,044	
2004/07		0.80	0.8378	0.8378		116	44.97	4,582,203	5,089,384	
2005/01		0.90	0.8595	0.8595		116	44.97	4,611,187	5,133,116	
2005/07		0.90	0.7364	0.7364		116	45.98	4,636,738	5,170,932	
2006/01		1.00	0.9068	0.9068		116	45.98	4,671,888	5,217,796	
2006/07	50,836	1.00	0.8133	0.8133		116	52.47	4,758,973	5,260,252	
2007/01		1.00	1.0133	1.0133		116	52.47	4,804,977	5,313,496	
2007/07		1.00	1.1050	1.1050		116	55.71	4,858,072	5,372,192	
2008/01		1.00	0.8556	0.8556		116	55.71	4,899,638	5,418,128	
2008/07		1.00	0.6104	0.6104		116	56.79	4,929,545	5,451,188	
2009/01		1.00	1.3268	1.3268		116	56.79	4,994,950	5,523,572	
2009/07		1.00	0.6841	0.6841		116	56.79	5,029,120	5,561,388	
2010/01		1.00	0.8643	0.8643		116	56.79	5,072,587	5,609,412	
2010/07		1.00	0.7107	0.7107		116	51.18	5,106,134	5,649,316	
2011/01		1.00	0.9198	0.9198		116	51.18	5,149,838	5,701,284	



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214.82

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07		1.00	0.9028	0.9028		116	51.18	5,193,102	5,752,788	
2012/01		1.00	0.3865	0.3865		116	51.69	5,211,965	5,775,060	
2012/07		1.00	0.9417	0.9417		116	51.69	5,258,092	5,829,464	
2013/01		1.00	0.4901	0.4901		116	49.96	5,281,500	5,858,000	
2013/07		1.00	0.6196	0.6196		116	49.96	5,311,225	5,894,308	
2014/01		1.00	0.8564	0.8564		116	51.39	5,353,725	5,944,768	
2014/07		1.00	1.2383	1.2383		116	51.39	5,415,669	6,018,428	
2015/01		1.00	0.7571	0.7571		116	51.45	5,454,025	6,064,016	
2015/09		1.00	1.5736	1.5736		116	51.45	5,534,310	6,159,484	
2016/09		1.00	1.9890	1.9890		116	62.09	5,644,387	6,281,980	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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199.54

Consulate Health Care of Kissimmee

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2511 JOHN YOUNG PARKWAY	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
KISSIMMEE, FL 34741	Days in CR 365	Maximum: 43,800	Standard: 366
County: Osceola [49]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 42,905	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 12,951	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,789	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	64.76867%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.95662%	Cost: 1.07573004
Open Date: 08/20/1999	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/20/1999	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 08/20/1999	Low Occupancy Adjustment Factor:	123.88282%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319511			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,294,064	1,928,154	1,065,768	1,012,353		5,300,339	
1a	Audit Adjustments							
2	Cost Per Diem	46.5675	69.3855	38.3522	36.4300		190.7352	
3	Cost Per Diem Inflated	50.0941	73.6480	41.2566				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.0941	73.6480	41.2566	36.4300		201.4287	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.7693		59.0692				
7	Provider Target Rate	60.9829		62.3551				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	50.0941	73.6480	41.2566	13.6500		178.6487	
12/13	Medicaid Adjustment Rate		1.2236	0.6855				
14	Prospective Per Diem 11	50.0941	74.8716	41.9421	13.6500		180.5578	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Consulate Health Care of Kissimmee

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/20/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,762,891.00		Total Amount	Per Diem
RS to Start Calcs:	1999/07	Type:	Fixed	80% Capital(1):	4,788,136	10.6114
Indexed Asset Value	5,985,170	<60% of Base:	False	20% ROE(2):	1,197,034	0.6896
FRVS Base Asset:	4,661,520	Interest Rate:	6.2000%	Insurance Cost(3):	57,101	1.3309
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	68,827	1.6042
ROE Factor	0.022710	Amortization Rate:	6.2000%	Home Office(3):	46,449	1.0826
		Interest Only:	False	Replacement(3&4):	22,052	0.0000
		Yearly Payment:	418,301	Total FRVS PD:		15.3187

(1) 80% Capital (\$4,788,136) amortized at 6.2000 % for 20 years Principal & Interest of \$418,301 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.6114

(2) 20% ROE (\$1,197,034) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6896

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1999	Current RS PBS:	38,846
Comparison Bed	120	Effective PBS Limitation	54,155
			4,661,520

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.0941	50.0941	2.2727	47.8214
Direct Care	74.8716	74.8716	3.3969	71.4747
Indirect Care	41.9421	41.9421	1.9029	40.0392
Property	13.6500	15.3187	0.6950	14.6237
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.3952
Supplemental Rate				8.1814
Totals	180.5578	182.2265	8.2675	199.5356

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07	7,151,465	0.00	1.2299	1.2299		120	52.69	4,661,520	4,661,520	1
2000/01	10,389	0.10	1.3356	1.3356		120	52.69	4,677,875	4,781,880	
2000/07		0.10	1.1129	1.1129		120	52.69	4,682,863	4,835,040	
2001/01	36,966	0.20	1.2976	1.2976		120	65.55	4,731,981	4,897,800	
2001/07		0.20	0.9615	0.9615		120	65.55	4,741,081	4,944,840	
2002/01		0.30	1.0301	1.0301		120	65.55	4,755,731	4,995,720	
2002/07		0.30	0.8337	0.8337		120	65.55	4,767,625	5,037,360	
2003/01		0.40	1.3271	1.3271		120	65.55	4,792,932	5,104,200	
2003/07		0.40	1.1664	1.1664		120	65.74	4,815,296	5,163,720	
2004/01		0.50	1.1103	1.1103		120	65.74	4,842,031	5,221,080	
2004/07		0.50	0.8378	0.8378		120	62.92	4,862,314	5,264,880	
2005/01		0.60	0.8595	0.8595		120	62.92	4,887,389	5,310,120	
2005/07	20,675	0.60	0.7364	0.7364		120	59.15	4,929,656	5,349,240	
2006/01		0.70	0.9068	0.9068		120	59.15	4,960,949	5,397,720	
2006/07	51,027	0.70	0.8133	0.8133		120	59.69	5,040,219	5,441,640	
2007/01		0.80	1.0133	1.0133		120	59.69	5,081,075	5,496,720	
2007/07		0.80	1.1050	1.1050		120	58.82	5,125,992	5,557,440	
2008/01		0.90	0.8556	0.8556		120	58.82	5,165,462	5,604,960	
2008/07		0.90	0.6104	0.6104		120	58.82	5,193,841	5,639,160	
2009/01		1.00	1.3268	1.3268		120	58.82	5,262,753	5,714,040	
2009/07		1.00	0.6841	0.6841		120	58.82	5,298,755	5,753,160	
2010/01		1.00	0.8643	0.8643		120	58.82	5,344,552	5,802,840	
2010/07		1.00	0.7107	0.7107		120	61.48	5,382,536	5,844,120	
2011/01		1.00	0.9198	0.9198		120	61.48	5,432,045	5,897,880	
2011/07		1.00	0.9028	0.9028		120	61.48	5,481,086	5,951,160	
2012/01		1.00	0.3865	0.3865		120	58.90	5,502,270	5,974,200	
2012/07		1.00	0.9417	0.9417		120	58.90	5,554,085	6,030,480	
2013/01		1.00	0.4901	0.4901		120	58.14	5,581,306	6,060,000	
2013/07		1.00	0.6196	0.6196		120	58.14	5,615,888	6,097,560	
2014/01		1.00	0.8564	0.8564		120	62.23	5,663,982	6,149,760	



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199.54

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		1.00	1.2383	1.2383		120	62.23	5,734,119	6,225,960	
2015/01		1.00	0.7571	0.7571		120	59.19	5,777,532	6,273,120	
2015/09		1.00	1.5736	1.5736		120	59.19	5,868,447	6,371,880	
2016/09		1.00	1.9890	1.9890		120	64.77	5,985,170	6,498,600	

Message Code:

1 Per Bed Standard Limitation

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193.05

Consulate Health Care of Lakeland

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5245 N SOCRUM LOOP RD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
LAKELAND, FL 33809	Days in CR 365	Maximum: 43,800	Standard: 343
County: Polk [53]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 23
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 41,441	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,766	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 30,748	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	74.19705%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.61416%	Cost: 1.07573004
Open Date: 12/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 12/01/1984	Low Occupancy Adjustment Factor:	119.65571%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319953			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,438,954	1,887,827	1,212,574	1,167,809		5,707,164	
1a	Audit Adjustments							
2	Cost Per Diem	46.7983	61.3967	39.4359	37.9800		185.6109	
3	Cost Per Diem Inflated	50.3423	65.1684	42.4224				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.3423	65.1684	42.4224	37.9800		195.9131	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.9715		59.0692				
7	Provider Target Rate	65.4189		62.3551				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	50.3423	65.1684	42.4224	13.6500		171.5831	
12/13	Medicaid Adjustment Rate		1.6625	1.0822				
14	Prospective Per Diem 11	50.3423	66.8309	43.5046	13.6500		174.3278	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Consulate Health Care of Lakeland

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	04/01/1998	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	None	80% Capital(1):	3,344,888	7.1477
Indexed Asset Value	4,181,110	<60% of Base:	True	20% ROE(2):	836,222	0.4818
FRVS Base Asset:	2,134,715	Interest Rate:	8.5000%	Insurance Cost(3):	58,620	1.4145
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	62,209	1.5011
ROE Factor	0.022710	Amortization Rate:	8.5000%	Home Office(3):	39,883	0.9624
		Interest Only:	True	Replacement(3&4):	41,199	0.0000
		Yearly Payment:	281,762	Total FRVS PD:		11.5075

(1) 80% Capital (\$3,344,888) amortized at 8.5000 % for 20 years Interest of \$281,762 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.1477

(2) 20% ROE (\$836,222) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4818

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	28,500
Comparison Date:	07/01/1985	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.3423	50.3423	2.2840	48.0583
Direct Care	66.8309	66.8309	3.0321	63.7988
Indirect Care	43.5046	43.5046	1.9738	41.5308
Property	13.6500	11.5075	0.5221	10.9854
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.4980
Supplemental Rate				8.1814
Totals	174.3278	172.1853	7.8120	193.0527

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	2,130,550	0.00	1.9179	1.9179		120	53.76	2,130,550	3,352,680	
1985/01		0.10	1.1471	1.1471		120	53.76	2,132,939	3,391,080	
1985/10		0.10	0.8522	0.8522		120	53.76	2,134,715	3,420,000	
1986/01		0.20	0.8299	0.8299		120	53.76	2,138,179	3,448,440	
1986/07		0.20	0.2974	0.2974		120	53.76	2,139,423	3,441,840	
1987/01		0.30	1.0091	1.0091		120	53.76	2,145,753	3,503,400	
1987/07		0.30	0.9007	0.9007		120	56.80	2,151,551	3,530,760	
1988/01		0.40	0.9007	0.9007		120	56.80	2,159,303	3,559,440	
1988/07		0.40	0.5899	0.5899		120	51.63	2,164,087	3,557,520	
1989/01		0.50	0.5899	0.5899		120	51.63	2,170,080	3,578,520	
1989/07	260,223	0.50	0.5899	0.5899		120	47.41	2,435,821	3,602,760	
1990/01		0.60	0.5899	0.5899		120	47.05	2,443,195	3,620,880	
1990/07		0.60	0.5899	0.5899		120	47.05	2,443,195	3,642,240	5
1991/01		0.70	0.5899	0.5899		120	57.42	2,450,592	3,663,600	5
1991/07		0.70	1.4932	1.4932		120	57.42	2,486,429	3,718,320	
1992/01		0.80	2.0117	2.0117		120	76.47	2,526,446	3,793,080	
1992/07		0.80	1.8152	1.8152		120	76.47	2,563,135	3,861,960	
1993/01		0.90	1.7710	1.7710		120	76.47	2,603,989	3,930,360	
1993/07		0.90	1.5329	1.5329		120	82.75	2,639,914	3,990,600	
1994/01		1.00	1.6983	1.6983		120	83.77	2,684,748	4,058,400	
1994/07		1.00	1.5991	1.5991		120	83.77	2,727,680	4,123,320	
1995/01		1.00	1.5812	1.5812		120	83.77	2,770,810	4,188,480	
1995/07	25,438	1.00	1.5250	1.5250		120	73.62	2,838,503	4,252,320	
1996/01		1.00	1.7228	1.7228		120	73.62	2,887,405	4,325,640	
1996/07		1.00	1.3294	1.3294		120	74.52	2,925,790	4,383,120	
1997/01		1.00	1.4109	1.4109		120	80.04	2,967,070	4,444,920	
1997/07		1.00	1.0917	1.0917		120	80.04	2,999,462	4,493,400	
1998/01		1.00	1.1663	1.1663		120	82.02	3,034,445	4,545,840	
1998/07		1.00	1.0794	1.0794		120	82.02	3,067,199	4,594,920	
1999/01		1.00	1.4499	1.4499		120	82.02	3,111,670	4,661,520	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		120	82.02	3,149,940	4,718,880	
2000/01		1.00	1.3356	1.3356		120	82.02	3,192,011	4,781,880	
2000/07		1.00	1.1129	1.1129		120	76.97	3,227,535	4,835,040	
2001/01		1.00	1.2976	1.2976		120	76.97	3,269,415	4,897,800	
2001/07	45,288	1.00	0.9615	0.9615		120	71.32	3,346,138	4,944,840	
2002/01		1.00	1.0301	1.0301		120	71.32	3,380,607	4,995,720	
2002/07		1.00	0.8337	0.8337		120	66.97	3,408,791	5,037,360	
2003/01		1.00	1.3271	1.3271		120	66.97	3,454,029	5,104,200	
2003/07		1.00	1.1664	1.1664		120	66.97	3,494,317	5,163,720	
2004/01		1.00	1.1103	1.1103		120	66.97	3,533,114	5,221,080	
2004/07	39,061	1.00	0.8378	0.8378		120	61.42	3,601,775	5,264,880	
2005/01	30,296	0.95	0.8595	0.8595		120	63.89	3,661,479	5,310,120	
2005/07		0.95	0.7364	0.7364		120	63.89	3,687,095	5,349,240	
2006/01		0.90	0.9068	0.9068		120	64.74	3,717,185	5,397,720	
2006/07		0.90	0.8133	0.8133		120	64.74	3,744,395	5,441,640	
2007/01		0.85	1.0133	1.0133		120	64.74	3,776,645	5,496,720	
2007/07		0.85	1.1050	1.1050		120	69.15	3,812,119	5,557,440	
2008/01		0.80	0.8556	0.8556		120	69.15	3,838,213	5,604,960	
2008/07		0.80	0.6104	0.6104		120	69.15	3,856,955	5,639,160	
2009/01		0.75	1.3268	1.3268		120	69.64	3,895,336	5,714,040	
2009/07		0.75	0.6841	0.6841		120	69.64	3,915,323	5,753,160	
2010/01		0.70	0.8643	0.8643		120	72.84	3,939,011	5,802,840	
2010/07		0.70	0.7107	0.7107		120	72.84	3,958,608	5,844,120	
2011/01		0.65	0.9198	0.9198		120	72.84	3,982,277	5,897,880	
2011/07		0.65	0.9028	0.9028		120	68.19	4,005,645	5,951,160	
2012/01		0.60	0.3865	0.3865		120	68.19	4,014,934	5,974,200	
2012/07		0.60	0.9417	0.9417		120	68.19	4,037,618	6,030,480	
2013/01		0.55	0.4901	0.4901		120	69.30	4,048,503	6,060,000	
2013/07		0.55	0.6196	0.6196		120	69.30	4,062,300	6,097,560	
2014/01		0.50	0.8564	0.8564		120	65.75	4,079,695	6,149,760	



Florida Agency for Health Care Administration
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Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

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193.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	65.75	4,104,956	6,225,960	
2015/01		0.45	0.7571	0.7571		120	70.07	4,118,942	6,273,120	
2015/09		0.45	1.5736	1.5736		120	70.07	4,148,108	6,371,880	
2016/09		0.40	1.9890	1.9890		120	74.20	4,181,110	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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ID: 080391123120140101201411112015084851



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0080393-00 - 2016/09

200.19

Consulate Health Care of Lake Parker

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2020 W LAKE PARKER DR	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
LAKELAND, FL 33805-5005	Days in CR 365	Maximum: 43,800	Standard: 366
County: Polk [53]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 41,736	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 10,604	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 26,668	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	63.89688%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.28767%	Cost: 1.07573004
Open Date: 04/12/1990	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/12/1990	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 05/14/1990	Low Occupancy Adjustment Factor:	120.50747%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319678			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,248,491	1,690,918	1,061,321	985,383		4,986,113	
1a	Audit Adjustments							
2	Cost Per Diem	46.8161	63.4063	39.7975	36.9500		186.9699	
3	Cost Per Diem Inflated	50.3615	67.3015	42.8114				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.3615	67.3015	42.8114	36.9500		197.4244	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	60.3740		59.0935				
7	Provider Target Rate	63.7325		62.3808				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	50.3615	67.3015	42.8114	13.6500		174.1244	
12/13	Medicaid Adjustment Rate		1.0522	0.6693				
14	Prospective Per Diem 11	50.3615	68.3537	43.4807	13.6500		175.8459	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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200.19

Consulate Health Care of Lake Parker

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/14/1990		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,316,600.00		Total Amount	Per Diem
RS to Start Calcs:	1990/01	Type:	Variable	80% Capital(1):	4,987,441	15.0560
Indexed Asset Value	6,234,301	<60% of Base:	False	20% ROE(2):	1,246,860	0.7183
FRVS Base Asset:	3,602,760	Interest Rate:	10.4000%	Insurance Cost(3):	37,437	0.8970
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	56,860	1.3624
ROE Factor	0.022710	Amortization Rate:	10.4000%	Home Office(3):	42,498	1.0183
		Interest Only:	False	Replacement(3&4):	28,173	0.0000
		Yearly Payment:	593,509	Total FRVS PD:		19.0520

(1) 80% Capital (\$4,987,441) amortized at 10.4000 % for 20 years Principal & Interest of \$593,509 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$15.0560

(2) 20% ROE (\$1,246,860) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7183

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1989	Current RS PBS:	30,023
Comparison Bed	120	Effective PBS Limitation	54,155
			3,602,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.3615	50.3615	2.2849	48.0766
Direct Care	68.3537	68.3537	3.1012	65.2525
Indirect Care	43.4807	43.4807	1.9727	41.5080
Property	13.6500	19.0520	0.8644	18.1876
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.9838
Supplemental Rate				8.1814
Totals	175.8459	181.2479	8.2232	200.1899

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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200.19

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1990/01	4,170,124	0.00	0.5899	0.5899		120	40.34	3,602,760	3,602,760	1
1990/07		0.10	0.5899	0.5899		120	40.34	3,604,319	3,642,240	
1991/01		0.10	0.5899	0.5899		120	40.34	3,605,879	3,663,600	
1991/07	60,683	0.20	1.4932	1.4932		120	40.34	3,674,459	3,718,320	
1992/01		0.20	2.0117	2.0117		120	40.34	3,685,301	3,793,080	
1992/07		0.30	1.8152	1.8152		120	40.25	3,699,989	3,861,960	
1993/01	70,787	0.30	1.7710	1.7710		120	52.54	3,789,555	3,930,360	
1993/07		0.40	1.5329	1.5329		120	52.54	3,811,753	3,990,600	
1994/01	125,664	0.40	1.6983	1.6983		120	49.21	3,960,584	4,058,400	
1994/07		0.50	1.5991	1.5991		120	49.21	3,988,919	4,123,320	
1995/01	39,404	0.50	1.5812	1.5812		120	45.44	4,054,378	4,188,480	
1995/07		0.60	1.5250	1.5250		120	45.44	4,085,027	4,252,320	
1996/01	81,882	0.60	1.7228	1.7228		120	40.46	4,197,973	4,325,640	
1996/07		0.70	1.3294	1.3294		120	40.46	4,226,712	4,383,120	
1997/01	47,231	0.70	1.4109	1.4109		120	42.20	4,273,943	4,444,920	5
1997/07		0.80	1.0917	1.0917		120	42.20	4,334,827	4,493,400	
1998/01	46,364	0.80	1.1663	1.1663		120	43.75	4,413,362	4,545,840	
1998/07		0.90	1.0794	1.0794		120	43.75	4,447,468	4,594,920	
1999/01	36,291	0.90	1.4499	1.4499		120	40.65	4,526,652	4,661,520	
1999/07		1.00	1.2299	1.2299		120	56.62	4,582,325	4,718,880	
2000/01		1.00	1.3356	1.3356		120	56.62	4,643,527	4,781,880	
2000/07	28,832	1.00	1.1129	1.1129		120	56.62	4,724,037	4,835,040	
2001/01		1.00	1.2976	1.2976		120	56.62	4,785,336	4,897,800	
2001/07		1.00	0.9615	0.9615		120	56.62	4,831,347	4,944,840	
2002/01	26,424	1.00	1.0301	1.0301		120	57.87	4,907,539	4,995,720	
2002/07		1.00	0.8337	0.8337		120	57.87	4,948,453	5,037,360	
2003/01		1.00	1.3271	1.3271		120	57.87	5,014,124	5,104,200	
2003/07		1.00	1.1664	1.1664		120	59.05	5,072,609	5,163,720	
2004/01		1.00	1.1103	1.1103		120	59.05	5,128,930	5,221,080	
2004/07		1.00	0.8378	0.8378		120	62.79	5,171,900	5,264,880	



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200.19

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2005/01		1.00	0.8595	0.8595		120	62.79	5,216,352	5,310,120	
2005/07		1.00	0.7364	0.7364		120	58.34	5,254,765	5,349,240	
2006/01		1.00	0.9068	0.9068		120	58.34	5,302,415	5,397,720	
2006/07		1.00	0.8133	0.8133		120	55.11	5,345,540	5,441,640	
2007/01		1.00	1.0133	1.0133		120	55.11	5,399,706	5,496,720	
2007/07		1.00	1.1050	1.1050		120	55.75	5,459,373	5,557,440	
2008/01		1.00	0.8556	0.8556		120	55.75	5,506,083	5,604,960	
2008/07		1.00	0.6104	0.6104		120	54.77	5,539,552	5,639,160	
2009/01		1.00	1.3268	1.3268		120	54.77	5,612,743	5,714,040	
2009/07		1.00	0.6841	0.6841		120	63.34	5,651,140	5,753,160	
2010/01		1.00	0.8643	0.8643		120	63.34	5,699,983	5,802,840	
2010/07		0.95	0.7107	0.7107		120	63.34	5,738,469	5,844,120	
2011/01		0.95	0.9198	0.9198		120	62.23	5,788,612	5,897,880	
2011/07		0.90	0.9028	0.9028		120	62.23	5,835,644	5,951,160	
2012/01		0.90	0.3865	0.3865		120	60.13	5,855,946	5,974,200	
2012/07		0.85	0.9417	0.9417		120	63.56	5,902,817	6,030,480	
2013/01		0.85	0.4901	0.4901		120	63.56	5,927,408	6,060,000	
2013/07		0.80	0.6196	0.6196		120	63.56	5,956,790	6,097,560	
2014/01		0.80	0.8564	0.8564		120	56.52	5,997,600	6,149,760	
2014/07		0.75	1.2383	1.2383		120	56.52	6,053,300	6,225,960	
2015/01		0.75	0.7571	0.7571		120	64.14	6,087,671	6,273,120	
2015/09		0.70	1.5736	1.5736		120	64.14	6,154,727	6,371,880	
2016/09		0.65	1.9890	1.9890		120	63.90	6,234,301	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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208.75

Consulate Health Care of Melbourne

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3033 SARNO RD	1/1/2014-12/31/2014	Number of Beds: 167	Superior: 0
MELBOURNE, FL 32934	Days in CR 365	Maximum: 60,955	Standard: 366
County: Brevard [5]	First Used : 2016/09	Max Annualized: 60,955	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 53,557	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 16,004	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 29,679	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	55.41573%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	87.86318%	Cost: 1.07573004
Open Date: 08/01/1994	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1994	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 08/19/1994	Low Occupancy Adjustment Factor:	111.11794%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319520			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,436,995	1,951,255	1,395,267	1,225,446		6,008,963	
1a	Audit Adjustments							
2	Cost Per Diem	48.4179	65.7453	47.0119	41.2900		202.4651	
3	Cost Per Diem Inflated	52.0846	69.7842	50.5721				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.0846	69.7842	50.5721	41.2900		213.7309	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.9722		60.4899				
7	Provider Target Rate	63.3083		63.8548				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	52.0846	69.7842	50.5721	13.6500		186.0909	
12/13	Medicaid Adjustment Rate		0.4252	0.3081				
14	Prospective Per Diem 11	52.0846	70.2094	50.8802	13.6500		186.8242	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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208.75

Consulate Health Care of Melbourne

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/19/1994		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	8,789,000.00		Total Amount	Per Diem
RS to Start Calcs:	1994/07	Type:	Variable	80% Capital(1):	6,305,162	13.6771
Indexed Asset Value	7,881,452	<60% of Base:	False	20% ROE(2):	1,576,290	0.6525
FRVS Base Asset:	5,597,125	Interest Rate:	10.4000%	Insurance Cost(3):	58,987	1.1014
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	90,589	1.6915
ROE Factor	0.022710	Amortization Rate:	10.4000%	Home Office(3):	62,225	1.1618
		Interest Only:	False	Replacement(3&4):	42,304	0.0000
		Yearly Payment:	750,318	Total FRVS PD:		18.2843

(1) 80% Capital (\$6,305,162) amortized at 10.4000 % for 20 years Principal & Interest of \$750,318 divided by annual available days (60955) divided by Occup. Adj. (0.90) = \$13.6771

(2) 20% ROE (\$1,576,290) times the ROE factor (0.022710) divided by annual available days (60955) divided by Occup. Adj. (0.90) = \$0.6525

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1994	Current RS PBS:	34,361
Comparison Bed	120	Effective PBS Limitation	54,155
			4,123,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.0846	52.0846	2.3631	49.7215
Direct Care	70.2094	70.2094	3.1854	67.0240
Indirect Care	50.8802	50.8802	2.3084	48.5718
Property	13.6500	18.2843	0.8295	17.4548
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.7942
Supplemental Rate				8.1814
Totals	186.8242	191.4585	8.6864	208.7477

Medicaid Trend Adjustment



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208.75

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/07	5,597,125	0.00	1.5991	1.5991		120	31.31	5,597,125	4,123,320	
1995/01	40,264	0.10	1.5812	1.5812		120	31.31	4,123,320	4,123,320	1
1995/07		0.10	1.5250	1.5250		120	31.31	4,126,900	4,252,320	
1996/01		0.20	1.7228	1.7228		120	31.31	4,134,996	4,325,640	
1996/07		0.20	1.3294	1.3294		120	31.31	4,141,255	4,383,120	
1997/01	69,868	0.30	1.4109	1.4109		120	31.26	4,221,086	4,444,920	
1997/07		0.30	1.0917	1.0917		120	31.26	4,228,943	4,493,400	
1998/01	56,127	0.40	1.1663	1.1663		120	32.09	4,296,580	4,545,840	
1998/07		0.40	1.0794	1.0794		120	32.09	4,307,405	4,594,920	
1999/01	24,738	0.50	1.4499	1.4499		120	29.35	4,348,808	4,661,520	
1999/07		0.50	1.2299	1.2299		167	46.30	4,371,323	6,567,108	
2000/01	1,788,446	0.60	1.3356	1.3356		167	46.30	6,189,259	6,654,783	
2000/07	11,713	0.60	1.1129	1.1129		167	46.30	6,235,761	6,728,764	
2001/01		0.70	1.2976	1.2976		167	46.30	6,283,441	6,816,105	
2001/07		0.70	0.9615	0.9615		167	46.30	6,319,045	6,881,569	
2002/01		0.80	1.0301	1.0301		167	46.30	6,362,883	6,952,377	
2002/07		0.80	0.8337	0.8337		167	46.73	6,398,942	7,010,326	
2003/01		0.90	1.3271	1.3271		167	46.73	6,463,879	7,103,345	
2003/07		0.90	1.1664	1.1664		167	46.73	6,521,533	7,186,177	
2004/01		1.00	1.1103	1.1103		167	46.73	6,583,054	7,266,003	
2004/07		1.00	0.8378	0.8378		167	46.01	6,629,192	7,326,958	
2005/01		1.00	0.8595	0.8595		167	46.01	6,676,857	7,389,917	
2005/07		1.00	0.7364	0.7364		167	46.01	6,717,989	7,444,359	
2006/01		1.00	0.9068	0.9068		167	44.07	6,766,802	7,511,827	
2006/07		1.00	0.8133	0.8133		167	44.07	6,810,900	7,572,949	
2007/01		1.00	1.0133	1.0133		167	44.07	6,866,200	7,649,602	
2007/07		1.00	1.1050	1.1050		167	41.38	6,923,283	7,734,104	
2008/01		1.00	0.8556	0.8556		167	37.72	6,963,908	7,800,236	
2008/07		1.00	0.6104	0.6104		167	37.72	6,993,061	7,847,831	
2009/01		1.00	1.3268	1.3268		167	43.78	7,066,917	7,952,039	



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0 080394-00 - 2016/09

208.75

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07		1.00	0.6841	0.6841		167	43.78	7,105,399	8,006,481	
2010/01		1.00	0.8643	0.8643		167	47.35	7,158,269	8,075,619	
2010/07		1.00	0.7107	0.7107		167	47.35	7,202,067	8,133,067	
2011/01		1.00	0.9198	0.9198		167	47.35	7,259,098	8,207,883	
2011/07		1.00	0.9028	0.9028		167	47.94	7,316,221	8,282,031	
2012/01		1.00	0.3865	0.3865		167	47.94	7,340,868	8,314,095	
2012/07		1.00	0.9417	0.9417		167	47.94	7,401,123	8,392,418	
2013/01		1.00	0.4901	0.4901		167	47.86	7,432,687	8,433,500	
2013/07		1.00	0.6196	0.6196		167	47.86	7,472,761	8,485,771	
2014/01		1.00	0.8564	0.8564		167	42.13	7,521,782	8,558,416	
2014/07		1.00	1.2383	1.2383		167	42.13	7,593,129	8,664,461	
2015/01		0.95	0.7571	0.7571		167	48.77	7,641,553	8,730,092	
2015/09		0.95	1.5736	1.5736		167	48.77	7,742,847	8,867,533	
2016/09		0.90	1.9890	1.9890		167	55.42	7,881,452	9,043,885	

Message Code:

1 Per Bed Standard Limitation

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Report Calculated: 6/30/2016 8:16:40 AM

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191.41

Consulate Health Care of New Port Richey

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
8417 OLD COUNTY RD 54	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
NEW PORT RICHEY, FL 34653	Days in CR 365	Maximum: 43,800	Standard: 366
County: Pasco [51]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 41,937	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,145	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 29,222	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	69.68071%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.74658%	Cost: 1.07573004
Open Date: 04/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 04/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 04/01/1984	Low Occupancy Adjustment Factor:	121.08784%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319970			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,387,136	1,840,190	1,062,325	1,127,969		5,417,620	
1a	Audit Adjustments							
2	Cost Per Diem	47.4689	62.9728	36.3536	38.6000		185.3953	
3	Cost Per Diem Inflated	51.0637	66.8413	39.1067				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.0637	66.8413	39.1067	38.6000		195.6117	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.8956		59.0692				
7	Provider Target Rate	57.9493		62.3551				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	51.0637	66.8413	39.1067	13.6500		170.6617	
12/13	Medicaid Adjustment Rate		1.4799	0.8659				
14	Prospective Per Diem 11	51.0637	68.3212	39.9726	13.6500		173.0075	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Consulate Health Care of New Port Richey

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/1998	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	None	80% Capital(1):	3,220,261	6.8814
Indexed Asset Value	4,025,326	<60% of Base:	True	20% ROE(2):	805,065	0.4638
FRVS Base Asset:	2,097,277	Interest Rate:	8.5000%	Insurance Cost(3):	58,843	1.4031
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	58,392	1.3924
ROE Factor	0.022710	Amortization Rate:	8.5000%	Home Office(3):	40,658	0.9695
		Interest Only:	True	Replacement(3&4):	11,943	0.0000
		Yearly Payment:	271,264	Total FRVS PD:		11.1102

(1) 80% Capital (\$3,220,261) amortized at 8.5000 % for 20 years Interest of \$271,264 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$6.8814

(2) 20% ROE (\$805,065) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4638

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.0637	51.0637	2.3167	48.7470
Direct Care	68.3212	68.3212	3.0997	65.2215
Indirect Care	39.9726	39.9726	1.8135	38.1591
Property	13.6500	11.1102	0.5041	10.6061
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.4959
Supplemental Rate				8.1814
Totals	173.0075	170.4677	7.7340	191.4110

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	2,092,662	0.00	1.2952	1.2952		120	25.42	2,092,662	3,289,560	
1984/07		0.10	1.9179	1.9179		120	25.42	2,094,517	3,352,680	
1985/01		0.10	1.1471	1.1471		120	25.42	2,095,627	3,391,080	
1985/10		0.20	0.8522	0.8522		120	25.42	2,097,277	3,420,000	
1986/01		0.20	0.8299	0.8299		120	25.42	2,098,886	3,448,440	
1986/07		0.30	0.2974	0.2974		120	25.42	2,099,751	3,441,840	
1987/01		0.30	1.0091	1.0091		120	25.42	2,102,689	3,503,400	
1987/07		0.40	0.9007	0.9007		120	33.59	2,107,316	3,530,760	
1988/01		0.40	0.9007	0.9007		120	33.59	2,111,953	3,559,440	
1988/07		0.50	0.5899	0.5899		120	35.36	2,115,958	3,557,520	
1989/01	242,398	0.50	0.5899	0.5899		120	55.06	2,364,598	3,578,520	
1989/07		0.60	0.5899	0.5899		120	55.06	2,372,966	3,602,760	
1990/01		0.60	0.5899	0.5899		120	55.06	2,381,364	3,620,880	
1990/07		0.70	0.5899	0.5899		120	50.21	2,390,340	3,642,240	
1991/01		0.70	0.5899	0.5899		120	59.17	2,400,210	3,663,600	
1991/07		0.80	1.4932	1.4932		120	59.17	2,428,883	3,718,320	
1992/01		0.80	2.0117	2.0117		120	61.57	2,428,883	3,793,080	5
1992/07		0.90	1.8152	1.8152		120	61.57	2,508,292	3,861,960	
1993/01		0.90	1.7710	1.7710		120	61.57	2,548,272	3,930,360	
1993/07		1.00	1.5329	1.5329		120	66.31	2,587,334	3,990,600	
1994/01		1.00	1.6983	1.6983		120	72.37	2,587,334	4,058,400	5
1994/07		1.00	1.5991	1.5991		120	72.37	2,673,352	4,123,320	
1995/01		1.00	1.5812	1.5812		120	69.48	2,715,623	4,188,480	
1995/07		1.00	1.5250	1.5250		120	69.48	2,757,036	4,252,320	
1996/01		1.00	1.7228	1.7228		120	69.48	2,804,534	4,325,640	
1996/07		1.00	1.3294	1.3294		120	65.54	2,841,817	4,383,120	
1997/01		1.00	1.4109	1.4109		120	65.54	2,881,912	4,444,920	
1997/07		1.00	1.0917	1.0917		120	67.61	2,913,374	4,493,400	
1998/01		1.00	1.1663	1.1663		120	71.76	2,947,353	4,545,840	
1998/07		1.00	1.0794	1.0794		120	71.76	2,979,167	4,594,920	



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191.41

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01		1.00	1.4499	1.4499		120	71.76	3,022,362	4,661,520	
1999/07		1.00	1.2299	1.2299		120	71.76	3,059,534	4,718,880	
2000/01		1.00	1.3356	1.3356		120	71.76	3,100,397	4,781,880	
2000/07		1.00	1.1129	1.1129		120	71.76	3,134,901	4,835,040	
2001/01		1.00	1.2976	1.2976		120	70.05	3,175,579	4,897,800	
2001/07		1.00	0.9615	0.9615		120	70.05	3,206,112	4,944,840	
2002/01	31,582	1.00	1.0301	1.0301		120	63.96	3,270,720	4,995,720	
2002/07		1.00	0.8337	0.8337		120	63.96	3,297,988	5,037,360	
2003/01		1.00	1.3271	1.3271		120	63.96	3,341,756	5,104,200	
2003/07		1.00	1.1664	1.1664		120	62.79	3,380,734	5,163,720	
2004/01		1.00	1.1103	1.1103		120	62.79	3,418,270	5,221,080	
2004/07	49,200	0.95	0.8378	0.8378		120	60.02	3,494,676	5,264,880	
2005/01		0.95	0.8595	0.8595		120	60.02	3,523,210	5,310,120	
2005/07	22,946	0.90	0.7364	0.7364		120	61.76	3,569,508	5,349,240	
2006/01		0.90	0.9068	0.9068		120	61.76	3,598,639	5,397,720	
2006/07		0.85	0.8133	0.8133		120	65.31	3,623,516	5,441,640	
2007/01		0.85	1.0133	1.0133		120	65.31	3,654,725	5,496,720	
2007/07		0.80	1.1050	1.1050		120	65.26	3,687,033	5,557,440	
2008/01		0.80	0.8556	0.8556		120	65.26	3,712,271	5,604,960	
2008/07		0.75	0.6104	0.6104		120	61.13	3,729,266	5,639,160	
2009/01		0.75	1.3268	1.3268		120	61.13	3,766,376	5,714,040	
2009/07		0.70	0.6841	0.6841		120	63.15	3,784,413	5,753,160	
2010/01		0.70	0.8643	0.8643		120	63.15	3,807,309	5,802,840	
2010/07		0.65	0.7107	0.7107		120	59.20	3,824,899	5,844,120	
2011/01		0.65	0.9198	0.9198		120	59.20	3,847,768	5,897,880	
2011/07		0.60	0.9028	0.9028		120	59.20	3,868,611	5,951,160	
2012/01		0.60	0.3865	0.3865		120	66.34	3,877,582	5,974,200	
2012/07		0.55	0.9417	0.9417		120	66.34	3,897,664	6,030,480	
2013/01		0.55	0.4901	0.4901		120	74.21	3,908,172	6,060,000	
2013/07		0.50	0.6196	0.6196		120	74.21	3,920,280	6,097,560	



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191.41

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.50	0.8564	0.8564		120	66.70	3,937,067	6,149,760	
2014/07		0.45	1.2383	1.2383		120	66.70	3,959,004	6,225,960	
2015/01		0.45	0.7571	0.7571		120	67.00	3,972,492	6,273,120	
2015/09		0.40	1.5736	1.5736		120	67.00	3,997,495	6,371,880	
2016/09		0.35	1.9890	1.9890		120	69.68	4,025,326	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

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Report Calculated: 6/30/2016 8:16:40 AM

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195.89

Consulate Health Care of North Ft. Myers

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
991 PONDELLA RD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
NORTH FORT MYERS, FL 3390	Days in CR 365	Maximum: 43,800	Standard: 366
County: Lee [36]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 41,914	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 10,336	Inflation
Current Class South Large	Initial CR? False	Medicaid: 26,942	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	64.27924%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.69406%	Cost: 1.07573004
Open Date: 06/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 06/01/1985	Low Occupancy Adjustment Factor:	121.02142%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 320111			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,406,037	1,739,627	975,134	1,060,437		5,181,235	
1a	Audit Adjustments							
2	Cost Per Diem	52.1876	64.5693	36.1938	39.3600		192.3107	
3	Cost Per Diem Inflated	56.1398	68.5359	38.9348				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	56.1398	68.5359	38.9348	39.3600		202.9705	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	58.6726		61.8990				
7	Provider Target Rate	61.9364		65.3423				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	56.1398	68.5359	38.9348	13.6500		177.2605	
12/13	Medicaid Adjustment Rate		1.1010	0.6255				
14	Prospective Per Diem 11	56.1398	69.6369	39.5603	13.6500		178.9870	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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195.89

Consulate Health Care of North Ft. Myers

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:	04/01/1998	Amount:	0.00	Total Amount	Per Diem
RS to Start Calcs:	1985/01	Type:	None	80% Capital(1):	3,103,352 6.6316
Indexed Asset Value	3,879,190	<60% of Base:	True	20% ROE(2):	775,838 0.4470
FRVS Base Asset:	2,181,402	Interest Rate:	8.5000%	Insurance Cost(3):	65,433 1.5611
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	85,759 2.0461
ROE Factor	0.022710	Amortization Rate:	8.5000%	Home Office(3):	54,044 1.2894
		Interest Only:	True	Replacement(3&4):	9,863 0.0000
		Yearly Payment:	261,416	Total FRVS PD:	11.9752

(1) 80% Capital (\$3,103,352) amortized at 8.5000 % for 20 years Interest of \$261,416 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$6.6316

(2) 20% ROE (\$775,838) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4470

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	78	Effective PBS Limitation	54,155
			2,223,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.1398	56.1398	2.5470	53.5928
Direct Care	69.6369	69.6369	3.1594	66.4775
Indirect Care	39.5603	39.5603	1.7948	37.7655
Property	13.6500	11.9752	0.5433	11.4319
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.4408
Supplemental Rate				8.1814
Totals	178.9870	177.3122	8.0445	195.8899

Medicaid Trend Adjustment



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195.89

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/01	2,180,045	0.00	1.1471	1.1471		78	40.19	2,180,045	2,204,202	
1985/10		0.10	0.8522	0.8522		78	40.19	2,181,402	2,223,000	
1986/01		0.10	0.8299	0.8299		78	40.19	2,182,725	2,241,486	
1986/07		0.20	0.2974	0.2974		78	40.19	2,183,674	2,237,196	
1987/01		0.20	1.0091	1.0091		78	40.19	2,186,894	2,277,210	
1987/07		0.30	0.9007	0.9007		78	40.19	2,191,212	2,294,994	
1988/01		0.30	0.9007	0.9007		78	54.98	2,197,131	2,313,636	
1988/07		0.40	0.5899	0.5899		78	51.28	2,201,966	2,312,388	
1989/01		0.40	0.5899	0.5899		78	51.28	2,201,966	2,326,038	5
1989/07		0.50	0.5899	0.5899		78	62.65	2,213,321	2,341,794	
1990/01		0.50	0.5899	0.5899		78	62.65	2,213,321	2,353,572	5
1990/07		0.60	0.5899	0.5899		78	61.65	2,219,850	2,367,456	5
1991/01		0.60	0.5899	0.5899		78	61.65	2,235,590	2,381,340	
1991/07		0.70	1.4932	1.4932		78	60.60	2,258,956	2,416,908	
1992/01		0.70	2.0117	2.0117		78	60.60	2,290,767	2,465,502	
1992/07		0.80	1.8152	1.8152		78	67.76	2,324,034	2,510,274	
1993/01		0.80	1.7710	1.7710		78	67.76	2,356,961	2,554,734	
1993/07		0.90	1.5329	1.5329		78	67.43	2,389,478	2,593,890	
1994/01		0.90	1.6983	1.6983		78	67.43	2,426,001	2,637,960	
1994/07		1.00	1.5991	1.5991		78	72.28	2,464,795	2,680,158	
1995/01		1.00	1.5812	1.5812		78	72.28	2,503,768	2,722,512	
1995/07		1.00	1.5250	1.5250		120	77.00	2,541,950	4,252,320	
1996/01		1.00	1.7228	1.7228		120	77.00	2,585,743	4,325,640	
1996/07		1.00	1.3294	1.3294		120	76.91	2,620,118	4,383,120	
1997/01		1.00	1.4109	1.4109		120	76.91	2,657,085	4,444,920	
1997/07		1.00	1.0917	1.0917		120	82.89	2,686,092	4,493,400	
1998/01		1.00	1.1663	1.1663		120	80.09	2,717,420	4,545,840	
1998/07		1.00	1.0794	1.0794		120	80.09	2,746,752	4,594,920	
1999/01		1.00	1.4499	1.4499		120	80.09	2,786,577	4,661,520	
1999/07		1.00	1.2299	1.2299		120	80.09	2,820,849	4,718,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/01		1.00	1.3356	1.3356		120	80.09	2,858,524	4,781,880	
2000/07		1.00	1.1129	1.1129		120	80.09	2,890,337	4,835,040	
2001/01		1.00	1.2976	1.2976		120	80.86	2,927,842	4,897,800	
2001/07	30,791	1.00	0.9615	0.9615		120	79.05	2,986,784	4,944,840	
2002/01		1.00	1.0301	1.0301		120	79.05	3,017,551	4,995,720	
2002/07	72,156	1.00	0.8337	0.8337		120	79.20	3,114,864	5,037,360	
2003/01		1.00	1.3271	1.3271		120	79.20	3,156,201	5,104,200	
2003/07		1.00	1.1664	1.1664		120	79.20	3,193,015	5,163,720	
2004/01		1.00	1.1103	1.1103		120	79.20	3,228,467	5,221,080	
2004/07	57,160	1.00	0.8378	0.8378		120	73.31	3,312,675	5,264,880	
2005/01	21,930	1.00	0.8595	0.8595		120	72.75	3,363,077	5,310,120	
2005/07		0.95	0.7364	0.7364		120	72.75	3,386,605	5,349,240	
2006/01	20,210	0.95	0.9068	0.9068		120	67.14	3,435,991	5,397,720	
2006/07		0.90	0.8133	0.8133		120	67.14	3,461,142	5,441,640	
2007/01		0.90	1.0133	1.0133		120	67.14	3,492,708	5,496,720	
2007/07		0.85	1.1050	1.1050		120	65.23	3,525,515	5,557,440	
2008/01		0.85	0.8556	0.8556		120	64.63	3,551,156	5,604,960	
2008/07		0.80	0.6104	0.6104		120	64.63	3,568,496	5,639,160	
2009/01		0.80	1.3268	1.3268		120	65.76	3,606,372	5,714,040	
2009/07		0.75	0.6841	0.6841		120	65.76	3,624,876	5,753,160	
2010/01		0.75	0.8643	0.8643		120	60.25	3,648,372	5,802,840	
2010/07		0.70	0.7107	0.7107		120	60.25	3,666,523	5,844,120	
2011/01		0.70	0.9198	0.9198		120	60.25	3,690,132	5,897,880	
2011/07		0.65	0.9028	0.9028		120	55.28	3,711,786	5,951,160	
2012/01		0.65	0.3865	0.3865		120	55.28	3,721,110	5,974,200	
2012/07		0.60	0.9417	0.9417		120	55.69	3,742,134	6,030,480	
2013/01		0.60	0.4901	0.4901		120	55.69	3,753,140	6,060,000	
2013/07		0.55	0.6196	0.6196		120	55.69	3,765,931	6,097,560	
2014/01		0.55	0.8564	0.8564		120	58.51	3,783,669	6,149,760	
2014/07		0.50	1.2383	1.2383		120	58.51	3,807,097	6,225,960	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/01		0.50	0.7571	0.7571		120	61.98	3,807,097	6,273,120	5
2015/09		0.45	1.5736	1.5736		120	61.98	3,848,571	6,371,880	
2016/09		0.40	1.9890	1.9890		120	64.28	3,879,190	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 080400123120140101201411172015135946



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
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196.53

Consulate Health Care of Orange Park

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1215 KINGSLEY AVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
ORANGE PARK, FL 32073	Days in CR 365	Maximum: 43,800	Standard: 366
County: Clay [10]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 41,875	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,714	Inflation
Current Class North Large	Initial CR? False	Medicaid: 27,023	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	64.53254%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.60502%	Cost: 1.04651568
Open Date: 12/12/1989	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/12/1989	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 01/09/1990	Low Occupancy Adjustment Factor:	120.90882%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 319538			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,168,995	1,803,311	1,170,677	1,247,382		5,390,365	
1a	Audit Adjustments							
2	Cost Per Diem	43.2593	66.7325	43.3215	46.1600		199.4733	
3	Cost Per Diem Inflated	45.2715	69.4476	45.3366				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.2715	69.4476	45.3366	46.1600		206.2157	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	65.0165		56.7094				
7	Provider Target Rate	68.6332		59.8640				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	45.2715	69.4476	45.3366	13.6500		173.7057	
12/13	Medicaid Adjustment Rate		1.1354	0.7412				
14	Prospective Per Diem 11	45.2715	70.5830	46.0778	13.6500		175.5823	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Consulate Health Care of Orange Park

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/09/1990		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,137,363.00		Total Amount	Per Diem
RS to Start Calcs:	1989/07	Type:	Variable	80% Capital(1):	5,061,146	11.4869
Indexed Asset Value	6,326,432	<60% of Base:	False	20% ROE(2):	1,265,286	0.6487
FRVS Base Asset:	3,578,520	Interest Rate:	6.5012%	Insurance Cost(3):	43,375	1.0358
Occup Adj Factor	0.9000	Chase Rate:	4.5000%	Taxes Cost(3):	43,510	1.0390
ROE Factor	0.020210	Amortization Rate:	6.5000%	Home Office(3):	41,303	0.9863
		Interest Only:	False	Replacement(3&4):	97,452	0.0000
		Yearly Payment:	452,815	Total FRVS PD:		15.1967

(1) 80% Capital (\$5,061,146) amortized at 6.5000 % for 20 years Principal & Interest of \$452,815 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.4869

(2) 20% ROE (\$1,265,286) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6487

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,821
Comparison Date: 01/01/1989	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,578,520

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.2715	45.2715	2.0539	43.2176
Direct Care	70.5830	70.5830	3.2023	67.3807
Indirect Care	46.0778	46.0778	2.0905	43.9873
Property	13.6500	15.1967	0.6895	14.5072
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.2515
Supplemental Rate				8.1814
Totals	175.5823	177.1290	8.0362	196.5257

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1989/07	3,898,859	0.00	0.5899	0.5899		120	54.26	3,578,520	3,578,520	1
1990/01		0.10	0.5899	0.5899		120	54.26	3,580,603	3,620,880	
1990/07		0.10	0.5899	0.5899		120	54.26	3,582,687	3,642,240	
1991/01		0.20	0.5899	0.5899		120	54.26	3,586,858	3,663,600	
1991/07	107,667	0.20	1.4932	1.4932		120	54.26	3,705,091	3,718,320	
1992/01		0.30	2.0117	2.0117		120	54.26	3,727,150	3,793,080	
1992/07		0.30	1.8152	1.8152		120	54.26	3,747,175	3,861,960	
1993/01	91,096	0.40	1.7710	1.7710		120	54.80	3,864,719	3,930,360	
1993/07		0.40	1.5329	1.5329		120	54.80	3,888,331	3,990,600	
1994/01	162,786	0.50	1.6983	1.6983		120	51.75	4,082,186	4,058,400	
1994/07		0.50	1.5991	1.5991		120	51.75	4,112,898	4,123,320	
1995/01	90,572	0.60	1.5812	1.5812		120	45.13	4,235,487	4,188,480	
1995/07		0.60	1.5250	1.5250		120	45.13	4,267,287	4,252,320	
1996/01	72,208	0.70	1.7228	1.7228		120	45.70	4,382,256	4,325,640	
1996/07		0.70	1.3294	1.3294		120	45.70	4,383,120	4,383,120	8
1997/01	101,149	0.80	1.4109	1.4109		120	45.20	4,444,920	4,444,920	8
1997/07		0.80	1.0917	1.0917		120	45.20	4,476,825	4,493,400	
1998/01	66,917	0.90	1.1663	1.1663		120	52.43	4,545,840	4,545,840	8
1998/07		0.90	1.0794	1.0794		120	52.43	4,587,939	4,594,920	
1999/01	63,246	1.00	1.4499	1.4499		120	57.79	4,661,520	4,661,520	8
1999/07		1.00	1.2299	1.2299		120	57.79	4,718,852	4,718,880	
2000/01		1.00	1.3356	1.3356		120	61.85	4,781,877	4,781,880	
2000/07		1.00	1.1129	1.1129		120	61.85	4,835,040	4,835,040	8
2001/01	71,624	1.00	1.2976	1.2976		120	51.80	4,897,800	4,897,800	8
2001/07		1.00	0.9615	0.9615		120	51.80	4,942,152	4,944,840	
2002/01		1.00	1.0301	1.0301		120	51.80	4,990,099	4,995,720	
2002/07		1.00	0.8337	0.8337		120	51.80	5,029,281	5,037,360	
2003/01		1.00	1.3271	1.3271		120	51.80	5,092,141	5,104,200	
2003/07	45,173	1.00	1.1664	1.1664		120	47.80	5,163,720	5,163,720	8
2004/01		1.00	1.1103	1.1103		120	47.80	5,213,547	5,221,080	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2004/07	26,027	1.00	0.8378	0.8378		120	47.87	5,264,880	5,264,880	8
2005/01		1.00	0.8595	0.8595		120	47.87	5,304,265	5,310,120	
2005/07		1.00	0.7364	0.7364		120	55.51	5,343,326	5,349,240	
2006/01		1.00	0.9068	0.9068		120	55.51	5,391,779	5,397,720	
2006/07		1.00	0.8133	0.8133		120	59.02	5,435,630	5,441,640	
2007/01		1.00	1.0133	1.0133		120	59.02	5,435,630	5,496,720	5
2007/07		1.00	1.1050	1.1050		120	62.76	5,551,381	5,557,440	
2008/01		1.00	0.8556	0.8556		120	62.76	5,598,879	5,604,960	
2008/07		1.00	0.6104	0.6104		120	64.04	5,633,055	5,639,160	
2009/01		1.00	1.3268	1.3268		120	64.04	5,707,794	5,714,040	
2009/07		1.00	0.6841	0.6841		120	61.97	5,746,841	5,753,160	
2010/01		0.95	0.8643	0.8643		120	61.97	5,794,028	5,802,840	
2010/07		0.95	0.7107	0.7107		120	65.36	5,833,149	5,844,120	
2011/01		0.90	0.9198	0.9198		120	65.36	5,881,436	5,897,880	
2011/07		0.90	0.9028	0.9028		120	65.36	5,929,223	5,951,160	
2012/01		0.85	0.3865	0.3865		120	61.44	5,948,700	5,974,200	
2012/07		0.85	0.9417	0.9417		120	61.44	5,948,700	6,030,480	5
2013/01		0.80	0.4901	0.4901		120	63.87	6,019,825	6,060,000	
2013/07		0.80	0.6196	0.6196		120	63.87	6,049,665	6,097,560	
2014/01		0.75	0.8564	0.8564		120	62.31	6,088,522	6,149,760	
2014/07		0.75	1.2383	1.2383		120	62.31	6,145,066	6,225,960	
2015/01		0.70	0.7571	0.7571		120	58.83	6,177,635	6,273,120	
2015/09		0.70	1.5736	1.5736		120	58.83	6,245,682	6,371,880	
2016/09		0.65	1.9890	1.9890		120	64.53	6,326,432	6,498,600	

Message Code:

- | |
|--|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |
| 8 Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
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206.07

Consulate Health Care of Pensacola

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
235 WEST AIRPORT BLVD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
PENSACOLA, FL 32505	Days in CR 365	Maximum: 43,800	Standard: 366
County: Escambia [17]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 41,987	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 16,193	Inflation
Current Class North Large	Initial CR? False	Medicaid: 23,271	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	55.42430%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.86073%	Cost: 1.07573004
Open Date: 01/08/1997	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/08/1997	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 01/08/1997	Low Occupancy Adjustment Factor:	121.23221%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319686			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,078,608	1,592,227	991,707	863,820		4,526,362	
1a	Audit Adjustments							
2	Cost Per Diem	46.3499	68.4211	42.6156	37.1200		194.5066	
3	Cost Per Diem Inflated	49.8600	72.6243	45.8429				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.8600	72.6243	45.8429	37.1200		205.4472	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	65.6140		56.8424				
7	Provider Target Rate	69.2640		60.0044				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	49.8600	72.6243	45.8429	13.6500		181.9772	
12/13	Medicaid Adjustment Rate		0.4432	0.2797				
14	Prospective Per Diem 11	49.8600	73.0675	46.1226	13.6500		182.7001	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 080405-00 - 2016/09

206.07

Consulate Health Care of Pensacola

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/08/1997		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,316,600.00		Total Amount	Per Diem
RS to Start Calcs:	1997/01	Type:	Variable	80% Capital(1):	4,760,586	14.3712
Indexed Asset Value	5,950,733	<60% of Base:	False	20% ROE(2):	1,190,147	0.6856
FRVS Base Asset:	4,383,120	Interest Rate:	10.4000%	Insurance Cost(3):	43,910	1.0458
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	45,109	1.0744
ROE Factor	0.022710	Amortization Rate:	10.4000%	Home Office(3):	45,736	1.0893
		Interest Only:	False	Replacement(3&4):	14,464	0.0000
		Yearly Payment:	566,513	Total FRVS PD:		18.2663

(1) 80% Capital (\$4,760,586) amortized at 10.4000 % for 20 years Principal & Interest of \$566,513 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$14.3712

(2) 20% ROE (\$1,190,147) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6856

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1996	Current RS PBS:	36,526
Comparison Bed	120	Effective PBS Limitation	54,155
			4,383,120

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.8600	49.8600	2.2621	47.5979
Direct Care	73.0675	73.0675	3.3150	69.7525
Indirect Care	46.1226	46.1226	2.0926	44.0300
Property	13.6500	18.2663	0.8287	17.4376
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.0688
Supplemental Rate				8.1814
Totals	182.7001	187.3164	8.4984	206.0682

Medicaid Trend Adjustment



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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/01	6,453,731	0.00	1.4109	1.4109		120	48.82	4,383,120	4,383,120	1
1997/07	9,871	0.10	1.0917	1.0917		120	48.82	4,397,240	4,493,400	
1998/01	43,253	0.10	1.1663	1.1663		120	48.82	4,445,044	4,545,840	
1998/07		0.20	1.0794	1.0794		120	48.82	4,453,563	4,594,920	
1999/01		0.20	1.4499	1.4499		120	48.82	4,465,027	4,661,520	
1999/07		0.30	1.2299	1.2299		120	56.73	4,465,027	4,718,880	5
2000/01	18,232	0.30	1.3356	1.3356		120	56.73	4,517,692	4,781,880	
2000/07	44,033	0.40	1.1129	1.1129		120	56.73	4,581,838	4,835,040	
2001/01		0.40	1.2976	1.2976		120	56.73	4,605,618	4,897,800	
2001/07		0.50	0.9615	0.9615		120	56.73	4,605,618	4,944,840	5
2002/01		0.50	1.0301	1.0301		120	56.73	4,651,600	4,995,720	
2002/07		0.60	0.8337	0.8337		120	59.75	4,674,867	5,037,360	
2003/01		0.60	1.3271	1.3271		120	59.75	4,712,093	5,104,200	
2003/07		0.70	1.1664	1.1664		120	59.75	4,750,567	5,163,720	
2004/01		0.70	1.1103	1.1103		120	59.75	4,787,488	5,221,080	
2004/07		0.80	0.8378	0.8378		120	57.05	4,819,574	5,264,880	
2005/01		0.80	0.8595	0.8595		120	57.95	4,852,713	5,310,120	
2005/07		0.90	0.7364	0.7364		120	57.95	4,884,877	5,349,240	
2006/01	18,477	0.90	0.9068	0.9068		120	56.74	4,943,219	5,397,720	
2006/07		1.00	0.8133	0.8133		120	56.74	4,983,422	5,441,640	
2007/01		1.00	1.0133	1.0133		120	56.74	5,033,919	5,496,720	
2007/07		1.00	1.1050	1.1050		120	56.74	5,089,544	5,557,440	
2008/01		1.00	0.8556	0.8556		120	56.74	5,133,090	5,604,960	
2008/07		1.00	0.6104	0.6104		120	56.74	5,164,422	5,639,160	
2009/01		1.00	1.3268	1.3268		120	56.74	5,232,944	5,714,040	
2009/07		1.00	0.6841	0.6841		120	56.74	5,268,743	5,753,160	
2010/01		1.00	0.8643	0.8643		120	58.63	5,314,281	5,802,840	
2010/07		1.00	0.7107	0.7107		120	58.63	5,352,050	5,844,120	
2011/01		1.00	0.9198	0.9198		120	58.63	5,401,278	5,897,880	
2011/07		1.00	0.9028	0.9028		120	56.43	5,450,041	5,951,160	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/01		1.00	0.3865	0.3865		120	56.43	5,471,105	5,974,200	
2012/07		1.00	0.9417	0.9417		120	56.43	5,522,626	6,030,480	
2013/01		1.00	0.4901	0.4901		120	54.55	5,549,471	6,060,000	
2013/07		1.00	0.6196	0.6196		120	54.55	5,583,574	6,097,560	
2014/01		1.00	0.8564	0.8564		120	56.65	5,631,392	6,149,760	
2014/07		1.00	1.2383	1.2383		120	56.65	5,701,126	6,225,960	
2015/01		1.00	0.7571	0.7571		120	61.93	5,744,289	6,273,120	
2015/09		1.00	1.5736	1.5736		120	61.93	5,834,681	6,371,880	
2016/09		1.00	1.9890	1.9890		120	55.42	5,950,733	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

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197.08

Consulate Health Care of Safety Harbor

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1410 DR MARTIN LUTHER KIN SAFETY HARBOR, FL 34695-33	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
County: Pinellas [52]	Days in CR 365	Maximum: 43,800	Standard: 366
Region: Central Area: 5	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Control: Proprietary : Corporation	Last Used: 2016/09	Total Patient: 42,699	Total: 366
Current Class Central Large	Unaudited	Medicare: 7,263	Inflation
Class at 1/94: North Large	Initial CR? False	Medicaid: 32,876	FY Index: 1.34193004
Operating Ex > 18 months	Medicaid Utilization	76.99478%	Semester Index: 1.44355445
Open Date: 09/01/1985	Occupancy:	97.48630%	Cost: 1.07573004
Acquired Date: 09/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 09/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Med # Active Date: 10/01/2012	Low Occupancy Adjustment Factor:	123.28802%	DC Sem Index: 1.30450000
Previous Med # 319694	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,506,142	2,190,683	1,175,580	1,198,001		6,070,406	
1a	Audit Adjustments							
2	Cost Per Diem	45.8128	66.6347	35.7580	36.4400		184.6455	
3	Cost Per Diem Inflated	49.2822	70.7282	38.4660				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.2822	70.7282	38.4660	36.4400		194.9164	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.5441		59.1101				
7	Provider Target Rate	62.8564		62.3983				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	49.2822	70.7282	38.4660	13.6500		172.1264	
12/13	Medicaid Adjustment Rate		2.1480	1.1682				
14	Prospective Per Diem 11	49.2822	72.8762	39.6342	13.6500		175.4426	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Consulate Health Care of Safety Harbor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	01/01/2001	Amount:	4,016,483.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Variable	80% Capital(1):	4,865,754	11.1270
Indexed Asset Value	6,082,193	<60% of Base:	False	20% ROE(2):	1,216,439	0.7008
FRVS Base Asset:	3,420,000	Interest Rate:	7.2654%	Insurance Cost(3):	41,344	0.9683
Occup Adj Factor	0.9000	Chase Rate:	4.5956%	Taxes Cost(3):	46,491	1.0888
ROE Factor	0.022710	Amortization Rate:	6.5956%	Home Office(3):	39,805	0.9322
		Interest Only:	False	Replacement(3&4):	26,286	0.0000
		Yearly Payment:	438,626	Total FRVS PD:		14.8171

(1) 80% Capital (\$4,865,754) amortized at 6.5956 % for 20 years Principal & Interest of \$438,626 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.1270

(2) 20% ROE (\$1,216,439) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7008

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.2822	49.2822	2.2359	47.0463
Direct Care	72.8762	72.8762	3.3064	69.5698
Indirect Care	39.6342	39.6342	1.7982	37.8360
Property	13.6500	14.8171	0.6722	14.1449
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.2974
Supplemental Rate				8.1814
Totals	175.4426	176.6097	8.0127	197.0758

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	3,500,000	0.00	0.8522	0.8522		120	63.14	3,420,000	3,420,000	1
1986/01		0.10	0.8299	0.8299		120	63.14	3,422,839	3,448,440	
1986/07		0.10	0.2974	0.2974		120	64.70	3,423,856	3,441,840	
1987/01		0.20	1.0091	1.0091		120	64.70	3,430,765	3,503,400	
1987/07		0.20	0.9007	0.9007		120	64.70	3,436,944	3,530,760	
1988/01		0.30	0.9007	0.9007		120	64.70	3,446,231	3,559,440	
1988/07		0.30	0.5899	0.5899		120	64.70	3,452,331	3,557,520	
1989/01		0.40	0.5899	0.5899		120	64.70	3,460,479	3,578,520	
1989/07		0.40	0.5899	0.5899		120	67.20	3,468,646	3,602,760	
1990/01		0.50	0.5899	0.5899		120	67.20	3,478,879	3,620,880	
1990/07		0.50	0.5899	0.5899		120	66.56	3,489,142	3,642,240	
1991/01		0.60	0.5899	0.5899		120	66.56	3,501,490	3,663,600	
1991/07		0.60	1.4932	1.4932		120	66.56	3,532,860	3,718,320	
1992/01		0.70	2.0117	2.0117		120	66.56	3,582,610	3,793,080	
1992/07		0.70	1.8152	1.8152		120	66.56	3,628,131	3,861,960	
1993/01		0.80	1.7710	1.7710		120	66.56	3,679,534	3,930,360	
1993/07		0.80	1.5329	1.5329		120	72.88	3,724,656	3,990,600	
1994/01		0.90	1.6983	1.6983		120	72.88	3,781,587	4,058,400	
1994/07	24,150	0.90	1.5991	1.5991		120	72.10	3,860,162	4,123,320	
1995/01	21,940	1.00	1.5812	1.5812		120	69.03	3,943,139	4,188,480	
1995/07		1.00	1.5250	1.5250		120	69.03	4,003,272	4,252,320	
1996/01	23,695	1.00	1.7228	1.7228		120	67.28	4,095,935	4,325,640	
1996/07		1.00	1.3294	1.3294		120	67.28	4,150,386	4,383,120	
1997/01	76,210	1.00	1.4109	1.4109		120	68.83	4,285,154	4,444,920	
1997/07		1.00	1.0917	1.0917		120	68.83	4,331,935	4,493,400	
1998/01	41,256	1.00	1.1663	1.1663		120	72.79	4,423,714	4,545,840	
1998/07		1.00	1.0794	1.0794		120	72.79	4,471,464	4,594,920	
1999/01	18,940	1.00	1.4499	1.4499		120	79.72	4,490,404	4,661,520	5
1999/07		1.00	1.2299	1.2299		120	79.72	4,611,261	4,718,880	
2000/01		1.00	1.3356	1.3356		120	78.58	4,672,849	4,781,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		120	78.58	4,724,853	4,835,040	
2001/01	56,952	1.00	1.2976	1.2976		120	75.56	4,843,115	4,897,800	
2001/07		1.00	0.9615	0.9615		120	75.56	4,889,682	4,944,840	
2002/01		1.00	1.0301	1.0301		120	75.56	4,940,051	4,995,720	
2002/07		1.00	0.8337	0.8337		120	75.56	4,981,236	5,037,360	
2003/01		1.00	1.3271	1.3271		120	75.56	5,047,342	5,104,200	
2003/07		1.00	1.1664	1.1664		120	69.09	5,106,214	5,163,720	
2004/01		1.00	1.1103	1.1103		120	69.09	5,162,908	5,221,080	
2004/07	21,767	1.00	0.8378	0.8378		120	70.27	5,227,930	5,264,880	
2005/01		1.00	0.8595	0.8595		120	70.27	5,272,864	5,310,120	
2005/07		1.00	0.7364	0.7364		120	66.14	5,311,693	5,349,240	
2006/01		0.95	0.9068	0.9068		120	66.14	5,357,453	5,397,720	
2006/07		0.95	0.8133	0.8133		120	72.65	5,398,845	5,441,640	
2007/01		0.90	1.0133	1.0133		120	72.65	5,448,082	5,496,720	
2007/07		0.90	1.1050	1.1050		120	71.03	5,502,263	5,557,440	
2008/01		0.85	0.8556	0.8556		120	71.03	5,542,281	5,604,960	
2008/07		0.85	0.6104	0.6104		120	71.03	5,571,034	5,639,160	
2009/01		0.80	1.3268	1.3268		120	71.03	5,630,165	5,714,040	
2009/07		0.80	0.6841	0.6841		120	75.33	5,660,979	5,753,160	
2010/01		0.75	0.8643	0.8643		120	75.33	5,697,673	5,802,840	
2010/07		0.75	0.7107	0.7107		120	75.33	5,728,042	5,844,120	
2011/01		0.70	0.9198	0.9198		120	74.64	5,764,925	5,897,880	
2011/07		0.70	0.9028	0.9028		120	74.64	5,801,359	5,951,160	
2012/01		0.65	0.3865	0.3865		120	78.88	5,815,932	5,974,200	
2012/07		0.65	0.9417	0.9417		120	78.88	5,851,531	6,030,480	
2013/01		0.60	0.4901	0.4901		120	74.75	5,868,740	6,060,000	
2013/07		0.60	0.6196	0.6196		120	74.75	5,890,560	6,097,560	
2014/01		0.55	0.8564	0.8564		120	72.63	5,918,305	6,149,760	
2014/07		0.55	1.2383	1.2383		120	72.63	5,958,615	6,225,960	
2015/01		0.50	0.7571	0.7571		120	72.67	5,981,174	6,273,120	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		120	72.67	6,028,234	6,371,880	
2016/09		0.45	1.9890	1.9890		120	76.99	6,082,193	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

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202.97

Consulate Health Care of St. Petersburg

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
9393 PARK BLVD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
SEMINOLE, FL 33777-4140	Days in CR 365	Maximum: 43,800	Standard: 340
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 26
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 41,782	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 10,255	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,911	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	69.19487%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.39269%	Cost: 1.07573004
Open Date: 10/01/1995	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/03/1995	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 11/03/1995	Low Occupancy Adjustment Factor:	120.64029%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319708			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,379,510	1,984,503	1,133,677	1,111,628		5,609,318	
1a	Audit Adjustments							
2	Cost Per Diem	47.7157	68.6418	39.2127	38.4500		194.0202	
3	Cost Per Diem Inflated	51.3292	72.8586	42.1823				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.3292	72.8586	42.1823	38.4500		204.8201	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.2871		59.0692				
7	Provider Target Rate	59.4182		62.3551				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	51.3292	72.8586	42.1823	13.6500		180.0201	
12/13	Medicaid Adjustment Rate		1.4616	0.8462				
14	Prospective Per Diem 11	51.3292	74.3202	43.0285	13.6500		182.3279	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 080409-00 - 2016/09

202.97

Consulate Health Care of St. Petersburg

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 11/03/1995		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,950,549.00		Total Amount	Per Diem
RS to Start Calcs:	1995/07	Type:	Variable	80% Capital(1):	4,816,027	11.0133
Indexed Asset Value	6,020,034	<60% of Base:	False	20% ROE(2):	1,204,007	0.6936
FRVS Base Asset:	4,188,480	Interest Rate:	7.2655%	Insurance Cost(3):	49,406	1.1825
Occup Adj Factor	0.9000	Chase Rate:	4.5956%	Taxes Cost(3):	79,629	1.9058
ROE Factor	0.022710	Amortization Rate:	6.5956%	Home Office(3):	44,495	1.0649
		Interest Only:	False	Replacement(3&4):	46,871	0.0000
		Yearly Payment:	434,143	Total FRVS PD:		15.8601

(1) 80% Capital (\$4,816,027) amortized at 6.5956 % for 20 years Principal & Interest of \$434,143 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.0133

(2) 20% ROE (\$1,204,007) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6936

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1995	Current RS PBS:	34,904
Comparison Bed	120	Effective PBS Limitation	54,155
			4,188,480

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.3292	51.3292	2.3288	49.0004
Direct Care	74.3202	74.3202	3.3719	70.9483
Indirect Care	43.0285	43.0285	1.9522	41.0763
Property	13.6500	15.8601	0.7196	15.1405
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.6202
Supplemental Rate				8.1814
Totals	182.3279	184.5380	8.3725	202.9671

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

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202.97

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1995/07	6,758,121	0.00	1.5250	1.5250		120	17.27	4,188,480	4,188,480	1
1996/01	60,482	0.10	1.7228	1.7228		120	17.27	4,248,962	4,325,640	
1996/07		0.10	1.3294	1.3294		120	17.19	4,248,962	4,383,120	
1997/01		0.20	1.4109	1.4109		120	17.19	4,248,962	4,444,920	
1997/07		0.20	1.0917	1.0917		120	17.19	4,248,962	4,493,400	
1998/01	145,707	0.30	1.1663	1.1663		120	27.40	4,402,076	4,545,840	
1998/07		0.30	1.0794	1.0794		120	27.40	4,409,177	4,594,920	
1999/01	84,403	0.40	1.4499	1.4499		120	35.79	4,510,221	4,661,520	
1999/07		0.40	1.2299	1.2299		120	35.79	4,524,661	4,718,880	
2000/01		0.50	1.3356	1.3356		120	38.16	4,545,625	4,781,880	
2000/07		0.50	1.1129	1.1129		120	38.16	4,563,176	4,835,040	
2001/01	32,173	0.60	1.2976	1.2976		120	44.43	4,624,050	4,897,800	
2001/07		0.60	0.9615	0.9615		120	44.43	4,645,599	4,944,840	
2002/01		0.70	1.0301	1.0301		120	44.43	4,672,660	4,995,720	
2002/07		0.70	0.8337	0.8337		120	44.43	4,694,689	5,037,360	
2003/01		0.80	1.3271	1.3271		120	44.43	4,734,953	5,104,200	
2003/07	23,185	0.80	1.1664	1.1664		120	44.79	4,794,118	5,163,720	
2004/01		0.90	1.1103	1.1103		120	44.79	4,833,132	5,221,080	
2004/07	27,228	0.90	0.8378	0.8378		120	53.13	4,895,563	5,264,880	
2005/01		1.00	0.8595	0.8595		120	53.13	4,936,210	5,310,120	
2005/07		1.00	0.7364	0.7364		120	48.16	4,968,040	5,349,240	
2006/01		1.00	0.9068	0.9068		120	48.16	5,007,488	5,397,720	
2006/07		1.00	0.8133	0.8133		120	53.62	5,047,192	5,441,640	
2007/01		1.00	1.0133	1.0133		120	53.62	5,097,052	5,496,720	
2007/07		1.00	1.1050	1.1050		120	56.75	5,153,374	5,557,440	
2008/01		1.00	0.8556	0.8556		120	56.75	5,197,466	5,604,960	
2008/07		1.00	0.6104	0.6104		120	57.73	5,229,191	5,639,160	
2009/01		1.00	1.3268	1.3268		120	57.73	5,298,572	5,714,040	
2009/07		1.00	0.6841	0.6841		120	60.14	5,334,820	5,753,160	
2010/01		1.00	0.8643	0.8643		120	60.14	5,380,929	5,802,840	



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0 080409-00 - 2016/09

202.97

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/07		1.00	0.7107	0.7107		120	59.60	5,419,171	5,844,120	
2011/01		1.00	0.9198	0.9198		120	59.60	5,469,017	5,897,880	
2011/07		1.00	0.9028	0.9028		120	59.60	5,518,391	5,951,160	
2012/01		1.00	0.3865	0.3865		120	64.73	5,539,720	5,974,200	
2012/07		1.00	0.9417	0.9417		120	64.73	5,591,888	6,030,480	
2013/01		1.00	0.4901	0.4901		120	63.97	5,619,294	6,060,000	
2013/07		1.00	0.6196	0.6196		120	63.97	5,654,111	6,097,560	
2014/01		1.00	0.8564	0.8564		120	61.97	5,702,533	6,149,760	
2014/07		1.00	1.2383	1.2383		120	61.97	5,773,147	6,225,960	
2015/01		1.00	0.7571	0.7571		120	63.82	5,816,855	6,273,120	
2015/09		1.00	1.5736	1.5736		120	63.82	5,908,389	6,371,880	
2016/09		0.95	1.9890	1.9890		120	69.19	6,020,034	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 080409123120140101201411112015111750



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0080413-00 - 2016/09

226.02

Consulate Health Care of Sarasota

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4783 FRUITVILLE ROAD	1/1/2014-12/31/2014	Number of Beds: 81	Superior: 0
SARASOTA, FL 34232	Days in CR 365	Maximum: 29,565	Standard: 366
County: Sarasota [58]	First Used : 2016/09	Max Annualized: 29,565	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 26,738	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,788	Inflation
Current Class South Small	Initial CR? False	Medicaid: 19,704	FY Index: 1.34193004
Class at 1/94: South Small	Medicaid Utilization	73.69287%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	90.43802%	Cost: 1.07573004
Open Date: 02/18/1998	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/18/1998	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 02/18/1998	Low Occupancy Adjustment Factor:	114.37427%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 320137			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,101,657	1,492,833	876,496	811,805		4,282,791	
1a	Audit Adjustments							
2	Cost Per Diem	55.9103	75.7629	44.4832	41.2000		217.3564	
3	Cost Per Diem Inflated	60.1444	80.4172	47.8519				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	60.1444	80.4172	47.8519	41.2000		229.6135	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	70.6560		75.0306				
7	Provider Target Rate	74.5865		79.2044				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	60.1444	80.4172	47.8519	13.6500		202.0635	
12/13	Medicaid Adjustment Rate		2.1435	1.2755				
14	Prospective Per Diem 11	60.1444	82.5607	49.1274	13.6500		205.4825	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 080413-00 - 2016/09

226.02

Consulate Health Care of Sarasota

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/18/1998		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,269,231.00		Total Amount	Per Diem
RS to Start Calcs:	1998/01	Type:	Variable	80% Capital(1):	3,313,034	11.2240
Indexed Asset Value	4,141,293	<60% of Base:	False	20% ROE(2):	828,259	0.7069
FRVS Base Asset:	3,033,045	Interest Rate:	7.2654%	Insurance Cost(3):	37,984	1.4206
Occup Adj Factor	0.9000	Chase Rate:	4.5956%	Taxes Cost(3):	54,606	2.0423
ROE Factor	0.022710	Amortization Rate:	6.5956%	Home Office(3):	28,782	1.0764
		Interest Only:	False	Replacement(3&4):	27,099	0.0000
		Yearly Payment:	298,655	Total FRVS PD:		16.4702

(1) 80% Capital (\$3,313,034) amortized at 6.5956 % for 20 years Principal & Interest of \$298,655 divided by annual available days (29565) divided by Occup. Adj. (0.90) = \$11.2240

(2) 20% ROE (\$828,259) times the ROE factor (0.022710) divided by annual available days (29565) divided by Occup. Adj. (0.90) = \$0.7069

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1997	Current RS PBS:	54,155
Comparison Bed	81	Effective PBS Limitation	3,033,045

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	60.1444	60.1444	2.7287	57.4157
Direct Care	82.5607	82.5607	3.7457	78.8150
Indirect Care	49.1274	49.1274	2.2289	46.8985
Property	13.6500	16.4702	0.7472	15.7230
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.9848
Supplemental Rate				8.1814
Totals	205.4825	208.3027	9.4505	226.0184

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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226.02

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01	5,390,862	0.00	1.1663	1.1663		81	16.04	3,033,045	3,033,045	1
1998/07		0.10	1.0794	1.0794		81	16.04	3,033,045	3,101,571	
1999/01		0.10	1.4499	1.4499		81	16.04	3,033,045	3,146,526	
1999/07		0.20	1.2299	1.2299		81	16.04	3,033,045	3,185,244	
2000/01	120,840	0.20	1.3356	1.3356		81	35.56	3,159,123	3,227,769	
2000/07		0.30	1.1129	1.1129		81	35.56	3,165,943	3,263,652	
2001/01	17,936	0.30	1.2976	1.2976		81	52.16	3,195,568	3,306,015	
2001/07		0.40	0.9615	0.9615		81	52.16	3,195,568	3,337,767	5
2002/01		0.40	1.0301	1.0301		81	52.16	3,219,755	3,372,111	
2002/07		0.50	0.8337	0.8337		81	52.16	3,232,485	3,400,218	
2003/01		0.50	1.3271	1.3271		81	52.16	3,252,828	3,445,335	
2003/07		0.60	1.1664	1.1664		81	55.28	3,275,591	3,485,511	
2004/01		0.60	1.1103	1.1103		81	55.28	3,297,413	3,524,229	
2004/07	16,597	0.70	0.8378	0.8378		81	56.40	3,333,349	3,553,794	
2005/01		0.70	0.8595	0.8595		81	56.40	3,353,406	3,584,331	
2005/07		0.80	0.7364	0.7364		81	57.90	3,373,161	3,610,737	
2006/01		0.80	0.9068	0.9068		81	57.90	3,397,630	3,643,461	
2006/07	48,780	0.90	0.8133	0.8133		81	64.44	3,471,281	3,673,107	
2007/01		0.90	1.0133	1.0133		81	64.44	3,502,939	3,710,286	
2007/07		1.00	1.1050	1.1050		81	63.14	3,541,646	3,751,272	
2008/01		1.00	0.8556	0.8556		81	63.14	3,571,948	3,783,348	
2008/07		1.00	0.6104	0.6104		81	64.50	3,593,751	3,806,433	
2009/01		1.00	1.3268	1.3268		81	64.50	3,641,433	3,856,977	
2009/07		1.00	0.6841	0.6841		81	65.68	3,666,344	3,883,383	
2010/01		1.00	0.8643	0.8643		81	65.68	3,698,032	3,916,917	
2010/07		1.00	0.7107	0.7107		81	57.95	3,724,314	3,944,781	
2011/01		1.00	0.9198	0.9198		81	57.95	3,758,570	3,981,069	
2011/07		1.00	0.9028	0.9028		81	57.95	3,792,502	4,017,033	
2012/01		1.00	0.3865	0.3865		81	67.29	3,807,160	4,032,585	
2012/07		1.00	0.9417	0.9417		81	67.29	3,843,012	4,070,574	



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226.02

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		1.00	0.4901	0.4901		81	67.38	3,861,847	4,090,500	
2013/07		1.00	0.6196	0.6196		81	67.38	3,885,775	4,115,853	
2014/01		1.00	0.8564	0.8564		81	68.39	3,919,053	4,151,088	
2014/07		1.00	1.2383	1.2383		81	68.39	3,967,583	4,202,523	
2015/01		1.00	0.7571	0.7571		81	75.34	3,997,622	4,234,356	
2015/09		1.00	1.5736	1.5736		81	75.34	4,060,529	4,301,019	
2016/09		1.00	1.9890	1.9890		81	73.69	4,141,293	4,386,555	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

2Z0S4

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Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

0080416-00 - 2016/09

206.11

Consulate Health Care of Port Charlotte

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
18480 COCHRAN BLVD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
PORT CHARLOTTE, FL 33948	Days in CR 365	Maximum: 43,800	Standard: 366
County: Charlotte [8]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 40,128	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 9,003	Inflation
Current Class South Large	Initial CR? False	Medicaid: 26,490	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	66.01376%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.61644%	Cost: 1.07573004
Open Date: 03/12/1998	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/12/1998	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 03/12/1998	Low Occupancy Adjustment Factor:	115.86458%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 320129			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,374,071	1,774,360	1,038,986	1,054,037		5,241,454
1a	Audit Adjustments						
2	Cost Per Diem	51.8713	66.9823	39.2218	39.7900		197.8654
3	Cost Per Diem Inflated	55.7995	71.0972	42.1921			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	55.7995	71.0972	42.1921	39.7900		208.8788
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	60.6781		61.4289			
7	Provider Target Rate	64.0535		64.8461			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	55.7995	71.0972	42.1921	13.6500		182.7388
12/13	Medicaid Adjustment Rate		1.2809	0.7601			
14	Prospective Per Diem 11	55.7995	72.3781	42.9522	13.6500		184.7798
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 080416-00 - 2016/09

206.11

Consulate Health Care of Port Charlotte

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 03/12/1998		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,604,395.00		Total Amount	Per Diem
RS to Start Calcs:	1998/01	Type:	Variable	80% Capital(1):	4,551,066	10.3292
Indexed Asset Value	5,688,833	<60% of Base:	False	20% ROE(2):	1,137,767	0.6555
FRVS Base Asset:	4,306,175	Interest Rate:	6.5012%	Insurance Cost(3):	46,808	1.1665
Occup Adj Factor	0.9000	Chase Rate:	4.5000%	Taxes Cost(3):	94,305	2.3501
ROE Factor	0.022710	Amortization Rate:	6.5000%	Home Office(3):	39,839	0.9928
		Interest Only:	False	Replacement(3&4):	28,570	0.0000
		Yearly Payment:	407,178	Total FRVS PD:		15.4941

(1) 80% Capital (\$4,551,066) amortized at 6.5000 % for 20 years Principal & Interest of \$407,178 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.3292

(2) 20% ROE (\$1,137,767) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6555

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1997	Current RS PBS:	37,445
Comparison Bed	115	Effective PBS Limitation	54,155
			4,306,175

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.7995	55.7995	2.5316	53.2679
Direct Care	72.3781	72.3781	3.2838	69.0943
Indirect Care	42.9522	42.9522	1.9487	41.0035
Property	13.6500	15.4941	0.7030	14.7911
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7752
Supplemental Rate				8.1814
Totals	184.7798	186.6239	8.4671	206.1134

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

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206.11

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01	7,098,538	0.00	1.1663	1.1663		115	37.77	4,306,175	4,306,175	1
1998/07		0.10	1.0794	1.0794		115	37.77	4,309,366	4,403,465	
1999/01		0.10	1.4499	1.4499		115	37.77	4,313,657	4,467,290	
1999/07		0.20	1.2299	1.2299		115	37.77	4,320,944	4,522,260	
2000/01		0.20	1.3356	1.3356		115	37.77	4,328,870	4,582,635	
2000/07		0.30	1.1129	1.1129		115	37.77	4,338,796	4,633,580	
2001/01	23,577	0.30	1.2976	1.2976		115	55.57	4,379,264	4,693,725	
2001/07	14,869	0.40	0.9615	0.9615		115	55.57	4,410,976	4,738,805	
2002/01	2,816	0.40	1.0301	1.0301		115	55.57	4,431,965	4,787,565	
2002/07		0.50	0.8337	0.8337		115	55.57	4,431,965	4,827,470	5
2003/01		0.50	1.3271	1.3271		115	55.57	4,479,975	4,891,525	
2003/07		0.60	1.1664	1.1664		115	55.57	4,511,326	4,948,565	
2004/01	48,125	0.60	1.1103	1.1103		120	53.86	4,588,883	5,221,080	
2004/07		0.70	0.8378	0.8378		120	53.86	4,615,239	5,264,880	
2005/01	18,151	0.70	0.8595	0.8595		120	53.27	4,660,286	5,310,120	
2005/07		0.80	0.7364	0.7364		120	53.27	4,686,876	5,349,240	
2006/01	25,256	0.80	0.9068	0.9068		120	55.62	4,746,131	5,397,720	
2006/07		0.90	0.8133	0.8133		120	55.62	4,780,873	5,441,640	
2007/01		0.90	1.0133	1.0133		120	54.88	4,824,379	5,496,720	
2007/07		1.00	1.1050	1.1050		120	54.88	4,877,572	5,557,440	
2008/01		1.00	0.8556	0.8556		120	54.88	4,919,213	5,604,960	
2008/07		1.00	0.6104	0.6104		120	54.88	4,949,174	5,639,160	
2009/01		1.00	1.3268	1.3268		120	55.98	5,014,840	5,714,040	
2009/07		1.00	0.6841	0.6841		120	55.98	5,049,147	5,753,160	
2010/01		1.00	0.8643	0.8643		120	56.03	5,092,787	5,802,840	
2010/07		1.00	0.7107	0.7107		120	56.03	5,128,981	5,844,120	
2011/01		1.00	0.9198	0.9198		120	56.03	5,128,981	5,897,880	5
2011/07		1.00	0.9028	0.9028		120	48.95	5,217,747	5,951,160	
2012/01		1.00	0.3865	0.3865		120	48.95	5,235,695	5,974,200	
2012/07		1.00	0.9417	0.9417		120	51.98	5,282,292	6,030,480	



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
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206.11

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		1.00	0.4901	0.4901		120	51.98	5,306,759	6,060,000	
2013/07		1.00	0.6196	0.6196		120	51.98	5,337,834	6,097,560	
2014/01		1.00	0.8564	0.8564		120	60.63	5,383,547	6,149,760	
2014/07		1.00	1.2383	1.2383		120	60.63	5,450,211	6,225,960	
2015/01		1.00	0.7571	0.7571		120	58.91	5,491,475	6,273,120	
2015/09		1.00	1.5736	1.5736		120	58.91	5,577,889	6,371,880	
2016/09		1.00	1.9890	1.9890		120	66.01	5,688,833	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0080428-00 - 2016/09

209.15

Consulate Health Care of Tallahassee

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1650 PHILLIPS RD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
TALLAHASSEE , FL 32308	Days in CR 365	Maximum: 43,800	Standard: 366
County: Leon [37]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 40,068	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,295	Inflation
Current Class North Large	Initial CR? False	Medicaid: 21,912	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	54.68703%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.47945%	Cost: 1.04651568
Open Date: 03/09/1992	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/09/1992	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 04/01/1992	Low Occupancy Adjustment Factor:	115.69133%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 319716			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,073,416	1,477,181	1,130,837	1,560,354		5,241,788	
1a	Audit Adjustments							
2	Cost Per Diem	48.9876	67.4142	51.6081	71.2100		239.2199	
3	Cost Per Diem Inflated	51.2663	70.1570	54.0087				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.2663	70.1570	54.0087	71.2100		246.6420	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	58.3289		66.5039				
7	Provider Target Rate	61.5736		70.2034				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	51.2663	70.1570	54.0087	13.6500		189.0820	
12/13	Medicaid Adjustment Rate		0.3699	0.2848				
14	Prospective Per Diem 11	51.2663	70.5269	54.2935	13.6500		189.7367	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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209.15

Consulate Health Care of Tallahassee

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 04/01/1992		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,316,600.00		Total Amount	Per Diem
RS to Start Calcs:	1992/01	Type:	Variable	80% Capital(1):	4,529,293	13.6730
Indexed Asset Value	5,661,616	<60% of Base:	False	20% ROE(2):	1,132,323	0.5805
FRVS Base Asset:	3,718,320	Interest Rate:	10.4000%	Insurance Cost(3):	39,338	0.9818
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	51,591	1.2876
ROE Factor	0.020210	Amortization Rate:	10.4000%	Home Office(3):	43,346	1.0818
		Interest Only:	False	Replacement(3&4):	467,921	0.0000
		Yearly Payment:	538,989	Total FRVS PD:		17.6047

(1) 80% Capital (\$4,529,293) amortized at 10.4000 % for 20 years Principal & Interest of \$538,989 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$13.6730

(2) 20% ROE (\$1,132,323) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5805

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1991	Current RS PBS:	30,986
Comparison Bed	120	Effective PBS Limitation	54,155
			3,718,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.2663	51.2663	2.3259	48.9404
Direct Care	70.5269	70.5269	3.1998	67.3271
Indirect Care	54.2935	54.2935	2.4633	51.8302
Property	13.6500	17.6047	0.7987	16.8060
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.0632
Supplemental Rate				8.1814
Totals	189.7367	193.6914	8.7877	209.1483

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1992/01	4,144,879	0.00	2.0117	2.0117		120	31.91	3,718,320	3,718,320	1
1992/07		0.10	1.8152	1.8152		120	31.91	3,722,236	3,861,960	
1993/01		0.10	1.7710	1.7710		120	31.91	3,726,061	3,930,360	
1993/07	69,656	0.20	1.5329	1.5329		120	31.91	3,802,345	3,990,600	
1994/01		0.20	1.6983	1.6983		120	31.91	3,809,839	4,058,400	
1994/07		0.30	1.5991	1.5991		120	31.91	3,820,442	4,123,320	
1995/01	82,098	0.30	1.5812	1.5812		120	27.58	3,911,628	4,188,480	
1995/07		0.40	1.5250	1.5250		120	27.58	3,923,593	4,252,320	
1996/01	248,048	0.40	1.7228	1.7228		120	24.29	4,171,641	4,325,640	
1996/07		0.50	1.3294	1.3294		120	24.29	4,171,641	4,383,120	
1997/01	39,029	0.50	1.4109	1.4109		120	27.30	4,225,278	4,444,920	
1997/07		0.60	1.0917	1.0917		120	27.30	4,239,015	4,493,400	
1998/01	44,415	0.60	1.1663	1.1663		120	31.12	4,300,215	4,545,840	
1998/07		0.70	1.0794	1.0794		120	31.12	4,318,600	4,594,920	
1999/01	28,209	0.70	1.4499	1.4499		120	34.89	4,374,613	4,661,520	
1999/07		0.80	1.2299	1.2299		120	35.91	4,402,715	4,718,880	
2000/01		0.80	1.3356	1.3356		120	35.91	4,433,430	4,781,880	
2000/07	36,396	0.90	1.1129	1.1129		120	35.91	4,498,819	4,835,040	
2001/01		0.90	1.2976	1.2976		120	35.91	4,498,819	4,897,800	5
2001/07		1.00	0.9615	0.9615		120	35.91	4,561,579	4,944,840	
2002/01	40,688	1.00	1.0301	1.0301		120	36.36	4,633,331	4,995,720	
2002/07		1.00	0.8337	0.8337		120	36.36	4,633,331	5,037,360	5
2003/01		1.00	1.3271	1.3271		120	36.36	4,699,742	5,104,200	
2003/07		1.00	1.1664	1.1664		120	36.36	4,735,982	5,163,720	
2004/01	31,591	1.00	1.1103	1.1103		120	39.95	4,805,768	5,221,080	
2004/07	37,299	1.00	0.8378	0.8378		120	43.20	4,874,692	5,264,880	
2005/01		1.00	0.8595	0.8595		120	43.20	4,907,601	5,310,120	
2005/07		1.00	0.7364	0.7364		120	42.50	4,935,527	5,349,240	
2006/01		1.00	0.9068	0.9068		120	42.50	4,970,111	5,397,720	
2006/07		1.00	0.8133	0.8133		120	37.80	4,997,892	5,441,640	



Florida Agency for Health Care Administration
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209.15

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/01		1.00	1.0133	1.0133		120	37.80	5,032,698	5,496,720	
2007/07		1.00	1.1050	1.1050		120	32.46	5,065,519	5,557,440	
2008/01		1.00	0.8556	0.8556		120	32.46	5,091,098	5,604,960	
2008/07		1.00	0.6104	0.6104		120	31.72	5,109,020	5,639,160	
2009/01		1.00	1.3268	1.3268		120	31.72	5,148,114	5,714,040	
2009/07		1.00	0.6841	0.6841		120	36.71	5,171,621	5,753,160	
2010/01		1.00	0.8643	0.8643		120	36.71	5,201,455	5,802,840	
2010/07		1.00	0.7107	0.7107		120	36.71	5,226,129	5,844,120	
2011/01		1.00	0.9198	0.9198		120	39.93	5,261,028	5,897,880	
2011/07		1.00	0.9028	0.9028		120	39.93	5,295,511	5,951,160	
2012/01		1.00	0.3865	0.3865		120	48.23	5,313,459	5,974,200	
2012/07		0.95	0.9417	0.9417		120	48.23	5,355,142	6,030,480	
2013/01		0.95	0.4901	0.4901		120	51.44	5,378,462	6,060,000	
2013/07		0.90	0.6196	0.6196		120	51.44	5,406,511	6,097,560	
2014/01		0.90	0.8564	0.8564		120	44.14	5,439,956	6,149,760	
2014/07		0.85	1.2383	1.2383		120	44.14	5,485,911	6,225,960	
2015/01		0.85	0.7571	0.7571		120	48.80	5,517,233	6,273,120	
2015/09		0.80	1.5736	1.5736		120	48.80	5,578,860	6,371,880	
2016/09		0.75	1.9890	1.9890		120	54.69	5,661,616	6,498,600	

Message Code:

- | |
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| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0080430-00 - 2016/09

200.17

Consulate Health Care of Vero Beach

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1310 37TH ST	1/1/2014-12/31/2014	Number of Beds: 159	Superior: 0
VERO BEACH, FL 32960-4860	Days in CR 365	Maximum: 58,035	Standard: 366
County: Indian River [31]	First Used : 2016/09	Max Annualized: 58,035	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 55,128	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 11,926	Inflation
Current Class South Large	Initial CR? False	Medicaid: 39,822	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	72.23552%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.99095%	Cost: 1.07573004
Open Date: 10/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 10/01/1984	Low Occupancy Adjustment Factor:	120.13222%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 320145			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,873,194	2,668,013	1,553,637	1,499,697		7,594,541	
1a	Audit Adjustments							
2	Cost Per Diem	47.0392	66.9985	39.0145	37.6600		190.7122	
3	Cost Per Diem Inflated	50.6015	71.1144	41.9691				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.6015	71.1144	41.9691	37.6600		201.3450	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	58.8950		61.4289				
7	Provider Target Rate	62.1712		64.8461				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	50.6015	71.1144	41.9691	13.6500		177.3350	
12/13	Medicaid Adjustment Rate		1.7789	1.0499				
14	Prospective Per Diem 11	50.6015	72.8933	43.0190	13.6500		180.1638	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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200.17

Consulate Health Care of Vero Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	04/01/1998	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	None	80% Capital(1):	5,992,601	9.6646
Indexed Asset Value	7,490,751	<60% of Base:	True	20% ROE(2):	1,498,150	0.6514
FRVS Base Asset:	2,240,349	Interest Rate:	8.5000%	Insurance Cost(3):	70,162	1.2727
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	86,652	1.5718
ROE Factor	0.022710	Amortization Rate:	8.5000%	Home Office(3):	54,044	0.9803
		Interest Only:	True	Replacement(3&4):	32,418	0.0000
		Yearly Payment:	504,796	Total FRVS PD:		14.1408

(1) 80% Capital (\$5,992,601) amortized at 8.5000 % for 20 years Interest of \$504,796 divided by annual available days (58035) divided by Occup. Adj. (0.90) = \$9.6646

(2) 20% ROE (\$1,498,150) times the ROE factor (0.022710) divided by annual available days (58035) divided by Occup. Adj. (0.90) = \$0.6514

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.6015	50.6015	2.2958	48.3057
Direct Care	72.8933	72.8933	3.3071	69.5862
Indirect Care	43.0190	43.0190	1.9518	41.0672
Property	13.6500	14.1408	0.6416	13.4992
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.5341
Supplemental Rate				8.1814
Totals	180.1638	180.6546	8.1963	200.1738

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	2,237,110	0.00	1.9179	1.9179		120	39.83	2,237,110	3,352,680	
1985/01		0.10	1.1471	1.1471		120	39.83	2,238,968	3,391,080	
1985/10		0.10	0.8522	0.8522		120	39.83	2,240,349	3,420,000	
1986/01		0.20	0.8299	0.8299		120	39.83	2,243,042	3,448,440	
1986/07		0.20	0.2974	0.2974		120	39.83	2,244,009	3,441,840	
1987/01		0.30	1.0091	1.0091		120	39.83	2,248,928	3,503,400	
1987/07		0.30	0.9007	0.9007		120	39.83	2,253,329	3,530,760	
1988/01		0.40	0.9007	0.9007		120	39.83	2,259,208	3,559,440	
1988/07		0.40	0.5899	0.5899		120	43.97	2,263,470	3,557,520	
1989/01		0.50	0.5899	0.5899		120	43.97	2,268,808	3,578,520	
1989/07	385,796	0.50	0.5899	0.5899		120	47.94	2,660,438	3,602,760	
1990/01		0.60	0.5899	0.5899		120	49.31	2,668,879	3,620,880	
1990/07		0.60	0.5899	0.5899		120	49.31	2,677,347	3,642,240	
1991/01		0.70	0.5899	0.5899		120	55.39	2,688,402	3,663,600	
1991/07		0.70	1.4932	1.4932		120	55.39	2,716,501	3,718,320	
1992/01		0.80	2.0117	2.0117		120	60.61	2,760,220	3,793,080	
1992/07		0.80	1.8152	1.8152		120	60.61	2,800,304	3,861,960	
1993/01		0.90	1.7710	1.7710		120	60.61	2,844,938	3,930,360	
1993/07		0.90	1.5329	1.5329		120	63.34	2,884,187	3,990,600	
1994/01		1.00	1.6983	1.6983		120	67.59	2,933,169	4,058,400	
1994/07		1.00	1.5991	1.5991		120	67.59	2,980,073	4,123,320	
1995/01		1.00	1.5812	1.5812		120	67.59	3,027,194	4,188,480	
1995/07		1.00	1.5250	1.5250		120	67.46	3,073,359	4,252,320	
1996/01		1.00	1.7228	1.7228		120	67.46	3,126,307	4,325,640	
1996/07		1.00	1.3294	1.3294		120	67.89	3,167,868	4,383,120	
1997/01		1.00	1.4109	1.4109		120	72.26	3,212,563	4,444,920	
1997/07		1.00	1.0917	1.0917		120	72.26	3,247,635	4,493,400	
1998/01		1.00	1.1663	1.1663		120	75.65	3,285,512	4,545,840	
1998/07		1.00	1.0794	1.0794		120	75.65	3,320,976	4,594,920	
1999/01		1.00	1.4499	1.4499		120	75.65	3,369,127	4,661,520	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		120	75.65	3,410,564	4,718,880	
2000/01		1.00	1.3356	1.3356		120	75.65	3,456,115	4,781,880	
2000/07		1.00	1.1129	1.1129		120	75.65	3,494,578	4,835,040	
2001/01		1.00	1.2976	1.2976		120	77.73	3,494,578	4,897,800	5
2001/07	57,434	1.00	0.9615	0.9615		120	79.26	3,631,394	4,944,840	
2002/01	2,383,394	1.00	1.0301	1.0301		159	76.14	6,052,195	6,619,329	
2002/07		1.00	0.8337	0.8337		159	76.14	6,102,652	6,674,502	
2003/01		1.00	1.3271	1.3271		159	76.14	6,183,640	6,763,065	
2003/07	89,320	1.00	1.1664	1.1664		159	62.69	6,345,086	6,841,929	
2004/01		1.00	1.1103	1.1103		159	62.69	6,415,535	6,917,931	
2004/07	37,385	1.00	0.8378	0.8378		159	58.21	6,506,669	6,975,966	
2005/01		0.95	0.8595	0.8595		159	58.21	6,559,796	7,035,909	
2005/07		0.95	0.7364	0.7364		159	61.77	6,605,688	7,087,743	
2006/01		0.90	0.9068	0.9068		159	61.77	6,659,597	7,151,979	
2006/07		0.90	0.8133	0.8133		159	63.99	6,708,345	7,210,173	
2007/01		0.85	1.0133	1.0133		159	63.99	6,766,124	7,283,154	
2007/07		0.85	1.1050	1.1050		159	72.45	6,829,678	7,363,608	
2008/01		0.80	0.8556	0.8556		159	72.45	6,876,427	7,426,572	
2008/07		0.80	0.6104	0.6104		159	72.32	6,910,005	7,471,887	
2009/01		0.75	1.3268	1.3268		159	72.32	6,978,766	7,571,103	
2009/07		0.75	0.6841	0.6841		159	67.91	7,014,574	7,622,937	
2010/01		0.70	0.8643	0.8643		159	67.91	7,057,012	7,688,763	
2010/07		0.70	0.7107	0.7107		159	68.41	7,092,121	7,743,459	
2011/01		0.65	0.9198	0.9198		159	68.41	7,134,525	7,814,691	
2011/07		0.65	0.9028	0.9028		159	68.41	7,176,390	7,885,287	
2012/01		0.60	0.3865	0.3865		159	64.31	7,193,032	7,915,815	
2012/07		0.60	0.9417	0.9417		159	64.31	7,233,673	7,990,386	
2013/01		0.55	0.4901	0.4901		159	66.06	7,253,175	8,029,500	
2013/07		0.55	0.6196	0.6196		159	66.06	7,277,894	8,079,267	
2014/01		0.50	0.8564	0.8564		159	66.26	7,309,058	8,148,432	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		159	66.26	7,354,316	8,249,397	
2015/01		0.45	0.7571	0.7571		159	68.91	7,379,372	8,311,884	
2015/09		0.45	1.5736	1.5736		159	68.91	7,431,625	8,442,741	
2016/09		0.40	1.9890	1.9890		159	72.24	7,490,751	8,610,645	

Message Code:

5 Uncorrected Licensure Deficiency

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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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203.60

Consulate Health Care at West Altamonte

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1099 WEST TOWN PARKWAY	1/1/2014-12/31/2014	Number of Beds: 116	Superior: 0
ALTAMONTE SPRINGS, FL 327	Days in CR 365	Maximum: 42,340	Standard: 366
County: Seminole [59]	First Used : 2016/09	Max Annualized: 42,340	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 41,429	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 11,328	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,834	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	67.18482%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	97.84837%	Cost: 1.07573004
Open Date: 01/20/1994	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/20/1994	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 02/17/1994	Low Occupancy Adjustment Factor:	123.74592%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319546			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,368,867	1,803,517	1,156,435	1,027,910		5,356,729	
1a	Audit Adjustments							
2	Cost Per Diem	49.1797	64.7955	41.5476	36.9300		192.4528	
3	Cost Per Diem Inflated	52.9041	68.7760	44.6940				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.9041	68.7760	44.6940	36.9300		203.3041	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	64.0851		61.3802				
7	Provider Target Rate	67.6500		64.7947				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	52.9041	68.7760	44.6940	13.6500		180.0241	
12/13	Medicaid Adjustment Rate		1.3296	0.8641				
14	Prospective Per Diem 11	52.9041	70.1056	45.5581	13.6500		182.2178	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Consulate Health Care at West Altamonte

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/17/1994		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,947,000.00		Total Amount	Per Diem
RS to Start Calcs:	1994/01	Type:	Fixed	80% Capital(1):	4,351,238	13.5884
Indexed Asset Value	5,439,048	<60% of Base:	False	20% ROE(2):	1,087,810	0.6483
FRVS Base Asset:	3,757,815	Interest Rate:	10.4000%	Insurance Cost(3):	46,472	1.1217
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	77,023	1.8592
ROE Factor	0.022710	Amortization Rate:	10.4000%	Home Office(3):	44,015	1.0624
		Interest Only:	False	Replacement(3&4):	21,107	0.0000
		Yearly Payment:	517,800	Total FRVS PD:		18.2800

(1) 80% Capital (\$4,351,238) amortized at 10.4000 % for 20 years Principal & Interest of \$517,800 divided by annual available days (42340) divided by Occup. Adj. (0.90) = \$13.5884

(2) 20% ROE (\$1,087,810) times the ROE factor (0.022710) divided by annual available days (42340) divided by Occup. Adj. (0.90) = \$0.6483

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1993	Current RS PBS:	33,255
Comparison Bed	113	Effective PBS Limitation	54,155
			3,757,815

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.9041	52.9041	2.4002	50.5039
Direct Care	70.1056	70.1056	3.1807	66.9249
Indirect Care	45.5581	45.5581	2.0669	43.4912
Property	13.6500	18.2800	0.8294	17.4506
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.0451
Supplemental Rate				8.1814
Totals	182.2178	186.8478	8.4772	203.5971

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/01	5,848,942	0.00	1.6983	1.6983		113	32.25	3,757,815	3,757,815	1
1994/07		0.10	1.5991	1.5991		113	32.25	3,761,338	3,882,793	
1995/01	27,857	0.10	1.5812	1.5812		113	32.25	3,792,682	3,944,152	
1995/07		0.20	1.5250	1.5250		113	32.25	3,799,465	4,004,268	
1996/01		0.20	1.7228	1.7228		113	32.25	3,807,142	4,073,311	
1996/07		0.30	1.3294	1.3294		113	32.25	3,816,045	4,127,438	
1997/01	33,633	0.30	1.4109	1.4109		113	54.32	3,865,632	4,185,633	
1997/07		0.40	1.0917	1.0917		113	54.32	3,882,305	4,231,285	
1998/01	27,873	0.40	1.1663	1.1663		113	53.19	3,927,693	4,280,666	
1998/07		0.50	1.0794	1.0794		113	53.19	3,948,193	4,326,883	
1999/01	32,310	0.50	1.4499	1.4499		116	55.68	4,009,127	4,506,136	
1999/07		0.60	1.2299	1.2299		116	58.75	4,009,127	4,561,584	5
2000/01		0.60	1.3356	1.3356		116	58.75	4,071,076	4,622,484	
2000/07		0.70	1.1129	1.1129		116	58.75	4,102,790	4,673,872	
2001/01		0.70	1.2976	1.2976		116	58.75	4,140,056	4,734,540	
2001/07		0.80	0.9615	0.9615		116	58.75	4,171,901	4,780,012	
2002/01		0.80	1.0301	1.0301		116	58.75	4,206,282	4,829,196	
2002/07	40,626	0.90	0.8337	0.8337		116	62.34	4,278,468	4,869,448	
2003/01		0.90	1.3271	1.3271		116	62.34	4,329,570	4,934,060	
2003/07		1.00	1.1664	1.1664		116	62.34	4,380,070	4,991,596	
2004/01		1.00	1.1103	1.1103		116	62.34	4,428,702	5,047,044	
2004/07		1.00	0.8378	0.8378		116	57.89	4,465,806	5,089,384	
2005/01		1.00	0.8595	0.8595		116	57.89	4,504,190	5,133,116	
2005/07		1.00	0.7364	0.7364		116	57.89	4,537,359	5,170,932	
2006/01	18,227	1.00	0.9068	0.9068		116	51.87	4,594,389	5,217,796	
2006/07		1.00	0.8133	0.8133		116	51.87	4,629,629	5,260,252	
2007/01		1.00	1.0133	1.0133		116	55.04	4,676,541	5,313,496	
2007/07		1.00	1.1050	1.1050		116	55.04	4,676,541	5,372,192	5
2008/01		1.00	0.8556	0.8556		116	58.49	4,768,672	5,418,128	
2008/07		1.00	0.6104	0.6104		116	58.49	4,797,780	5,451,188	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/01		1.00	1.3268	1.3268		116	55.33	4,861,437	5,523,572	
2009/07		1.00	0.6841	0.6841		116	55.33	4,894,694	5,561,388	
2010/01		1.00	0.8643	0.8643		116	48.43	4,931,945	5,609,412	
2010/07		1.00	0.7107	0.7107		116	48.43	4,962,809	5,649,316	
2011/01		1.00	0.9198	0.9198		116	48.43	5,003,004	5,701,284	
2011/07		1.00	0.9028	0.9028		116	45.35	5,040,246	5,752,788	
2012/01		1.00	0.3865	0.3865		116	45.35	5,056,309	5,775,060	
2012/07		1.00	0.9417	0.9417		116	45.35	5,095,570	5,829,464	
2013/01		1.00	0.4901	0.4901		116	49.19	5,117,905	5,858,000	
2013/07		1.00	0.6196	0.6196		116	49.19	5,146,266	5,894,308	
2014/01		1.00	0.8564	0.8564		116	47.12	5,184,024	5,944,768	
2014/07		0.95	1.2383	1.2383		116	47.12	5,236,271	6,018,428	
2015/01		0.95	0.7571	0.7571		116	58.12	5,273,930	6,064,016	
2015/09		0.90	1.5736	1.5736		116	58.12	5,348,619	6,159,484	
2016/09		0.85	1.9890	1.9890		116	67.18	5,439,048	6,281,980	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |

2Z0S4

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Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

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216.11

Consulate Health Care of West Palm Beach

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1626 DAVIS RD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
WEST PALM BCH, FL 33406-56	Days in CR 365	Maximum: 43,800	Standard: 366
County: Palm Beach [50]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 41,791	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 13,330	Inflation
Current Class South Large	Initial CR? False	Medicaid: 25,198	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	60.29528%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.41324%	Cost: 1.07573004
Open Date: 03/18/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/18/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 03/18/1985	Low Occupancy Adjustment Factor:	120.66628%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 320153			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,315,803	1,883,365	1,133,844	1,018,503		5,351,515	
1a	Audit Adjustments							
2	Cost Per Diem	52.2185	74.7426	44.9974	40.4200		212.3785	
3	Cost Per Diem Inflated	56.1730	79.3342	48.4051				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	56.1730	79.3342	48.4051	40.4200		224.3323	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	71.6123		63.8381				
7	Provider Target Rate	75.5960		67.3893				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	56.1730	79.3342	48.4051	13.6500		197.5623	
12/13	Medicaid Adjustment Rate		0.9189	0.5606				
14	Prospective Per Diem 11	56.1730	80.2531	48.9657	13.6500		199.0418	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Consulate Health Care of West Palm Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	04/01/1998	Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1985/01	Type:	None	80% Capital(1):	3,671,024	7.8446
Indexed Asset Value	4,588,780	<60% of Base:	True	20% ROE(2):	917,756	0.5287
FRVS Base Asset:	2,282,012	Interest Rate:	8.5000%	Insurance Cost(3):	66,405	1.5890
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	93,439	2.2359
ROE Factor	0.022710	Amortization Rate:	8.5000%	Home Office(3):	47,862	1.1453
		Interest Only:	True	Replacement(3&4):	25,798	0.0000
		Yearly Payment:	309,234	Total FRVS PD:		13.3435

(1) 80% Capital (\$3,671,024) amortized at 8.5000 % for 20 years Interest of \$309,234 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.8446

(2) 20% ROE (\$917,756) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5287

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.1730	56.1730	2.5485	53.6245
Direct Care	80.2531	80.2531	3.6410	76.6121
Indirect Care	48.9657	48.9657	2.2215	46.7442
Property	13.6500	13.3435	0.6054	12.7381
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.2123
Supplemental Rate				8.1814
Totals	199.0418	198.7353	9.0164	216.1126

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/01	2,281,037	0.00	1.1471	1.1471		120	27.58	2,281,037	3,391,080	
1985/10		0.10	0.8522	0.8522		120	27.58	2,282,012	3,420,000	
1986/01		0.10	0.8299	0.8299		120	27.58	2,282,962	3,448,440	
1986/07		0.20	0.2974	0.2974		120	27.58	2,283,643	3,441,840	
1987/01		0.20	1.0091	1.0091		120	27.58	2,285,954	3,503,400	
1987/07		0.30	0.9007	0.9007		120	27.58	2,289,051	3,530,760	
1988/01		0.30	0.9007	0.9007		120	48.62	2,294,519	3,559,440	
1988/07		0.40	0.5899	0.5899		120	57.97	2,299,934	3,557,520	
1989/01		0.40	0.5899	0.5899		120	57.97	2,305,362	3,578,520	
1989/07		0.50	0.5899	0.5899		120	57.97	2,312,163	3,602,760	
1990/01	322,469	0.50	0.5899	0.5899		120	68.93	2,641,453	3,620,880	
1990/07		0.60	0.5899	0.5899		120	67.58	2,650,801	3,642,240	
1991/01		0.60	0.5899	0.5899		120	67.58	2,660,182	3,663,600	
1991/07		0.70	1.4932	1.4932		120	79.69	2,687,986	3,718,320	
1992/01	25,354	0.70	2.0117	2.0117		120	79.69	2,751,192	3,793,080	
1992/07		0.80	1.8152	1.8152		120	81.36	2,791,145	3,861,960	
1993/01		0.80	1.7710	1.7710		120	81.36	2,830,690	3,930,360	
1993/07		0.90	1.5329	1.5329		120	86.14	2,830,690	3,990,600	5
1994/01		0.90	1.6983	1.6983		120	86.14	2,869,742	4,058,400	5
1994/07		1.00	1.5991	1.5991		120	91.34	2,960,197	4,123,320	
1995/01		1.00	1.5812	1.5812		120	91.34	3,007,004	4,188,480	
1995/07		1.00	1.5250	1.5250		120	86.12	3,052,861	4,252,320	
1996/01		1.00	1.7228	1.7228		120	86.12	3,105,456	4,325,640	
1996/07		1.00	1.3294	1.3294		120	82.74	3,146,740	4,383,120	
1997/01		1.00	1.4109	1.4109		120	82.74	3,191,137	4,444,920	
1997/07		1.00	1.0917	1.0917		120	84.36	3,225,975	4,493,400	
1998/01		1.00	1.1663	1.1663		120	83.72	3,263,600	4,545,840	
1998/07		1.00	1.0794	1.0794		120	83.72	3,298,827	4,594,920	
1999/01		1.00	1.4499	1.4499		120	83.72	3,346,657	4,661,520	
1999/07		1.00	1.2299	1.2299		120	83.72	3,387,818	4,718,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/01		1.00	1.3356	1.3356		120	83.72	3,433,066	4,781,880	
2000/07		1.00	1.1129	1.1129		120	83.72	3,471,273	4,835,040	
2001/01		1.00	1.2976	1.2976		120	79.55	3,516,316	4,897,800	
2001/07	41,949	1.00	0.9615	0.9615		120	70.08	3,592,074	4,944,840	
2002/01	46,317	1.00	1.0301	1.0301		120	70.37	3,638,391	4,995,720	5
2002/07		1.00	0.8337	0.8337		120	70.37	3,706,035	5,037,360	
2003/01		1.00	1.3271	1.3271		120	70.37	3,755,218	5,104,200	
2003/07	57,427	1.00	1.1664	1.1664		120	68.47	3,856,446	5,163,720	
2004/01		1.00	1.1103	1.1103		120	68.47	3,899,264	5,221,080	
2004/07	35,764	1.00	0.8378	0.8378		120	63.78	3,967,696	5,264,880	
2005/01		1.00	0.8595	0.8595		120	63.78	4,001,798	5,310,120	
2005/07		0.95	0.7364	0.7364		120	66.01	4,029,795	5,349,240	
2006/01		0.95	0.9068	0.9068		120	66.01	4,064,512	5,397,720	
2006/07		0.90	0.8133	0.8133		120	71.36	4,094,264	5,441,640	
2007/01		0.90	1.0133	1.0133		120	71.36	4,094,264	5,496,720	5
2007/07		0.85	1.1050	1.1050		120	71.36	4,170,412	5,557,440	
2008/01		0.85	0.8556	0.8556		120	71.36	4,200,743	5,604,960	
2008/07		0.80	0.6104	0.6104		120	60.06	4,221,255	5,639,160	
2009/01		0.80	1.3268	1.3268		120	60.06	4,266,059	5,714,040	
2009/07		0.75	0.6841	0.6841		120	65.63	4,287,948	5,753,160	
2010/01		0.75	0.8643	0.8643		120	65.63	4,315,742	5,802,840	
2010/07		0.70	0.7107	0.7107		120	60.64	4,337,213	5,844,120	
2011/01		0.70	0.9198	0.9198		120	60.64	4,365,140	5,897,880	
2011/07		0.65	0.9028	0.9028		120	60.64	4,390,755	5,951,160	
2012/01		0.65	0.3865	0.3865		120	60.81	4,401,785	5,974,200	
2012/07		0.60	0.9417	0.9417		120	60.81	4,426,655	6,030,480	
2013/01		0.60	0.4901	0.4901		120	62.04	4,439,674	6,060,000	
2013/07		0.55	0.6196	0.6196		120	62.04	4,454,804	6,097,560	
2014/01		0.55	0.8564	0.8564		120	62.71	4,475,786	6,149,760	
2014/07		0.50	1.2383	1.2383		120	62.71	4,503,500	6,225,960	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/01		0.50	0.7571	0.7571		120	62.00	4,520,550	6,273,120	
2015/09		0.45	1.5736	1.5736		120	62.00	4,552,560	6,371,880	
2016/09		0.40	1.9890	1.9890		120	60.30	4,588,780	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 080432123120140101201411172015140607



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Consulate Health Care of Winter Haven

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2701 LAKE ALFRED RD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
WINTER HAVEN, FL 33881	Days in CR 365	Maximum: 43,800	Standard: 366
County: Polk [53]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 41,294	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 16,331	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 22,680	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	54.92323%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.27854%	Cost: 1.07573004
Open Date: 10/02/1998	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/02/1998	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 10/02/1998	Low Occupancy Adjustment Factor:	119.23126%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319724			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,050,569	1,428,014	1,012,817	865,696		4,357,096	
1a	Audit Adjustments							
2	Cost Per Diem	46.3214	62.9636	44.6568	38.1700		192.1118	
3	Cost Per Diem Inflated	49.8293	66.8316	48.0387				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.8293	66.8316	48.0387	38.1700		202.8696	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.3141		59.0692				
7	Provider Target Rate	57.3355		62.3551				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	49.8293	66.8316	48.0387	13.6500		178.3496	
12/13	Medicaid Adjustment Rate		0.3702	0.2661				
14	Prospective Per Diem 11	49.8293	67.2018	48.3048	13.6500		178.9859	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Consulate Health Care of Winter Haven

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/02/1998		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	9,237,328.00		Total Amount	Per Diem
RS to Start Calcs:	1998/07	Type:	Fixed	80% Capital(1):	4,581,170	10.1527
Indexed Asset Value	5,726,462	<60% of Base:	False	20% ROE(2):	1,145,292	0.6598
FRVS Base Asset:	4,545,840	Interest Rate:	6.2000%	Insurance Cost(3):	49,028	1.1873
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	76,060	1.8419
ROE Factor	0.022710	Amortization Rate:	6.2000%	Home Office(3):	46,491	1.1259
		Interest Only:	False	Replacement(3&4):	19,138	0.0000
		Yearly Payment:	400,220	Total FRVS PD:		14.9676

(1) 80% Capital (\$4,581,170) amortized at 6.2000 % for 20 years Principal & Interest of \$400,220 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.1527

(2) 20% ROE (\$1,145,292) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6598

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	37,882
Comparison Date: 01/01/1998	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	4,545,840

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.8293	49.8293	2.2607	47.5686
Direct Care	67.2018	67.2018	3.0489	64.1529
Indirect Care	48.3048	48.3048	2.1916	46.1132
Property	13.6500	14.9676	0.6791	14.2885
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.4190
Supplemental Rate				8.1814
Totals	178.9859	180.3035	8.1803	196.7236

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/07	6,816,579	0.00	1.0794	1.0794		120	41.20	4,545,840	4,545,840	1
1999/01		0.10	1.4499	1.4499		120	41.20	4,550,778	4,661,520	
1999/07		0.10	1.2299	1.2299		120	41.20	4,554,971	4,718,880	
2000/01		0.20	1.3356	1.3356		120	41.20	4,564,085	4,781,880	
2000/07	41,309	0.20	1.1129	1.1129		120	49.95	4,614,621	4,835,040	
2001/01	24,355	0.30	1.2976	1.2976		120	51.59	4,655,827	4,897,800	
2001/07		0.30	0.9615	0.9615		120	51.59	4,668,426	4,944,840	
2002/01		0.40	1.0301	1.0301		120	51.59	4,686,467	4,995,720	
2002/07		0.40	0.8337	0.8337		120	51.59	4,701,127	5,037,360	
2003/01		0.50	1.3271	1.3271		120	51.59	4,730,389	5,104,200	
2003/07	20,160	0.50	1.1664	1.1664		120	52.21	4,776,737	5,163,720	
2004/01		0.60	1.1103	1.1103		120	52.21	4,806,945	5,221,080	
2004/07		0.60	0.8378	0.8378		120	48.94	4,828,447	5,264,880	
2005/01		0.70	0.8595	0.8595		120	48.94	4,854,299	5,310,120	
2005/07		0.70	0.7364	0.7364		120	43.63	4,874,150	5,349,240	
2006/01		0.80	0.9068	0.9068		120	43.63	4,902,198	5,397,720	
2006/07	48,564	0.80	0.8133	0.8133		120	44.11	4,976,341	5,441,640	
2007/01		0.90	1.0133	1.0133		120	44.11	5,012,739	5,496,720	
2007/07		0.90	1.1050	1.1050		120	43.09	5,051,796	5,557,440	
2008/01		1.00	0.8556	0.8556		120	43.09	5,085,659	5,604,960	
2008/07		1.00	0.6104	0.6104		120	40.76	5,108,665	5,639,160	
2009/01		1.00	1.3268	1.3268		120	40.76	5,158,897	5,714,040	
2009/07		1.00	0.6841	0.6841		120	43.14	5,186,579	5,753,160	
2010/01		1.00	0.8643	0.8643		120	43.14	5,221,740	5,802,840	
2010/07		1.00	0.7107	0.7107		120	43.35	5,250,990	5,844,120	
2011/01		1.00	0.9198	0.9198		120	43.35	5,289,058	5,897,880	
2011/07		1.00	0.9028	0.9028		120	43.35	5,326,693	5,951,160	
2012/01		1.00	0.3865	0.3865		120	43.10	5,342,826	5,974,200	
2012/07		1.00	0.9417	0.9417		120	43.10	5,382,253	6,030,480	
2013/01		1.00	0.4901	0.4901		120	40.09	5,382,253	6,060,000	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07		1.00	0.6196	0.6196		120	40.09	5,425,875	6,097,560	
2014/01		1.00	0.8564	0.8564		120	39.17	5,458,968	6,149,760	
2014/07		1.00	1.2383	1.2383		120	39.17	5,507,110	6,225,960	
2015/01		1.00	0.7571	0.7571		120	46.01	5,541,989	6,273,120	
2015/09		1.00	1.5736	1.5736		120	46.01	5,614,943	6,371,880	
2016/09		1.00	1.9890	1.9890		120	54.92	5,726,462	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 080434123120140101201407302015130228



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0080436-00 - 2016/09

219.43

Franco Nursing and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
800 NW 95TH STREET	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
MIAMI, FL 33150	Days in CR 365	Maximum: 43,800	Standard: 366
County: Dade [13]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 40,923	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 10,912	Inflation
Current Class South Large	Initial CR? False	Medicaid: 28,876	FY Index: 1.34193004
Class at 1/94: South Large	Medicaid Utilization	70.56179%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.43151%	Cost: 1.07573004
Open Date: 01/04/1996	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/04/1996	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 01/04/1996	Low Occupancy Adjustment Factor:	118.16004%	DC Sem Index: 1.30450000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 319554			PS Target: 1.05562807

Rate Calculations								
Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,537,768	2,018,805	1,419,643	1,113,747		6,089,963	
1a	Audit Adjustments							
2	Cost Per Diem	53.2542	69.9129	49.1634	38.5700		210.9005	
3	Cost Per Diem Inflated	57.2871	74.2078	52.8865				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.2871	74.2078	52.8865	38.5700		222.9514	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.6457		61.6994				
7	Provider Target Rate	65.0749		65.1316				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	57.2871	74.2078	52.8865	13.6500		198.0314	
12/13	Medicaid Adjustment Rate		1.7166	1.2234				
14	Prospective Per Diem 11	57.2871	75.9244	54.1099	13.6500		200.9714	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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Franco Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/04/1996		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,912,591.00		Total Amount	Per Diem
RS to Start Calcs:	1996/01	Type:	Fixed	80% Capital(1):	4,753,403	10.5344
Indexed Asset Value	5,941,754	<60% of Base:	False	20% ROE(2):	1,188,351	0.6846
FRVS Base Asset:	4,252,320	Interest Rate:	6.2000%	Insurance Cost(3):	47,199	1.1534
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	60,967	1.4898
ROE Factor	0.022710	Amortization Rate:	6.2000%	Home Office(3):	50,285	1.2288
		Interest Only:	False	Replacement(3&4):	18,833	0.0000
		Yearly Payment:	415,267	Total FRVS PD:		15.0910

(1) 80% Capital (\$4,753,403) amortized at 6.2000 % for 20 years Principal & Interest of \$415,267 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.5344

(2) 20% ROE (\$1,188,351) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6846

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1995	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	4,252,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.2871	57.2871	2.5991	54.6880
Direct Care	75.9244	75.9244	3.4447	72.4797
Indirect Care	54.1099	54.1099	2.4549	51.6550
Property	13.6500	15.0910	0.6847	14.4063
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.0162
Supplemental Rate				8.1814
Totals	200.9714	202.4124	9.1834	219.4266

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 080436-00 - 2016/09

219.43

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/01	5,437,248	0.00	1.7228	1.7228		120	57.16	4,252,320	4,252,320	1
1996/07		0.10	1.3294	1.3294		120	57.16	4,257,971	4,383,120	
1997/01		0.10	1.4109	1.4109		120	57.16	4,263,979	4,444,920	
1997/07		0.20	1.0917	1.0917		120	57.16	4,273,287	4,493,400	
1998/01		0.20	1.1663	1.1663		120	57.16	4,283,257	4,545,840	
1998/07		0.30	1.0794	1.0794		120	59.80	4,297,126	4,594,920	
1999/01		0.30	1.4499	1.4499		120	69.58	4,315,818	4,661,520	
1999/07		0.40	1.2299	1.2299		120	69.58	4,337,052	4,718,880	
2000/01		0.40	1.3356	1.3356		120	69.58	4,360,221	4,781,880	
2000/07		0.50	1.1129	1.1129		120	69.58	4,384,486	4,835,040	
2001/01		0.50	1.2976	1.2976		120	69.58	4,412,933	4,897,800	
2001/07	30,251	0.60	0.9615	0.9615		120	76.63	4,468,642	4,944,840	
2002/01	48,788	0.60	1.0301	1.0301		120	75.04	4,545,051	4,995,720	
2002/07		0.70	0.8337	0.8337		120	75.04	4,571,576	5,037,360	
2003/01		0.70	1.3271	1.3271		120	75.04	4,614,046	5,104,200	
2003/07		0.80	1.1664	1.1664		120	75.04	4,657,100	5,163,720	
2004/01	88,086	0.80	1.1103	1.1103		120	73.40	4,786,550	5,221,080	
2004/07		0.90	0.8378	0.8378		120	73.40	4,822,641	5,264,880	
2005/01		0.90	0.8595	0.8595		120	73.40	4,859,949	5,310,120	
2005/07		1.00	0.7364	0.7364		120	67.04	4,895,738	5,349,240	
2006/01		1.00	0.9068	0.9068		120	67.04	4,940,133	5,397,720	
2006/07		1.00	0.8133	0.8133		120	67.75	4,980,311	5,441,640	
2007/01		1.00	1.0133	1.0133		120	67.75	5,030,776	5,496,720	
2007/07		1.00	1.1050	1.1050		120	63.03	5,086,366	5,557,440	
2008/01		1.00	0.8556	0.8556		120	63.03	5,129,885	5,604,960	
2008/07		1.00	0.6104	0.6104		120	68.71	5,161,198	5,639,160	
2009/01		1.00	1.3268	1.3268		120	68.71	5,229,677	5,714,040	
2009/07		1.00	0.6841	0.6841		120	68.71	5,265,453	5,753,160	
2010/01		1.00	0.8643	0.8643		120	68.71	5,310,962	5,802,840	
2010/07		1.00	0.7107	0.7107		120	68.71	5,348,707	5,844,120	



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219.43

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/01		1.00	0.9198	0.9198		120	68.71	5,397,904	5,897,880	
2011/07		1.00	0.9028	0.9028		120	72.27	5,446,636	5,951,160	
2012/01		1.00	0.3865	0.3865		120	69.16	5,467,687	5,974,200	
2012/07		1.00	0.9417	0.9417		120	62.17	5,519,176	6,030,480	
2013/01		1.00	0.4901	0.4901		120	62.17	5,546,225	6,060,000	
2013/07		1.00	0.6196	0.6196		120	62.17	5,580,589	6,097,560	
2014/01		1.00	0.8564	0.8564		120	59.45	5,628,381	6,149,760	
2014/07		1.00	1.2383	1.2383		120	59.45	5,698,077	6,225,960	
2015/01		1.00	0.7571	0.7571		120	67.08	5,741,217	6,273,120	
2015/09		1.00	1.5736	1.5736		120	67.08	5,831,561	6,371,880	
2016/09		0.95	1.9890	1.9890		120	70.56	5,941,754	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0082204-00 - 2016/09

240.61

University Plaza Rehabilitation & Nursing Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
724 NW 19TH ST	3/1/2014-2/28/2015	Number of Beds: 148	Superior: 0
MIAMI, FL 33136	Days in CR 365	Maximum: 54,020	Standard: 366
County: Dade [13]	First Used : 2016/09	Max Annualized: 54,020	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 35,623	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 8,469	Inflation
Current Class South Large	Initial CR? False	Medicaid: 21,188	FY Index: 1.34732075
Class at 1/94: South Large	Medicaid Utilization	59.47843%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	65.94409%	Cost: 1.07142598
Open Date: 05/02/2013	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/23/2011	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23299675
Entered Medicaid 08/22/2013	Low Occupancy Adjustment Factor:	83.39752%	DC Sem Index: 1.30450000
Med # Active Date: 08/22/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05799143
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,249,908	1,723,208	1,240,476	990,963		5,204,555	
1a	Audit Adjustments							
2	Cost Per Diem	58.9913	81.3294	58.5462	46.7700		245.6369	
3	Cost Per Diem Inflated	63.2048	86.0458	62.7279				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	63.2048	86.0458	62.7279	46.7700		258.7485	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	135.9926		106.4789				
7	Provider Target Rate	143.5576		112.4021				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	60.9942		70.7695				
10b	Base for line 10a	57.7800		67.0402				
11	Lesser of 5,7,8,10, 10a	58.7902	86.0458	62.7279	13.6500		221.2139	
12/13	Medicaid Adjustment Rate		0.9175	0.6689				
14	Prospective Per Diem 11	58.7902	86.9633	63.3968	13.6500		222.8003	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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240.61

University Plaza Rehabilitation & Nursing Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/22/2013		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	19,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	2011/07	Type:	Variable	80% Capital(1):	6,026,105	8.7618
Indexed Asset Value	7,532,631	<60% of Base:	False	20% ROE(2):	1,506,526	0.6780
FRVS Base Asset:	0	Interest Rate:	3.6767%	Insurance Cost(3):	128,463	3.6062
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	0	0.0000
ROE Factor	0.021880	Amortization Rate:	3.6767%	Home Office(3):	26,524	0.7446
		Interest Only:	False	Replacement(3&4):	28,341	0.0000
		Yearly Payment:	425,983	Total FRVS PD:		13.7906

(1) 80% Capital (\$6,026,105) amortized at 3.6767 % for 20 years Principal & Interest of \$425,983 divided by annual available days (54020) divided by Occup. Adj. (0.90) = \$8.7618

(2) 20% ROE (\$1,506,526) times the ROE factor (0.021880) divided by annual available days (54020) divided by Occup. Adj. (0.90) = \$0.6780

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/2012	Current RS PBS:	54,155
Comparison Bed	148	Effective PBS Limitation	7,437,592

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	86.9633	86.9633	3.9455	83.0178
Indirect Care	63.3968	63.3968	2.8763	60.5205
Property	13.6500	13.7906	0.6257	13.1649
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.6016
Supplemental Rate				8.1814
Totals	222.8003	222.9409	10.1148	240.6091

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 082204-00 - 2016/09

240.61

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07	25,524,908	0.00	0.6196	0.6196		148	63.78	7,437,592	7,437,592	1
2014/01		0.10	0.8564	0.8564		148	63.78	7,443,959	7,584,704	
2014/07		0.10	1.2383	1.2383		148	63.78	7,453,175	7,678,684	
2015/01		0.20	0.7571	0.7571		148	63.78	7,464,459	7,736,848	
2015/09		0.20	1.5736	1.5736		148	63.78	7,487,950	7,858,652	
2016/09		0.30	1.9890	1.9890		148	59.48	7,532,631	8,014,940	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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0085643-00 - 2016/09

274.13

Sarasota Point Rehabilitation Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2600 COURTLAND STREET	10/24/2013-10/31/2014	Number of Beds: 120	Superior: 0
SARASOTA, FL 34237	Days in CR 373	Maximum: 44,760	Standard: 366
County: Sarasota [58]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 12,607	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,416	Inflation
Current Class South Large	Initial CR? False	Medicaid: 7,419	FY Index: 1.33689974
Class at 1/94: South Large	Medicaid Utilization	58.84826%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	28.16577%	Cost: 1.07977764
Open Date: 06/27/2006	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/27/2006	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 06/27/2006	Low Occupancy Adjustment Factor:	35.62041%	DC Sem Index: 1.30450000
Med # Active Date: 10/24/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 317136			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	645,652	751,066	681,120	200,313		2,278,151	
1a	Audit Adjustments							
2	Cost Per Diem	87.0268	101.2355	91.8075	27.0000		307.0698	
3	Cost Per Diem Inflated	93.9696	107.6591	99.1317				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	93.9696	107.6591	99.1317	27.0000		327.7604	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	95.2143		100.4448				
7	Provider Target Rate	100.5109		106.0324				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	60.2819		69.5479				
10b	Base for line 10a	57.1052		65.8830				
11	Lesser of 5,7,8,10, 10a	58.7902	104.3884	69.5479	13.6500		246.3765	
12/13	Medicaid Adjustment Rate		1.0391	0.6923				
14	Prospective Per Diem 11	58.7902	105.4275	70.2402	13.6500		248.1079	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

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274.13

Sarasota Point Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/27/2006		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,500,000.00		Total Amount	Per Diem
RS to Start Calcs:	2006/01	Type:	Fixed	80% Capital(1):	4,897,686	10.8976
Indexed Asset Value	6,122,107	<60% of Base:	False	20% ROE(2):	1,224,421	0.7107
FRVS Base Asset:	5,349,240	Interest Rate:	6.8600%	Insurance Cost(3):	52,643	4.1757
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	76,380	6.0585
ROE Factor	0.022880	Amortization Rate:	6.2500%	Home Office(3):	2,767	0.2195
		Interest Only:	False	Replacement(3&4):	154,936	0.0000
		Yearly Payment:	429,583	Total FRVS PD:		22.0620

(1) 80% Capital (\$4,897,686) amortized at 6.2500 % for 20 years Principal & Interest of \$429,583 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.8976

(2) 20% ROE (\$1,224,421) times the ROE factor (0.022880) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7107

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/2005	Current RS PBS:	44,577
Comparison Bed	120	Effective PBS Limitation	54,155
			5,349,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	105.4275	105.4275	4.7832	100.6443
Indirect Care	70.2402	70.2402	3.1868	67.0534
Property	13.6500	22.0620	1.0009	21.0611
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.0675
Supplemental Rate				8.1814
Totals	248.1079	256.5199	11.6382	274.1306

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 10/31/2014

0 085643-00 - 2016/09

274.13

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01	7,781,634	0.00	0.9068	0.9068		120	36.53	5,349,240	5,349,240	1
2006/07		0.10	0.8133	0.8133		120	36.53	5,352,128	5,441,640	
2007/01		0.10	1.0133	1.0133		120	36.53	5,355,729	5,496,720	
2007/07		0.20	1.1050	1.1050		120	36.53	5,363,590	5,557,440	
2008/01		0.20	0.8556	0.8556		120	36.53	5,369,685	5,604,960	
2008/07		0.30	0.6104	0.6104		120	36.53	5,376,215	5,639,160	
2009/01		0.30	1.3268	1.3268		120	36.53	5,390,427	5,714,040	
2009/07		0.40	0.6841	0.6841		120	36.53	5,400,222	5,753,160	
2010/01		0.40	0.8643	0.8643		120	47.28	5,416,270	5,802,840	
2010/07		0.50	0.7107	0.7107		120	47.28	5,416,270	5,844,120	5
2011/01		0.50	0.9198	0.9198		120	61.09	5,457,804	5,897,880	
2011/07		0.60	0.9028	0.9028		120	61.09	5,487,369	5,951,160	11
2012/01		0.60	0.9028	0.9028		120	61.09	5,487,369	5,974,200	11
2012/07		0.60	0.9028	0.9028		120	61.09	5,487,369	6,030,480	11
2013/01		0.60	0.9028	0.9028		120	61.09	5,487,369	6,060,000	11
2013/07	283,378	0.60	0.6196	0.6196		120	58.85	5,770,747	6,097,560	12
2014/01	14,448	0.60	0.8564	0.8564		120	58.85	5,814,845	6,149,760	
2014/07	43,106	0.70	1.2383	1.2383		120	58.85	5,908,354	6,225,960	
2015/01		0.70	0.7571	0.7571		120	58.85	5,939,668	6,273,120	
2015/09		0.80	1.5736	1.5736		120	58.85	6,014,442	6,371,880	
2016/09		0.90	1.9890	1.9890		120	58.85	6,122,107	6,498,600	

Message Code:

- | | |
|----|----------------------------------|
| 1 | Per Bed Standard Limitation |
| 5 | Uncorrected Licensure Deficiency |
| 11 | Not in Medicaid |
| 12 | Re-Entry to Medicaid |



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0086990-00 - 2016/09

252.32

Bartram Crossing

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
6209 BROOKS BARTRAM DRIV JACKSONVILLE, FL 32258	7/9/2013-12/31/2014	Number of Beds: 100	Superior: 0
County: Duval [16]	Days in CR 541	Maximum: 54,100	Standard: 366
Region: North Area: 4	First Used : 2016/09	Max Annualized: 36,500	Conditional: 0
Control: Nonprofit : 501(c)(3) Organization	Last Used: 2016/09	Total Patient: 37,192	Total: 366
Current Class North Small	Unaudited	Medicare: 22,464	Inflation
Class at 1/94: North Small	Initial CR? False	Medicaid: 8,470	FY Index: 1.33439166
Operating Ex > 18 months	Medicaid Utilization	22.77371%	Semester Index: 1.44355445
Open Date: 07/09/2013	Occupancy:	68.74677%	Cost: 1.08180716
Acquired Date: 06/01/2013	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 07/09/2013	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Med # Active Date: 07/09/2013	Low Occupancy Adjustment Factor:	86.94199%	DC Sem Index: 1.30450000
Previous Med #	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	714,106	1,061,919	869,866	431,970		3,077,861	
1a	Audit Adjustments							
2	Cost Per Diem	84.3100	125.3741	102.6996	51.0000		363.3837	
3	Cost Per Diem Inflated	91.2072	133.4562	111.1012				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	91.2072	133.4562	111.1012	51.0000		386.7646	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	63.2241		71.6341				
10b	Base for line 10a	59.8924		67.8592				
11	Lesser of 5,7,8,10, 10a	59.8766	100.8980	71.6341	13.6500		246.0587	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	59.8766	100.8980	71.6341	13.6500		246.0587	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0 086990-00 - 2016/09

252.32

Bartram Crossing

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/09/2013		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	17,276,000.00		Total Amount	Per Diem
RS to Start Calcs:	2013/01	Type:	Variable	80% Capital(1):	4,066,126	8.8946
Indexed Asset Value	5,082,658	<60% of Base:	False	20% ROE(2):	1,016,532	0.6963
FRVS Base Asset:	0	Interest Rate:	3.8638%	Insurance Cost(3):	11,499	0.3092
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	27,994	0.7527
ROE Factor	0.022500	Amortization Rate:	3.8638%	Home Office(3):	125,633	3.3780
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	292,189	Total FRVS PD:		14.0308

(1) 80% Capital (\$4,066,126) amortized at 3.8638 % for 20 years Principal & Interest of \$292,189 divided by annual available days (36500) divided by Occup. Adj. (0.90) = \$8.8946

(2) 20% ROE (\$1,016,532) times the ROE factor (0.022500) divided by annual available days (36500) divided by Occup. Adj. (0.90) = \$0.6963

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	50,500
Comparison Date: 01/01/2013	Current RS PBS:	54,155
Comparison Bed 100	Effective PBS Limitation	5,050,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	59.8766	59.8766	2.7166	57.1600
Direct Care	100.8980	100.8980	4.5777	96.3203
Indirect Care	71.6341	71.6341	3.2500	68.3841
Property	13.6500	14.0308	0.6366	13.3942
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				8.8834
Supplemental Rate				8.1814
Totals	246.0587	246.4395	11.1809	252.3234

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 086990-00 - 2016/09
252.32

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/07	14,983,099	0.00	0.6196	0.6196		100	52.54	5,050,000	5,050,000	1
2014/01		0.10	0.8564	0.8564		100	52.54	5,054,129	5,124,800	
2014/07		0.10	1.2383	1.2383		100	52.54	5,060,106	5,188,300	
2015/01		0.20	0.7571	0.7571		100	52.54	5,067,424	5,227,600	
2015/09		0.20	1.5736	1.5736		100	52.54	5,082,658	5,309,900	
2016/09		0.30	1.9890	1.9890		100	22.77	5,082,658	5,415,500	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 086990123120140709201307282015142207



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0088049-00 - 2016/09

221.04

Cross Gardens Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
190 NE 191ST STREET	5/1/2014-1/31/2015	Number of Beds: 120	Superior: 0
MIAMI, FL 33179	Days in CR 276	Maximum: 33,120	Standard: 366
County: Dade [13]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 25,710	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,392	Inflation
Current Class South Large	Initial CR? False	Medicaid: 22,844	FY Index: 1.35002422
Class at 1/94: South Large	Medicaid Utilization	88.85259%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	77.62681%	Cost: 1.06928041
Open Date: 02/04/1992	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/04/1992	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23500000
Entered Medicaid 03/11/1992	Low Occupancy Adjustment Factor:	98.17231%	DC Sem Index: 1.30450000
Med # Active Date: 10/11/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05627530
Previous Med # 210617			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	985,719	1,774,390	1,060,747	223,643		4,044,499
1a	Audit Adjustments						
2	Cost Per Diem	43.1500	77.6742	46.4344	9.7900		177.0486
3	Cost Per Diem Inflated	46.1394	82.0453	49.6514			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.1394	82.0453	49.6514	9.7900		187.6261
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	62.8284		76.4563			
7	Provider Target Rate	66.3234		80.7094			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	65.9263		75.3838			
10b	Base for line 10a	62.4522		71.4113			
11	Lesser of 5,7,8,10, 10a	46.1394	82.0453	49.6514	9.7900		187.6261
12/13	Medicaid Adjustment Rate		3.5861	2.1702			
14	Prospective Per Diem 11	46.1394	85.6314	51.8216	9.7900		193.3824
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 088049-00 - 2016/09

221.04

Cross Gardens Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 03/11/1992		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,300,000.00		Total Amount	Per Diem
RS to Start Calcs:	1992/01	Type:	Fixed	80% Capital(1):	4,388,886	13.7904
Indexed Asset Value	5,486,107	<60% of Base:	False	20% ROE(2):	1,097,221	0.6185
FRVS Base Asset:	3,718,320	Interest Rate:	11.1250%	Insurance Cost(3):	20,995	0.8166
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	36,310	1.4123
ROE Factor	0.022220	Amortization Rate:	11.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	543,619	Total FRVS PD:		16.6378

(1) 80% Capital (\$4,388,886) amortized at 11.0000 % for 20 years Principal & Interest of \$543,619 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$13.7904

(2) 20% ROE (\$1,097,221) times the ROE factor (0.022220) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6185

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,986
Comparison Date: 07/01/1991	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,718,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.1394	46.1394	2.0933	44.0461
Direct Care	85.6314	85.6314	3.8851	81.7463
Indirect Care	51.8216	51.8216	2.3511	49.4705
Property	9.7900	16.6378	0.7548	15.8830
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.7103
Supplemental Rate				8.1814
Totals	193.3824	200.2302	9.0843	221.0376

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 1/31/2015

0 088049-00 - 2016/09

221.04

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1992/01	4,097,160	0.00	2.0117	2.0117		120	62.53	3,718,320	3,718,320	1
1992/07		0.10	1.8152	1.8152		120	62.53	3,725,069	3,861,960	
1993/01		0.10	1.7710	1.7710		120	62.53	3,731,666	3,930,360	
1993/07		0.20	1.5329	1.5329		120	62.53	3,731,666	3,990,600	5
1994/01		0.20	1.6983	1.6983		120	62.53	3,743,107	4,058,400	5
1994/07		0.30	1.5991	1.5991		120	62.53	3,773,839	4,123,320	
1995/01		0.30	1.5812	1.5812		120	62.53	3,791,742	4,188,480	
1995/07		0.40	1.5250	1.5250		120	72.51	3,814,872	4,252,320	
1996/01		0.40	1.7228	1.7228		120	68.63	3,841,160	4,325,640	
1996/07		0.50	1.3294	1.3294		120	68.63	3,866,692	4,383,120	
1997/01		0.50	1.4109	1.4109		120	70.48	3,893,972	4,444,920	
1997/07		0.60	1.0917	1.0917		120	70.48	3,919,478	4,493,400	
1998/01		0.60	1.1663	1.1663		120	70.48	3,946,907	4,545,840	
1998/07		0.70	1.0794	1.0794		120	80.97	3,976,730	4,594,920	
1999/01		0.70	1.4499	1.4499		120	80.97	3,976,730	4,661,520	5
1999/07		0.80	1.2299	1.2299		120	79.43	4,017,090	4,718,880	5
2000/01		0.80	1.3356	1.3356		120	75.31	4,056,614	4,781,880	5
2000/07		0.90	1.1129	1.1129		120	75.31	4,141,024	4,835,040	
2001/01		0.90	1.2976	1.2976		120	74.05	4,189,383	4,897,800	
2001/07		1.00	0.9615	0.9615		120	74.05	4,229,664	4,944,840	
2002/01		1.00	1.0301	1.0301		120	80.72	4,273,234	4,995,720	
2002/07		1.00	0.8337	0.8337		120	80.72	4,308,860	5,037,360	
2003/01		1.00	1.3271	1.3271		120	76.27	4,366,043	5,104,200	
2003/07		1.00	1.1664	1.1664		120	76.27	4,416,969	5,163,720	
2004/01		1.00	1.1103	1.1103		120	75.22	4,466,011	5,221,080	
2004/07		1.00	0.8378	0.8378		120	75.22	4,503,427	5,264,880	
2005/01		1.00	0.8595	0.8595		120	80.90	4,542,134	5,310,120	
2005/07		1.00	0.7364	0.7364		120	80.90	4,575,582	5,349,240	
2006/01		1.00	0.9068	0.9068		120	80.90	4,617,073	5,397,720	
2006/07		1.00	0.8133	0.8133		120	80.81	4,654,624	5,441,640	



Florida Agency for Health Care Administration
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 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 1/31/2015

0 088049-00 - 2016/09

221.04

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/01		1.00	1.0133	1.0133		120	80.81	4,701,789	5,496,720	
2007/07		1.00	1.1050	1.1050		120	76.56	4,753,744	5,557,440	
2008/01		1.00	0.8556	0.8556		120	80.74	4,794,417	5,604,960	
2008/07		1.00	0.6104	0.6104		120	80.74	4,823,682	5,639,160	
2009/01		1.00	1.3268	1.3268		120	78.74	4,887,683	5,714,040	
2009/07		1.00	0.6841	0.6841		120	78.74	4,921,120	5,753,160	
2010/01		1.00	0.8643	0.8643		120	76.87	4,963,653	5,802,840	
2010/07		1.00	0.7107	0.7107		120	76.87	4,998,930	5,844,120	
2011/01		1.00	0.9198	0.9198		120	76.58	5,044,910	5,897,880	
2011/07		1.00	0.9028	0.9028		120	76.58	5,090,455	5,951,160	
2012/01		1.00	0.3865	0.3865		120	78.47	5,110,130	5,974,200	
2012/07		0.95	0.9417	0.9417		120	85.32	5,155,845	6,030,480	
2013/01		0.95	0.4901	0.4901		120	85.32	5,179,851	6,060,000	
2013/07		0.90	0.6196	0.6196		120	85.32	5,208,734	6,097,560	
2014/01		0.90	0.8564	0.8564		120	85.32	5,248,883	6,149,760	
2014/07		0.85	1.2383	1.2383		120	85.32	5,304,133	6,225,960	
2015/01		0.85	0.7571	0.7571		120	86.13	5,338,265	6,273,120	
2015/09		0.80	1.5736	1.5736		120	86.13	5,405,468	6,371,880	
2016/09		0.75	1.9890	1.9890		120	88.85	5,486,107	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 088049013120150501201408132015095740



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0088601-00 - 2016/09

258.89

Whitehall Boca Raton

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
7300 DEL PRADO CIRCLE SOU BOCA RATON, FL 33433	8/2/2013-12/31/2014	Number of Beds: 154	Superior: 0
County: Palm Beach [50]	Days in CR 517	Maximum: 79,618	Standard: 366
Region: South Area: 9	First Used : 2016/09	Max Annualized: 56,210	Conditional: 0
Control: Proprietary : Corporation	Last Used: 2016/09	Total Patient: 61,520	Total: 366
Current Class South Large	Unaudited	Medicare: 38,332	Inflation
Class at 1/94: South Large	Initial CR? False	Medicaid: 11,496	FY Index: 1.33689974
Operating Ex > 18 months	Medicaid Utilization	18.68661%	Semester Index: 1.44355445
Open Date: 12/16/1982	Occupancy:	77.26896%	Cost: 1.07977764
Acquired Date: 12/16/1982	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 12/01/2009	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Med # Active Date: 08/02/2013	Low Occupancy Adjustment Factor:	97.71975%	DC Sem Index: 1.30450000
Previous Med # 071884	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	679,988	1,159,513	819,234	625,842		3,284,577	
1a	Audit Adjustments							
2	Cost Per Diem	59.1500	100.8623	71.2625	54.4400		285.7148	
3	Cost Per Diem Inflated	63.8688	107.2622	76.9477				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	63.8688	107.2622	76.9477	54.4400		302.5187	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	66.4784		107.0073				
7	Provider Target Rate	70.1765		112.9599				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	64.4587		72.9880				
10b	Base for line 10a	61.0619		69.1418				
11	Lesser of 5,7,8,10, 10a	58.7902	104.3884	70.3550	13.6500		247.1836	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	58.7902	104.3884	70.3550	13.6500		247.1836	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 088601-00 - 2016/09

258.89

Whitehall Boca Raton

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/01/2009	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	16,500,000.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Variable	80% Capital(1):	3,102,283	4.9587
Indexed Asset Value	3,877,854	<60% of Base:	False	20% ROE(2):	775,571	0.3460
FRVS Base Asset:	0	Interest Rate:	5.5000%	Insurance Cost(3):	241,047	3.9182
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	358,072	5.8204
ROE Factor	0.022570	Amortization Rate:	5.2500%	Home Office(3):	164,175	2.6686
		Interest Only:	False	Replacement(3&4):	60,268	0.0000
		Yearly Payment:	250,855	Total FRVS PD:		17.7119

(1) 80% Capital (\$3,102,283) amortized at 5.2500 % for 20 years Principal & Interest of \$250,855 divided by annual available days (56210) divided by Occup. Adj. (0.90) = \$4.9587

(2) 20% ROE (\$775,571) times the ROE factor (0.022570) divided by annual available days (56210) divided by Occup. Adj. (0.90) = \$0.3460

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	24,796
Comparison Date: 01/01/1982	Current RS PBS:	54,155
Comparison Bed 154	Effective PBS Limitation	3,818,584

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	104.3884	104.3884	4.7360	99.6524
Indirect Care	70.3550	70.3550	3.1920	67.1630
Property	13.6500	17.7119	0.8036	16.9083
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				10.8661
Supplemental Rate				8.1814
Totals	247.1836	251.2455	11.3989	258.8941

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

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258.89

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07	11,421,785	0.00	0.6841	0.6841		154	1.92	3,818,584	3,818,584	1
2010/01		0.10	0.8643	0.8643		154	1.92	3,818,584	7,446,978	
2010/07		0.10	0.7107	0.7107		154	1.92	3,818,584	7,499,954	
2011/01		0.20	0.9198	0.9198		154	1.92	3,818,584	7,568,946	
2011/07		0.20	0.9028	0.9028		154	1.92	3,818,584	7,637,322	
2012/01		0.30	0.3865	0.3865		154	1.92	3,818,584	7,666,890	
2012/07		0.30	0.9417	0.9417		154	6.56	3,818,584	7,739,116	
2013/01	59,270	0.40	0.4901	0.4901		154	6.82	3,877,854	7,777,000	
2013/07		0.40	0.6196	0.6196		154	6.82	3,877,854	7,825,202	
2014/01		0.50	0.8564	0.8564		154	6.82	3,877,854	7,892,192	
2014/07		0.50	1.2383	1.2383		154	6.82	3,877,854	7,989,982	
2015/01		0.60	0.7571	0.7571		154	6.82	3,877,854	8,050,504	
2015/09		0.60	1.5736	1.5736		154	6.82	3,877,854	8,177,246	
2016/09		0.70	1.9890	1.9890		154	18.69	3,877,854	8,339,870	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 088601123120140802201307302015155955



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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254.44

Krystal Bay Nursing and Rehabilitation

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
16650 W DIXIE HWY	2/1/2014-1/31/2015	Number of Beds: 150	Superior: 0
NORTH MIAMI BEACH, FL 331	Days in CR 365	Maximum: 54,750	Standard: 366
County: Dade [13]	First Used : 2016/09	Max Annualized: 54,750	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 29,506	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 3,182	Inflation
Current Class South Large	Initial CR? False	Medicaid: 24,904	FY Index: 1.34462269
Class at 1/94: South Large	Medicaid Utilization	84.40317%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	53.89224%	Cost: 1.07357585
Open Date: 09/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23099675
Entered Medicaid 11/01/1984	Low Occupancy Adjustment Factor:	68.15591%	DC Sem Index: 1.30450000
Med # Active Date: 05/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05971035
Previous Med # 310409			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,616,622	2,234,143	1,324,841	758,327		5,933,933
1a	Audit Adjustments						
2	Cost Per Diem	64.9142	89.7102	53.1979	30.4500		238.2723
3	Cost Per Diem Inflated	69.6903	95.0668	57.1120			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	69.6903	95.0668	57.1120	30.4500		252.3191
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	73.1081		63.1769			
7	Provider Target Rate	77.1750		66.6913			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	59.6894		69.8003			
10b	Base for line 10a	56.5440		66.1221			
11	Lesser of 5,7,8,10, 10a	58.7902	95.0668	57.1120	13.6500		224.6190
12/13	Medicaid Adjustment Rate		3.6794	2.2104			
14	Prospective Per Diem 11	58.7902	98.7462	59.3224	13.6500		230.5088
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Krystal Bay Nursing and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/01/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Variable	80% Capital(1):	6,063,206	13.2852
Indexed Asset Value	7,579,008	<60% of Base:	False	20% ROE(2):	1,515,802	0.6891
FRVS Base Asset:	4,275,000	Interest Rate:	9.0000%	Insurance Cost(3):	76,527	2.5936
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	43,318	1.4681
ROE Factor	0.022400	Amortization Rate:	9.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	57,660	0.0000
		Yearly Payment:	654,627	Total FRVS PD:		18.0360

(1) 80% Capital (\$6,063,206) amortized at 9.0000 % for 20 years Principal & Interest of \$654,627 divided by annual available days (54750) divided by Occup. Adj. (0.90) = \$13.2852

(2) 20% ROE (\$1,515,802) times the ROE factor (0.022400) divided by annual available days (54750) divided by Occup. Adj. (0.90) = \$0.6891

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 150	Effective PBS Limitation	4,275,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	98.7462	98.7462	4.4801	94.2661
Indirect Care	59.3224	59.3224	2.6914	56.6310
Property	13.6500	18.0360	0.8183	17.2177
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.0192
Supplemental Rate				8.1814
Totals	230.5088	234.8948	10.6571	254.4383

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/07	4,293,365	0.00	1.9179	1.9179		150	61.82	4,293,365	4,190,850	
1985/01		0.10	1.1471	1.1471		150	61.82	4,298,289	4,238,850	
1985/10		0.10	0.8522	0.8522		150	61.82	4,275,000	4,275,000	1
1986/01		0.20	0.8299	0.8299		150	61.82	4,282,097	4,310,550	
1986/07		0.20	0.2974	0.2974		150	61.82	4,284,645	4,302,300	
1987/01		0.30	1.0091	1.0091		150	59.18	4,297,615	4,379,250	
1987/07		0.30	0.9007	0.9007		150	66.76	4,309,227	4,413,450	
1988/01		0.40	0.9007	0.9007		150	89.50	4,324,753	4,449,300	
1988/07		0.40	0.5899	0.5899		150	89.50	4,334,959	4,446,900	
1989/01		0.50	0.5899	0.5899		150	89.50	4,347,747	4,473,150	
1989/07		0.50	0.5899	0.5899		150	89.50	4,360,573	4,503,450	
1990/01		0.60	0.5899	0.5899		150	89.50	4,376,005	4,526,100	
1990/07		0.60	0.5899	0.5899		150	89.50	4,391,492	4,552,800	
1991/01		0.70	0.5899	0.5899		150	89.50	4,409,624	4,579,500	
1991/07		0.70	1.4932	1.4932		150	93.40	4,455,713	4,647,900	
1992/01		0.80	2.0117	2.0117		150	93.40	4,527,423	4,741,350	
1992/07		0.80	1.8152	1.8152		150	90.98	4,593,170	4,827,450	
1993/01		0.90	1.7710	1.7710		150	85.00	4,666,381	4,912,950	
1993/07		0.90	1.5329	1.5329		150	85.00	4,730,758	4,988,250	
1994/01		1.00	1.6983	1.6983		150	85.00	4,811,100	5,073,000	
1994/07		1.00	1.5991	1.5991		88	85.00	4,888,034	3,023,768	
1995/01		1.00	1.5812	1.5812		88	85.00	4,965,324	3,071,552	
1995/07	23,166	1.00	1.5250	1.5250		150	82.15	5,064,211	5,315,400	
1996/01		1.00	1.7228	1.7228		150	82.15	5,151,457	5,407,050	
1996/07		1.00	1.3294	1.3294		150	79.31	5,219,940	5,478,900	
1997/01		1.00	1.4109	1.4109		150	79.31	5,293,588	5,556,150	
1997/07		1.00	1.0917	1.0917		150	77.87	5,351,378	5,616,750	
1998/01		1.00	1.1663	1.1663		150	77.87	5,413,791	5,682,300	
1998/07		1.00	1.0794	1.0794		150	77.87	5,413,791	5,743,650	5
1999/01		1.00	1.4499	1.4499		150	73.36	5,472,227	5,826,900	5



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254.44

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07		1.00	1.2299	1.2299		150	82.17	5,551,569	5,898,600	5
2000/01		1.00	1.3356	1.3356		150	82.17	5,694,907	5,977,350	
2000/07		1.00	1.1129	1.1129		150	82.17	5,758,286	6,043,800	
2001/01		1.00	1.2976	1.2976		150	82.17	5,833,006	6,122,250	
2001/07		1.00	0.9615	0.9615		150	82.17	5,889,090	6,181,050	
2002/01		1.00	1.0301	1.0301		150	82.17	5,949,754	6,244,650	
2002/07		1.00	0.8337	0.8337		150	82.17	5,999,357	6,296,700	
2003/01		1.00	1.3271	1.3271		150	76.65	6,078,974	6,380,250	
2003/07		1.00	1.1664	1.1664		150	79.65	6,149,879	6,454,650	
2004/01		1.00	1.1103	1.1103		150	79.65	6,218,161	6,526,350	
2004/07		1.00	0.8378	0.8378		150	84.06	6,270,257	6,581,100	
2005/01		0.95	0.8595	0.8595		150	84.06	6,321,454	6,637,650	
2005/07		0.95	0.7364	0.7364		150	84.30	6,365,679	6,686,550	
2006/01		0.90	0.9068	0.9068		150	84.30	6,417,629	6,747,150	
2006/07		0.90	0.8133	0.8133		150	84.30	6,464,606	6,802,050	
2007/01		0.85	1.0133	1.0133		150	84.30	6,520,286	6,870,900	
2007/07		0.85	1.1050	1.1050		150	84.30	6,581,531	6,946,800	
2008/01	44,169	0.80	0.8556	0.8556		150	88.46	6,670,751	7,006,200	
2008/07	64,904	0.80	0.6104	0.6104		150	86.09	6,768,228	7,048,950	
2009/01		0.75	1.3268	1.3268		150	86.09	6,835,579	7,142,550	
2009/07		0.75	0.6841	0.6841		150	86.09	6,870,652	7,191,450	
2010/01	67,559	0.70	0.8643	0.8643		150	85.39	6,979,778	7,253,550	
2010/07	23,418	0.70	0.7107	0.7107		150	84.86	7,037,920	7,305,150	
2011/01		0.65	0.9198	0.9198		150	84.86	7,080,000	7,372,350	
2011/07	31,700	0.65	0.9028	0.9028		150	83.76	7,153,245	7,438,950	
2012/01		0.60	0.3865	0.3865		150	83.76	7,153,245	7,467,750	5
2012/07	108,558	0.60	0.9417	0.9417		150	83.52	7,318,901	7,538,100	
2013/01		0.55	0.4901	0.4901		150	86.77	7,338,633	7,575,000	
2013/07		0.55	0.6196	0.6196		150	86.77	7,363,643	7,621,950	
2014/01		0.50	0.8564	0.8564		150	86.77	7,395,174	7,687,200	



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254.44

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		150	86.77	7,440,965	7,782,450	
2015/01		0.45	0.7571	0.7571		150	86.77	7,466,316	7,841,400	
2015/09		0.45	1.5736	1.5736		150	86.77	7,519,185	7,964,850	
2016/09		0.40	1.9890	1.9890		150	84.40	7,579,008	8,123,250	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 089220013120150201201406262015092749



Florida Agency for Health Care Administration
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227.28

Osprey Point Nursing Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1104 NORTH MAIN STREET	8/1/2013-1/31/2014	Number of Beds: 60	Superior: 0
BUSHNELL, FL 33513-5045	Days in CR 184	Maximum: 11,040	Standard: 366
County: Sumter [60]	First Used : 2013/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 10,171	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 3,629	Inflation
Current Class North Small	Initial CR? False	Medicaid: 5,496	FY Index: 1.31713889
Class at 1/94: North Small	Medicaid Utilization	54.03598%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.12862%	Cost: 1.09597740
Open Date: 07/02/1999	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/02/1999	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22033188
Entered Medicaid 07/02/1999	Low Occupancy Adjustment Factor:	116.51232%	DC Sem Index: 1.30450000
Med # Active Date: 08/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06897150
Previous Med # 215597			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	372,835	370,848	343,189	335,970		1,422,842
1a	Audit Adjustments						
2	Cost Per Diem	67.8375	67.4760	62.4434	61.1299		258.8868
3	Cost Per Diem Inflated	74.3484	72.1299	68.4366			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	74.3484	72.1299	68.4366	61.1299		276.0448
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	76.0154		69.9711			
7	Provider Target Rate	80.2440		73.8635			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500		
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507			
10	Target Rate Class Ceiling	59.8766		72.7784			
10a	New Provider Target Limitation	57.2461		71.3674			
10b	Base for line 10a	54.2294		67.6066			
11	Lesser of 5,7,8,10, 10a	57.2461	72.1299	68.4366	13.6500		211.4626
12/13	Medicaid Adjustment Rate		0.3275	0.3107			
14	Prospective Per Diem 11	57.2461	72.4574	68.7473	13.6500		212.1008
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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227.28

Osprey Point Nursing Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/02/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,080,000.00		Total Amount	Per Diem
RS to Start Calcs:	1999/07	Type:	Variable	80% Capital(1):	2,449,998	9.8441
Indexed Asset Value	3,062,497	<60% of Base:	False	20% ROE(2):	612,499	0.7057
FRVS Base Asset:	2,330,760	Interest Rate:	5.0000%	Insurance Cost(3):	20,958	2.0606
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	19,303	1.8978
ROE Factor	0.022710	Amortization Rate:	5.0000%	Home Office(3):	11,161	1.0973
		Interest Only:	False	Replacement(3&4):	79,094	0.0000
		Yearly Payment:	194,027	Total FRVS PD:		15.6055

(1) 80% Capital (\$2,449,998) amortized at 5.0000 % for 20 years Principal & Interest of \$194,027 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$9.8441

(2) 20% ROE (\$612,499) times the ROE factor (0.022710) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.7057

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1999	Current RS PBS:	38,846
Comparison Bed	60	Effective PBS Limitation	54,155
			2,330,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.2461	57.2461	2.5972	54.6489
Direct Care	72.4574	72.4574	3.2874	69.1700
Indirect Care	68.7473	68.7473	3.1190	65.6283
Property	13.6500	15.6055	0.7080	14.8975
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				14.7512
Supplemental Rate				8.1814
Totals	212.1008	214.0563	9.7116	227.2773

Medicaid Trend Adjustment



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227.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/07	3,368,748	0.00	1.2299	1.2299		60	49.31	2,330,760	2,330,760	1
2000/01	23,273	0.10	1.3356	1.3356		60	49.31	2,356,825	2,390,940	
2000/07	4,535	0.10	1.1129	1.1129		60	49.31	2,363,712	2,417,520	
2001/01		0.20	1.2976	1.2976		60	49.31	2,369,211	2,448,900	
2001/07		0.20	0.9615	0.9615		60	49.31	2,373,296	2,472,420	
2002/01		0.30	1.0301	1.0301		60	49.31	2,379,871	2,497,860	
2002/07	13,203	0.30	0.8337	0.8337		60	58.49	2,399,026	2,518,680	
2003/01		0.40	1.3271	1.3271		60	58.49	2,411,760	2,552,100	
2003/07		0.40	1.1664	1.1664		60	62.63	2,423,013	2,581,860	
2004/01		0.50	1.1103	1.1103		60	62.63	2,436,466	2,610,540	
2004/07	17,649	0.50	0.8378	0.8378		60	64.63	2,464,321	2,632,440	
2005/01		0.60	0.8595	0.8595		60	64.63	2,477,030	2,655,060	
2005/07		0.60	0.7364	0.7364		60	64.63	2,487,974	2,674,620	
2006/01	13,156	0.70	0.9068	0.9068		60	49.91	2,515,462	2,698,860	
2006/07	43,072	0.70	0.8133	0.8133		60	49.57	2,571,441	2,720,820	
2007/01		0.80	1.0133	1.0133		60	49.57	2,590,227	2,748,360	
2007/07		0.80	1.1050	1.1050		60	42.74	2,608,021	2,778,720	
2008/01		0.90	0.8556	0.8556		60	42.74	2,623,626	2,802,480	
2008/07		0.90	0.6104	0.6104		60	46.57	2,635,831	2,819,580	
2009/01		1.00	1.3268	1.3268		60	46.57	2,665,443	2,857,020	
2009/07		1.00	0.6841	0.6841		60	46.57	2,680,882	2,876,580	
2010/01		1.00	0.8643	0.8643		60	43.87	2,699,364	2,901,420	
2010/07	28,133	1.00	0.7107	0.7107		60	46.61	2,743,755	2,922,060	
2011/01		1.00	0.9198	0.9198		60	46.61	2,765,142	2,948,940	
2011/07		1.00	0.9028	0.9028		60	46.61	2,786,298	2,975,580	
2012/01		1.00	0.3865	0.3865		60	47.03	2,795,507	2,987,100	
2012/07		1.00	0.9417	0.9417		60	47.03	2,818,018	3,015,240	
2013/01		1.00	0.4901	0.4901		60	47.06	2,829,835	3,030,000	
2013/07	29,652	1.00	0.6196	0.6196		60	54.04	2,876,715	3,048,780	
2014/01		1.00	0.8564	0.8564		60	54.04	2,900,921	3,074,880	



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227.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		1.00	1.2383	1.2383		60	54.04	2,936,216	3,112,980	
2015/01		1.00	0.7571	0.7571		60	54.04	2,958,058	3,136,560	
2015/09		1.00	1.5736	1.5736		60	54.04	3,003,794	3,185,940	
2016/09		1.00	1.9890	1.9890		60	54.04	3,062,497	3,249,300	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 092678013120140801201302032015130820



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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234.78

Baya Pointe Nursing and Rehabilitation Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
587 SE ERMINE AVE	8/1/2013-1/31/2014	Number of Beds: 90	Superior: 0
LAKE CITY, FL 32025	Days in CR 184	Maximum: 16,560	Standard: 366
County: Columbia [12]	First Used : 2013/07	Max Annualized: 32,850	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 15,516	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,242	Inflation
Current Class North Small	Initial CR? False	Medicaid: 7,682	FY Index: 1.31713889
Class at 1/94: North Small	Medicaid Utilization	49.51018%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.69565%	Cost: 1.09597740
Open Date: 01/07/1994	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/07/1994	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22033188
Entered Medicaid 01/25/1994	Low Occupancy Adjustment Factor:	118.49409%	DC Sem Index: 1.30450000
Med # Active Date: 08/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06897150
Previous Med # 308111			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	498,250	541,651	517,417	464,915		2,022,233	
1a	Audit Adjustments							
2	Cost Per Diem	64.8594	70.5091	67.3545	60.5200		263.2430	
3	Cost Per Diem Inflated	71.0844	75.3722	73.8190				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	71.0844	75.3722	73.8190	60.5200		280.7956	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	72.6783		75.4742				
7	Provider Target Rate	76.7213		79.6727				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	61.0080		68.8791				
10b	Base for line 10a	57.7931		65.2494				
11	Lesser of 5,7,8,10, 10a	59.8766	75.3722	68.8791	13.6500		217.7779	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	59.8766	75.3722	68.8791	13.6500		217.7779	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Baya Pointe Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/25/1994		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	9,120,000.00		Total Amount	Per Diem
RS to Start Calcs:	1994/01	Type:	Variable	80% Capital(1):	3,855,506	10.3276
Indexed Asset Value	4,819,382	<60% of Base:	False	20% ROE(2):	963,876	0.7404
FRVS Base Asset:	1,995,300	Interest Rate:	5.0000%	Insurance Cost(3):	31,437	2.0261
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	35,190	2.2680
ROE Factor	0.022710	Amortization Rate:	5.0000%	Home Office(3):	15,840	1.0209
		Interest Only:	False	Replacement(3&4):	73,752	0.0000
		Yearly Payment:	305,336	Total FRVS PD:		16.3830

(1) 80% Capital (\$3,855,506) amortized at 5.0000 % for 20 years Principal & Interest of \$305,336 divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$10.3276

(2) 20% ROE (\$963,876) times the ROE factor (0.022710) divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$0.7404

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1993	Current RS PBS:	54,155
Comparison Bed	60	Effective PBS Limitation	1,995,300

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	59.8766	59.8766	2.7166	57.1600
Direct Care	75.3722	75.3722	3.4196	71.9526
Indirect Care	68.8791	68.8791	3.1250	65.7541
Property	13.6500	16.3830	0.7433	15.6397
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.0929
Supplemental Rate				8.1814
Totals	217.7779	220.5109	10.0045	234.7807

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/01	2,178,057	0.00	1.6983	1.6983		60	79.33	1,995,300	1,995,300	1
1994/07		0.10	1.5991	1.5991		60	79.33	1,998,490	2,061,660	
1995/01		0.10	1.5812	1.5812		60	79.33	2,001,650	2,094,240	
1995/07		0.20	1.5250	1.5250		60	79.33	2,001,650	2,126,160	5
1996/01		0.20	1.7228	1.7228		60	79.33	2,014,674	2,162,820	
1996/07		0.30	1.3294	1.3294		60	79.33	2,022,709	2,191,560	
1997/01		0.30	1.4109	1.4109		60	79.35	2,031,271	2,222,460	
1997/07		0.40	1.0917	1.0917		60	79.35	2,040,142	2,246,700	
1998/01		0.40	1.1663	1.1663		60	79.35	2,049,659	2,272,920	
1998/07		0.50	1.0794	1.0794		60	68.14	2,060,721	2,297,460	
1999/01		0.50	1.4499	1.4499		60	68.14	2,075,661	2,330,760	
1999/07		0.60	1.2299	1.2299		60	70.82	2,090,977	2,359,440	
2000/01		0.60	1.3356	1.3356		60	70.82	2,107,734	2,390,940	
2000/07	20,228	0.70	1.1129	1.1129		60	67.85	2,144,381	2,417,520	
2001/01		0.70	1.2976	1.2976		60	67.85	2,163,858	2,448,900	
2001/07	10,969	0.80	0.9615	0.9615		60	77.89	2,191,471	2,472,420	
2002/01		0.80	1.0301	1.0301		60	77.89	2,191,471	2,497,860	5
2002/07	11,227	0.90	0.8337	0.8337		60	76.26	2,237,336	2,518,680	
2003/01		0.90	1.3271	1.3271		60	76.26	2,264,059	2,552,100	
2003/07	10,636	1.00	1.1664	1.1664		60	78.22	2,301,103	2,581,860	
2004/01		1.00	1.1103	1.1103		60	78.22	2,326,652	2,610,540	
2004/07		1.00	0.8378	0.8378		60	71.37	2,346,145	2,632,440	
2005/01	42,668	1.00	0.8595	0.8595		60	66.86	2,408,978	2,655,060	
2005/07	11,451	1.00	0.7364	0.7364		60	66.86	2,438,169	2,674,620	
2006/01	33,423	1.00	0.9068	0.9068		60	66.86	2,493,701	2,698,860	
2006/07	576	1.00	0.8133	0.8133		60	66.86	2,514,558	2,720,820	
2007/01		1.00	1.0133	1.0133		60	66.86	2,540,038	2,748,360	
2007/07		1.00	1.1050	1.1050		60	66.86	2,568,105	2,778,720	
2008/01	2,445,774	1.00	0.8556	0.8556		90	61.91	4,203,720	4,203,720	8
2008/07		1.00	0.6104	0.6104		90	61.91	4,229,370	4,229,370	8



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234.78

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/01		1.00	1.3268	1.3268		90	61.91	4,285,485	4,285,530	
2009/07		1.00	0.6841	0.6841		90	46.35	4,310,191	4,314,870	
2010/01	16,736	1.00	0.8643	0.8643		90	54.16	4,352,130	4,352,130	8
2010/07		1.00	0.7107	0.7107		90	54.16	4,382,588	4,383,090	
2011/01		1.00	0.9198	0.9198		90	53.94	4,422,122	4,423,410	
2011/07		1.00	0.9028	0.9028		90	53.94	4,461,275	4,463,370	
2012/01		1.00	0.3865	0.3865		90	53.94	4,478,186	4,480,650	
2012/07		1.00	0.9417	0.9417		90	54.51	4,519,981	4,522,860	
2013/01		1.00	0.4901	0.4901		90	54.51	4,541,936	4,545,000	
2013/07	61,723	1.00	0.6196	0.6196		90	49.51	4,573,170	4,573,170	8
2014/01		1.00	0.8564	0.8564		90	49.51	4,608,425	4,612,320	
2014/07		0.95	1.2383	1.2383		90	49.51	4,657,227	4,669,470	
2015/01		0.95	0.7571	0.7571		90	49.51	4,687,378	4,704,840	
2015/09		0.90	1.5736	1.5736		90	49.51	4,747,134	4,778,910	
2016/09		0.85	1.9890	1.9890		90	49.51	4,819,382	4,873,950	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
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267.05

Hawthorne Health and Rehab of Sarasota

Type of Cost Report: Cost Settled Interim New Facility Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : Other CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5381 Desoto Road	1/15/2013-6/30/2014	Number of Beds: 120	Superior: 0
SARASOTA, FL 34235	Days in CR 532	Maximum: 63,840	Standard: 366
County: Sarasota [58]	First Used : 2013/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 23,267	Total: 366
Control: Nonprofit : Other	Unaudited	Medicare: 12,770	Inflation
Current Class South Large	Initial CR? True	Medicaid: 2,246	FY Index: 1.31463861
Class at 1/94: South Large	Medicaid Utilization	9.65316%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	36.44580%	Cost: 1.09806181
Open Date: 01/15/2013	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/22/2012	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.21900000
Entered Medicaid 01/15/2013	Low Occupancy Adjustment Factor:	46.09192%	DC Sem Index: 1.30450000
Med # Active Date: 01/15/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.07013946
Previous Med #			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	165,193	241,638	175,767	283,872		866,470	
1a	Audit Adjustments							
2	Cost Per Diem	73.5499	107.5859	78.2578	126.3900		385.7836	
3	Cost Per Diem Inflated	80.7623	115.1319	85.9319				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	80.7623	115.1319	85.9319	126.3900		408.2161	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	81.7862		87.0214				
7	Provider Target Rate	86.3358		91.8622				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	60.7076		69.9974				
10b	Base for line 10a	57.5085		66.3088				
11	Lesser of 5,7,8,10, 10a	58.7902	104.3884	69.9974	13.6500		246.8260	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	58.7902	104.3884	69.9974	13.6500		246.8260	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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267.05

Hawthorne Health and Rehab of Sarasota

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/15/2013	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	12,321,195.00		Total Amount	Per Diem
RS to Start Calcs:	2012/01	Type:	Fixed	80% Capital(1):	4,914,726	9.6682
Indexed Asset Value	6,143,407	<60% of Base:	False	20% ROE(2):	1,228,681	0.6321
FRVS Base Asset:	0	Interest Rate:	4.7500%	Insurance Cost(3):	156,286	6.7171
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	187,068	8.0401
ROE Factor	0.020280	Amortization Rate:	4.7500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	381,122	Total FRVS PD:		25.0575

(1) 80% Capital (\$4,914,726) amortized at 4.7500 % for 20 years Principal & Interest of \$381,122 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.6682

(2) 20% ROE (\$1,228,681) times the ROE factor (0.020280) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6321

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	50,254
Comparison Date: 07/01/2012	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	6,030,480

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.7902	58.7902	2.6673	56.1229
Direct Care	104.3884	104.3884	4.7360	99.6524
Indirect Care	69.9974	69.9974	3.1757	66.8217
Property	13.6500	25.0575	1.1368	23.9207
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				12.3511
Supplemental Rate				8.1814
Totals	246.8260	258.2335	11.7158	267.0502

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 094353-00 - 2016/09
267.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01	20,679,154	0.00	0.4901	0.4901		120	9.65	6,030,480	6,030,480	1
2013/07	40,787	0.10	0.6196	0.6196		120	9.65	6,071,267	6,097,560	
2014/01	23,047	0.10	0.8564	0.8564		120	9.65	6,094,314	6,149,760	
2014/07		0.20	1.2383	1.2383		120	9.65	6,094,314	6,225,960	
2015/01		0.20	0.7571	0.7571		120	9.65	6,094,314	6,273,120	
2015/09		0.30	1.5736	1.5736		120	9.65	6,094,314	6,371,880	
2016/09	49,093	0.40	1.9890	1.9890		120	9.65	6,143,407	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM Report Printed: 6/30/2016 ID: 094353063020140115201312292014121958



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226.60

Willowbrooke Court at Azalea Trace

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
10100 HILLVIEW DR	1/1/2014-12/31/2014	Number of Beds: 82	Superior: 0
PENSACOLA, FL 32514	Days in CR 365	Maximum: 29,930	Standard: 366
County: Escambia [17]	First Used : 2016/09	Max Annualized: 29,930	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 24,985	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 2,421	Inflation
Current Class North Small	Initial CR? False	Medicaid: 3,715	FY Index: 1.34193004
Class at 1/94: North Small	Medicaid Utilization	14.86892%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	83.47812%	Cost: 1.07573004
Open Date: 05/01/1981	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/01/1981	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 09/01/1988	Low Occupancy Adjustment Factor:	105.57229%	DC Sem Index: 1.30450000
Med # Active Date: 08/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 210374			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	152,006	380,410	260,783	41,014		834,213	
1a	Audit Adjustments							
2	Cost Per Diem	40.9168	102.3984	70.1973	11.0401		224.5526	
3	Cost Per Diem Inflated	44.0154	108.6889	75.5133				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.0154	108.6889	75.5133	11.0401		239.2577	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	93.5193		125.6141				
7	Provider Target Rate	98.7216		132.6018				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	44.0154	100.8980	72.7784	11.0401		228.7319	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	44.0154	100.8980	72.7784	11.0401		228.7319	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Willowbrooke Court at Azalea Trace

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/01/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,225,224.00		Total Amount	Per Diem
RS to Start Calcs:	1981/01	Type:	Variable	80% Capital(1):	2,477,414	6.3160
Indexed Asset Value	3,096,767	<60% of Base:	False	20% ROE(2):	619,353	0.5222
FRVS Base Asset:	2,040,570	Interest Rate:	3.3500%	Insurance Cost(3):	8,759	0.3506
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	9,840	0.3938
ROE Factor	0.022710	Amortization Rate:	3.3500%	Home Office(3):	88,114	3.5267
		Interest Only:	False	Replacement(3&4):	2,303,872	0.0000
		Yearly Payment:	170,133	Total FRVS PD:		11.1093

(1) 80% Capital (\$2,477,414) amortized at 3.3500 % for 20 years Principal & Interest of \$170,133 divided by annual available days (29930) divided by Occup. Adj. (0.90) = \$6.3160

(2) 20% ROE (\$619,353) times the ROE factor (0.022710) divided by annual available days (29930) divided by Occup. Adj. (0.90) = \$0.5222

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1980	Current RS PBS:	54,155
Comparison Bed	90	Effective PBS Limitation	2,040,570

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.0154	44.0154	1.9970	42.0184
Direct Care	100.8980	100.8980	4.5777	96.3203
Indirect Care	72.7784	72.7784	3.3019	69.4765
Property	11.0401	11.1093	0.5040	10.6053
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	228.7319	228.8011	10.3806	226.6019

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1981/01	3,083,124	0.00	3.8241	3.0000	0.8241	90		2,040,570	2,040,570	1
1981/07		0.10	3.4129	3.0000	0.4129	90		2,040,570	2,173,410	
1982/01		0.10	3.0888	3.0000	0.0888	90		2,040,570	2,231,640	
1982/07		0.20	2.3865	2.3865		90		2,040,570	2,282,850	
1983/04		0.20	2.6288	2.6288		90		2,040,570	2,342,880	
1983/07		0.30	3.9578	3.0000	0.9578	90		2,040,570	2,435,580	
1984/01		0.30	2.2530	2.2530		90		2,040,570	2,467,170	
1984/07		0.40	1.9179	1.9179		90		2,040,570	2,514,510	
1985/01		0.40	1.1471	1.1471		90		2,040,570	2,543,310	
1985/10		0.50	0.8522	0.8522		90		2,040,570	2,565,000	
1986/01		0.50	0.8299	0.8299		90		2,040,570	2,586,330	
1986/07		0.60	0.2974	0.2974		90		2,040,570	2,581,380	
1987/01		0.60	1.0091	1.0091		90		2,040,570	2,627,550	
1987/07		0.70	0.9007	0.9007		90		2,040,570	2,648,070	
1988/01		0.70	0.9007	0.9007		90		2,040,570	2,669,580	
1988/07		0.80	0.5899	0.5899		90	18.46	2,040,570	2,668,140	
1989/01		0.80	0.5899	0.5899		90	18.46	2,040,570	2,683,890	
1989/07		0.90	0.5899	0.5899		90	18.46	2,040,570	2,702,070	
1990/01		0.90	0.5899	0.5899		90	18.46	2,040,570	2,715,660	
1990/07		1.00	0.5899	0.5899		90	18.46	2,040,570	2,731,680	
1991/01		1.00	0.5899	0.5899		90	18.46	2,040,570	2,747,700	
1991/07		1.00	1.4932	1.4932		90	28.48	2,056,348	2,788,740	
1992/01		1.00	2.0117	2.0117		90	28.48	2,077,769	2,844,810	
1992/07		1.00	1.8152	1.8152		90	30.13	2,098,430	2,896,470	
1993/01		1.00	1.7710	1.7710		90	30.13	2,118,789	2,947,770	
1993/07		1.00	1.5329	1.5329		90	39.06	2,141,855	2,992,950	
1994/01		1.00	1.6983	1.6983		90	39.06	2,167,688	3,043,800	
1994/07	219,646	1.00	1.5991	1.5991		106	46.31	2,416,521	3,642,266	
1995/01		1.00	1.5812	1.5812		106	46.31	2,448,694	3,699,824	
1995/07		1.00	1.5250	1.5250		106	47.90	2,481,216	3,756,216	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/01		1.00	1.7228	1.7228		106	47.90	2,518,444	3,820,982	
1996/07		1.00	1.3294	1.3294		106	49.24	2,548,418	3,871,756	
1997/01		1.00	1.4109	1.4109		106	49.24	2,580,608	3,926,346	
1997/07		1.00	1.0917	1.0917		106	43.01	2,602,639	3,969,170	
1998/01		1.00	1.1663	1.1663		106	43.01	2,626,376	4,015,492	
1998/07		1.00	1.0794	1.0794		106	44.26	2,649,189	4,058,846	
1999/01		1.00	1.4499	1.4499		106	44.26	2,680,099	4,117,676	
1999/07		1.00	1.2299	1.2299		106	50.71	2,710,490	4,168,344	
2000/01		1.00	1.3356	1.3356		106	50.71	2,743,868	4,223,994	
2000/07		1.00	1.1129	1.1129		106	52.63	2,773,089	4,270,952	
2001/01		1.00	1.2976	1.2976		106	52.63	2,807,522	4,326,390	
2001/07		0.95	0.9615	0.9615		106	49.69	2,830,690	4,367,942	
2002/01		0.95	1.0301	1.0301		106	49.69	2,855,717	4,412,886	
2002/07		0.90	0.8337	0.8337		106	45.83	2,873,571	4,449,668	
2003/01		0.90	1.3271	1.3271		106	45.83	2,902,171	4,508,710	
2003/07		0.85	1.1664	1.1664		106	42.86	2,924,592	4,561,286	
2004/01		0.85	1.1103	1.1103		106	42.86	2,924,592	4,611,954	5
2004/07		0.80	0.8378	0.8378		106	42.86	2,961,489	4,650,644	
2005/01		0.80	0.8595	0.8595		106	40.05	2,976,317	4,690,606	
2005/07		0.75	0.7364	0.7364		106	40.05	2,988,287	4,725,162	
2006/01		0.75	0.9068	0.9068		106	39.91	3,003,034	4,767,986	
2006/07		0.70	0.8133	0.8133		106	39.91	3,015,440	4,806,782	
2007/01		0.70	1.0133	1.0133		106	37.97	3,030,206	4,855,436	
2007/07		0.65	1.1050	1.1050		106	37.97	3,045,232	4,909,072	
2008/01		0.65	0.8556	0.8556		106	33.80	3,055,639	4,951,048	
2008/07		0.60	0.6104	0.6104		106	33.80	3,062,516	4,981,258	
2009/01		0.60	1.3268	1.3268		106	33.39	3,077,317	5,047,402	
2009/07		0.55	0.6841	0.6841		106	33.39	3,084,347	5,081,958	
2010/01		0.55	0.8643	0.8643		82	26.63	3,091,447	3,965,274	
2010/07		0.50	0.7107	0.7107		82	26.63	3,096,767	3,993,482	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/01		0.50	0.9198	0.9198		82	23.33	3,096,767	4,030,218	
2011/07		0.45	0.9028	0.9028		82	23.33	3,096,767	4,066,626	
2012/01		0.45	0.3865	0.3865		82	21.10	3,096,767	4,082,370	
2012/07		0.40	0.9417	0.9417		82	21.10	3,096,767	4,120,828	
2013/01		0.40	0.4901	0.4901		82	20.05	3,096,767	4,141,000	
2013/07		0.35	0.6196	0.6196		82	20.05	3,096,767	4,166,666	
2014/01		0.35	0.8564	0.8564		82	18.68	3,096,767	4,202,336	
2014/07		0.30	1.2383	1.2383		82	18.68	3,096,767	4,254,406	
2015/01		0.30	0.7571	0.7571		82	14.57	3,096,767	4,286,632	
2015/09		0.25	1.5736	1.5736		82	14.57	3,096,767	4,354,118	
2016/09		0.20	1.9890	1.9890		82	14.87	3,096,767	4,440,710	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Printed: 6/30/2016 ID: 096150123120140101201405262015144932



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244.94

Palm Garden of Aventura

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
21251 E DIXIE HIGHWAY	7/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
NORTH MIAMI BEACH, FL 331	Days in CR 457	Maximum: 54,840	Standard: 366
County: Dade [13]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2016/09	Total Patient: 50,874	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 13,565	Inflation
Current Class South Large	Initial CR? False	Medicaid: 27,556	FY Index: 1.36645256
Class at 1/94: South Large	Medicaid Utilization	54.16519%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.76805%	Cost: 1.05642486
Open Date: 07/13/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/13/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24399678
Entered Medicaid 07/13/1988	Low Occupancy Adjustment Factor:	117.32099%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04863615
Previous Med # 257494			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,522,558	2,376,413	1,737,959	497,661		6,134,591
1a	Audit Adjustments						
2	Cost Per Diem	55.2532	86.2394	63.0701	18.0600		222.6227
3	Cost Per Diem Inflated	58.3709	90.4338	66.6288			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	58.3709	90.4338	66.6288	18.0600		233.4935
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	56.7432		75.2212			
7	Provider Target Rate	59.8997		79.4056			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	56.5458		71.1394			
10b	Base for line 10a	53.5660		67.3906			
11	Lesser of 5,7,8,10, 10a	56.5458	90.4338	66.6288	13.6500		227.2584
12/13	Medicaid Adjustment Rate		0.4238	0.3122			
14	Prospective Per Diem 11	56.5458	90.8576	66.9410	13.6500		227.9944
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Palm Garden of Aventura

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/13/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/07	Type:	Variable	80% Capital(1):	4,687,276	8.9771
Indexed Asset Value	5,859,095	<60% of Base:	False	20% ROE(2):	1,171,819	0.6192
FRVS Base Asset:	3,559,440	Interest Rate:	4.4350%	Insurance Cost(3):	84,375	1.6585
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	192,905	3.7918
ROE Factor	0.020830	Amortization Rate:	4.4350%	Home Office(3):	48,253	0.9485
		Interest Only:	False	Replacement(3&4):	446,915	0.0000
		Yearly Payment:	353,878	Total FRVS PD:		15.9951

(1) 80% Capital (\$4,687,276) amortized at 4.4350 % for 20 years Principal & Interest of \$353,878 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.9771

(2) 20% ROE (\$1,171,819) times the ROE factor (0.020830) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6192

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,662
Comparison Date: 01/01/1988	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,559,440

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.5458	56.5458	2.5655	53.9803
Direct Care	90.8576	90.8576	4.1222	86.7354
Indirect Care	66.9410	66.9410	3.0371	63.9039
Property	13.6500	15.9951	0.7257	15.2694
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.8667
Supplemental Rate				8.1814
Totals	227.9944	230.3395	10.4505	244.9371

Medicaid Trend Adjustment



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244.94

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/07	6,734,529	0.00	0.5899	0.5899		120	34.58	3,559,440	3,559,440	1
1989/01		0.10	0.5899	0.5899		120	34.58	3,560,760	3,578,520	
1989/07	18,819	0.10	0.5899	0.5899		120	34.58	3,580,900	3,602,760	
1990/01		0.20	0.5899	0.5899		120	34.58	3,583,557	3,620,880	
1990/07		0.20	0.5899	0.5899		120	34.58	3,586,216	3,642,240	
1991/01		0.30	0.5899	0.5899		120	34.58	3,586,216	3,663,600	5
1991/07		0.30	1.4932	1.4932		120	34.58	3,590,207	3,718,320	5
1992/01	21,335	0.40	2.0117	2.0117		120	49.07	3,647,503	3,793,080	
1992/07		0.40	1.8152	1.8152		120	49.07	3,671,132	3,861,960	
1993/01	17,648	0.50	1.7710	1.7710		120	56.95	3,721,288	3,930,360	
1993/07		0.50	1.5329	1.5329		120	56.95	3,749,812	3,990,600	
1994/01	35,373	0.60	1.6983	1.6983		120	58.59	3,823,396	4,058,400	
1994/07		0.60	1.5991	1.5991		120	58.59	3,860,081	4,123,320	
1995/01	70,035	0.70	1.5812	1.5812		120	46.92	3,966,563	4,188,480	
1995/07		0.70	1.5250	1.5250		120	46.92	4,002,685	4,252,320	
1996/01		0.80	1.7228	1.7228		120	44.78	4,047,599	4,325,640	
1996/07		0.80	1.3294	1.3294		120	44.78	4,082,646	4,383,120	
1997/01	42,882	0.90	1.4109	1.4109		120	50.38	4,173,015	4,444,920	
1997/07		0.90	1.0917	1.0917		120	50.38	4,210,571	4,493,400	
1998/01		1.00	1.1663	1.1663		120	50.61	4,255,759	4,545,840	
1998/07		1.00	1.0794	1.0794		120	50.61	4,298,029	4,594,920	
1999/01		1.00	1.4499	1.4499		120	48.75	4,353,265	4,661,520	
1999/07		1.00	1.2299	1.2299		120	50.39	4,402,318	4,718,880	
2000/01		1.00	1.3356	1.3356		120	50.39	4,456,187	4,781,880	
2000/07		1.00	1.1129	1.1129		120	50.39	4,501,623	4,835,040	
2001/01		1.00	1.2976	1.2976		120	50.39	4,501,623	4,897,800	5
2001/07		1.00	0.9615	0.9615		120	50.39	4,595,267	4,944,840	
2002/01		1.00	1.0301	1.0301		120	58.01	4,642,603	4,995,720	
2002/07		1.00	0.8337	0.8337		120	58.01	4,681,308	5,037,360	
2003/01		1.00	1.3271	1.3271		120	58.01	4,743,434	5,104,200	



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244.94

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/07		1.00	1.1664	1.1664		120	58.01	4,798,761	5,163,720	
2004/01		1.00	1.1103	1.1103		120	58.01	4,852,042	5,221,080	
2004/07		1.00	0.8378	0.8378		120	58.01	4,892,692	5,264,880	
2005/01	38,242	1.00	0.8595	0.8595		120	50.04	4,969,194	5,310,120	
2005/07		1.00	0.7364	0.7364		120	50.04	5,002,487	5,349,240	
2006/01		1.00	0.9068	0.9068		120	50.04	5,043,759	5,397,720	
2006/07		1.00	0.8133	0.8133		120	55.05	5,084,780	5,441,640	
2007/01		1.00	1.0133	1.0133		120	55.05	5,136,304	5,496,720	
2007/07		1.00	1.1050	1.1050		120	58.23	5,193,060	5,557,440	
2008/01		1.00	0.8556	0.8556		120	59.83	5,237,492	5,604,960	
2008/07		1.00	0.6104	0.6104		120	59.83	5,269,462	5,639,160	
2009/01		0.95	1.3268	1.3268		120	60.04	5,335,884	5,714,040	
2009/07		0.95	0.6841	0.6841		120	60.04	5,370,562	5,753,160	
2010/01		0.90	0.8643	0.8643		120	60.04	5,412,340	5,802,840	
2010/07		0.90	0.7107	0.7107		120	57.92	5,446,957	5,844,120	
2011/01		0.85	0.9198	0.9198		120	60.65	5,489,541	5,897,880	
2011/07		0.85	0.9028	0.9028		120	60.65	5,531,668	5,951,160	
2012/01		0.80	0.3865	0.3865		120	60.65	5,548,772	5,974,200	
2012/07		0.80	0.9417	0.9417		120	56.20	5,590,576	6,030,480	
2013/01		0.75	0.4901	0.4901		120	56.20	5,611,127	6,060,000	
2013/07		0.75	0.6196	0.6196		120	45.23	5,632,570	6,097,560	
2014/01	18,758	0.70	0.8564	0.8564		120	45.23	5,679,097	6,149,760	
2014/07		0.70	1.2383	1.2383		120	45.23	5,719,579	6,225,960	
2015/01		0.65	0.7571	0.7571		120	45.23	5,742,725	6,273,120	
2015/09		0.65	1.5736	1.5736		120	45.23	5,791,028	6,371,880	
2016/09		0.60	1.9890	1.9890		120	54.17	5,859,095	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



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241.74

Palm Garden of Clearwater

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3480 MCMULLEN BOOTH RD	7/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
CLEARWATER, FL 33761	Days in CR 457	Maximum: 54,840	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 51,818	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 12,045	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,909	FY Index: 1.36645256
Class at 1/94: North Large	Medicaid Utilization	53.85966%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.48942%	Cost: 1.05642486
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24399678
Entered Medicaid 09/18/1987	Low Occupancy Adjustment Factor:	119.49795%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04863615
Previous Med # 257460			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,515,885	2,476,468	1,558,818	507,944		6,059,115	
1a	Audit Adjustments							
2	Cost Per Diem	54.3153	88.7337	55.8536	18.2000		217.1026	
3	Cost Per Diem Inflated	57.3800	93.0494	59.0051				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.3800	93.0494	59.0051	18.2000		227.6345	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.4996		63.3538				
7	Provider Target Rate	62.8094		66.8780				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	53.4298		66.1677				
10b	Base for line 10a	50.6142		62.6809				
11	Lesser of 5,7,8,10, 10a	53.4298	93.0494	59.0051	13.6500		219.1343	
12/13	Medicaid Adjustment Rate		0.4040	0.2562				
14	Prospective Per Diem 11	53.4298	93.4534	59.2613	13.6500		219.7945	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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241.74

Palm Garden of Clearwater

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/18/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,374,781.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Fixed	80% Capital(1):	4,972,930	15.6256
Indexed Asset Value	6,216,162	<60% of Base:	False	20% ROE(2):	1,243,232	0.6569
FRVS Base Asset:	3,503,400	Interest Rate:	11.0000%	Insurance Cost(3):	99,120	1.9128
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	81,292	1.5688
ROE Factor	0.020830	Amortization Rate:	11.0000%	Home Office(3):	49,548	0.9562
		Interest Only:	False	Replacement(3&4):	330,914	0.0000
		Yearly Payment:	615,960	Total FRVS PD:		20.7203

(1) 80% Capital (\$4,972,930) amortized at 11.0000 % for 20 years Principal & Interest of \$615,960 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$15.6256

(2) 20% ROE (\$1,243,232) times the ROE factor (0.020830) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6569

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1987	Current RS PBS:	29,195
Comparison Bed	120	Effective PBS Limitation	54,155
			3,503,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.4298	53.4298	2.4241	51.0057
Direct Care	93.4534	93.4534	4.2399	89.2135
Indirect Care	59.2613	59.2613	2.6887	56.5726
Property	13.6500	20.7203	0.9401	19.7802
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.9846
Supplemental Rate				8.1814
Totals	219.7945	226.8648	10.2928	241.7380

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	5,572,553	0.00	0.9007	0.9007		120	38.83	3,503,400	3,503,400	1
1988/01		0.10	0.9007	0.9007		120	38.83	3,505,629	3,559,440	
1988/07		0.10	0.5899	0.5899		120	38.83	3,507,089	3,557,520	
1989/01		0.20	0.5899	0.5899		120	38.83	3,510,011	3,578,520	
1989/07		0.20	0.5899	0.5899		120	38.83	3,512,935	3,602,760	
1990/01		0.30	0.5899	0.5899		120	38.83	3,517,325	3,620,880	
1990/07		0.30	0.5899	0.5899		120	38.83	3,521,720	3,642,240	
1991/01		0.40	0.5899	0.5899		120	38.21	3,527,494	3,663,600	
1991/07	32,860	0.40	1.4932	1.4932		120	43.55	3,577,037	3,718,320	
1992/01		0.50	2.0117	2.0117		120	43.55	3,605,528	3,793,080	
1992/07	18,831	0.50	1.8152	1.8152		120	51.12	3,654,774	3,861,960	
1993/01		0.60	1.7710	1.7710		120	51.12	3,690,870	3,930,360	
1993/07	25,635	0.60	1.5329	1.5329		120	51.13	3,748,061	3,990,600	
1994/01		0.70	1.6983	1.6983		120	51.13	3,789,483	4,058,400	
1994/07	69,734	0.70	1.5991	1.5991		120	49.21	3,897,171	4,123,320	
1995/01		0.80	1.5812	1.5812		120	49.21	3,941,280	4,188,480	
1995/07		0.80	1.5250	1.5250		120	45.01	3,980,630	4,252,320	
1996/01		0.90	1.7228	1.7228		120	45.01	4,031,139	4,325,640	
1996/07	42,281	0.90	1.3294	1.3294		120	46.12	4,113,865	4,383,120	
1997/01		1.00	1.4109	1.4109		120	46.12	4,162,536	4,444,920	
1997/07	1,149,206	1.00	1.0917	1.0917		120	47.02	5,350,591	4,493,400	6
1998/01		1.00	1.1663	1.1663		120	47.02	5,350,591	4,545,840	3
1998/07		1.00	1.0794	1.0794		120	47.02	5,350,591	4,594,920	3
1999/01		1.00	1.4499	1.4499		120	53.99	5,350,591	4,661,520	3
1999/07		1.00	1.2299	1.2299		120	61.33	5,350,591	4,718,880	3
2000/01		1.00	1.3356	1.3356		120	61.33	5,350,591	4,781,880	3
2000/07		1.00	1.1129	1.1129		120	61.33	5,350,591	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	61.33	5,350,591	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	61.33	5,350,591	4,944,840	3
2002/01	12,866	1.00	1.0301	1.0301		120	57.40	5,350,591	4,995,720	3



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241.74

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		120	57.40	5,350,591	5,037,360	3
2003/01		1.00	1.3271	1.3271		120	57.40	5,350,591	5,104,200	3
2003/07		1.00	1.1664	1.1664		120	57.40	5,350,591	5,163,720	3
2004/01		1.00	1.1103	1.1103		120	57.40	5,350,591	5,221,080	3
2004/07		1.00	0.8378	0.8378		120	57.40	5,350,591	5,264,880	3
2005/01	18,088	1.00	0.8595	0.8595		120	60.51	5,350,591	5,310,120	3
2005/07		1.00	0.7364	0.7364		120	56.85	5,350,591	5,349,240	3
2006/01		1.00	0.9068	0.9068		120	56.85	5,397,720	5,397,720	8
2006/07	29,157	1.00	0.8133	0.8133		120	50.80	5,441,640	5,441,640	8
2007/01		1.00	1.0133	1.0133		120	50.80	5,492,569	5,496,720	
2007/07		1.00	1.1050	1.1050		120	50.26	5,548,031	5,557,440	
2008/01		0.95	0.8556	0.8556		120	50.26	5,589,239	5,604,960	
2008/07		0.95	0.6104	0.6104		120	50.87	5,619,217	5,639,160	
2009/01		0.90	1.3268	1.3268		120	48.17	5,677,984	5,714,040	
2009/07		0.90	0.6841	0.6841		120	48.17	5,708,602	5,753,160	
2010/01		0.85	0.8643	0.8643		120	48.17	5,745,335	5,802,840	
2010/07		0.85	0.7107	0.7107		120	50.06	5,776,925	5,844,120	
2011/01		0.80	0.9198	0.9198		120	50.06	5,815,614	5,897,880	
2011/07		0.80	0.9028	0.9028		120	60.85	5,857,614	5,951,160	
2012/01		0.75	0.3865	0.3865		120	57.99	5,874,595	5,974,200	
2012/07		0.75	0.9417	0.9417		120	57.99	5,916,087	6,030,480	
2013/01		0.70	0.4901	0.4901		120	57.99	5,936,385	6,060,000	
2013/07		0.70	0.6196	0.6196		120	54.68	5,961,981	6,097,560	
2014/01	22,550	0.65	0.8564	0.8564		120	54.68	6,017,528	6,149,760	
2014/07		0.65	1.2383	1.2383		120	54.68	6,065,681	6,225,960	
2015/01		0.60	0.7571	0.7571		120	54.68	6,093,077	6,273,120	
2015/09		0.60	1.5736	1.5736		120	54.68	6,150,273	6,371,880	
2016/09		0.55	1.9890	1.9890		120	53.86	6,216,162	6,498,600	

Message Code:

- | | |
|---|---|
| 1 | Per Bed Standard Limitation |
| 3 | Index Cost Limitation - January 1996 |
| 6 | Not Limited to Current Per Bed Standard |
| 8 | Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
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231.51

Palm Garden of Gainesville

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
227 SW 62ND BLVD	5/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
GAINESVILLE, FL 32607	Days in CR 518	Maximum: 62,160	Standard: 366
County: Alachua [1]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 57,567	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 22,523	Inflation
Current Class North Large	Initial CR? False	Medicaid: 26,222	FY Index: 1.36305434
Class at 1/94: North Large	Medicaid Utilization	45.55040%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.61100%	Cost: 1.05905862
Open Date: 07/20/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/20/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 07/21/1987	Low Occupancy Adjustment Factor:	117.12237%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257265			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,385,053	2,205,452	1,597,139	520,769		5,708,413
1a	Audit Adjustments						
2	Cost Per Diem	52.8203	84.1069	60.9084	19.8600		217.6956
3	Cost Per Diem Inflated	55.9398	88.3396	64.5056			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	55.9398	88.3396	64.5056	19.8600		228.6450
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	51.7666		66.6405			
7	Provider Target Rate	54.6463		70.3476			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	51.1035		63.6256			
10b	Base for line 10a	48.4105		60.2727			
11	Lesser of 5,7,8,10, 10a	51.1035	88.3396	63.6256	13.6500		216.7187
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	51.1035	88.3396	63.6256	13.6500		216.7187
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Computation of Nursing Home Medicaid Reimbursement Rate

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Palm Garden of Gainesville

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/01/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,750,000.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Variable	80% Capital(1):	4,883,846	9.3536
Indexed Asset Value	6,104,807	<60% of Base:	False	20% ROE(2):	1,220,961	0.6535
FRVS Base Asset:	3,503,400	Interest Rate:	4.4350%	Insurance Cost(3):	108,312	1.8815
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	151,676	2.6348
ROE Factor	0.021100	Amortization Rate:	4.4350%	Home Office(3):	55,481	0.9638
		Interest Only:	False	Replacement(3&4):	347,418	0.0000
		Yearly Payment:	368,718	Total FRVS PD:		15.4872

(1) 80% Capital (\$4,883,846) amortized at 4.4350 % for 20 years Principal & Interest of \$368,718 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.3536

(2) 20% ROE (\$1,220,961) times the ROE factor (0.021100) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6535

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,195
Comparison Date: 01/01/1987	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,503,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.1035	51.1035	2.3185	48.7850
Direct Care	88.3396	88.3396	4.0079	84.3317
Indirect Care	63.6256	63.6256	2.8867	60.7389
Property	13.6500	15.4872	0.7026	14.7846
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				14.6898
Supplemental Rate				8.1814
Totals	216.7187	218.5559	9.9157	231.5114

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 098581-00 - 2016/09

231.51

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	3,618,331	0.00	0.9007	0.9007		120	65.35	3,503,400	3,503,400	1
1988/01		0.10	0.9007	0.9007		120	65.35	3,506,557	3,559,440	
1988/07	14,358	0.10	0.5899	0.5899		120	65.35	3,522,984	3,557,520	
1989/01		0.20	0.5899	0.5899		120	65.35	3,527,141	3,578,520	
1989/07		0.20	0.5899	0.5899		120	65.35	3,531,303	3,602,760	
1990/01		0.30	0.5899	0.5899		120	65.35	3,537,553	3,620,880	
1990/07		0.30	0.5899	0.5899		120	65.35	3,543,814	3,642,240	
1991/01		0.40	0.5899	0.5899		120	68.72	3,552,177	3,663,600	
1991/07		0.40	1.4932	1.4932		120	66.34	3,573,394	3,718,320	
1992/01		0.50	2.0117	2.0117		120	66.34	3,609,339	3,793,080	
1992/07	26,819	0.50	1.8152	1.8152		120	62.19	3,668,916	3,861,960	
1993/01		0.60	1.7710	1.7710		120	62.19	3,707,902	3,930,360	
1993/07	23,525	0.60	1.5329	1.5329		120	62.24	3,765,529	3,990,600	
1994/01		0.70	1.6983	1.6983		120	62.24	3,810,294	4,058,400	
1994/07	27,222	0.70	1.5991	1.5991		120	66.78	3,880,168	4,123,320	
1995/01		0.80	1.5812	1.5812		120	66.78	3,929,252	4,188,480	
1995/07	58,269	0.80	1.5250	1.5250		120	60.68	4,035,458	4,252,320	
1996/01		0.90	1.7228	1.7228		120	60.68	4,098,028	4,325,640	
1996/07	29,222	0.90	1.3294	1.3294		120	53.64	4,175,070	4,383,120	
1997/01		1.00	1.4109	1.4109		120	53.64	4,232,519	4,444,920	
1997/07	1,118,490	1.00	1.0917	1.0917		120	53.51	5,395,964	4,493,400	6
1998/01		1.00	1.1663	1.1663		120	53.51	5,395,964	4,545,840	3
1998/07	47,047	1.00	1.0794	1.0794		120	53.25	5,395,964	4,594,920	3
1999/01		1.00	1.4499	1.4499		120	53.25	5,395,964	4,661,520	3
1999/07		1.00	1.2299	1.2299		120	41.35	5,395,964	4,718,880	3
2000/01		1.00	1.3356	1.3356		120	41.35	5,395,964	4,781,880	3
2000/07		1.00	1.1129	1.1129		120	41.35	5,395,964	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	41.35	5,395,964	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	41.35	5,395,964	4,944,840	3
2002/01	37,693	1.00	1.0301	1.0301		120	48.64	5,395,964	4,995,720	3



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231.51

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		120	48.64	5,395,964	5,037,360	3
2003/01		1.00	1.3271	1.3271		120	48.64	5,395,964	5,104,200	3
2003/07		1.00	1.1664	1.1664		120	48.64	5,395,964	5,163,720	3
2004/01		1.00	1.1103	1.1103		120	48.64	5,395,964	5,221,080	3
2004/07		1.00	0.8378	0.8378		120	48.64	5,395,964	5,264,880	3
2005/01	40,493	1.00	0.8595	0.8595		120	42.38	5,395,964	5,310,120	3
2005/07		1.00	0.7364	0.7364		120	42.38	5,395,964	5,349,240	3
2006/01		1.00	0.9068	0.9068		120	42.38	5,397,720	5,397,720	8
2006/07		1.00	0.8133	0.8133		120	43.55	5,432,481	5,441,640	
2007/01		1.00	1.0133	1.0133		120	43.55	5,476,068	5,496,720	
2007/07		1.00	1.1050	1.1050		120	46.98	5,527,755	5,557,440	
2008/01		0.95	0.8556	0.8556		120	42.98	5,562,865	5,604,960	
2008/07		0.95	0.6104	0.6104		120	42.98	5,588,074	5,639,160	
2009/01		0.90	1.3268	1.3268		120	44.16	5,641,650	5,714,040	
2009/07		0.90	0.6841	0.6841		120	44.16	5,669,540	5,753,160	
2010/01		0.85	0.8643	0.8643		120	44.16	5,702,984	5,802,840	
2010/07		0.85	0.7107	0.7107		120	47.29	5,732,606	5,844,120	
2011/01		0.80	0.9198	0.9198		120	47.29	5,768,874	5,897,880	
2011/07		0.80	0.9028	0.9028		120	48.87	5,805,893	5,951,160	
2012/01		0.75	0.3865	0.3865		120	48.87	5,820,848	5,974,200	
2012/07		0.75	0.9417	0.9417		120	48.89	5,857,393	6,030,480	
2013/01		0.70	0.4901	0.4901		120	48.89	5,875,257	6,060,000	
2013/07	2,624	0.70	0.6196	0.6196		120	47.33	5,899,809	6,097,560	
2014/01	8,666	0.65	0.8564	0.8564		120	47.33	5,936,739	6,149,760	
2014/07		0.65	1.2383	1.2383		120	47.33	5,977,860	6,225,960	
2015/01		0.60	0.7571	0.7571		120	47.33	6,001,230	6,273,120	
2015/09		0.60	1.5736	1.5736		120	47.33	6,049,992	6,371,880	
2016/09		0.55	1.9890	1.9890		120	45.55	6,104,807	6,498,600	

Message Code:

- | | |
|---|---|
| 1 | Per Bed Standard Limitation |
| 3 | Index Cost Limitation - January 1996 |
| 6 | Not Limited to Current Per Bed Standard |
| 8 | Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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243.23

Palm Garden of Jacksonville

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
5725 SPRING PARK ROAD	5/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
JACKSONVILLE, FL 32216	Days in CR 518	Maximum: 62,160	Standard: 366
County: Duval [16]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 59,776	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 8,024	Inflation
Current Class North Large	Initial CR? False	Medicaid: 41,079	FY Index: 1.36305434
Class at 1/94: North Large	Medicaid Utilization	68.72156%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.16474%	Cost: 1.05905862
Open Date: 03/02/1990	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/02/1990	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 03/14/1990	Low Occupancy Adjustment Factor:	121.61668%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257273			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,331,988	3,404,631	2,331,699	551,691		8,620,009	
1a	Audit Adjustments							
2	Cost Per Diem	56.7684	82.8801	56.7613	13.4300		209.8398	
3	Cost Per Diem Inflated	60.1211	87.0510	60.1135				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	60.1211	87.0510	60.1135	13.4300		220.7156	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.1339		69.5718				
7	Provider Target Rate	56.0896		73.4419				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	53.9186		61.3767				
10b	Base for line 10a	51.0773		58.1424				
11	Lesser of 5,7,8,10, 10a	53.9186	87.0510	60.1135	13.4300		214.5131	
12/13	Medicaid Adjustment Rate		1.8334	1.2661				
14	Prospective Per Diem 11	53.9186	88.8844	61.3796	13.4300		217.6126	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Palm Garden of Jacksonville

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	03/14/1990	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,447,445.00		Total Amount	Per Diem
RS to Start Calcs:	1990/01	Type:	Fixed	80% Capital(1):	5,098,543	15.3810
Indexed Asset Value	6,373,179	<60% of Base:	False	20% ROE(2):	1,274,636	0.6823
FRVS Base Asset:	3,182,438	Interest Rate:	10.3900%	Insurance Cost(3):	95,505	1.5977
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	105,602	1.7666
ROE Factor	0.021100	Amortization Rate:	10.3900%	Home Office(3):	57,382	0.9600
		Interest Only:	False	Replacement(3&4):	323,398	0.0000
		Yearly Payment:	606,320	Total FRVS PD:		20.3876

(1) 80% Capital (\$5,098,543) amortized at 10.3900 % for 20 years Principal & Interest of \$606,320 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$15.3810

(2) 20% ROE (\$1,274,636) times the ROE factor (0.021100) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6823

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,023
Comparison Date: 07/01/1989	Current RS PBS:	54,155
Comparison Bed 106	Effective PBS Limitation	3,182,438

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.9186	53.9186	2.4463	51.4723
Direct Care	88.8844	88.8844	4.0326	84.8518
Indirect Care	61.3796	61.3796	2.7848	58.5948
Property	13.4300	20.3876	0.9250	19.4626
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.6664
Supplemental Rate				8.1814
Totals	217.6126	224.5702	10.1887	243.2293

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1990/01	4,319,725	0.00	0.5899	0.5899		106	57.21	3,182,438	3,182,438	1
1990/07		0.10	0.5899	0.5899		106	57.21	3,184,316	3,217,312	
1991/01	34,136	0.10	0.5899	0.5899		106	57.21	3,220,331	3,236,180	
1991/07		0.20	1.4932	1.4932		106	57.21	3,229,947	3,284,516	
1992/01		0.20	2.0117	2.0117		106	57.21	3,242,941	3,350,554	
1992/07		0.30	1.8152	1.8152		106	57.21	3,260,602	3,411,398	
1993/01	38,451	0.30	1.7710	1.7710		106	70.97	3,316,377	3,471,818	
1993/07		0.40	1.5329	1.5329		106	70.97	3,336,713	3,525,030	
1994/01		0.40	1.6983	1.6983		106	76.50	3,359,379	3,584,920	
1994/07		0.50	1.5991	1.5991		106	76.50	3,386,241	3,642,266	
1995/01	24,658	0.50	1.5812	1.5812		106	77.35	3,437,671	3,699,824	
1995/07		0.60	1.5250	1.5250		106	77.35	3,469,126	3,756,216	
1996/01	1,458,984	0.60	1.7228	1.7228		120	72.29	4,963,970	4,325,640	
1996/07		0.70	1.3294	1.3294		120	72.29	4,963,970	4,383,120	3
1997/01	40,313	0.70	1.4109	1.4109		120	70.88	4,963,970	4,444,920	3
1997/07		0.80	1.0917	1.0917		120	70.88	4,963,970	4,493,400	3
1998/01		0.80	1.1663	1.1663		120	71.23	4,963,970	4,545,840	3
1998/07		0.90	1.0794	1.0794		120	71.23	4,963,970	4,594,920	3
1999/01	24,962	0.90	1.4499	1.4499		120	70.81	4,963,970	4,661,520	3
1999/07		1.00	1.2299	1.2299		120	68.71	4,963,970	4,718,880	3
2000/01		1.00	1.3356	1.3356		120	68.71	4,963,970	4,781,880	3
2000/07		1.00	1.1129	1.1129		120	68.71	4,963,970	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	68.71	4,963,970	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	68.71	4,963,970	4,944,840	3
2002/01		1.00	1.0301	1.0301		120	64.39	4,995,720	4,995,720	8
2002/07		1.00	0.8337	0.8337		120	64.39	4,995,720	5,037,360	5
2003/01		1.00	1.3271	1.3271		120	64.39	5,104,200	5,104,200	8
2003/07		1.00	1.1664	1.1664		120	64.39	5,163,720	5,163,720	8
2004/01		1.00	1.1103	1.1103		120	64.39	5,221,053	5,221,080	
2004/07		1.00	0.8378	0.8378		120	64.39	5,264,795	5,264,880	



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243.23

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2005/01	19,410	1.00	0.8595	0.8595		120	63.61	5,310,120	5,310,120	8
2005/07		1.00	0.7364	0.7364		120	57.38	5,349,224	5,349,240	
2006/01		1.00	0.9068	0.9068		120	57.38	5,397,720	5,397,720	8
2006/07		1.00	0.8133	0.8133		120	59.78	5,441,620	5,441,640	
2007/01		1.00	1.0133	1.0133		120	59.78	5,496,720	5,496,720	8
2007/07		1.00	1.1050	1.1050		120	59.89	5,557,440	5,557,440	8
2008/01		1.00	0.8556	0.8556		120	59.89	5,604,960	5,604,960	8
2008/07		1.00	0.6104	0.6104		120	58.77	5,639,160	5,639,160	8
2009/01		1.00	1.3268	1.3268		120	67.07	5,713,980	5,714,040	
2009/07		1.00	0.6841	0.6841		120	67.07	5,753,069	5,753,160	
2010/01		1.00	0.8643	0.8643		120	67.07	5,802,793	5,802,840	
2010/07		0.95	0.7107	0.7107		120	65.90	5,841,973	5,844,120	
2011/01		0.95	0.9198	0.9198		120	65.90	5,893,020	5,897,880	
2011/07		0.90	0.9028	0.9028		120	69.44	5,940,901	5,951,160	
2012/01		0.90	0.3865	0.3865		120	69.44	5,961,569	5,974,200	
2012/07		0.85	0.9417	0.9417		120	66.11	5,961,569	6,030,480	5
2013/01		0.85	0.4901	0.4901		120	66.11	6,034,320	6,060,000	
2013/07	16,516	0.80	0.6196	0.6196		120	63.30	6,080,748	6,097,560	
2014/01	8,799	0.80	0.8564	0.8564		120	63.30	6,131,206	6,149,760	
2014/07		0.75	1.2383	1.2383		120	63.30	6,188,147	6,225,960	
2015/01		0.75	0.7571	0.7571		120	63.30	6,223,283	6,273,120	
2015/09		0.70	1.5736	1.5736		120	63.30	6,291,832	6,371,880	
2016/09		0.65	1.9890	1.9890		120	68.72	6,373,179	6,498,600	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 3 | Index Cost Limitation - January 1996 |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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0098583-00 - 2016/09

242.45

Palm Garden of Largo

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
10500 STARKEY RD	6/1/2014-9/30/2015	Number of Beds: 140	Superior: 0
LARGO, FL 33777	Days in CR 487	Maximum: 68,180	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 51,100	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 60,790	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 11,879	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 37,518	FY Index: 1.36305434
Class at 1/94: North Large	Medicaid Utilization	61.71739%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.16104%	Cost: 1.05905862
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 07/31/1987	Low Occupancy Adjustment Factor:	112.75931%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257478			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,132,611	3,242,969	2,115,748	620,548		8,111,876
1a	Audit Adjustments						
2	Cost Per Diem	56.8423	86.4377	56.3929	16.5400		216.2129
3	Cost Per Diem Inflated	60.1993	90.7877	59.7234			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	60.1993	90.7877	59.7234	16.5400		227.2504
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.7506		62.7266			
7	Provider Target Rate	52.5181		66.2160			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	52.5059		64.3792			
10b	Base for line 10a	49.7390		60.9866			
11	Lesser of 5,7,8,10, 10a	52.5059	90.7877	59.7234	13.6500		216.6670
12/13	Medicaid Adjustment Rate		1.1968	0.7873			
14	Prospective Per Diem 11	52.5059	91.9845	60.5107	13.6500		218.6511
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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242.45

Palm Garden of Largo

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/31/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	7,227,441.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Fixed	80% Capital(1):	5,842,377	15.7350
Indexed Asset Value	7,302,971	<60% of Base:	False	20% ROE(2):	1,460,594	0.6650
FRVS Base Asset:	2,277,210	Interest Rate:	11.0000%	Insurance Cost(3):	107,271	1.7646
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	127,486	2.0972
ROE Factor	0.020940	Amortization Rate:	11.0000%	Home Office(3):	58,713	0.9658
		Interest Only:	False	Replacement(3&4):	808,403	0.0000
		Yearly Payment:	723,652	Total FRVS PD:		21.2276

(1) 80% Capital (\$5,842,377) amortized at 11.0000 % for 20 years Principal & Interest of \$723,652 divided by annual available days (51100) divided by Occup. Adj. (0.90) = \$15.7350

(2) 20% ROE (\$1,460,594) times the ROE factor (0.020940) divided by annual available days (51100) divided by Occup. Adj. (0.90) = \$0.6650

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1987	Current RS PBS:	29,195
Comparison Bed	78	Effective PBS Limitation	54,155
			2,277,210

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.5059	52.5059	2.3822	50.1237
Direct Care	91.9845	91.9845	4.1733	87.8112
Indirect Care	60.5107	60.5107	2.7453	57.7654
Property	13.6500	21.2276	0.9631	20.2645
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.3068
Supplemental Rate				8.1814
Totals	218.6511	226.2287	10.2639	242.4530

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 9/30/2015

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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	4,699,567	0.00	0.9007	0.9007		78	23.13	2,277,210	2,277,210	1
1988/01		0.10	0.9007	0.9007		78	23.13	2,277,210	2,313,636	
1988/07		0.10	0.5899	0.5899		78	23.13	2,277,210	2,312,388	
1989/01		0.20	0.5899	0.5899		78	23.13	2,277,210	2,326,038	5
1989/07		0.20	0.5899	0.5899		78	23.13	2,277,210	2,341,794	
1990/01		0.30	0.5899	0.5899		78	23.13	2,277,210	2,353,572	
1990/07		0.30	0.5899	0.5899		78	23.13	2,277,210	2,367,456	
1991/01	9,536	0.40	0.5899	0.5899		78	26.72	2,289,357	2,381,340	
1991/07		0.40	1.4932	1.4932		78	26.72	2,296,000	2,416,908	
1992/01	16,162	0.50	2.0117	2.0117		78	29.33	2,324,478	2,465,502	
1992/07		0.50	1.8152	1.8152		78	29.33	2,335,728	2,510,274	
1993/01		0.60	1.7710	1.7710		78	39.61	2,353,603	2,554,734	
1993/07		0.60	1.5329	1.5329		78	39.61	2,369,192	2,593,890	
1994/01	1,960,143	0.70	1.6983	1.6983		120	30.76	4,345,087	4,058,400	
1994/07		0.70	1.5991	1.5991		120	30.76	4,372,289	4,123,320	
1995/01		0.80	1.5812	1.5812		120	30.76	4,403,222	4,188,480	
1995/07	48,378	0.80	1.5250	1.5250		120	33.46	4,484,281	4,252,320	
1996/01	676,400	0.90	1.7228	1.7228		140	30.84	5,199,668	5,046,580	
1996/07		0.90	1.3294	1.3294		140	30.84	5,199,668	5,113,640	3
1997/01	28,338	1.00	1.4109	1.4109		140	33.60	5,199,668	5,185,740	3
1997/07		1.00	1.0917	1.0917		140	33.60	5,234,346	5,242,300	
1998/01		1.00	1.1663	1.1663		140	33.60	5,271,641	5,303,480	
1998/07	68,618	1.00	1.0794	1.0794		140	41.47	5,360,740	5,360,740	8
1999/01	67,528	1.00	1.4499	1.4499		140	39.48	5,438,440	5,438,440	8
1999/07		1.00	1.2299	1.2299		140	49.03	5,498,067	5,505,360	
2000/01		1.00	1.3356	1.3356		140	49.03	5,563,528	5,578,860	
2000/07		1.00	1.1129	1.1129		140	49.03	5,618,724	5,640,880	
2001/01		1.00	1.2976	1.2976		140	49.03	5,683,719	5,714,100	
2001/07		1.00	0.9615	0.9615		140	49.03	5,732,436	5,768,980	
2002/01	47,952	1.00	1.0301	1.0301		140	51.55	5,828,340	5,828,340	8



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		140	51.55	5,873,883	5,876,920	
2003/01		1.00	1.3271	1.3271		140	51.55	5,946,946	5,954,900	
2003/07		1.00	1.1664	1.1664		140	51.55	6,011,960	6,024,340	
2004/01		1.00	1.1103	1.1103		140	51.55	6,074,524	6,091,260	
2004/07		1.00	0.8378	0.8378		140	51.55	6,122,224	6,142,360	
2005/01	45,648	1.00	0.8595	0.8595		140	53.50	6,195,140	6,195,140	8
2005/07		1.00	0.7364	0.7364		140	53.50	6,239,517	6,240,780	
2006/01		1.00	0.9068	0.9068		140	53.50	6,294,554	6,297,340	
2006/07		1.00	0.8133	0.8133		140	57.84	6,345,748	6,348,580	
2007/01		1.00	1.0133	1.0133		140	57.84	6,410,049	6,412,840	
2007/07		1.00	1.1050	1.1050		140	58.39	6,480,880	6,483,680	
2008/01		0.95	0.8556	0.8556		140	55.21	6,533,557	6,539,120	
2008/07		0.95	0.6104	0.6104		140	55.21	6,571,445	6,579,020	
2009/01		0.90	1.3268	1.3268		140	58.03	6,649,915	6,666,380	
2009/07		0.90	0.6841	0.6841		140	58.03	6,690,859	6,712,020	
2010/01		0.85	0.8643	0.8643		140	58.03	6,740,017	6,769,980	
2010/07		0.85	0.7107	0.7107		140	58.72	6,780,733	6,818,140	
2011/01		0.80	0.9198	0.9198		140	58.72	6,830,626	6,880,860	
2011/07		0.80	0.9028	0.9028		140	57.89	6,879,957	6,943,020	
2012/01		0.75	0.3865	0.3865		140	57.89	6,899,902	6,969,900	
2012/07		0.75	0.9417	0.9417		140	59.51	6,948,636	7,035,560	
2013/01		0.70	0.4901	0.4901		140	59.51	6,972,477	7,070,000	
2013/07	10,564	0.70	0.6196	0.6196		140	62.11	7,013,281	7,113,820	
2014/01	14,800	0.65	0.8564	0.8564		140	62.11	7,067,124	7,174,720	
2014/07		0.65	1.2383	1.2383		140	62.11	7,124,007	7,263,620	
2015/01		0.60	0.7571	0.7571		140	62.11	7,156,371	7,318,640	
2015/09		0.60	1.5736	1.5736		140	62.11	7,223,941	7,433,860	
2016/09		0.55	1.9890	1.9890		140	61.72	7,302,971	7,581,700	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 3 | Index Cost Limitation - January 1996 |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
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Palm Garden of Ocala

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2700 SW 34TH ST	5/1/2014-9/30/2015	Number of Beds: 180	Superior: 0
OCALA, FL 34474	Days in CR 518	Maximum: 93,240	Standard: 366
County: Marion [42]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 88,201	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 14,207	Inflation
Current Class North Large	Initial CR? False	Medicaid: 55,191	FY Index: 1.36305434
Class at 1/94: North Large	Medicaid Utilization	62.57412%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.59567%	Cost: 1.05905862
Open Date: 06/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 06/01/1987	Low Occupancy Adjustment Factor:	119.63232%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257290			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,853,301	4,517,127	2,857,797	1,009,443		11,237,668
1a	Audit Adjustments						
2	Cost Per Diem	51.6987	81.8454	51.7801	18.2900		203.6142
3	Cost Per Diem Inflated	54.7520	85.9643	54.8382			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	54.7520	85.9643	54.8382	18.2900		213.8445
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	48.4791		62.6466			
7	Provider Target Rate	51.1759		66.1315			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	52.6414		63.1078			
10b	Base for line 10a	49.8674		59.7822			
11	Lesser of 5,7,8,10, 10a	51.1759	85.9643	54.8382	13.6500		205.6284
12/13	Medicaid Adjustment Rate		1.2160	0.7757			
14	Prospective Per Diem 11	51.1759	87.1803	55.6139	13.6500		207.6201
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Palm Garden of Ocala

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/01/1999		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	9,386,700.00		Total Amount	Per Diem
RS to Start Calcs:	1987/01	Type:	Variable	80% Capital(1):	7,468,878	9.5363
Indexed Asset Value	9,336,097	<60% of Base:	False	20% ROE(2):	1,867,219	0.6663
FRVS Base Asset:	1,720,920	Interest Rate:	4.4350%	Insurance Cost(3):	139,844	1.5855
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	175,990	1.9953
ROE Factor	0.021100	Amortization Rate:	4.4350%	Home Office(3):	84,574	0.9589
		Interest Only:	False	Replacement(3&4):	560,468	0.0000
		Yearly Payment:	563,882	Total FRVS PD:		14.7423

(1) 80% Capital (\$7,468,878) amortized at 4.4350 % for 20 years Principal & Interest of \$563,882 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$9.5363

(2) 20% ROE (\$1,867,219) times the ROE factor (0.021100) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.6663

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,682
Comparison Date: 07/01/1986	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,720,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.1759	51.1759	2.3218	48.8541
Direct Care	87.1803	87.1803	3.9553	83.2250
Indirect Care	55.6139	55.6139	2.5232	53.0907
Property	13.6500	14.7423	0.6689	14.0734
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.3938
Supplemental Rate				8.1814
Totals	207.6201	208.7124	9.4692	225.8184

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/01	2,994,495	0.00	1.0091	1.0091		60	70.17	1,720,920	1,720,920	1
1987/07		0.10	0.9007	0.9007		60	70.17	1,722,471	1,765,380	
1988/01		0.10	0.9007	0.9007		60	70.17	1,724,023	1,779,720	
1988/07		0.20	0.5899	0.5899		60	70.17	1,726,057	1,778,760	
1989/01		0.20	0.5899	0.5899		60	70.17	1,728,094	1,789,260	
1989/07		0.30	0.5899	0.5899		60	70.17	1,731,153	1,801,380	
1990/01		0.30	0.5899	0.5899		60	70.17	1,734,217	1,810,440	
1990/07		0.40	0.5899	0.5899		60	70.17	1,738,310	1,821,120	
1991/01	7,198	0.40	0.5899	0.5899		60	68.62	1,749,610	1,831,800	
1991/07	41,756	0.50	1.4932	1.4932		120	64.21	1,804,429	3,718,320	
1992/01	1,831,800	0.50	2.0117	2.0117		120	64.21	3,654,380	3,793,080	1
1992/07	14,439	0.60	1.8152	1.8152		120	65.05	3,708,619	3,861,960	
1993/01		0.60	1.7710	1.7710		120	65.05	3,748,027	3,930,360	
1993/07	36,716	0.70	1.5329	1.5329		120	63.74	3,824,959	3,990,600	
1994/01		0.70	1.6983	1.6983		120	63.74	3,870,430	4,058,400	
1994/07	36,789	0.80	1.5991	1.5991		120	65.32	3,956,733	4,123,320	
1995/01		0.80	1.5812	1.5812		120	65.32	4,006,786	4,188,480	
1995/07	188,100	0.90	1.5250	1.5250		120	54.74	4,249,619	4,252,320	
1996/01		0.90	1.7228	1.7228		120	54.74	4,315,198	4,325,640	
1996/07	22,382	1.00	1.3294	1.3294		120	46.07	4,383,120	4,383,120	8
1997/01		1.00	1.4109	1.4109		120	46.07	4,434,921	4,444,920	
1997/07	20,237	1.00	1.0917	1.0917		120	48.40	4,493,400	4,493,400	8
1998/01		1.00	1.1663	1.1663		120	48.40	4,539,518	4,545,840	
1998/07		1.00	1.0794	1.0794		120	48.40	4,582,638	4,594,920	
1999/01	2,222,460	1.00	1.4499	1.4499		180	49.17	6,864,499	6,992,280	
1999/07		1.00	1.2299	1.2299		180	64.68	6,948,925	7,078,320	
2000/01		1.00	1.3356	1.3356		180	64.68	7,041,735	7,172,820	
2000/07	37,733	1.00	1.1129	1.1129		180	64.68	7,157,835	7,252,560	
2001/01		1.00	1.2976	1.2976		180	64.68	7,250,715	7,346,700	
2001/07		1.00	0.9615	0.9615		180	64.68	7,320,431	7,417,260	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/01		1.00	1.0301	1.0301		180	58.86	7,320,431	7,493,580	5
2002/07		1.00	0.8337	0.8337		180	58.86	7,457,498	7,556,040	
2003/01		1.00	1.3271	1.3271		180	58.86	7,556,466	7,656,300	
2003/07		1.00	1.1664	1.1664		180	58.86	7,644,605	7,745,580	
2004/01		1.00	1.1103	1.1103		180	58.86	7,729,483	7,831,620	
2004/07		1.00	0.8378	0.8378		180	58.86	7,794,241	7,897,320	
2005/01	63,324	1.00	0.8595	0.8595		180	57.91	7,924,557	7,965,180	
2005/07		1.00	0.7364	0.7364		180	57.91	7,982,913	8,023,860	
2006/01		1.00	0.9068	0.9068		180	57.91	8,055,302	8,096,580	
2006/07		1.00	0.8133	0.8133		180	58.12	8,120,816	8,162,460	
2007/01		1.00	1.0133	1.0133		180	58.12	8,203,104	8,245,080	
2007/07		0.95	1.1050	1.1050		180	61.67	8,289,220	8,336,160	
2008/01		0.95	0.8556	0.8556		180	59.47	8,356,595	8,407,440	
2008/07		0.90	0.6104	0.6104		180	59.47	8,402,506	8,458,740	
2009/01		0.90	1.3268	1.3268		180	59.47	8,502,840	8,571,060	
2009/07		0.85	0.6841	0.6841		180	61.88	8,552,284	8,629,740	
2010/01		0.85	0.8643	0.8643		180	61.88	8,615,118	8,704,260	
2010/07		0.80	0.7107	0.7107		180	61.81	8,664,104	8,766,180	
2011/01		0.80	0.9198	0.9198		180	61.81	8,727,854	8,846,820	
2011/07		0.75	0.9028	0.9028		180	61.91	8,786,950	8,926,740	
2012/01		0.75	0.3865	0.3865		180	61.91	8,812,423	8,961,300	
2012/07		0.70	0.9417	0.9417		180	57.09	8,870,514	9,045,720	
2013/01		0.70	0.4901	0.4901		180	57.09	8,900,949	9,090,000	
2013/07	68,441	0.65	0.6196	0.6196		180	62.55	9,005,234	9,146,340	
2014/01	741	0.65	0.8564	0.8564		180	62.55	9,056,107	9,224,640	
2014/07		0.60	1.2383	1.2383		180	62.55	9,123,394	9,338,940	
2015/01		0.60	0.7571	0.7571		180	62.55	9,164,842	9,409,680	
2015/09		0.55	1.5736	1.5736		180	62.55	9,244,164	9,557,820	
2016/09		0.50	1.9890	1.9890		180	62.57	9,336,097	9,747,900	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |



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Palm Garden of Orlando

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
654 N ECONLOCKHATCHEE T	7/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
ORLANDO, FL 32825-6402	Days in CR 457	Maximum: 54,840	Standard: 366
County: Orange [48]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 51,972	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 7,596	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 34,377	FY Index: 1.36645256
Class at 1/94: North Large	Medicaid Utilization	66.14523%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.77024%	Cost: 1.05642486
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24399678
Entered Medicaid 09/21/1987	Low Occupancy Adjustment Factor:	119.85310%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04863615
Previous Med # 257303			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,670,079	2,549,591	1,809,987	527,343		6,557,000	
1a	Audit Adjustments							
2	Cost Per Diem	48.5813	74.1656	52.6511	15.3400		190.7380	
3	Cost Per Diem Inflated	51.3225	77.7727	55.6219				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.3225	77.7727	55.6219	15.3400		200.0571	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.6741		67.4476				
7	Provider Target Rate	51.3817		71.1996				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	53.5747		65.4332				
10b	Base for line 10a	50.7515		61.9851				
11	Lesser of 5,7,8,10, 10a	51.3225	77.7727	55.6219	13.6500		198.3671	
12/13	Medicaid Adjustment Rate		1.4126	1.0103				
14	Prospective Per Diem 11	51.3225	79.1853	56.6322	13.6500		200.7900	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Palm Garden of Orlando

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/21/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,032,000.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Variable	80% Capital(1):	5,011,047	9.5972
Indexed Asset Value	6,263,809	<60% of Base:	False	20% ROE(2):	1,252,762	0.6620
FRVS Base Asset:	1,751,700	Interest Rate:	4.4350%	Insurance Cost(3):	86,588	1.6661
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	136,877	2.6337
ROE Factor	0.020830	Amortization Rate:	4.4350%	Home Office(3):	50,131	0.9646
		Interest Only:	False	Replacement(3&4):	177,290	0.0000
		Yearly Payment:	378,322	Total FRVS PD:		15.5236

(1) 80% Capital (\$5,011,047) amortized at 4.4350 % for 20 years Principal & Interest of \$378,322 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.5972

(2) 20% ROE (\$1,252,762) times the ROE factor (0.020830) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6620

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,195
Comparison Date: 01/01/1987	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,751,700

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.3225	51.3225	2.3285	48.9940
Direct Care	79.1853	79.1853	3.5926	75.5927
Indirect Care	56.6322	56.6322	2.5694	54.0628
Property	13.6500	15.5236	0.7043	14.8193
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.5566
Supplemental Rate				8.1814
Totals	200.7900	202.6636	9.1948	220.2068

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	3,985,214	0.00	0.9007	0.9007		60	70.40	1,751,700	1,751,700	1
1988/01		0.10	0.9007	0.9007		60	70.40	1,753,278	1,779,720	
1988/07		0.10	0.5899	0.5899		60	70.40	1,754,312	1,778,760	
1989/01		0.20	0.5899	0.5899		60	70.40	1,756,382	1,789,260	
1989/07		0.20	0.5899	0.5899		60	70.40	1,758,455	1,801,380	
1990/01		0.30	0.5899	0.5899		60	70.40	1,761,567	1,810,440	
1990/07		0.30	0.5899	0.5899		60	70.40	1,764,685	1,821,120	
1991/01		0.40	0.5899	0.5899		60	63.31	1,768,850	1,831,800	
1991/07		0.40	1.4932	1.4932		60	63.31	1,779,415	1,859,160	
1992/01		0.50	2.0117	2.0117		60	64.12	1,797,314	1,896,540	
1992/07		0.50	1.8152	1.8152		60	64.12	1,813,626	1,930,980	
1993/01	14,147	0.60	1.7710	1.7710		60	71.55	1,847,045	1,965,180	
1993/07		0.60	1.5329	1.5329		60	71.55	1,864,032	1,995,300	
1994/01	17,117	0.70	1.6983	1.6983		60	69.42	1,903,309	2,029,200	
1994/07		0.70	1.5991	1.5991		60	69.42	1,924,615	2,061,660	
1995/01	39,031	0.80	1.5812	1.5812		60	67.84	1,987,992	2,094,240	
1995/07		0.80	1.5250	1.5250		60	67.84	2,012,246	2,126,160	
1996/01	3,181,622	0.90	1.7228	1.7228		120	49.61	5,222,010	4,325,640	
1996/07		0.90	1.3294	1.3294		120	49.61	5,222,010	4,383,120	3
1997/01	27,825	1.00	1.4109	1.4109		120	51.15	5,222,010	4,444,920	3
1997/07		1.00	1.0917	1.0917		120	51.15	5,222,010	4,493,400	3
1998/01		1.00	1.1663	1.1663		120	56.22	5,222,010	4,545,840	3
1998/07		1.00	1.0794	1.0794		120	56.22	5,222,010	4,594,920	3
1999/01		1.00	1.4499	1.4499		120	57.01	5,222,010	4,661,520	3
1999/07		1.00	1.2299	1.2299		120	67.01	5,222,010	4,718,880	3
2000/01		1.00	1.3356	1.3356		120	67.01	5,222,010	4,781,880	3
2000/07		1.00	1.1129	1.1129		120	67.01	5,222,010	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	67.01	5,222,010	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	67.01	5,222,010	4,944,840	3
2002/01	63,538	1.00	1.0301	1.0301		120	62.29	5,222,010	4,995,720	3



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		120	62.29	5,222,010	5,037,360	3
2003/01		1.00	1.3271	1.3271		120	62.29	5,222,010	5,104,200	3
2003/07		1.00	1.1664	1.1664		120	62.29	5,222,010	5,163,720	3
2004/01		1.00	1.1103	1.1103		120	62.29	5,222,010	5,221,080	3
2004/07		1.00	0.8378	0.8378		120	62.29	5,264,880	5,264,880	8
2005/01	21,889	1.00	0.8595	0.8595		120	63.84	5,310,120	5,310,120	8
2005/07		1.00	0.7364	0.7364		120	63.84	5,349,224	5,349,240	
2006/01		1.00	0.9068	0.9068		120	63.84	5,397,720	5,397,720	8
2006/07		1.00	0.8133	0.8133		120	57.72	5,441,620	5,441,640	
2007/01		1.00	1.0133	1.0133		120	57.72	5,496,720	5,496,720	8
2007/07	23,399	1.00	1.1050	1.1050		120	65.14	5,557,440	5,557,440	8
2008/01		0.95	0.8556	0.8556		120	65.14	5,602,611	5,604,960	
2008/07		0.95	0.6104	0.6104		120	61.93	5,635,101	5,639,160	
2009/01		0.90	1.3268	1.3268		120	63.91	5,702,390	5,714,040	
2009/07		0.90	0.6841	0.6841		120	63.91	5,737,500	5,753,160	
2010/01		0.85	0.8643	0.8643		120	63.91	5,779,653	5,802,840	
2010/07		0.85	0.7107	0.7107		120	63.52	5,814,568	5,844,120	
2011/01		0.80	0.9198	0.9198		120	63.52	5,857,352	5,897,880	
2011/07		0.80	0.9028	0.9028		120	68.36	5,899,654	5,951,160	
2012/01		0.75	0.3865	0.3865		120	68.36	5,916,757	5,974,200	
2012/07		0.75	0.9417	0.9417		120	62.77	5,958,547	6,030,480	
2013/01		0.70	0.4901	0.4901		120	62.77	5,978,991	6,060,000	
2013/07		0.70	0.6196	0.6196		120	63.80	6,004,922	6,097,560	
2014/01	23,169	0.65	0.8564	0.8564		120	63.80	6,061,520	6,149,760	
2014/07		0.65	1.2383	1.2383		120	63.80	6,110,309	6,225,960	
2015/01		0.60	0.7571	0.7571		120	63.80	6,138,068	6,273,120	
2015/09		0.60	1.5736	1.5736		120	63.80	6,196,024	6,371,880	
2016/09		0.55	1.9890	1.9890		120	66.15	6,263,809	6,498,600	

Message Code:

- | |
|--|
| 1 Per Bed Standard Limitation |
| 3 Index Cost Limitation - January 1996 |
| 8 Limited to Current RS Per Bed Standard |



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Palm Garden of Pinellas

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
200 16TH AVE SE	5/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
LARGO, FL 33771	Days in CR 518	Maximum: 62,160	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 57,401	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 6,548	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 38,199	FY Index: 1.36305434
Class at 1/94: North Large	Medicaid Utilization	66.54762%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.34395%	Cost: 1.05905862
Open Date: 06/14/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/14/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 06/25/1991	Low Occupancy Adjustment Factor:	116.78464%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257508			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,982,127	3,238,831	2,162,169	630,665		8,013,792	
1a	Audit Adjustments							
2	Cost Per Diem	51.8895	84.7884	56.6028	16.5100		209.7907	
3	Cost Per Diem Inflated	54.9540	89.0554	59.9457				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.9540	89.0554	59.9457	16.5100		220.4651	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.1356		66.9146				
7	Provider Target Rate	52.9245		70.6369				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	51.8959		65.4783				
10b	Base for line 10a	49.1612		62.0278				
11	Lesser of 5,7,8,10, 10a	51.8959	89.0554	59.9457	13.6500		214.5470	
12/13	Medicaid Adjustment Rate		1.6579	1.1160				
14	Prospective Per Diem 11	51.8959	90.7133	61.0617	13.6500		217.3209	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Palm Garden of Pinellas

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/25/1991		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,500,000.00		Total Amount	Per Diem
RS to Start Calcs:	1991/01	Type:	Fixed	80% Capital(1):	5,106,127	15.4039
Indexed Asset Value	6,382,659	<60% of Base:	False	20% ROE(2):	1,276,532	0.6833
FRVS Base Asset:	3,642,240	Interest Rate:	10.3900%	Insurance Cost(3):	98,231	1.7113
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	114,664	1.9976
ROE Factor	0.021100	Amortization Rate:	10.3900%	Home Office(3):	55,576	0.9682
		Interest Only:	False	Replacement(3&4):	269,966	0.0000
		Yearly Payment:	607,222	Total FRVS PD:		20.7643

(1) 80% Capital (\$5,106,127) amortized at 10.3900 % for 20 years Principal & Interest of \$607,222 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$15.4039

(2) 20% ROE (\$1,276,532) times the ROE factor (0.021100) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6833

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,352
Comparison Date: 07/01/1990	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.8959	51.8959	2.3545	49.5414
Direct Care	90.7133	90.7133	4.1156	86.5977
Indirect Care	61.0617	61.0617	2.7703	58.2914
Property	13.6500	20.7643	0.9421	19.8222
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1174
Supplemental Rate				8.1814
Totals	217.3209	224.4352	10.1825	241.5515

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/01	5,285,470	0.00	0.5899	0.5899		120	30.70	3,642,240	3,642,240	1
1991/07		0.10	1.4932	1.4932		120	30.70	3,645,275	3,718,320	
1992/01		0.10	2.0117	2.0117		120	30.70	3,649,369	3,793,080	
1992/07		0.20	1.8152	1.8152		120	30.70	3,656,763	3,861,960	
1993/01		0.20	1.7710	1.7710		120	30.70	3,663,993	3,930,360	
1993/07		0.30	1.5329	1.5329		120	30.70	3,673,399	3,990,600	
1994/01		0.30	1.6983	1.6983		120	30.70	3,683,846	4,058,400	
1994/07	19,584	0.40	1.5991	1.5991		120	38.86	3,720,078	4,123,320	
1995/01		0.40	1.5812	1.5812		120	38.86	3,736,703	4,188,480	
1995/07	29,680	0.50	1.5250	1.5250		120	35.98	3,785,022	4,252,320	
1996/01	1,148,530	0.50	1.7228	1.7228		120	33.93	4,953,666	4,325,640	
1996/07		0.60	1.3294	1.3294		120	33.93	4,953,666	4,383,120	3
1997/01		0.60	1.4109	1.4109		120	33.93	4,953,666	4,444,920	3
1997/07	81,799	0.70	1.0917	1.0917		120	31.24	4,953,666	4,493,400	3
1998/01		0.70	1.1663	1.1663		120	31.24	4,953,666	4,545,840	3
1998/07		0.80	1.0794	1.0794		120	36.63	4,953,666	4,594,920	3
1999/01		0.80	1.4499	1.4499		120	36.63	4,953,666	4,661,520	3
1999/07		0.90	1.2299	1.2299		120	48.18	4,953,666	4,718,880	3
2000/01		0.90	1.3356	1.3356		120	48.18	4,953,666	4,781,880	3
2000/07		1.00	1.1129	1.1129		120	48.18	4,953,666	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	48.18	4,953,666	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	48.18	4,953,666	4,944,840	3
2002/01		1.00	1.0301	1.0301		120	59.41	4,995,720	4,995,720	8
2002/07		1.00	0.8337	0.8337		120	59.41	5,037,360	5,037,360	8
2003/01		1.00	1.3271	1.3271		120	59.41	5,104,200	5,104,200	8
2003/07		1.00	1.1664	1.1664		120	59.41	5,163,720	5,163,720	8
2004/01		1.00	1.1103	1.1103		120	59.41	5,221,053	5,221,080	
2004/07		1.00	0.8378	0.8378		120	59.41	5,264,795	5,264,880	
2005/01		1.00	0.8595	0.8595		120	63.61	5,310,046	5,310,120	
2005/07		1.00	0.7364	0.7364		120	63.61	5,349,149	5,349,240	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01		1.00	0.9068	0.9068		120	63.61	5,397,655	5,397,720	
2006/07		1.00	0.8133	0.8133		120	61.93	5,441,554	5,441,640	
2007/01		1.00	1.0133	1.0133		120	61.93	5,496,693	5,496,720	
2007/07	19,998	1.00	1.1050	1.1050		120	61.37	5,557,440	5,557,440	8
2008/01		1.00	0.8556	0.8556		120	59.01	5,604,960	5,604,960	8
2008/07		1.00	0.6104	0.6104		120	59.01	5,639,160	5,639,160	8
2009/01		1.00	1.3268	1.3268		120	59.27	5,713,980	5,714,040	
2009/07		1.00	0.6841	0.6841		120	59.27	5,753,069	5,753,160	
2010/01		1.00	0.8643	0.8643		120	59.27	5,802,793	5,802,840	
2010/07		1.00	0.7107	0.7107		120	57.66	5,844,033	5,844,120	
2011/01		1.00	0.9198	0.9198		120	57.66	5,897,786	5,897,880	
2011/07		0.95	0.9028	0.9028		120	61.24	5,948,371	5,951,160	
2012/01		0.95	0.3865	0.3865		120	61.78	5,970,213	5,974,200	
2012/07		0.90	0.9417	0.9417		120	61.78	6,020,811	6,030,480	
2013/01		0.90	0.4901	0.4901		120	61.78	6,047,369	6,060,000	
2013/07		0.85	0.6196	0.6196		120	66.58	6,079,220	6,097,560	
2014/01		0.85	0.8564	0.8564		120	66.58	6,123,471	6,149,760	
2014/07		0.80	1.2383	1.2383		120	66.58	6,184,130	6,225,960	
2015/01		0.80	0.7571	0.7571		120	66.58	6,221,587	6,273,120	
2015/09		0.75	1.5736	1.5736		120	66.58	6,295,014	6,371,880	
2016/09		0.70	1.9890	1.9890		120	66.55	6,382,659	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
3 Index Cost Limitation - January 1996
8 Limited to Current RS Per Bed Standard |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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233.58

Palm Garden of Port Saint Lucie

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1751 SE HILLMOOR DRIVE	5/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
PORT SAINT LUCIE, FL 34952	Days in CR 518	Maximum: 62,160	Standard: 366
County: St Lucie [56]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 58,915	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 6,778	Inflation
Current Class South Large	Initial CR? False	Medicaid: 37,701	FY Index: 1.36305434
Class at 1/94: South Large	Medicaid Utilization	63.99219%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.77960%	Cost: 1.05905862
Open Date: 02/25/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/25/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 02/25/1988	Low Occupancy Adjustment Factor:	119.86493%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257249			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,950,735	3,005,331	2,215,478	638,278		7,809,822	
1a	Audit Adjustments							
2	Cost Per Diem	51.7423	79.7149	58.7644	16.9300		207.1516	
3	Cost Per Diem Inflated	54.7981	83.7265	62.2349				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.7981	83.7265	62.2349	16.9300		217.6895	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.1702		63.5622				
7	Provider Target Rate	52.9611		67.0980				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	54.2930		65.2596				
10b	Base for line 10a	51.4319		61.8206				
11	Lesser of 5,7,8,10, 10a	52.9611	83.7265	62.2349	13.6500		212.5725	
12/13	Medicaid Adjustment Rate		1.3180	0.9797				
14	Prospective Per Diem 11	52.9611	85.0445	63.2146	13.6500		214.8702	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Palm Garden of Port Saint Lucie

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 02/25/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,400,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/01	Type:	Fixed	80% Capital(1):	4,717,402	10.2883
Indexed Asset Value	5,896,752	<60% of Base:	False	20% ROE(2):	1,179,350	0.6313
FRVS Base Asset:	3,530,760	Interest Rate:	6.0000%	Insurance Cost(3):	91,390	1.5512
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	137,755	2.3382
ROE Factor	0.021100	Amortization Rate:	6.0000%	Home Office(3):	55,954	0.9497
		Interest Only:	False	Replacement(3&4):	527,362	0.0000
		Yearly Payment:	405,563	Total FRVS PD:		15.7587

(1) 80% Capital (\$4,717,402) amortized at 6.0000 % for 20 years Principal & Interest of \$405,563 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.2883

(2) 20% ROE (\$1,179,350) times the ROE factor (0.021100) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6313

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1987	Current RS PBS:	29,423
Comparison Bed	120	Effective PBS Limitation	54,155
			3,530,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.9611	52.9611	2.4028	50.5583
Direct Care	85.0445	85.0445	3.8584	81.1861
Indirect Care	63.2146	63.2146	2.8680	60.3466
Property	13.6500	15.7587	0.7150	15.0437
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.2608
Supplemental Rate				8.1814
Totals	214.8702	216.9789	9.8442	233.5769

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 9/30/2015

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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/01	5,806,005	0.00	0.9007	0.9007		120	36.36	3,530,760	3,530,760	1
1988/07		0.10	0.5899	0.5899		120	36.36	3,532,137	3,557,520	
1989/01		0.10	0.5899	0.5899		120	36.36	3,533,515	3,578,520	
1989/07		0.20	0.5899	0.5899		120	36.36	3,536,271	3,602,760	
1990/01		0.20	0.5899	0.5899		120	36.36	3,539,030	3,620,880	
1990/07		0.30	0.5899	0.5899		120	36.36	3,543,171	3,642,240	
1991/01		0.30	0.5899	0.5899		120	36.36	3,547,317	3,663,600	
1991/07		0.40	1.4932	1.4932		120	44.84	3,564,591	3,718,320	
1992/01		0.40	2.0117	2.0117		120	44.84	3,587,976	3,793,080	
1992/07	28,643	0.50	1.8152	1.8152		120	47.41	3,644,690	3,861,960	
1993/01		0.50	1.7710	1.7710		120	47.41	3,672,510	3,930,360	
1993/07	33,839	0.60	1.5329	1.5329		120	47.43	3,735,476	3,990,600	
1994/01		0.60	1.6983	1.6983		120	47.43	3,768,301	4,058,400	
1994/07	50,591	0.70	1.5991	1.5991		120	47.75	3,855,514	4,123,320	
1995/01		0.70	1.5812	1.5812		120	47.75	3,892,562	4,188,480	
1995/07	35,907	0.80	1.5250	1.5250		120	54.89	3,975,863	4,252,320	
1996/01		0.80	1.7228	1.7228		120	54.89	4,030,549	4,325,640	
1996/07	24,186	0.90	1.3294	1.3294		120	54.52	4,102,540	4,383,120	
1997/01		0.90	1.4109	1.4109		120	54.52	4,154,179	4,444,920	
1997/07		1.00	1.0917	1.0917		120	54.76	4,199,332	4,493,400	
1998/01		1.00	1.1663	1.1663		120	54.76	4,248,095	4,545,840	
1998/07		1.00	1.0794	1.0794		120	54.76	4,248,095	4,594,920	5
1999/01		1.00	1.4499	1.4499		120	58.71	4,356,004	4,661,520	
1999/07		1.00	1.2299	1.2299		120	63.92	4,409,578	4,718,880	
2000/01		1.00	1.3356	1.3356		120	63.92	4,468,472	4,781,880	
2000/07		1.00	1.1129	1.1129		120	63.92	4,468,472	4,835,040	5
2001/01		1.00	1.2976	1.2976		120	63.92	4,576,830	4,897,800	
2001/07		1.00	0.9615	0.9615		120	63.92	4,620,836	4,944,840	
2002/01		1.00	1.0301	1.0301		120	73.93	4,668,435	4,995,720	
2002/07		1.00	0.8337	0.8337		120	73.93	4,707,356	5,037,360	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/01		1.00	1.3271	1.3271		120	73.93	4,769,827	5,104,200	
2003/07		1.00	1.1664	1.1664		120	73.93	4,825,462	5,163,720	
2004/01		1.00	1.1103	1.1103		120	73.93	4,879,039	5,221,080	
2004/07		1.00	0.8378	0.8378		120	73.93	4,919,916	5,264,880	
2005/01	27,209	1.00	0.8595	0.8595		120	71.62	4,989,412	5,310,120	
2005/07		1.00	0.7364	0.7364		120	71.62	5,026,154	5,349,240	
2006/01		1.00	0.9068	0.9068		120	71.62	5,071,731	5,397,720	
2006/07		1.00	0.8133	0.8133		120	74.39	5,112,979	5,441,640	
2007/01		1.00	1.0133	1.0133		120	74.39	5,164,789	5,496,720	
2007/07		1.00	1.1050	1.1050		120	69.73	5,221,860	5,557,440	
2008/01		1.00	0.8556	0.8556		120	69.73	5,266,538	5,604,960	
2008/07		0.95	0.6104	0.6104		120	65.23	5,297,079	5,639,160	
2009/01		0.95	1.3268	1.3268		120	63.69	5,363,849	5,714,040	
2009/07		0.90	0.6841	0.6841		120	63.69	5,396,874	5,753,160	
2010/01		0.90	0.8643	0.8643		120	63.69	5,438,856	5,802,840	
2010/07		0.85	0.7107	0.7107		120	63.42	5,471,712	5,844,120	
2011/01		0.85	0.9198	0.9198		120	63.42	5,514,490	5,897,880	
2011/07		0.80	0.9028	0.9028		120	63.16	5,554,316	5,951,160	
2012/01		0.80	0.3865	0.3865		120	63.16	5,571,490	5,974,200	
2012/07		0.75	0.9417	0.9417		120	65.16	5,610,841	6,030,480	
2013/01		0.75	0.4901	0.4901		120	65.16	5,631,466	6,060,000	
2013/07	14,289	0.70	0.6196	0.6196		120	58.30	5,670,179	6,097,560	
2014/01		0.70	0.8564	0.8564		120	58.30	5,704,172	6,149,760	
2014/07		0.65	1.2383	1.2383		120	58.30	5,750,085	6,225,960	
2015/01		0.65	0.7571	0.7571		120	58.30	5,778,381	6,273,120	
2015/09		0.60	1.5736	1.5736		120	58.30	5,832,940	6,371,880	
2016/09		0.55	1.9890	1.9890		120	63.99	5,896,752	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

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Palm Garden of Sun City

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3850 UPPER CREEK DR	7/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
SUN CITY CENTER, FL 33573	Days in CR 457	Maximum: 54,840	Standard: 366
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 49,346	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 8,250	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,657	FY Index: 1.36645256
Class at 1/94: North Large	Medicaid Utilization	56.04710%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.98177%	Cost: 1.05642486
Open Date: 06/01/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24399678
Entered Medicaid 06/01/1991	Low Occupancy Adjustment Factor:	113.79726%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04863615
Previous Med # 257516			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,288,907	2,366,937	1,632,451	522,717		5,811,012	
1a	Audit Adjustments							
2	Cost Per Diem	46.6033	85.5818	59.0249	18.9000		210.1100	
3	Cost Per Diem Inflated	49.2329	89.7442	62.3554				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.2329	89.7442	62.3554	18.9000		220.2325	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.3131		66.8515				
7	Provider Target Rate	48.8894		70.5703				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	55.6253		63.9426				
10b	Base for line 10a	52.6940		60.5730				
11	Lesser of 5,7,8,10, 10a	48.8894	89.7442	62.3554	13.6500		214.6390	
12/13	Medicaid Adjustment Rate		0.6105	0.4242				
14	Prospective Per Diem 11	48.8894	90.3547	62.7796	13.6500		215.6737	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Palm Garden of Sun City

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/28/1991		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,250,000.00		Total Amount	Per Diem
RS to Start Calcs:	1991/01	Type:	Fixed	80% Capital(1):	5,098,375	15.3805
Indexed Asset Value	6,372,969	<60% of Base:	False	20% ROE(2):	1,274,594	0.6735
FRVS Base Asset:	3,642,240	Interest Rate:	10.3900%	Insurance Cost(3):	77,999	1.5807
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	102,067	2.0684
ROE Factor	0.020830	Amortization Rate:	10.3900%	Home Office(3):	47,533	0.9633
		Interest Only:	False	Replacement(3&4):	186,027	0.0000
		Yearly Payment:	606,300	Total FRVS PD:		20.6664

(1) 80% Capital (\$5,098,375) amortized at 10.3900 % for 20 years Principal & Interest of \$606,300 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$15.3805

(2) 20% ROE (\$1,274,594) times the ROE factor (0.020830) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6735

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1990	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.8894	48.8894	2.2181	46.6713
Direct Care	90.3547	90.3547	4.0993	86.2554
Indirect Care	62.7796	62.7796	2.8483	59.9313
Property	13.6500	20.6664	0.9376	19.7288
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.6122
Supplemental Rate				8.1814
Totals	215.6737	222.6901	10.1033	238.3804

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/01	5,505,000	0.00	0.5899	0.5899		120	55.00	3,642,240	3,642,240	1
1991/07	4,788	0.10	1.4932	1.4932		120	47.53	3,651,727	3,718,320	
1992/01	59,334	0.10	2.0117	2.0117		120	47.53	3,717,410	3,793,080	
1992/07	19,767	0.20	1.8152	1.8152		120	47.53	3,748,838	3,861,960	
1993/01	6,081	0.20	1.7710	1.7710		120	47.53	3,766,394	3,930,360	
1993/07		0.30	1.5329	1.5329		120	47.53	3,781,363	3,990,600	
1994/01		0.30	1.6983	1.6983		120	47.53	3,798,012	4,058,400	
1994/07		0.40	1.5991	1.5991		120	47.53	3,819,005	4,123,320	
1995/01	214,887	0.40	1.5812	1.5812		120	44.57	4,053,467	4,188,480	
1995/07		0.50	1.5250	1.5250		120	44.57	4,078,513	4,252,320	
1996/01	24,011	0.50	1.7228	1.7228		120	48.11	4,133,255	4,325,640	
1996/07		0.60	1.3294	1.3294		120	48.11	4,162,092	4,383,120	
1997/01	1,288,987	0.60	1.4109	1.4109		120	50.65	5,483,525	4,444,920	6
1997/07		0.70	1.0917	1.0917		120	50.65	5,483,525	4,493,400	3
1998/01		0.70	1.1663	1.1663		120	54.13	5,483,525	4,545,840	3
1998/07		0.80	1.0794	1.0794		120	54.13	5,483,525	4,594,920	3
1999/01		0.80	1.4499	1.4499		120	54.44	5,483,525	4,661,520	3
1999/07		0.90	1.2299	1.2299		120	54.86	5,483,525	4,718,880	3
2000/01		0.90	1.3356	1.3356		120	54.86	5,483,525	4,781,880	3
2000/07		1.00	1.1129	1.1129		120	54.86	5,483,525	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	54.86	5,483,525	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	54.86	5,483,525	4,944,840	3
2002/01		1.00	1.0301	1.0301		120	55.62	5,483,525	4,995,720	3
2002/07		1.00	0.8337	0.8337		120	55.62	5,483,525	5,037,360	3
2003/01		1.00	1.3271	1.3271		120	55.62	5,483,525	5,104,200	3
2003/07		1.00	1.1664	1.1664		120	55.62	5,483,525	5,163,720	3
2004/01		1.00	1.1103	1.1103		120	55.62	5,483,525	5,221,080	3
2004/07		1.00	0.8378	0.8378		120	55.62	5,483,525	5,264,880	3
2005/01	28,798	1.00	0.8595	0.8595		120	50.21	5,483,525	5,310,120	3
2005/07		1.00	0.7364	0.7364		120	50.21	5,483,525	5,349,240	3



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238.38

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01		1.00	0.9068	0.9068		120	50.21	5,483,525	5,397,720	3
2006/07		1.00	0.8133	0.8133		120	43.97	5,483,525	5,441,640	3
2007/01		1.00	1.0133	1.0133		120	43.97	5,496,720	5,496,720	8
2007/07		1.00	1.1050	1.1050		120	49.60	5,551,495	5,557,440	
2008/01		1.00	0.8556	0.8556		120	50.27	5,594,909	5,604,960	
2008/07		1.00	0.6104	0.6104		120	50.27	5,626,123	5,639,160	
2009/01		1.00	1.3268	1.3268		120	50.27	5,694,351	5,714,040	
2009/07		1.00	0.6841	0.6841		120	52.76	5,731,720	5,753,160	
2010/01		1.00	0.8643	0.8643		120	52.76	5,779,242	5,802,840	
2010/07		1.00	0.7107	0.7107		120	51.35	5,817,589	5,844,120	
2011/01		1.00	0.9198	0.9198		120	55.03	5,871,099	5,897,880	
2011/07		0.95	0.9028	0.9028		120	55.03	5,921,455	5,951,160	
2012/01		0.95	0.3865	0.3865		120	52.53	5,942,222	5,974,200	
2012/07		0.90	0.9417	0.9417		120	52.53	5,990,321	6,030,480	
2013/01		0.90	0.4901	0.4901		120	52.53	6,015,558	6,060,000	
2013/07	830	0.85	0.6196	0.6196		120	56.09	6,048,072	6,097,560	
2014/01	22,078	0.85	0.8564	0.8564		120	56.09	6,114,174	6,149,760	
2014/07		0.80	1.2383	1.2383		120	56.09	6,174,741	6,225,960	
2015/01		0.80	0.7571	0.7571		120	56.09	6,212,141	6,273,120	
2015/09		0.75	1.5736	1.5736		120	56.09	6,285,457	6,371,880	
2016/09		0.70	1.9890	1.9890		120	56.05	6,372,969	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 3 Index Cost Limitation - January 1996
- 6 Not Limited to Current Per Bed Standard
- 8 Limited to Current RS Per Bed Standard



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243.03

Palm Garden of Tampa

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3612 E 138TH AVE	7/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
TAMPA, FL 33613	Days in CR 457	Maximum: 54,840	Standard: 366
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 51,642	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 7,843	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 33,476	FY Index: 1.36645256
Class at 1/94: North Large	Medicaid Utilization	64.82321%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.16849%	Cost: 1.05642486
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24399678
Entered Medicaid 11/01/1987	Low Occupancy Adjustment Factor:	119.09208%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04863615
Previous Med # 257524			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,826,248	2,836,596	1,964,515	455,274		7,082,633	
1a	Audit Adjustments							
2	Cost Per Diem	54.5539	84.7352	58.6843	13.6000		211.5734	
3	Cost Per Diem Inflated	57.6321	88.8564	61.9956				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.6321	88.8564	61.9956	13.6000		222.0841	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.1380		68.6743				
7	Provider Target Rate	52.9271		72.4945				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	53.8100		64.0307				
10b	Base for line 10a	50.9744		60.6565				
11	Lesser of 5,7,8,10, 10a	52.9271	88.8564	61.9956	13.6000		217.3791	
12/13	Medicaid Adjustment Rate		1.4818	1.0338				
14	Prospective Per Diem 11	52.9271	90.3382	63.0294	13.6000		219.8947	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Palm Garden of Tampa

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/1990		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,006,000.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Fixed	80% Capital(1):	4,725,147	14.8470
Indexed Asset Value	5,906,434	<60% of Base:	False	20% ROE(2):	1,181,287	0.6242
FRVS Base Asset:	3,007,085	Interest Rate:	11.0000%	Insurance Cost(3):	86,709	1.6790
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	79,550	1.5404
ROE Factor	0.020830	Amortization Rate:	11.0000%	Home Office(3):	49,400	0.9566
		Interest Only:	False	Replacement(3&4):	284,463	0.0000
		Yearly Payment:	585,269	Total FRVS PD:		19.6472

(1) 80% Capital (\$4,725,147) amortized at 11.0000 % for 20 years Principal & Interest of \$585,269 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$14.8470

(2) 20% ROE (\$1,181,287) times the ROE factor (0.020830) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6242

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1987	Current RS PBS:	29,195
Comparison Bed	103	Effective PBS Limitation	54,155
			3,007,085

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.9271	52.9271	2.4013	50.5258
Direct Care	90.3382	90.3382	4.0986	86.2396
Indirect Care	63.0294	63.0294	2.8596	60.1698
Property	13.6000	19.6472	0.8914	18.7558
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1605
Supplemental Rate				8.1814
Totals	219.8947	225.9419	10.2509	243.0329

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	5,043,339	0.00	0.9007	0.9007		103	47.27	3,007,085	3,007,085	1
1988/01		0.10	0.9007	0.9007		103	47.27	3,009,414	3,055,186	
1988/07		0.10	0.5899	0.5899		103	47.27	3,010,940	3,053,538	
1989/01		0.20	0.5899	0.5899		103	47.27	3,013,994	3,071,563	
1989/07		0.20	0.5899	0.5899		103	47.27	3,017,051	3,092,369	
1990/01		0.30	0.5899	0.5899		103	47.27	3,021,641	3,107,922	
1990/07		0.30	0.5899	0.5899		103	47.27	3,026,238	3,126,256	
1991/01		0.40	0.5899	0.5899		103	45.06	3,032,089	3,144,590	
1991/07		0.40	1.4932	1.4932		103	47.79	3,047,826	3,191,558	
1992/01		0.50	2.0117	2.0117		103	47.79	3,074,465	3,255,727	
1992/07	24,048	0.50	1.8152	1.8152		103	52.50	3,125,148	3,314,849	
1993/01		0.60	1.7710	1.7710		103	52.50	3,156,846	3,373,559	
1993/07	420,990	0.60	1.5329	1.5329		120	59.90	3,606,870	3,990,600	
1994/01		0.70	1.6983	1.6983		120	59.90	3,649,748	4,058,400	
1994/07	71,161	0.70	1.5991	1.5991		120	61.73	3,761,764	4,123,320	
1995/01		0.80	1.5812	1.5812		120	61.73	3,809,350	4,188,480	
1995/07		0.80	1.5250	1.5250		120	61.73	3,855,824	4,252,320	
1996/01		0.90	1.7228	1.7228		120	62.76	3,915,609	4,325,640	
1996/07	30,409	0.90	1.3294	1.3294		120	62.87	3,992,868	4,383,120	
1997/01		1.00	1.4109	1.4109		120	62.87	4,049,203	4,444,920	
1997/07		1.00	1.0917	1.0917		120	65.61	4,093,408	4,493,400	
1998/01		1.00	1.1663	1.1663		120	65.61	4,141,149	4,545,840	
1998/07		1.00	1.0794	1.0794		120	65.61	4,185,849	4,594,920	
1999/01		1.00	1.4499	1.4499		120	68.28	4,246,540	4,661,520	
1999/07	19,403	1.00	1.2299	1.2299		120	66.11	4,318,171	4,718,880	
2000/01		1.00	1.3356	1.3356		120	66.11	4,375,844	4,781,880	
2000/07	31,736	1.00	1.1129	1.1129		120	66.11	4,456,279	4,835,040	
2001/01		1.00	1.2976	1.2976		120	66.11	4,456,279	4,897,800	5
2001/07		1.00	0.9615	0.9615		120	66.11	4,557,507	4,944,840	
2002/01		1.00	1.0301	1.0301		120	66.52	4,604,454	4,995,720	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		120	66.52	4,642,841	5,037,360	
2003/01		1.00	1.3271	1.3271		120	66.52	4,704,456	5,104,200	
2003/07		1.00	1.1664	1.1664		120	66.52	4,759,329	5,163,720	
2004/01		1.00	1.1103	1.1103		120	66.52	4,812,172	5,221,080	
2004/07		1.00	0.8378	0.8378		120	66.52	4,852,488	5,264,880	
2005/01	45,532	1.00	0.8595	0.8595		120	66.28	4,939,727	5,310,120	
2005/07		1.00	0.7364	0.7364		120	66.28	4,976,103	5,349,240	
2006/01		1.00	0.9068	0.9068		120	66.28	5,021,226	5,397,720	
2006/07	20,641	1.00	0.8133	0.8133		120	70.39	5,082,705	5,441,640	
2007/01		1.00	1.0133	1.0133		120	70.39	5,134,208	5,496,720	
2007/07		1.00	1.1050	1.1050		120	68.04	5,190,941	5,557,440	
2008/01		0.95	0.8556	0.8556		120	64.26	5,233,133	5,604,960	
2008/07		0.95	0.6104	0.6104		120	64.26	5,263,480	5,639,160	
2009/01		0.90	1.3268	1.3268		120	64.26	5,326,331	5,714,040	
2009/07	22,621	0.90	0.6841	0.6841		120	65.86	5,381,746	5,753,160	
2010/01		0.85	0.8643	0.8643		120	65.86	5,421,286	5,802,840	
2010/07		0.85	0.7107	0.7107		120	68.67	5,454,036	5,844,120	
2011/01		0.80	0.9198	0.9198		120	72.48	5,494,167	5,897,880	
2011/07		0.80	0.9028	0.9028		120	72.48	5,533,846	5,951,160	
2012/01		0.75	0.3865	0.3865		120	72.48	5,549,889	5,974,200	
2012/07		0.75	0.9417	0.9417		120	67.73	5,589,088	6,030,480	
2013/01		0.70	0.4901	0.4901		120	67.73	5,608,264	6,060,000	
2013/07	15,443	0.70	0.6196	0.6196		120	67.44	5,648,030	6,097,560	
2014/01	36,214	0.65	0.8564	0.8564		120	67.44	5,715,687	6,149,760	
2014/07		0.65	1.2383	1.2383		120	67.44	5,761,693	6,225,960	
2015/01		0.60	0.7571	0.7571		120	67.44	5,787,868	6,273,120	
2015/09		0.60	1.5736	1.5736		120	67.44	5,842,517	6,371,880	
2016/09		0.55	1.9890	1.9890		120	64.82	5,906,434	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



Florida Agency for Health Care Administration
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225.04

Palm Garden of Vero Beach

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1755 37TH STREET	5/1/2014-9/30/2015	Number of Beds: 180	Superior: 0
VERO BEACH, FL 32960	Days in CR 518	Maximum: 93,240	Standard: 366
County: Indian River [31]	First Used : 2016/09	Max Annualized: 65,700	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 80,360	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 13,106	Inflation
Current Class South Large	Initial CR? False	Medicaid: 56,841	FY Index: 1.36305434
Class at 1/94: South Large	Medicaid Utilization	70.73295%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	86.18619%	Cost: 1.05905862
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 11/25/1987	Low Occupancy Adjustment Factor:	108.99710%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 257311			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	3,137,953	4,498,383	2,903,821	1,040,190		11,580,347
1a	Audit Adjustments						
2	Cost Per Diem	55.2058	79.1398	51.0867	18.3000		203.7323
3	Cost Per Diem Inflated	58.4662	83.1225	54.1038			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	58.4662	83.1225	54.1038	18.3000		213.9925
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.5099		60.5435			
7	Provider Target Rate	52.2640		63.9114			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500		
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181			
10	Target Rate Class Ceiling	62.2421		70.3550			
10a	New Provider Target Limitation	53.1655		63.4051			
10b	Base for line 10a	50.3639		60.0639			
11	Lesser of 5,7,8,10, 10a	52.2640	83.1225	54.1038	13.6500		203.1403
12/13	Medicaid Adjustment Rate		1.9388	1.2619			
14	Prospective Per Diem 11	52.2640	85.0613	55.3657	13.6500		206.3410
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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225.04

Palm Garden of Vero Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 11/25/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	7,717,166.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Variable	80% Capital(1):	7,321,407	9.3480
Indexed Asset Value	9,151,759	<60% of Base:	False	20% ROE(2):	1,830,352	0.6531
FRVS Base Asset:	2,656,745	Interest Rate:	4.4350%	Insurance Cost(3):	153,052	1.9046
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	159,052	1.9792
ROE Factor	0.021100	Amortization Rate:	4.4350%	Home Office(3):	75,928	0.9448
		Interest Only:	False	Replacement(3&4):	698,368	0.0000
		Yearly Payment:	552,748	Total FRVS PD:		14.8297

(1) 80% Capital (\$7,321,407) amortized at 4.4350 % for 20 years Principal & Interest of \$552,748 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$9.3480

(2) 20% ROE (\$1,830,352) times the ROE factor (0.021100) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.6531

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1987	Current RS PBS:	29,195
Comparison Bed	91	Effective PBS Limitation	54,155
			2,656,745

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.2640	52.2640	2.3712	49.8928
Direct Care	85.0613	85.0613	3.8592	81.2021
Indirect Care	55.3657	55.3657	2.5119	52.8538
Property	13.6500	14.8297	0.6728	14.1569
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.7486
Supplemental Rate				8.1814
Totals	206.3410	207.5207	9.4151	225.0356

Medicaid Trend Adjustment



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225.04

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	5,163,940	0.00	0.9007	0.9007		91	61.71	2,656,745	2,656,745	1
1988/01		0.10	0.9007	0.9007		91	61.71	2,659,139	2,699,242	
1988/07		0.10	0.5899	0.5899		91	61.71	2,660,708	2,697,786	
1989/01		0.20	0.5899	0.5899		91	61.71	2,663,848	2,713,711	
1989/07		0.20	0.5899	0.5899		91	61.71	2,666,991	2,732,093	
1990/01		0.30	0.5899	0.5899		91	61.71	2,671,712	2,745,834	
1990/07		0.30	0.5899	0.5899		91	61.71	2,676,441	2,762,032	
1991/01		0.40	0.5899	0.5899		91	49.80	2,682,160	2,778,230	
1991/07	18,209	0.40	1.4932	1.4932		91	42.87	2,712,856	2,819,726	
1992/01		0.50	2.0117	2.0117		91	42.87	2,734,126	2,876,419	
1992/07	19,703	0.50	1.8152	1.8152		91	35.31	2,769,760	2,928,653	
1993/01		0.60	1.7710	1.7710		91	35.31	2,788,655	2,980,523	
1993/07	641,992	0.60	1.5329	1.5329		96	40.51	3,449,537	3,192,480	
1994/01		0.70	1.6983	1.6983		96	40.51	3,479,741	3,246,720	
1994/07	2,478,091	0.70	1.5991	1.5991		173	44.13	5,989,086	5,944,453	
1995/01		0.80	1.5812	1.5812		173	44.13	6,049,875	6,038,392	
1995/07	269,345	0.80	1.5250	1.5250		173	43.00	6,376,925	6,130,428	
1996/01		0.90	1.7228	1.7228		173	43.00	6,454,227	6,236,131	
1996/07		0.90	1.3294	1.3294		173	42.08	6,454,227	6,318,998	3
1997/01		1.00	1.4109	1.4109		173	42.08	6,454,227	6,408,093	3
1997/07		1.00	1.0917	1.0917		173	45.19	6,477,985	6,477,985	8
1998/01		1.00	1.1663	1.1663		173	45.19	6,540,062	6,553,586	
1998/07		1.00	1.0794	1.0794		173	45.19	6,598,064	6,624,343	
1999/01		1.00	1.4499	1.4499		173	49.64	6,684,406	6,720,358	
1999/07		1.00	1.2299	1.2299		173	55.34	6,766,618	6,803,052	
2000/01		1.00	1.3356	1.3356		173	55.34	6,856,993	6,893,877	
2000/07		1.00	1.1129	1.1129		173	55.34	6,933,304	6,970,516	
2001/01		1.00	1.2976	1.2976		173	55.34	7,023,271	7,060,995	
2001/07		1.00	0.9615	0.9615		173	55.34	7,090,800	7,128,811	
2002/01	78,867	1.00	1.0301	1.0301		180	60.90	7,169,667	7,493,580	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		180	60.90	7,303,091	7,556,040	
2003/01		1.00	1.3271	1.3271		180	60.90	7,400,010	7,656,300	
2003/07		1.00	1.1664	1.1664		180	60.90	7,486,324	7,745,580	
2004/01		1.00	1.1103	1.1103		180	60.90	7,569,445	7,831,620	
2004/07		1.00	0.8378	0.8378		180	60.90	7,632,862	7,897,320	
2005/01	75,819	1.00	0.8595	0.8595		180	62.42	7,774,285	7,965,180	
2005/07		1.00	0.7364	0.7364		180	62.42	7,831,535	8,023,860	
2006/01		1.00	0.9068	0.9068		180	62.42	7,902,551	8,096,580	
2006/07		1.00	0.8133	0.8133		180	64.93	7,966,822	8,162,460	
2007/01		1.00	1.0133	1.0133		180	64.93	8,047,550	8,245,080	
2007/07		1.00	1.1050	1.1050		180	63.61	8,136,475	8,336,160	
2008/01		0.95	0.8556	0.8556		180	64.73	8,202,608	8,407,440	
2008/07		0.95	0.6104	0.6104		180	64.73	8,250,175	8,458,740	
2009/01		0.90	1.3268	1.3268		180	64.73	8,348,690	8,571,060	
2009/07		0.90	0.6841	0.6841		180	64.05	8,400,093	8,629,740	
2010/01		0.85	0.8643	0.8643		180	64.05	8,461,808	8,704,260	
2010/07		0.85	0.7107	0.7107		180	66.40	8,512,926	8,766,180	
2011/01		0.80	0.9198	0.9198		180	66.40	8,575,564	8,846,820	
2011/07		0.80	0.9028	0.9028		180	69.53	8,637,497	8,926,740	
2012/01		0.75	0.3865	0.3865		180	69.53	8,662,537	8,961,300	
2012/07		0.75	0.9417	0.9417		180	72.13	8,723,720	9,045,720	
2013/01		0.70	0.4901	0.4901		180	72.13	8,753,651	9,090,000	
2013/07	9,079	0.70	0.6196	0.6196		180	75.98	8,800,695	9,146,340	
2014/01	6,516	0.65	0.8564	0.8564		180	75.98	8,856,204	9,224,640	
2014/07		0.65	1.2383	1.2383		180	75.98	8,927,488	9,338,940	
2015/01		0.60	0.7571	0.7571		180	75.98	8,968,046	9,409,680	
2015/09		0.60	1.5736	1.5736		180	75.98	9,052,722	9,557,820	
2016/09		0.55	1.9890	1.9890		180	70.73	9,151,759	9,747,900	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 3 | Index Cost Limitation - January 1996 |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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Palm Garden of West Palm Beach

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
300 EXECUTIVE CENTER DRIV WEST PALM BEACH, FL 33401	6/1/2014-9/30/2015	Number of Beds: 176	Superior: 0
County: Palm Beach [50]	Days in CR 487	Maximum: 85,712	Standard: 366
Region: South Area: 9	First Used : 2016/09	Max Annualized: 64,240	Conditional: 0
Control: Proprietary : Partnership	Last Used: 2016/09	Total Patient: 79,720	Total: 366
Current Class South Large	Unaudited	Medicare: 7,722	Inflation
Class at 1/94: South Large	Initial CR? False	Medicaid: 52,098	FY Index: 1.36305434
Operating Ex > 18 months	Medicaid Utilization	65.35123%	Semester Index: 1.44355445
Open Date: 04/20/1988	Occupancy:	93.00915%	Cost: 1.05905862
Acquired Date: 04/20/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 04/20/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Med # Active Date: 11/01/2013	Low Occupancy Adjustment Factor:	117.62590%	DC Sem Index: 1.30450000
Previous Med # 257257	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,411,208	4,313,769	2,565,475	840,341		10,130,793	
1a	Audit Adjustments							
2	Cost Per Diem	46.2822	82.8010	49.2433	16.1300		194.4565	
3	Cost Per Diem Inflated	49.0156	86.9679	52.1515				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.0156	86.9679	52.1515	16.1300		204.2650	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	44.5378		57.8560				
7	Provider Target Rate	47.0154		61.0744				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	52.3776		61.2689				
10b	Base for line 10a	49.6175		58.0402				
11	Lesser of 5,7,8,10, 10a	47.0154	86.9679	52.1515	13.6500		199.7848	
12/13	Medicaid Adjustment Rate		1.5019	0.9007				
14	Prospective Per Diem 11	47.0154	88.4698	53.0522	13.6500		202.1874	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Palm Garden of West Palm Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 04/20/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	7,515,852.00		Total Amount	Per Diem
RS to Start Calcs:	1988/01	Type:	Variable	80% Capital(1):	7,180,266	9.3762
Indexed Asset Value	8,975,332	<60% of Base:	False	20% ROE(2):	1,795,066	0.6501
FRVS Base Asset:	3,530,760	Interest Rate:	4.4350%	Insurance Cost(3):	155,280	1.9478
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	246,273	3.0892
ROE Factor	0.020940	Amortization Rate:	4.4350%	Home Office(3):	76,964	0.9654
		Interest Only:	False	Replacement(3&4):	597,670	0.0000
		Yearly Payment:	542,092	Total FRVS PD:		16.0287

(1) 80% Capital (\$7,180,266) amortized at 4.4350 % for 20 years Principal & Interest of \$542,092 divided by annual available days (64240) divided by Occup. Adj. (0.90) = \$9.3762

(2) 20% ROE (\$1,795,066) times the ROE factor (0.020940) divided by annual available days (64240) divided by Occup. Adj. (0.90) = \$0.6501

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,423
Comparison Date: 07/01/1987	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,530,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.0154	47.0154	2.1331	44.8823
Direct Care	88.4698	88.4698	4.0138	84.4560
Indirect Care	53.0522	53.0522	2.4070	50.6452
Property	13.6500	16.0287	0.7272	15.3015
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7083
Supplemental Rate				8.1814
Totals	202.1874	204.5661	9.2811	223.1747

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/01	5,747,137	0.00	0.9007	0.9007		120	52.84	3,530,760	3,530,760	1
1988/07		0.10	0.5899	0.5899		120	52.84	3,532,761	3,557,520	
1989/01	23,724	0.10	0.5899	0.5899		120	52.84	3,558,487	3,578,520	
1989/07	26,516	0.20	0.5899	0.5899		120	52.84	3,589,037	3,602,760	
1990/01	38,773	0.20	0.5899	0.5899		120	52.84	3,631,879	3,620,880	
1990/07		0.30	0.5899	0.5899		120	52.84	3,638,055	3,642,240	
1991/01		0.30	0.5899	0.5899		120	52.84	3,644,241	3,663,600	
1991/07		0.40	1.4932	1.4932		120	59.06	3,644,241	3,718,320	5
1992/01		0.40	2.0117	2.0117		120	59.06	3,695,508	3,793,080	
1992/07	35,339	0.50	1.8152	1.8152		120	59.28	3,764,387	3,861,960	
1993/01		0.50	1.7710	1.7710		120	59.28	3,797,721	3,930,360	
1993/07	28,561	0.60	1.5329	1.5329		120	66.36	3,861,210	3,990,600	
1994/01		0.60	1.6983	1.6983		120	66.36	3,900,556	4,058,400	
1994/07	101,045	0.70	1.5991	1.5991		120	58.95	4,045,264	4,123,320	
1995/01		0.70	1.5812	1.5812		120	58.95	4,090,037	4,188,480	
1995/07		0.80	1.5250	1.5250		120	58.95	4,139,935	4,252,320	
1996/01	66,762	0.80	1.7228	1.7228		120	46.43	4,254,863	4,325,640	
1996/07	1,749,373	0.90	1.3294	1.3294		159	42.77	6,043,825	5,807,634	6
1997/01		0.90	1.4109	1.4109		159	42.77	6,043,825	5,889,519	3
1997/07		1.00	1.0917	1.0917		159	33.76	6,043,825	5,953,755	3
1998/01		1.00	1.1663	1.1663		159	33.76	6,043,825	6,023,238	3
1998/07		1.00	1.0794	1.0794		159	33.76	6,083,869	6,088,269	
1999/01		1.00	1.4499	1.4499		162	42.97	6,152,785	6,293,052	
1999/07		1.00	1.2299	1.2299		176	47.60	6,218,277	6,921,024	
2000/01		1.00	1.3356	1.3356		176	47.60	6,218,277	7,013,424	5
2000/07		1.00	1.1129	1.1129		176	47.60	6,350,739	7,091,392	
2001/01		1.00	1.2976	1.2976		176	47.60	6,422,059	7,183,440	
2001/07		1.00	0.9615	0.9615		176	47.60	6,422,059	7,252,432	5
2002/01		1.00	1.0301	1.0301		176	59.32	6,542,203	7,327,056	
2002/07		1.00	0.8337	0.8337		176	59.32	6,596,745	7,388,128	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/01		1.00	1.3271	1.3271		176	59.32	6,684,290	7,486,160	
2003/07		1.00	1.1664	1.1664		176	59.32	6,762,256	7,573,456	
2004/01		1.00	1.1103	1.1103		176	59.32	6,837,337	7,657,584	
2004/07		1.00	0.8378	0.8378		176	59.32	6,894,620	7,721,824	
2005/01	81,937	1.00	0.8595	0.8595		176	56.97	7,035,816	7,788,176	
2005/07		1.00	0.7364	0.7364		176	56.35	7,087,628	7,845,552	
2006/01		1.00	0.9068	0.9068		176	56.35	7,151,899	7,916,656	
2006/07	563,904	1.00	0.8133	0.8133		176	57.76	7,773,969	7,981,072	
2007/01		1.00	1.0133	1.0133		176	57.76	7,852,743	8,061,856	
2007/07		1.00	1.1050	1.1050		176	58.90	7,939,516	8,150,912	
2008/01		1.00	0.8556	0.8556		176	56.72	8,007,446	8,220,608	
2008/07		0.95	0.6104	0.6104		176	56.72	8,053,881	8,270,768	
2009/01		0.95	1.3268	1.3268		176	56.29	8,155,400	8,380,592	
2009/07		0.90	0.6841	0.6841		176	56.29	8,205,613	8,437,968	
2010/01		0.90	0.8643	0.8643		176	56.29	8,269,444	8,510,832	
2010/07		0.85	0.7107	0.7107		176	54.08	8,318,564	8,571,376	
2011/01		0.85	0.9198	0.9198		176	54.08	8,382,511	8,650,224	
2011/07		0.80	0.9028	0.9028		176	55.58	8,443,049	8,728,368	
2012/01		0.80	0.3865	0.3865		176	55.58	8,469,155	8,762,160	
2012/07		0.75	0.9417	0.9417		176	54.97	8,528,940	8,844,704	
2013/01		0.75	0.4901	0.4901		176	54.97	8,560,275	8,888,000	
2013/07		0.70	0.6196	0.6196		176	65.28	8,597,401	8,943,088	
2014/01	33,266	0.70	0.8564	0.8564		176	65.28	8,682,208	9,019,648	
2014/07		0.65	1.2383	1.2383		176	65.28	8,752,091	9,131,408	
2015/01		0.65	0.7571	0.7571		176	65.28	8,795,160	9,200,576	
2015/09		0.60	1.5736	1.5736		176	65.28	8,878,204	9,345,424	
2016/09		0.55	1.9890	1.9890		176	65.35	8,975,332	9,531,280	

Message Code:

- | | |
|---|---|
| 1 | Per Bed Standard Limitation |
| 3 | Index Cost Limitation - January 1996 |
| 5 | Uncorrected Licensure Deficiency |
| 6 | Not Limited to Current Per Bed Standard |



Florida Agency for Health Care Administration
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245.69

Palm Garden of Winter Haven

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1120 CYPRESS GARDENS BLVD	9/1/2014-9/30/2015	Number of Beds: 120	Superior: 0
WINTER HAVEN, FL 33884	Days in CR 395	Maximum: 47,400	Standard: 366
County: Polk [53]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 40,793	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 3,214	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,083	FY Index: 1.36985926
Class at 1/94: South Large	Medicaid Utilization	68.84269%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	86.06118%	Cost: 1.05379764
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24600000
Entered Medicaid 07/09/1987	Low Occupancy Adjustment Factor:	108.83901%	DC Sem Index: 1.30450000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04695024
Previous Med # 257320			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,695,676	2,531,864	1,794,249	478,534		6,500,323	
1a	Audit Adjustments							
2	Cost Per Diem	60.3809	90.1565	63.8909	17.0400		231.4683	
3	Cost Per Diem Inflated	63.6292	94.3894	67.3281				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	63.6292	94.3894	67.3281	17.0400		242.3867	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.2088		62.4776				
7	Provider Target Rate	53.0018		65.9531				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	51.2746		64.4368				
10b	Base for line 10a	48.5726		61.0412				
11	Lesser of 5,7,8,10, 10a	51.2746	94.3894	64.4368	13.6500		223.7508	
12/13	Medicaid Adjustment Rate		2.0009	1.3659				
14	Prospective Per Diem 11	51.2746	96.3903	65.8027	13.6500		227.1176	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Palm Garden of Winter Haven

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/09/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,490,000.00		Total Amount	Per Diem
RS to Start Calcs:	1987/07	Type:	Variable	80% Capital(1):	5,029,348	9.6322
Indexed Asset Value	6,286,685	<60% of Base:	False	20% ROE(2):	1,257,337	0.6532
FRVS Base Asset:	1,751,700	Interest Rate:	4.4350%	Insurance Cost(3):	82,398	2.0199
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	80,099	1.9635
ROE Factor	0.020480	Amortization Rate:	4.4350%	Home Office(3):	38,639	0.9472
		Interest Only:	False	Replacement(3&4):	967,236	0.0000
		Yearly Payment:	379,703	Total FRVS PD:		15.2160

(1) 80% Capital (\$5,029,348) amortized at 4.4350 % for 20 years Principal & Interest of \$379,703 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.6322

(2) 20% ROE (\$1,257,337) times the ROE factor (0.020480) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6532

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1987	Current RS PBS:	29,195
Comparison Bed	60	Effective PBS Limitation	54,155
			1,751,700

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.2746	51.2746	2.3263	48.9483
Direct Care	96.3903	96.3903	4.3732	92.0171
Indirect Care	65.8027	65.8027	2.9854	62.8173
Property	13.6500	15.2160	0.6903	14.5257
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1975
Supplemental Rate				8.1814
Totals	227.1176	228.6836	10.3752	245.6873

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1987/07	3,392,603	0.00	0.9007	0.9007		60	72.63	1,751,700	1,751,700	1
1988/01		0.10	0.9007	0.9007		60	72.63	1,753,278	1,779,720	
1988/07		0.10	0.5899	0.5899		60	72.63	1,754,312	1,778,760	
1989/01		0.20	0.5899	0.5899		60	72.63	1,756,382	1,789,260	
1989/07		0.20	0.5899	0.5899		60	72.63	1,758,455	1,801,380	
1990/01		0.30	0.5899	0.5899		60	72.63	1,761,567	1,810,440	
1990/07		0.30	0.5899	0.5899		60	72.63	1,764,685	1,821,120	
1991/01		0.40	0.5899	0.5899		60	61.85	1,768,850	1,831,800	
1991/07		0.40	1.4932	1.4932		60	61.85	1,779,415	1,859,160	
1992/01		0.50	2.0117	2.0117		60	64.14	1,797,314	1,896,540	
1992/07		0.50	1.8152	1.8152		60	64.14	1,813,626	1,930,980	
1993/01	13,138	0.60	1.7710	1.7710		60	62.61	1,846,036	1,965,180	
1993/07		0.60	1.5329	1.5329		60	59.62	1,863,014	1,995,300	
1994/01		0.70	1.6983	1.6983		60	59.62	1,885,162	2,029,200	
1994/07		0.70	1.5991	1.5991		60	59.62	1,906,265	2,061,660	
1995/01	59,924	0.80	1.5812	1.5812		60	50.15	1,988,177	2,094,240	
1995/07		0.80	1.5250	1.5250		60	50.15	2,010,294	2,126,160	
1996/01	1,925,460	0.90	1.7228	1.7228		85	46.97	3,962,373	3,063,995	
1996/07		0.90	1.3294	1.3294		85	46.97	3,962,373	3,104,710	3
1997/01	1,274,090	1.00	1.4109	1.4109		120	45.12	4,444,920	4,444,920	8
1997/07		1.00	1.0917	1.0917		120	45.12	4,484,728	4,493,400	
1998/01		1.00	1.1663	1.1663		120	52.43	4,534,589	4,545,840	
1998/07		1.00	1.0794	1.0794		120	52.43	4,581,248	4,594,920	
1999/01		1.00	1.4499	1.4499		120	53.80	4,646,222	4,661,520	
1999/07		1.00	1.2299	1.2299		120	63.90	4,703,366	4,718,880	
2000/01		1.00	1.3356	1.3356		120	63.90	4,766,184	4,781,880	
2000/07		1.00	1.1129	1.1129		120	63.90	4,819,227	4,835,040	
2001/01		1.00	1.2976	1.2976		120	63.90	4,881,761	4,897,800	
2001/07		1.00	0.9615	0.9615		120	63.90	4,928,699	4,944,840	
2002/01	12,532	1.00	1.0301	1.0301		120	64.39	4,992,002	4,995,720	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/07		1.00	0.8337	0.8337		120	64.39	5,033,620	5,037,360	
2003/01		1.00	1.3271	1.3271		120	64.39	5,100,421	5,104,200	
2003/07		1.00	1.1664	1.1664		120	64.39	5,159,912	5,163,720	
2004/01		1.00	1.1103	1.1103		120	64.39	5,217,203	5,221,080	
2004/07		1.00	0.8378	0.8378		120	64.39	5,217,203	5,264,880	5
2005/01	30,846	1.00	0.8595	0.8595		120	65.72	5,310,120	5,310,120	8
2005/07		1.00	0.7364	0.7364		120	61.25	5,349,224	5,349,240	
2006/01		1.00	0.9068	0.9068		120	61.25	5,397,720	5,397,720	8
2006/07	248,184	1.00	0.8133	0.8133		120	63.21	5,441,640	5,441,640	8
2007/01		1.00	1.0133	1.0133		120	63.21	5,496,720	5,496,720	8
2007/07		1.00	1.1050	1.1050		120	60.94	5,557,440	5,557,440	8
2008/01		0.95	0.8556	0.8556		120	60.94	5,602,611	5,604,960	
2008/07		0.95	0.6104	0.6104		120	64.11	5,635,101	5,639,160	
2009/01		0.90	1.3268	1.3268		120	64.11	5,702,390	5,714,040	
2009/07		0.90	0.6841	0.6841		120	64.60	5,737,500	5,753,160	
2010/01		0.85	0.8643	0.8643		120	64.60	5,779,653	5,802,840	
2010/07		0.85	0.7107	0.7107		120	70.76	5,814,568	5,844,120	
2011/01		0.80	0.9198	0.9198		120	70.76	5,857,352	5,897,880	
2011/07		0.80	0.9028	0.9028		120	65.97	5,899,654	5,951,160	
2012/01		0.75	0.3865	0.3865		120	67.02	5,916,757	5,974,200	
2012/07		0.75	0.9417	0.9417		120	67.02	5,958,547	6,030,480	
2013/01		0.70	0.4901	0.4901		120	67.02	5,978,991	6,060,000	
2013/07	21,752	0.70	0.6196	0.6196		120	71.14	6,026,674	6,097,560	
2014/01	23,434	0.65	0.8564	0.8564		120	71.14	6,083,658	6,149,760	
2014/07		0.65	1.2383	1.2383		120	71.14	6,132,625	6,225,960	
2015/01		0.60	0.7571	0.7571		120	71.14	6,160,486	6,273,120	
2015/09		0.60	1.5736	1.5736		120	71.14	6,218,653	6,371,880	
2016/09		0.55	1.9890	1.9890		120	68.84	6,286,685	6,498,600	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 3 | Index Cost Limitation - January 1996 |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |



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Community Health and Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
3611 TRANSMITTER ROAD	7/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
PANAMA CITY, FL 32404-9799	Days in CR 184	Maximum: 22,080	Standard: 366
County: Bay [3]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 20,579	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 4,609	Inflation
Current Class North Large	Initial CR? False	Medicaid: 10,140	FY Index: 1.38522332
Class at 1/94: North Large	Medicaid Utilization	49.27353%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.20199%	Cost: 1.04210955
Open Date: 11/04/1997	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/04/1997	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25850000
Entered Medicaid 11/04/1997	Low Occupancy Adjustment Factor:	117.86978%	DC Sem Index: 1.30450000
Med # Active Date: 01/01/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03655145
Previous Med # 318779			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	544,733	914,953	691,086	231,699		2,382,471	
1a	Audit Adjustments							
2	Cost Per Diem	53.7212	90.2321	68.1544	22.8500		234.9577	
3	Cost Per Diem Inflated	55.9834	93.5302	71.0244				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.9834	93.5302	71.0244	22.8500		243.3880	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.2472		65.2919				
7	Provider Target Rate	59.3761		68.9240				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	54.9888		67.9686				
10b	Base for line 10a	52.0911		64.3869				
11	Lesser of 5,7,8,10, 10a	54.8223	93.5302	66.1467	13.6500		228.1492	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	54.8223	93.5302	66.1467	13.6500		228.1492	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Community Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	11/04/1997	Amount:	6,320,000.00		Total Amount	Per Diem
RS to Start Calcs:	1997/07	Type:	Variable	80% Capital(1):	4,689,474	11.4653
Indexed Asset Value	5,861,843	<60% of Base:	False	20% ROE(2):	1,172,369	0.6320
FRVS Base Asset:	4,444,920	Interest Rate:	7.4600%	Insurance Cost(3):	28,463	1.3831
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	16,838	0.8182
ROE Factor	0.021250	Amortization Rate:	7.4600%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	451,962	Total FRVS PD:		14.2986

(1) 80% Capital (\$4,689,474) amortized at 7.4600 % for 20 years Principal & Interest of \$451,962 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.4653

(2) 20% ROE (\$1,172,369) times the ROE factor (0.021250) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6320

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	37,041
Comparison Date: 01/01/1997	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	4,444,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	93.5302	93.5302	4.2434	89.2868
Indirect Care	66.1467	66.1467	3.0010	63.1457
Property	13.6500	14.2986	0.6487	13.6499
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.7579
Supplemental Rate				8.1814
Totals	228.1492	228.7978	10.3804	245.3567

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/07	4,800,000	0.00	1.0917	1.0917		120	76.77	4,444,920	4,444,920	1
1998/01		0.10	1.1663	1.1663		120	76.77	4,450,103	4,545,840	
1998/07		0.10	1.0794	1.0794		120	76.77	4,454,905	4,594,920	
1999/01	29,725	0.20	1.4499	1.4499		120	79.60	4,497,549	4,661,520	
1999/07	5,418	0.20	1.2299	1.2299		120	79.60	4,514,031	4,718,880	
2000/01		0.30	1.3356	1.3356		120	79.60	4,532,119	4,781,880	
2000/07		0.30	1.1129	1.1129		120	79.60	4,547,252	4,835,040	
2001/01		0.40	1.2976	1.2976		120	79.60	4,570,852	4,897,800	
2001/07	74,937	0.40	0.9615	0.9615		120	81.72	4,663,368	4,944,840	
2002/01		0.50	1.0301	1.0301		120	81.72	4,687,389	4,995,720	
2002/07		0.50	0.8337	0.8337		120	81.02	4,706,931	5,037,360	
2003/01		0.60	1.3271	1.3271		120	81.02	4,744,412	5,104,200	
2003/07		0.60	1.1664	1.1664		120	72.18	4,777,613	5,163,720	
2004/01		0.70	1.1103	1.1103		120	75.32	4,814,745	5,221,080	
2004/07		0.70	0.8378	0.8378		120	75.32	4,842,983	5,264,880	
2005/01		0.80	0.8595	0.8595		120	75.32	4,876,283	5,310,120	
2005/07		0.80	0.7364	0.7364		120	75.32	4,905,009	5,349,240	
2006/01		0.90	0.9068	0.9068		120	75.32	4,945,039	5,397,720	
2006/07		0.90	0.8133	0.8133		120	75.32	4,981,237	5,441,640	
2007/01		1.00	1.0133	1.0133		120	47.70	5,025,012	5,496,720	
2007/07		1.00	1.1050	1.1050		120	47.70	5,073,169	5,557,440	
2008/01		1.00	0.8556	0.8556		120	47.70	5,110,814	5,604,960	
2008/07		1.00	0.6104	0.6104		120	47.70	5,137,870	5,639,160	
2009/01		1.00	1.3268	1.3268		120	47.70	5,196,991	5,714,040	
2009/07		1.00	0.6841	0.6841		120	48.69	5,228,465	5,753,160	
2010/01		1.00	0.8643	0.8643		120	48.69	5,268,470	5,802,840	
2010/07		1.00	0.7107	0.7107		120	44.97	5,299,085	5,844,120	
2011/01		1.00	0.9198	0.9198		120	44.97	5,338,937	5,897,880	
2011/07		1.00	0.9028	0.9028		120	46.37	5,379,574	5,951,160	
2012/01		1.00	0.3865	0.3865		120	46.37	5,397,104	5,974,200	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07		1.00	0.9417	0.9417		120	50.54	5,443,807	6,030,480	
2013/01		1.00	0.4901	0.4901		120	50.54	5,468,324	6,060,000	
2013/07		1.00	0.6196	0.6196		120	52.96	5,500,949	6,097,560	
2014/01		1.00	0.8564	0.8564		120	61.06	5,548,059	6,149,760	
2014/07		1.00	1.2383	1.2383		120	61.06	5,616,761	6,225,960	
2015/01		1.00	0.7571	0.7571		120	61.06	5,659,285	6,273,120	
2015/09		1.00	1.5736	1.5736		120	61.06	5,748,340	6,371,880	
2016/09	11,080	1.00	1.9890	1.9890		120	49.27	5,861,843	6,498,600	

Message Code:

1 Per Bed Standard Limitation

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Gulfport Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1430 PASADENA AVE S	8/1/2014-7/31/2015	Number of Beds: 126	Superior: 0
SOUTH PASADENA, FL 33707	Days in CR 365	Maximum: 45,990	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 45,990	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 19,589	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,940	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 9,387	FY Index: 1.36305434
Class at 1/94: North Large	Medicaid Utilization	47.91975%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	42.59404%	Cost: 1.05905862
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24199678
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	53.86741%	DC Sem Index: 1.30450000
Med # Active Date: 11/24/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05032478
Previous Med # 281891			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	412,245	674,380	526,309	303,576		1,916,510
1a	Audit Adjustments						
2	Cost Per Diem	43.9166	71.8419	56.0679	32.3400		204.1664
3	Cost Per Diem Inflated	46.5103	75.4573	59.3792			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.5103	75.4573	59.3792	32.3400		213.6868
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	96.1968		97.0103			
7	Provider Target Rate	101.5480		102.4068			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	57.3181		66.0090			
10b	Base for line 10a	54.2976		62.5305			
11	Lesser of 5,7,8,10, 10a	46.5103	75.4573	59.3792	13.6500		194.9968
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	46.5103	75.4573	59.3792	13.6500		194.9968
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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205.29

Gulfport Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/01/1985		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,896,724.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Variable	80% Capital(1):	1,337,067	3.4256
Indexed Asset Value	1,671,334	<60% of Base:	False	20% ROE(2):	334,267	0.1666
FRVS Base Asset:	842,445	Interest Rate:	11.7683%	Insurance Cost(3):	16,368	0.8356
Occup Adj Factor	0.9000	Chase Rate:	6.7500%	Taxes Cost(3):	35,448	1.8096
ROE Factor	0.020630	Amortization Rate:	8.7500%	Home Office(3):	8,374	0.4275
		Interest Only:	False	Replacement(3&4):	134,621	0.0000
		Yearly Payment:	141,790	Total FRVS PD:		6.6649

(1) 80% Capital (\$1,337,067) amortized at 8.7500 % for 20 years Principal & Interest of \$141,790 divided by annual available days (45990) divided by Occup. Adj. (0.90) = \$3.4256

(2) 20% ROE (\$334,267) times the ROE factor (0.020630) divided by annual available days (45990) divided by Occup. Adj. (0.90) = \$0.1666

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 126	Effective PBS Limitation	3,591,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.5103	46.5103	2.1101	44.4002
Direct Care	75.4573	75.4573	3.4235	72.0338
Indirect Care	59.3792	59.3792	2.6940	56.6852
Property	13.6500	6.6649	0.3024	6.3625
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.6225
Supplemental Rate				8.1814
Totals	194.9968	188.0117	8.5300	205.2856

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	543,922	0.00				126	100.00	543,922	1,292,886	
1972/01		0.10	3.9787	3.0000	0.9787	126	100.00	545,554	1,344,294	
1972/07		0.10	5.9113	3.0000	2.9113	126	100.00	547,191	1,410,570	
1973/01		0.20	8.0622	3.0000	5.0622	126	100.00	550,474	1,483,272	
1973/07		0.20	10.7186	3.0000	7.7186	126	100.00	553,777	1,567,188	
1974/01		0.30	12.9457	3.0000	9.9457	126	100.00	558,761	1,649,088	
1974/07		0.30	13.0494	3.0000	10.0494	126	100.00	563,790	1,700,244	
1975/01		0.40	13.1399	3.0000	10.1399	126	100.00	570,555	1,752,786	
1975/07		0.40	14.2033	3.0000	11.2033	126	100.00	577,402	1,824,102	
1976/01		0.50	15.2478	3.0000	12.2478	126	100.00	586,063	1,897,812	
1976/07		0.50	15.7330	3.0000	12.7330	126	100.00	594,854	1,963,962	
1977/01		0.60	16.4836	3.0000	13.4836	126	100.00	605,561	2,037,672	
1977/07		0.60	18.5412	3.0000	15.5412	126	100.00	616,461	2,140,614	
1978/01		0.70	20.2809	3.0000	17.2809	126	100.00	629,407	2,242,170	
1978/07		0.70	22.8203	3.0000	19.8203	126	100.00	642,625	2,366,280	
1979/01		0.80	24.9476	3.0000	21.9476	126	100.00	658,048	2,487,618	
1979/07		0.80	26.1458	3.0000	23.1458	126	100.00	673,841	2,592,072	
1980/01		0.90	29.3115	3.0000	26.3115	126	45.23	688,803	2,751,966	
1980/07		0.90	30.1222	3.0000	27.1222	126	45.23	704,097	2,856,798	
1981/01		1.00	30.9462	3.0000	27.9462	126	38.95	719,056	2,966,040	
1981/07		1.00	30.5350	3.0000	27.5350	126	38.95	734,333	3,042,774	
1982/01		1.00	30.2110	3.0000	27.2110	126	34.14	748,008	3,124,296	
1982/07		1.00	29.5087	3.0000	26.5087	126	34.14	761,937	3,195,990	
1983/04		1.00	29.1375	3.0000	26.1375	126	32.25	775,340	3,280,032	
1983/07		1.00	30.0953	3.0000	27.0953	126	32.25	788,979	3,409,812	
1984/01		1.00	28.3905	3.0000	25.3905	126	30.43	802,075	3,454,038	
1984/07		1.00	27.3084	3.0000	24.3084	126	30.43	815,388	3,520,314	
1985/01		1.00	25.4555	3.0000	22.4555	126	30.17	828,806	3,560,634	
1985/10		1.00	23.3077	3.0000	20.3077	126	30.17	842,445	3,591,000	
1986/01		1.00	21.1376	3.0000	18.1376	126	30.09	856,272	3,620,862	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07		1.00	18.4350	3.0000	15.4350	126	30.09	870,326	3,613,932	
1987/01		1.00	16.4441	3.0000	13.4441	126	26.47	882,892	3,678,570	
1987/07		1.00	14.3448	3.0000	11.3448	126	26.47	895,639	3,707,298	
1988/01		1.00	12.2455	3.0000	9.2455	126	29.48	910,041	3,737,412	
1988/07		1.00	9.8354	3.0000	6.8354	126	29.48	924,674	3,735,396	
1989/01	18,717	1.00	7.4253	3.0000	4.4253	126	29.73	958,386	3,757,446	
1989/07		1.00	5.0152	3.0000	2.0152	126	29.73	973,928	3,782,898	
1990/01	85,884	1.00	2.6051	2.6051		126	39.31	1,077,946	3,801,924	
1990/07		1.00	0.5899	0.5899		126	39.31	1,082,491	3,824,352	
1991/01	20,250	1.00	0.5899	0.5899		126	47.77	1,108,287	3,846,780	
1991/07	24,142	1.00	1.4932	1.4932		126	47.77	1,146,803	3,904,236	
1992/01	41,392	0.95	2.0117	2.0117		126	51.11	1,208,561	3,982,734	
1992/07		0.95	1.8152	1.8152		126	51.11	1,227,927	4,055,058	
1993/01	28,218	0.90	1.7710	1.7710		126	53.55	1,275,201	4,126,878	
1993/07		0.90	1.5329	1.5329		126	53.55	1,292,330	4,190,130	
1994/01	28,467	0.85	1.6983	1.6983		126	56.41	1,339,453	4,261,320	
1994/07		0.85	1.5991	1.5991		126	56.41	1,357,659	4,329,486	
1995/01		0.80	1.5812	1.5812		126	49.69	1,373,175	4,397,904	
1995/07		0.80	1.5250	1.5250		126	49.69	1,388,310	4,464,936	
1996/01		0.75	1.7228	1.7228		126	54.87	1,388,310	4,541,922	5
1996/07		0.75	1.3294	1.3294		126	54.87	1,420,194	4,602,276	
1997/01		0.70	1.4109	1.4109		126	53.39	1,433,809	4,667,166	
1997/07		0.70	1.0917	1.0917		126	53.39	1,444,445	4,718,070	
1998/01	24,094	0.65	1.1663	1.1663		126	62.92	1,479,489	4,773,132	
1998/07		0.65	1.0794	1.0794		126	62.92	1,489,869	4,824,666	
1999/01	29,035	0.60	1.4499	1.4499		126	60.22	1,531,864	4,894,596	
1999/07		0.60	1.2299	1.2299		126	60.22	1,543,168	4,954,824	
2000/01		0.55	1.3356	1.3356		126	61.50	1,554,504	5,020,974	
2000/07		0.55	1.1129	1.1129		126	61.50	1,564,019	5,076,792	
2001/01		0.50	1.2976	1.2976		126	62.20	1,574,166	5,142,690	



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2001/07		0.50	0.9615	0.9615		126	62.20	1,581,735	5,192,082	
2002/01		0.45	1.0301	1.0301		126	62.80	1,589,066	5,245,506	
2002/07		0.45	0.8337	0.8337		126	62.80	1,595,028	5,289,228	
2003/01		0.40	1.3271	1.3271		126	62.80	1,603,494	5,359,410	
2003/07		0.40	1.1664	1.1664		126	64.59	1,610,976	5,421,906	
2004/01		0.35	1.1103	1.1103		126	64.59	1,617,236	5,482,134	
2004/07		0.35	0.8378	0.8378		126	61.59	1,621,978	5,528,124	
2005/01		0.30	0.8595	0.8595		126	61.59	1,626,161	5,575,626	
2005/07		0.30	0.7364	0.7364		126	61.59	1,629,753	5,616,702	
2006/01		0.25	0.9068	0.9068		126	61.59	1,633,448	5,667,606	
2006/07		0.25	0.8133	0.8133		126	61.59	1,636,769	5,713,722	
2007/01		0.20	1.0133	1.0133		126	61.59	1,640,087	5,771,556	
2007/07		0.20	1.1050	1.1050		126	70.32	1,643,712	5,835,312	
2008/01		0.15	0.8556	0.8556		122	73.53	1,645,821	5,698,376	
2008/07		0.15	0.6104	0.6104		122	73.53	1,647,329	5,733,146	
2009/01		0.10	1.3268	1.3268		122	73.53	1,649,515	5,809,274	
2009/07		0.10	0.6841	0.6841		126	75.79	1,650,643	6,040,818	
2010/01		0.05	0.8643	0.8643		126	75.79	1,651,356	6,092,982	
2010/07		0.05	0.7107	0.7107		126	81.80	1,651,942	6,136,326	
2011/01		0.00	0.9198	0.9198		126	88.09	1,651,942	6,192,774	
2011/07		0.00	0.9028	0.9028		126	88.09	1,651,942	6,248,718	11
2012/01		0.00	0.9028	0.9028		126	1.00	1,651,942	6,272,910	11
2012/07		0.00	0.9028	0.9028		126	1.00	1,651,942	6,332,004	11
2013/01		0.00	0.9028	0.9028		126	1.00	1,651,942	6,363,000	11
2013/07		0.00	0.6196	0.6196		126	46.95	1,651,942	6,402,438	12
2014/01	1,072	0.00	0.8564	0.8564		126	46.95	1,653,014	6,457,248	
2014/07	18,320	0.00	1.2383	1.2383		126	46.95	1,671,334	6,537,258	
2015/01		0.00	0.7571	0.7571		126	46.95	1,671,334	6,586,776	
2015/09		0.00	1.5736	1.5736		126	46.95	1,671,334	6,690,474	
2016/09		0.00	1.9890	1.9890		126	47.92	1,671,334	6,823,530	

Message Code:

5 Uncorrected Licensure Deficiency

11 Not in Medicaid

12 Re-Entry to Medicaid

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID: 099366073120150801201403142016135436



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0100487-00 - 2016/09

205.90

The Terrace of Kissimmee

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
221 PARK PLACE BLVD	12/1/2013-2/28/2015	Number of Beds: 120	Superior: 0
KISSIMMEE, FL 34741	Days in CR 455	Maximum: 54,600	Standard: 366
County: Osceola [49]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 53,812	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 11,193	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 33,174	FY Index: 1.34462269
Class at 1/94: North Large	Medicaid Utilization	61.64796%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	98.55678%	Cost: 1.07357585
Open Date: 12/28/1993	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/28/1993	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23099675
Entered Medicaid 01/13/1994	Low Occupancy Adjustment Factor:	124.64182%	DC Sem Index: 1.30450000
Med # Active Date: 12/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05971035
Previous Med # 253421			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,649,237	2,262,177	1,465,497	1,931,390		7,308,301
1a	Audit Adjustments						
2	Cost Per Diem	49.7147	68.1913	44.1761	58.2200		220.3021
3	Cost Per Diem Inflated	53.3725	72.2630	47.4264			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	53.3725	72.2630	47.4264	58.2200		231.2819
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	53.1499		52.4510			
7	Provider Target Rate	56.1065		55.3687			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	55.4699		64.2523			
10b	Base for line 10a	52.5468		60.8664			
11	Lesser of 5,7,8,10, 10a	53.3725	72.2630	47.4264	13.6500		186.7119
12/13	Medicaid Adjustment Rate		0.9469	0.6215			
14	Prospective Per Diem 11	53.3725	73.2099	48.0479	13.6500		188.2803
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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The Terrace of Kissimmee

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 01/13/1994		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	12,480,000.00		Total Amount	Per Diem
RS to Start Calcs:	1993/07	Type:	Variable	80% Capital(1):	4,593,660	8.6592
Indexed Asset Value	5,742,075	<60% of Base:	False	20% ROE(2):	1,148,415	0.6459
FRVS Base Asset:	3,930,360	Interest Rate:	4.2500%	Insurance Cost(3):	97,561	1.8130
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	74,942	1.3927
ROE Factor	0.022170	Amortization Rate:	4.2500%	Home Office(3):	12,454	0.2314
		Interest Only:	False	Replacement(3&4):	92,703	0.0000
		Yearly Payment:	341,346	Total FRVS PD:		12.7422

(1) 80% Capital (\$4,593,660) amortized at 4.2500 % for 20 years Principal & Interest of \$341,346 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.6592

(2) 20% ROE (\$1,148,415) times the ROE factor (0.022170) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6459

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1993	Current RS PBS:	32,753
Comparison Bed	120	Effective PBS Limitation	54,155
			3,930,360

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3725	53.3725	2.4215	50.9510
Direct Care	73.2099	73.2099	3.3215	69.8884
Indirect Care	48.0479	48.0479	2.1799	45.8680
Property	13.6500	12.7422	0.5781	12.1641
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.8486
Supplemental Rate				8.1814
Totals	188.2803	187.3725	8.5010	205.9015

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1993/07	7,084,564	0.00	1.5329	1.5329		120	74.50	3,930,360	3,930,360	1
1994/01	42,928	0.10	1.6983	1.6983		120	54.02	3,979,843	4,058,400	
1994/07		0.10	1.5991	1.5991		120	54.02	3,986,093	4,123,320	
1995/01		0.20	1.5812	1.5812		120	54.02	3,998,472	4,188,480	
1995/07		0.20	1.5250	1.5250		120	54.02	4,010,450	4,252,320	
1996/01		0.30	1.7228	1.7228		120	54.02	4,030,807	4,325,640	
1996/07		0.30	1.3294	1.3294		120	54.02	4,046,595	4,383,120	
1997/01		0.40	1.4109	1.4109		120	55.48	4,069,434	4,444,920	
1997/07		0.40	1.0917	1.0917		120	55.48	4,087,205	4,493,400	
1998/01		0.50	1.1663	1.1663		120	61.26	4,111,042	4,545,840	
1998/07		0.50	1.0794	1.0794		120	61.26	4,133,229	4,594,920	
1999/01		0.60	1.4499	1.4499		120	63.75	4,169,184	4,661,520	
1999/07		0.60	1.2299	1.2299		120	63.75	4,199,948	4,718,880	
2000/01	22,573	0.70	1.3356	1.3356		120	65.47	4,261,786	4,781,880	
2000/07		0.70	1.1129	1.1129		120	65.47	4,294,985	4,835,040	
2001/01		0.80	1.2976	1.2976		120	64.86	4,339,571	4,897,800	
2001/07		0.80	0.9615	0.9615		120	69.72	4,372,951	4,944,840	
2002/01		0.90	1.0301	1.0301		120	69.72	4,413,493	4,995,720	
2002/07		0.90	0.8337	0.8337		120	69.72	4,446,607	5,037,360	
2003/01		1.00	1.3271	1.3271		120	69.72	4,505,618	5,104,200	
2003/07		1.00	1.1664	1.1664		120	69.72	4,558,172	5,163,720	
2004/01		1.00	1.1103	1.1103		120	66.75	4,608,781	5,221,080	
2004/07		1.00	0.8378	0.8378		120	66.75	4,647,393	5,264,880	
2005/01		1.00	0.8595	0.8595		120	66.75	4,687,337	5,310,120	
2005/07		1.00	0.7364	0.7364		120	65.71	4,721,855	5,349,240	
2006/01		1.00	0.9068	0.9068		120	65.71	4,764,673	5,397,720	
2006/07		1.00	0.8133	0.8133		120	63.74	4,803,424	5,441,640	
2007/01		1.00	1.0133	1.0133		120	63.97	4,852,097	5,496,720	
2007/07		1.00	1.1050	1.1050		120	63.97	4,905,713	5,557,440	
2008/01		1.00	0.8556	0.8556		120	63.97	4,947,686	5,604,960	



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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 2/28/2015

0 100487-00 - 2016/09

205.90

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2008/07		1.00	0.6104	0.6104		120	64.13	4,977,887	5,639,160	
2009/01		1.00	1.3268	1.3268		120	60.13	5,043,934	5,714,040	
2009/07		1.00	0.6841	0.6841		120	60.13	5,078,440	5,753,160	
2010/01		1.00	0.8643	0.8643		120	63.64	5,122,333	5,802,840	
2010/07		1.00	0.7107	0.7107		120	63.64	5,158,737	5,844,120	
2011/01		1.00	0.9198	0.9198		120	63.64	5,206,187	5,897,880	
2011/07	38,337	1.00	0.9028	0.9028		120	58.96	5,291,525	5,951,160	
2012/01		1.00	0.3865	0.3865		120	58.96	5,311,977	5,974,200	
2012/07		1.00	0.9417	0.9417		120	64.40	5,362,000	6,030,480	
2013/01		1.00	0.4901	0.4901		120	65.26	5,388,279	6,060,000	
2013/07		1.00	0.6196	0.6196		120	61.65	5,421,665	6,097,560	
2014/01		0.95	0.8564	0.8564		120	61.65	5,465,776	6,149,760	
2014/07		0.95	1.2383	1.2383		120	61.65	5,530,075	6,225,960	
2015/01		0.90	0.7571	0.7571		120	61.65	5,567,757	6,273,120	
2015/09		0.90	1.5736	1.5736		120	61.65	5,646,608	6,371,880	
2016/09		0.85	1.9890	1.9890		120	61.65	5,742,075	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0100509-00 - 2016/09

233.62

Arcadia Health & Rehabilitation Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
10095 HILLVIEW ROAD	12/1/2013-6/30/2014	Number of Beds: 170	Superior: 0
PENSACOLA, FL 32514	Days in CR 212	Maximum: 36,040	Standard: 366
County: Escambia [17]	First Used : 2013/07	Max Annualized: 62,050	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 32,218	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 7,098	Inflation
Current Class North Large	Initial CR? False	Medicaid: 20,019	FY Index: 1.33439166
Class at 1/94: North Large	Medicaid Utilization	62.13607%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.39512%	Cost: 1.08180716
Open Date: 12/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 12/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 12/01/1985	Low Occupancy Adjustment Factor:	113.05534%	DC Sem Index: 1.30450000
Med # Active Date: 12/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 208809			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,013,462	1,669,062	1,120,978	603,373		4,406,875
1a	Audit Adjustments						
2	Cost Per Diem	50.6250	83.3739	55.9957	30.1400		220.1346
3	Cost Per Diem Inflated	54.7665	88.7485	60.5765			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	54.7665	88.7485	60.5765	30.1400		234.2315
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	55.4944		61.3818			
7	Provider Target Rate	58.5814		64.7964			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	53.9804		64.8544			
10b	Base for line 10a	51.1358		61.4368			
11	Lesser of 5,7,8,10, 10a	53.9804	88.7485	60.5765	13.6500		216.9554
12/13	Medicaid Adjustment Rate		1.2117	0.8271			
14	Prospective Per Diem 11	53.9804	89.9602	61.4036	13.6500		218.9942
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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233.62

Arcadia Health & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	02/01/2009	Amount:	10,700,000.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Variable	80% Capital(1):	7,071,145	9.6785
Indexed Asset Value	8,838,931	<60% of Base:	False	20% ROE(2):	1,767,786	0.7347
FRVS Base Asset:	2,972,345	Interest Rate:	4.5800%	Insurance Cost(3):	28,246	0.8767
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	27,600	0.8567
ROE Factor	0.023210	Amortization Rate:	4.5800%	Home Office(3):	25,487	0.7911
		Interest Only:	False	Replacement(3&4):	259,474	0.0000
		Yearly Payment:	540,498	Total FRVS PD:		12.9377

(1) 80% Capital (\$7,071,145) amortized at 4.5800 % for 20 years Principal & Interest of \$540,498 divided by annual available days (62050) divided by Occup. Adj. (0.90) = \$9.6785

(2) 20% ROE (\$1,767,786) times the ROE factor (0.023210) divided by annual available days (62050) divided by Occup. Adj. (0.90) = \$0.7347

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 170	Effective PBS Limitation	4,845,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.9804	53.9804	2.4491	51.5313
Direct Care	89.9602	89.9602	4.0814	85.8788
Indirect Care	61.4036	61.4036	2.7859	58.6177
Property	13.6500	12.9377	0.5870	12.3507
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.0590
Supplemental Rate				8.1814
Totals	218.9942	218.2819	9.9034	233.6189

Medicaid Trend Adjustment



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 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2014

0 100509-00 - 2016/09

233.62

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	2,972,345	0.00	0.8522	0.8522		110	86.97	2,972,345	3,135,000	
1986/01		0.10	0.8299	0.8299		90	78.09	2,974,812	2,586,330	
1986/07		0.10	0.2974	0.2974		90	78.09	2,975,696	2,581,380	
1987/01		0.20	1.0091	1.0091		90	78.09	2,981,701	2,627,550	
1987/07		0.20	0.9007	0.9007		90	78.09	2,987,071	2,648,070	
1988/01		0.30	0.9007	0.9007		90	78.09	2,995,142	2,669,580	
1988/07	209,900	0.30	0.5899	0.5899		110	84.61	3,210,343	3,261,060	
1989/01	18,523	0.40	0.5899	0.5899		110	84.61	3,236,442	3,280,310	
1989/07		0.40	0.5899	0.5899		110	84.61	3,244,080	3,302,530	
1990/01		0.50	0.5899	0.5899		110	84.61	3,253,650	3,319,140	
1990/07		0.50	0.5899	0.5899		110	84.18	3,263,248	3,338,720	
1991/01		0.60	0.5899	0.5899		110	84.18	3,274,797	3,358,300	
1991/07		0.60	1.4932	1.4932		110	81.79	3,304,136	3,408,460	
1992/01		0.70	2.0117	2.0117		110	81.79	3,350,665	3,476,990	
1992/07	1,818,758	0.70	1.8152	1.8152		170	70.22	5,211,997	5,471,110	
1993/01		0.80	1.7710	1.7710		170	70.22	5,285,841	5,568,010	
1993/07		0.80	1.5329	1.5329		170	68.56	5,350,661	5,653,350	
1994/01		0.90	1.6983	1.6983		170	68.56	5,432,446	5,749,400	
1994/07		0.90	1.5991	1.5991		170	74.20	5,510,630	5,841,370	
1995/01		1.00	1.5812	1.5812		170	74.20	5,597,764	5,933,680	
1995/07	55,317	1.00	1.5250	1.5250		170	78.07	5,738,447	6,024,120	
1996/01		1.00	1.7228	1.7228		170	78.07	5,837,309	6,127,990	
1996/07	25,101	1.00	1.3294	1.3294		170	78.18	5,940,011	6,209,420	
1997/01		1.00	1.4109	1.4109		170	78.18	6,023,819	6,296,970	
1997/07	32,636	1.00	1.0917	1.0917		170	72.89	6,122,217	6,365,650	
1998/01		1.00	1.1663	1.1663		170	72.89	6,193,620	6,439,940	
1998/07	227,796	1.00	1.0794	1.0794		170	70.89	6,488,270	6,509,470	
1999/01		1.00	1.4499	1.4499		170	70.89	6,582,343	6,603,820	
1999/07	98,459	1.00	1.2299	1.2299		170	73.15	6,685,080	6,685,080	8
2000/01		1.00	1.3356	1.3356		170	73.15	6,774,330	6,774,330	8



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233.62

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07	34,217	1.00	1.1129	1.1129		170	68.95	6,849,640	6,849,640	8
2001/01		1.00	1.2976	1.2976		170	68.95	6,938,521	6,938,550	
2001/07	94,083	1.00	0.9615	0.9615		170	69.40	7,005,190	7,005,190	8
2002/01		1.00	1.0301	1.0301		170	69.40	7,077,270	7,077,270	8
2002/07	92,055	1.00	0.8337	0.8337		170	63.88	7,136,260	7,136,260	8
2003/01		1.00	1.3271	1.3271		170	63.88	7,230,950	7,230,950	8
2003/07	145,573	1.00	1.1664	1.1664		170	65.89	7,315,270	7,315,270	8
2004/01		1.00	1.1103	1.1103		170	65.89	7,396,491	7,396,530	
2004/07	139,069	1.00	0.8378	0.8378		170	67.93	7,458,580	7,458,580	8
2005/01		1.00	0.8595	0.8595		170	67.93	7,522,670	7,522,670	8
2005/07	36,373	1.00	0.7364	0.7364		170	73.34	7,578,090	7,578,090	8
2006/01		0.95	0.9068	0.9068		170	73.34	7,643,375	7,646,770	
2006/07	265,944	0.95	0.8133	0.8133		170	73.01	7,708,990	7,708,990	8
2007/01		0.90	1.0133	1.0133		170	73.01	7,779,296	7,787,020	
2007/07	84,595	0.90	1.1050	1.1050		170	54.48	7,873,040	7,873,040	8
2008/01		0.85	0.8556	0.8556		170	54.48	7,929,759	7,940,360	
2008/07	63,811	0.85	0.6104	0.6104		170	60.75	7,988,810	7,988,810	8
2009/01		0.80	1.3268	1.3268		170	60.75	8,073,603	8,094,890	
2009/07	65,583	0.80	0.6841	0.6841		170	60.85	8,150,310	8,150,310	8
2010/01		0.75	0.8643	0.8643		170	60.85	8,203,140	8,220,690	
2010/07	47,280	0.75	0.7107	0.7107		170	67.23	8,279,170	8,279,170	8
2011/01		0.70	0.9198	0.9198		170	67.23	8,332,480	8,355,330	
2011/07	62,284	0.70	0.9028	0.9028		170	60.87	8,430,810	8,430,810	8
2012/01		0.65	0.3865	0.3865		170	60.87	8,451,988	8,463,450	
2012/07		0.65	0.9417	0.9417		170	57.22	8,503,723	8,543,180	
2013/01		0.60	0.4901	0.4901		170	57.22	8,528,732	8,585,000	
2013/07		0.60	0.6196	0.6196		170	62.14	8,560,442	8,638,210	
2014/01		0.55	0.8564	0.8564		170	62.14	8,600,762	8,712,160	
2014/07		0.55	1.2383	1.2383		170	62.14	8,659,342	8,820,110	
2015/01		0.50	0.7571	0.7571		170	62.14	8,692,126	8,886,920	



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233.62

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		170	62.14	8,760,516	9,026,830	
2016/09		0.45	1.9890	1.9890		170	62.14	8,838,931	9,206,350	

Message Code:

8 Limited to Current RS Per Bed Standard

2Z0S4

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0101391-00 - 2016/09

204.71

The Oaks of Clearwater

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
420 BAY AVE	1/17/2014-12/31/2014	Number of Beds: 60	Superior: 0
CLEARWATER, FL 33756	Days in CR 349	Maximum: 20,940	Standard: 366
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 21,900	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 18,050	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,883	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 12,667	FY Index: 1.34193004
Class at 1/94: North Small	Medicaid Utilization	70.17729%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	86.19866%	Cost: 1.07573004
Open Date: 03/30/1989	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 03/30/1989	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 07/15/1991	Low Occupancy Adjustment Factor:	109.01287%	DC Sem Index: 1.30450000
Med # Active Date: 01/17/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 203823			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	600,590	807,098	668,541	90,822		2,167,051
1a	Audit Adjustments						
2	Cost Per Diem	47.4138	63.7166	52.7782	7.1700		171.0786
3	Cost Per Diem Inflated	51.0044	67.6308	56.7751			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	51.0044	67.6308	56.7751	7.1700		182.5803
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	50.7703		63.3632			
7	Provider Target Rate	53.5946		66.8880			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500		
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674			
10	Target Rate Class Ceiling	67.5182		79.7567			
10a	New Provider Target Limitation	66.6954		74.5042			
10b	Base for line 10a	63.1808		70.5781			
11	Lesser of 5,7,8,10, 10a	51.0044	67.6308	56.7751	7.1700		182.5803
12/13	Medicaid Adjustment Rate		1.5352	1.2888			
14	Prospective Per Diem 11	51.0044	69.1660	58.0639	7.1700		185.4043
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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204.71

The Oaks of Clearwater

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/15/1991		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	21,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1989/01	Type:	Variable	80% Capital(1):	1,393,031	4.5606
Indexed Asset Value	1,741,289	<60% of Base:	False	20% ROE(2):	348,258	0.4013
FRVS Base Asset:	1,258,595	Interest Rate:	2.6600%	Insurance Cost(3):	13,958	0.7733
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	5,590	0.3097
ROE Factor	0.022710	Amortization Rate:	2.6600%	Home Office(3):	763	0.0423
		Interest Only:	False	Replacement(3&4):	14,956	0.0000
		Yearly Payment:	89,889	Total FRVS PD:		6.0872

(1) 80% Capital (\$1,393,031) amortized at 2.6600 % for 20 years Principal & Interest of \$89,889 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$4.5606

(2) 20% ROE (\$348,258) times the ROE factor (0.022710) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.4013

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,646
Comparison Date: 07/01/1988	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,778,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.0044	51.0044	2.3140	48.6904
Direct Care	69.1660	69.1660	3.1380	66.0280
Indirect Care	58.0639	58.0639	2.6343	55.4296
Property	7.1700	6.0872	0.2762	5.8110
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.5647
Supplemental Rate				8.1814
Totals	185.4043	184.3215	8.3625	204.7051

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 101391-00 - 2016/09

204.71

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1989/01	1,258,595	0.00	0.5899	0.5899		60		1,258,595	1,789,260	
1989/07		0.10	0.5899	0.5899		60		1,258,595	1,801,380	
1990/01		0.10	0.5899	0.5899		60		1,258,595	1,810,440	
1990/07		0.20	0.5899	0.5899		60		1,258,595	1,821,120	
1991/01		0.20	0.5899	0.5899		60		1,258,595	1,831,800	
1991/07		0.30	1.4932	1.4932		60	3.45	1,258,595	1,859,160	
1992/01		0.30	2.0117	2.0117		60	3.45	1,258,595	1,896,540	
1992/07		0.40	1.8152	1.8152		60	3.45	1,258,595	1,930,980	5
1993/01		0.40	1.7710	1.7710		60	3.45	1,258,595	1,965,180	
1993/07		0.50	1.5329	1.5329		60	3.45	1,258,595	1,995,300	
1994/01		0.50	1.6983	1.6983		60	3.45	1,258,595	2,029,200	
1994/07	50,039	0.60	1.5991	1.5991		60	11.86	1,308,634	2,061,660	
1995/01		0.60	1.5812	1.5812		60	11.86	1,308,634	2,094,240	
1995/07		0.70	1.5250	1.5250		60	12.97	1,308,634	2,126,160	
1996/01		0.70	1.7228	1.7228		60	12.97	1,308,634	2,162,820	
1996/07		0.80	1.3294	1.3294		60	22.58	1,308,634	2,191,560	
1997/01		0.80	1.4109	1.4109		60	22.58	1,308,634	2,222,460	
1997/07		0.90	1.0917	1.0917		60	22.51	1,308,634	2,246,700	
1998/01		0.90	1.1663	1.1663		60	22.51	1,308,634	2,272,920	
1998/07		1.00	1.0794	1.0794		60	21.84	1,308,634	2,297,460	
1999/01		1.00	1.4499	1.4499		60	21.84	1,308,634	2,330,760	
1999/07		1.00	1.2299	1.2299		60	32.73	1,318,212	2,359,440	
2000/01		1.00	1.3356	1.3356		60	32.73	1,328,689	2,390,940	
2000/07		1.00	1.1129	1.1129		60	39.04	1,339,185	2,417,520	
2001/01		1.00	1.2976	1.2976		60	39.04	1,351,520	2,448,900	
2001/07		1.00	0.9615	0.9615		60	43.83	1,361,876	2,472,420	
2002/01		1.00	1.0301	1.0301		60	48.98	1,374,369	2,497,860	
2002/07		1.00	0.8337	0.8337		60	48.98	1,384,573	2,518,680	
2003/01		1.00	1.3271	1.3271		60	48.98	1,400,936	2,552,100	
2003/07		1.00	1.1664	1.1664		60	51.03	1,416,097	2,581,860	



Florida Agency for Health Care Administration
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0 101391-00 - 2016/09

204.71

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2004/01		1.00	1.1103	1.1103		60	51.03	1,430,685	2,610,540	
2004/07		1.00	0.8378	0.8378		60	53.82	1,442,414	2,632,440	
2005/01		1.00	0.8595	0.8595		60	53.82	1,454,546	2,655,060	
2005/07		1.00	0.7364	0.7364		60	60.23	1,465,257	2,674,620	
2006/01		1.00	0.9068	0.9068		60	60.23	1,478,544	2,698,860	
2006/07		1.00	0.8133	0.8133		60	60.23	1,490,569	2,720,820	
2007/01		1.00	1.0133	1.0133		60	54.01	1,505,401	2,748,360	
2007/07	8,874	1.00	1.1050	1.1050		60	54.32	1,530,704	2,778,720	
2008/01		1.00	0.8556	0.8556		60	54.32	1,543,639	2,802,480	
2008/07		1.00	0.6104	0.6104		60	54.32	1,552,945	2,819,580	
2009/01		1.00	1.3268	1.3268		60	51.75	1,572,332	2,857,020	
2009/07		0.95	0.6841	0.6841		60	51.75	1,581,947	2,876,580	
2010/01		0.95	0.8643	0.8643		60	52.94	1,594,450	2,901,420	
2010/07		0.90	0.7107	0.7107		60	48.78	1,603,495	2,922,060	
2011/01		0.90	0.9198	0.9198		60	48.78	1,615,268	2,948,940	
2011/07		0.85	0.9028	0.9028		60	48.78	1,626,262	2,975,580	
2012/01		0.85	0.3865	0.3865		60	48.71	1,630,993	2,987,100	
2012/07		0.80	0.9417	0.9417		60	48.71	1,641,876	3,015,240	
2013/01		0.80	0.4901	0.4901		60	58.92	1,648,314	3,030,000	
2013/07		0.75	0.6196	0.6196		60	66.93	1,655,974	3,048,780	
2014/01	9,448	0.75	0.8564	0.8564		60	70.18	1,676,058	3,074,880	
2014/07	3,766	0.70	1.2383	1.2383		60	70.18	1,694,352	3,112,980	
2015/01		0.70	0.7571	0.7571		60	70.18	1,703,332	3,136,560	
2015/09		0.65	1.5736	1.5736		60	70.18	1,720,754	3,185,940	
2016/09		0.60	1.9890	1.9890		60	70.18	1,741,289	3,249,300	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 101391123120140117201408312015140423



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0101959-00 - 2016/09

211.26

Carrington Place of St. Pete

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
10501 ROOSEVELT BLVD N	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 366
SAINT PETERSBURG, FL 33716	Days in CR 365	Maximum: 43,800	Standard: 0
County: Pinellas [52]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 40,738	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 5,811	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,995	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	68.71962%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.00913%	Cost: 1.07573004
Open Date: 08/01/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 10/01/1988	Low Occupancy Adjustment Factor:	117.62587%	DC Sem Index: 1.30450000
Med # Active Date: 04/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 035167			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,001,242	2,125,938	1,385,805	910,957		5,423,942	
1a	Audit Adjustments							
2	Cost Per Diem	35.7650	75.9399	49.5019	32.5400		193.7468	
3	Cost Per Diem Inflated	38.4735	80.6050	53.2507				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	38.4735	80.6050	53.2507	32.5400		204.8692	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.3312		59.0692				
7	Provider Target Rate	54.1867		62.3551				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	38.4735	80.6050	53.2507	13.6500		185.9792	
12/13	Medicaid Adjustment Rate		1.6975	1.1214				
14	Prospective Per Diem 11	38.4735	82.3025	54.3721	13.6500		188.7981	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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211.26

Carrington Place of St. Pete

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/01/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,520,263.00		Total Amount	Per Diem
RS to Start Calcs:	1988/07	Type:	Fixed	80% Capital(1):	4,684,869	10.0794
Indexed Asset Value	5,856,086	<60% of Base:	False	20% ROE(2):	1,171,217	0.6747
FRVS Base Asset:	3,559,440	Interest Rate:	5.8318%	Insurance Cost(3):	88,431	2.1707
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	82,118	2.0158
ROE Factor	0.022710	Amortization Rate:	5.8318%	Home Office(3):	44,956	1.1035
		Interest Only:	False	Replacement(3&4):	30,202	0.0000
		Yearly Payment:	397,330	Total FRVS PD:		16.0441

(1) 80% Capital (\$4,684,869) amortized at 5.8318 % for 20 years Principal & Interest of \$397,330 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.0794

(2) 20% ROE (\$1,171,217) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6747

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1988	Current RS PBS:	29,662
Comparison Bed	120	Effective PBS Limitation	54,155
			3,559,440

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	38.4735	38.4735	1.7455	36.7280
Direct Care	82.3025	82.3025	3.7340	78.5685
Indirect Care	54.3721	54.3721	2.4668	51.9053
Property	13.6500	16.0441	0.7279	15.3162
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.5575
Supplemental Rate				8.1814
Totals	188.7981	191.1922	8.6742	211.2569

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

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211.26

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/07	4,914,588	0.00	0.5899	0.5899		120	33.55	3,559,440	3,559,440	1
1989/01		0.10	0.5899	0.5899		120	33.55	3,560,721	3,578,520	
1989/07	17,925	0.10	0.5899	0.5899		120	33.55	3,579,928	3,602,760	
1990/01		0.20	0.5899	0.5899		120	33.55	3,582,505	3,620,880	
1990/07		0.20	0.5899	0.5899		120	33.55	3,585,084	3,642,240	
1991/01		0.30	0.5899	0.5899		120	33.55	3,588,955	3,663,600	
1991/07	49,477	0.30	1.4932	1.4932		120	53.18	3,653,978	3,718,320	
1992/01		0.40	2.0117	2.0117		120	53.18	3,682,409	3,793,080	
1992/07		0.40	1.8152	1.8152		120	59.75	3,709,147	3,861,960	
1993/01		0.50	1.7710	1.7710		120	59.75	3,709,147	3,930,360	5
1993/07		0.50	1.5329	1.5329		120	60.57	3,770,673	3,990,600	
1994/01		0.60	1.6983	1.6983		120	60.57	3,809,096	4,058,400	
1994/07		0.60	1.5991	1.5991		120	65.79	3,845,644	4,123,320	
1995/01		0.70	1.5812	1.5812		120	65.79	3,888,208	4,188,480	
1995/07		0.70	1.5250	1.5250		120	64.73	3,929,715	4,252,320	
1996/01		0.80	1.7228	1.7228		120	64.73	3,983,874	4,325,640	
1996/07	17,617	0.80	1.3294	1.3294		120	55.07	4,043,859	4,383,120	
1997/01		0.90	1.4109	1.4109		120	55.07	4,095,208	4,444,920	
1997/07	22,909	0.90	1.0917	1.0917		120	52.77	4,156,721	4,493,400	
1998/01		1.00	1.1663	1.1663		120	52.77	4,203,235	4,545,840	
1998/07		1.00	1.0794	1.0794		120	47.70	4,242,583	4,594,920	
1999/01		1.00	1.4499	1.4499		120	47.70	4,295,932	4,661,520	
1999/07		1.00	1.2299	1.2299		120	45.59	4,339,728	4,718,880	
2000/01		1.00	1.3356	1.3356		120	45.59	4,387,773	4,781,880	
2000/07		1.00	1.1129	1.1129		120	47.09	4,429,582	4,835,040	
2001/01		1.00	1.2976	1.2976		120	47.09	4,478,794	4,897,800	
2001/07		1.00	0.9615	0.9615		120	47.09	4,515,664	4,944,840	
2002/01		1.00	1.0301	1.0301		120	54.21	4,561,512	4,995,720	
2002/07		1.00	0.8337	0.8337		120	49.80	4,595,946	5,037,360	
2003/01		1.00	1.3271	1.3271		120	49.80	4,651,172	5,104,200	



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211.26

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/07		1.00	1.1664	1.1664		120	57.04	4,705,423	5,163,720	
2004/01		1.00	1.1103	1.1103		120	57.04	4,757,667	5,221,080	
2004/07		1.00	0.8378	0.8378		120	60.37	4,797,527	5,264,880	
2005/01		1.00	0.8595	0.8595		120	60.37	4,838,762	5,310,120	
2005/07	17,816	1.00	0.7364	0.7364		120	56.62	4,892,211	5,349,240	
2006/01		1.00	0.9068	0.9068		120	62.44	4,936,574	5,397,720	
2006/07		1.00	0.8133	0.8133		120	62.44	4,976,723	5,441,640	
2007/01		1.00	1.0133	1.0133		120	62.44	5,027,152	5,496,720	
2007/07		1.00	1.1050	1.1050		120	62.44	5,082,702	5,557,440	
2008/01		1.00	0.8556	0.8556		120	62.44	5,126,190	5,604,960	
2008/07		1.00	0.6104	0.6104		120	62.44	5,157,480	5,639,160	
2009/01		0.95	1.3268	1.3268		120	62.44	5,222,490	5,714,040	
2009/07		0.95	0.6841	0.6841		120	62.44	5,256,431	5,753,160	
2010/01	62,478	0.90	0.8643	0.8643		120	59.57	5,359,799	5,802,840	
2010/07	34,050	0.90	0.7107	0.7107		120	57.41	5,428,130	5,844,120	
2011/01		0.85	0.9198	0.9198		120	57.41	5,470,567	5,897,880	
2011/07		0.85	0.9028	0.9028		120	57.41	5,512,548	5,951,160	
2012/01		0.80	0.3865	0.3865		120	58.43	5,529,593	5,974,200	
2012/07		0.80	0.9417	0.9417		120	62.82	5,571,253	6,030,480	
2013/01		0.75	0.4901	0.4901		120	62.82	5,591,733	6,060,000	
2013/07		0.75	0.6196	0.6196		120	66.95	5,617,718	6,097,560	
2014/01		0.70	0.8564	0.8564		120	66.95	5,651,396	6,149,760	
2014/07		0.70	1.2383	1.2383		120	67.73	5,700,382	6,225,960	
2015/01		0.65	0.7571	0.7571		120	67.73	5,728,434	6,273,120	
2015/09		0.65	1.5736	1.5736		120	68.72	5,787,024	6,371,880	
2016/09		0.60	1.9890	1.9890		120	68.72	5,856,086	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0101961-00 - 2016/09

214.42

Trinity Regional Rehab Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2144 WELBILT BLVD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
TRINITY, FL 34655	Days in CR 365	Maximum: 43,800	Standard: 366
County: Pasco [51]	First Used : 2015/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 41,786	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 14,287	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 21,281	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	50.92854%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.40183%	Cost: 1.07573004
Open Date: 11/19/2007	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/19/2007	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 11/25/2008	Low Occupancy Adjustment Factor:	120.65185%	DC Sem Index: 1.30450000
Med # Active Date: 04/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 003521			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	917,246	1,473,009	1,277,473	862,306		4,530,034	
1a	Audit Adjustments							
2	Cost Per Diem	43.1016	69.2171	60.0288	40.5200		212.8675	
3	Cost Per Diem Inflated	46.3657	73.4692	64.5748				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.3657	73.4692	64.5748	40.5200		224.9297	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	68.2164		98.9967				
7	Provider Target Rate	72.0111		104.5037				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	60.9926		68.9331				
10b	Base for line 10a	57.7785		65.3006				
11	Lesser of 5,7,8,10, 10a	46.3657	73.4692	64.5748	13.6500		198.0597	
12/13	Medicaid Adjustment Rate		0.0767	0.0675				
14	Prospective Per Diem 11	46.3657	73.5459	64.6423	13.6500		198.2039	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 101961-00 - 2016/09

214.42

Trinity Regional Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/25/2008	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	8,729,094.00		Total Amount	Per Diem
RS to Start Calcs:	2007/07	Type:	Variable	80% Capital(1):	4,958,573	9.0994
Indexed Asset Value	6,198,216	<60% of Base:	False	20% ROE(2):	1,239,643	0.7142
FRVS Base Asset:	0	Interest Rate:	3.9400%	Insurance Cost(3):	92,297	2.2088
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	107,373	2.5696
ROE Factor	0.022710	Amortization Rate:	3.9400%	Home Office(3):	52,740	1.2621
		Interest Only:	False	Replacement(3&4):	9,375	0.0000
		Yearly Payment:	358,697	Total FRVS PD:		15.8541

(1) 80% Capital (\$4,958,573) amortized at 3.9400 % for 20 years Principal & Interest of \$358,697 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.0994

(2) 20% ROE (\$1,239,643) times the ROE factor (0.022710) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7142

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	46,708
Comparison Date: 01/01/2008	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	5,604,960

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.3657	46.3657	2.1036	44.2621
Direct Care	73.5459	73.5459	3.3367	70.2092
Indirect Care	64.6423	64.6423	2.9328	61.7095
Property	13.6500	15.8541	0.7193	15.1348
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				14.9257
Supplemental Rate				8.1814
Totals	198.2039	200.4080	9.0924	214.4227

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 101961-00 - 2016/09

214.42

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2008/07	11,975,038	0.00	0.6104	0.6104		120	37.51	5,604,960	5,604,960	1
2009/01	49,969	0.10	1.3268	1.3268		120	37.51	5,660,002	5,714,040	
2009/07	8,782	0.10	0.6841	0.6841		120	37.51	5,671,424	5,753,160	
2010/01		0.20	0.8643	0.8643		120	37.51	5,678,112	5,802,840	
2010/07		0.20	0.7107	0.7107		120	37.51	5,683,615	5,844,120	
2011/01		0.30	0.9198	0.9198		120	37.51	5,694,310	5,897,880	
2011/07		0.30	0.9028	0.9028		120	37.51	5,704,827	5,951,160	
2012/01	19,060	0.40	0.3865	0.3865		120	42.62	5,730,721	5,974,200	
2012/07	41,567	0.40	0.9417	0.9417		120	51.23	5,792,396	6,030,480	
2013/01		0.50	0.4901	0.4901		120	51.23	5,805,620	6,060,000	
2013/07	25,773	0.50	0.6196	0.6196		120	52.73	5,848,636	6,097,560	
2014/01		0.60	0.8564	0.8564		120	52.73	5,877,446	6,149,760	
2014/07		0.60	1.2383	1.2383		120	49.84	5,917,018	6,225,960	
2015/01		0.70	0.7571	0.7571		120	49.84	5,945,436	6,273,120	
2015/09	102,135	0.70	1.5736	1.5736		120	50.93	6,108,214	6,371,880	
2016/09		0.80	1.9890	1.9890		120	50.93	6,198,216	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 101961123120140101201405182015151718



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0101963-00 - 2016/09

216.36

Eagle Lake Rehab & Care Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1100 66TH ST N	1/1/2014-12/31/2014	Number of Beds: 59	Superior: 0
ST PETERSBURG, FL 33710-622	Days in CR 365	Maximum: 21,535	Standard: 366
County: Pinellas [52]	First Used : 2015/09	Max Annualized: 21,535	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 17,942	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,009	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 14,975	FY Index: 1.34193004
Class at 1/94: North Small	Medicaid Utilization	83.46338%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	83.31553%	Cost: 1.07573004
Open Date: 08/01/1986	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1986	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 07/01/1987	Low Occupancy Adjustment Factor:	105.36667%	DC Sem Index: 1.30450000
Med # Active Date: 04/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 098330			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	637,662	994,329	740,288	197,820		2,570,099
1a	Audit Adjustments						
2	Cost Per Diem	42.5818	66.3993	49.4349	13.2100		171.6260
3	Cost Per Diem Inflated	45.8065	70.4783	53.1786			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.8065	70.4783	53.1786	13.2100		182.6734
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	64.6294		73.6225			
7	Provider Target Rate	68.2246		77.7180			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500		
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674			
10	Target Rate Class Ceiling	67.5182		79.7567			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	45.8065	70.4783	53.1786	13.2100		182.6734
12/13	Medicaid Adjustment Rate		2.6532	2.0020			
14	Prospective Per Diem 11	45.8065	73.1315	55.1806	13.2100		187.3286
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 101963-00 - 2016/09

216.36

Eagle Lake Rehab & Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1986/07	Type:	Fixed	80% Capital(1):	2,327,427	13.1046
Indexed Asset Value	2,909,284	<60% of Base:	False	20% ROE(2):	581,857	0.6818
FRVS Base Asset:	1,695,483	Interest Rate:	9.1500%	Insurance Cost(3):	79,365	4.4234
Occup Adj Factor	0.9000	Chase Rate:	7.2500%	Taxes Cost(3):	21,197	1.1814
ROE Factor	0.022710	Amortization Rate:	9.1500%	Home Office(3):	17,917	0.9986
		Interest Only:	False	Replacement(3&4):	33,123	0.0000
		Yearly Payment:	253,986	Total FRVS PD:		20.3898

(1) 80% Capital (\$2,327,427) amortized at 9.1500 % for 20 years Principal & Interest of \$253,986 divided by annual available days (21535) divided by Occup. Adj. (0.90) = \$13.1046

(2) 20% ROE (\$581,857) times the ROE factor (0.022710) divided by annual available days (21535) divided by Occup. Adj. (0.90) = \$0.6818

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,737
Comparison Date: 01/01/1986	Current RS PBS:	54,155
Comparison Bed 59	Effective PBS Limitation	1,695,483

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.8065	45.8065	2.0782	43.7283
Direct Care	73.1315	73.1315	3.3179	69.8136
Indirect Care	55.1806	55.1806	2.5035	52.6771
Property	13.2100	20.3898	0.9251	19.4647
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4991
Supplemental Rate				8.1814
Totals	187.3286	194.5084	8.8247	216.3642

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2014

0 101963-00 - 2016/09

216.36

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/07	2,496,782	0.00	0.2974	0.2974		59		1,695,483	1,695,483	1
1987/01		0.10	1.0091	1.0091		59		1,695,483	1,722,505	
1987/07		0.10	0.9007	0.9007		59	13.21	1,695,483	1,735,957	
1988/01		0.20	0.9007	0.9007		59	13.21	1,695,483	1,750,058	
1988/07		0.20	0.5899	0.5899		59	13.21	1,695,483	1,749,114	
1989/01		0.30	0.5899	0.5899		59	13.21	1,695,483	1,759,439	
1989/07		0.30	0.5899	0.5899		59	13.21	1,695,483	1,771,357	
1990/01		0.40	0.5899	0.5899		59	13.21	1,695,483	1,780,266	
1990/07		0.40	0.5899	0.5899		59	13.21	1,695,483	1,790,768	
1991/01		0.50	0.5899	0.5899		59	13.21	1,695,483	1,801,270	
1991/07		0.50	1.4932	1.4932		59	13.21	1,695,483	1,828,174	
1992/01		0.60	2.0117	2.0117		59	13.21	1,695,483	1,864,931	
1992/07		0.60	1.8152	1.8152		59	13.21	1,695,483	1,898,797	
1993/01		0.70	1.7710	1.7710		59	23.47	1,695,483	1,932,427	
1993/07		0.70	1.5329	1.5329		59	45.28	1,710,460	1,962,045	
1994/01		0.80	1.6983	1.6983		59	45.28	1,729,591	1,995,380	
1994/07	29,974	0.80	1.5991	1.5991		59	51.83	1,780,416	2,027,299	
1995/01		0.90	1.5812	1.5812		59	51.83	1,804,293	2,059,336	
1995/07		0.90	1.5250	1.5250		59	51.83	1,827,630	2,090,724	
1996/01		1.00	1.7228	1.7228		59	51.83	1,857,302	2,126,773	
1996/07		1.00	1.3294	1.3294		59	51.83	1,880,570	2,155,034	
1997/01		1.00	1.4109	1.4109		59	51.83	1,905,574	2,185,419	
1997/07	10,701	1.00	1.0917	1.0917		59	58.35	1,916,275	2,209,255	5
1998/01		1.00	1.1663	1.1663		59	58.35	1,959,670	2,235,038	
1998/07		1.00	1.0794	1.0794		59	53.29	1,980,165	2,259,169	
1999/01		1.00	1.4499	1.4499		59	53.29	2,007,983	2,291,914	
1999/07	29,433	1.00	1.2299	1.2299		59	55.88	2,037,416	2,320,116	5
2000/01		1.00	1.3356	1.3356		59	55.88	2,089,654	2,351,091	
2000/07	28,163	1.00	1.1129	1.1129		59	59.38	2,141,073	2,377,228	
2001/01		1.00	1.2976	1.2976		59	59.38	2,168,856	2,408,085	



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216.36

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		1.00	0.9615	0.9615		59	69.89	2,189,710	2,431,213	
2002/01	32,235	1.00	1.0301	1.0301		59	71.70	2,244,501	2,456,229	
2002/07		1.00	0.8337	0.8337		59	71.70	2,263,213	2,476,702	
2003/01		1.00	1.3271	1.3271		59	71.70	2,293,248	2,509,565	
2003/07		1.00	1.1664	1.1664		59	65.63	2,319,996	2,538,829	
2004/01		1.00	1.1103	1.1103		59	65.63	2,345,755	2,567,031	
2004/07		1.00	0.8378	0.8378		59	72.45	2,365,408	2,588,566	
2005/01		1.00	0.8595	0.8595		59	72.45	2,385,739	2,610,809	
2005/07	7,789	1.00	0.7364	0.7364		59	68.21	2,411,097	2,630,043	
2006/01	8,496	1.00	0.9068	0.9068		59	68.21	2,441,457	2,653,879	
2006/07	49,588	1.00	0.8133	0.8133		59	68.21	2,510,901	2,675,473	
2007/01		0.95	1.0133	1.0133		59	68.21	2,535,071	2,702,554	
2007/07		0.95	1.1050	1.1050		59	68.21	2,561,684	2,732,408	
2008/01		0.90	0.8556	0.8556		59	68.21	2,581,409	2,755,772	
2008/07		0.90	0.6104	0.6104		59	68.21	2,595,591	2,772,587	
2009/01	10,683	0.85	1.3268	1.3268		59	70.49	2,635,547	2,809,403	
2009/07		0.85	0.6841	0.6841		59	70.49	2,650,873	2,828,637	
2010/01		0.80	0.8643	0.8643		59	79.91	2,669,201	2,853,063	
2010/07		0.80	0.7107	0.7107		59	79.53	2,684,378	2,873,359	
2011/01		0.75	0.9198	0.9198		59	79.53	2,702,898	2,899,791	
2011/07		0.75	0.9028	0.9028		59	79.53	2,721,199	2,925,987	
2012/01		0.70	0.3865	0.3865		59	78.81	2,728,563	2,937,315	
2012/07	17,014	0.70	0.9417	0.9417		59	73.29	2,763,564	2,964,986	
2013/01		0.65	0.4901	0.4901		59	73.29	2,772,369	2,979,500	
2013/07	25,135	0.65	0.6196	0.6196		59	83.69	2,808,668	2,997,967	
2014/01		0.60	0.8564	0.8564		59	83.69	2,823,099	3,023,632	
2014/07		0.60	1.2383	1.2383		59	80.78	2,844,075	3,061,097	
2015/01		0.55	0.7571	0.7571		59	80.78	2,855,918	3,084,284	
2015/09		0.55	1.5736	1.5736		59	83.46	2,880,636	3,132,841	
2016/09		0.50	1.9890	1.9890		59	83.46	2,909,284	3,195,145	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0102419-00 - 2016/09

203.68

The Terrace of St. Cloud

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
3855 OLD CANOE CREEK ROA	12/1/2013-2/28/2015	Number of Beds: 120	Superior: 0
SAINT CLOUD, FL 34769	Days in CR 455	Maximum: 54,600	Standard: 366
County: Osceola [49]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 53,679	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 5,975	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 35,489	FY Index: 1.34462269
Class at 1/94: North Large	Medicaid Utilization	66.11338%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	98.31319%	Cost: 1.07357585
Open Date: 02/01/1986	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/01/1986	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23099675
Entered Medicaid 02/24/1986	Low Occupancy Adjustment Factor:	124.33376%	DC Sem Index: 1.30450000
Med # Active Date: 12/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05971035
Previous Med # 253146			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,764,621	2,482,626	1,402,827	687,067		6,337,141	
1a	Audit Adjustments							
2	Cost Per Diem	49.7230	69.9548	39.5285	19.3600		178.5663	
3	Cost Per Diem Inflated	53.3814	74.1318	42.4368				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.3814	74.1318	42.4368	19.3600		189.3100	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.1587		52.4510				
7	Provider Target Rate	56.1158		55.3687				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	51.7491		61.9183				
10b	Base for line 10a	49.0221		58.6554				
11	Lesser of 5,7,8,10, 10a	51.7491	74.1318	42.4368	13.6500		181.9677	
12/13	Medicaid Adjustment Rate		1.3438	0.7693				
14	Prospective Per Diem 11	51.7491	75.4756	43.2061	13.6500		184.0808	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 102419-00 - 2016/09

203.68

The Terrace of St. Cloud

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 12/01/2013		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,720,000.00		Total Amount	Per Diem
RS to Start Calcs:	1986/01	Type:	Variable	80% Capital(1):	4,553,656	8.5838
Indexed Asset Value	5,692,070	<60% of Base:	False	20% ROE(2):	1,138,414	0.6402
FRVS Base Asset:	2,133,058	Interest Rate:	4.2500%	Insurance Cost(3):	70,607	1.3154
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	76,366	1.4226
ROE Factor	0.022170	Amortization Rate:	4.2500%	Home Office(3):	11,624	0.2165
		Interest Only:	False	Replacement(3&4):	125,423	0.0000
		Yearly Payment:	338,374	Total FRVS PD:		12.1785

(1) 80% Capital (\$4,553,656) amortized at 4.2500 % for 20 years Principal & Interest of \$338,374 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.5838

(2) 20% ROE (\$1,138,414) times the ROE factor (0.022170) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6402

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.7491	51.7491	2.3478	49.4013
Direct Care	75.4756	75.4756	3.4243	72.0513
Indirect Care	43.2061	43.2061	1.9602	41.2459
Property	13.6500	12.1785	0.5525	11.6260
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.1758
Supplemental Rate				8.1814
Totals	184.0808	182.6093	8.2848	203.6817

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 2/28/2015

0 102419-00 - 2016/09

203.68

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/01	2,133,058	0.00	0.8299	0.8299		120	42.63	2,133,058	3,448,440	
1986/07		0.10	0.2974	0.2974		120	42.63	2,133,549	3,441,840	
1987/01		0.10	1.0091	1.0091		120	42.63	2,135,218	3,503,400	
1987/07		0.20	0.9007	0.9007		120	42.63	2,138,199	3,530,760	
1988/01		0.20	0.9007	0.9007		120	42.63	2,141,184	3,559,440	
1988/07	1,154,705	0.30	0.5899	0.5899		120	42.63	3,298,827	3,557,520	
1989/01		0.30	0.5899	0.5899		120	42.63	3,303,353	3,578,520	
1989/07	16,331	0.40	0.5899	0.5899		120	73.13	3,327,480	3,602,760	
1990/01		0.40	0.5899	0.5899		120	81.62	3,335,333	3,620,880	
1990/07		0.50	0.5899	0.5899		120	81.62	3,345,172	3,642,240	
1991/01		0.50	0.5899	0.5899		120	73.66	3,355,040	3,663,600	
1991/07	23,351	0.60	1.4932	1.4932		120	73.01	3,408,449	3,718,320	
1992/01		0.60	2.0117	2.0117		120	73.01	3,449,589	3,793,080	
1992/07		0.70	1.8152	1.8152		120	75.76	3,493,419	3,861,960	
1993/01		0.70	1.7710	1.7710		120	75.76	3,536,727	3,930,360	
1993/07		0.80	1.5329	1.5329		120	78.56	3,580,098	3,990,600	
1994/01		0.80	1.6983	1.6983		120	78.56	3,628,737	4,058,400	
1994/07		0.90	1.5991	1.5991		120	82.47	3,680,962	4,123,320	
1995/01		0.90	1.5812	1.5812		120	82.47	3,733,346	4,188,480	
1995/07	35,908	1.00	1.5250	1.5250		120	82.87	3,826,188	4,252,320	
1996/01		1.00	1.7228	1.7228		120	82.87	3,892,106	4,325,640	
1996/07	35,767	1.00	1.3294	1.3294		120	83.87	3,979,615	4,383,120	
1997/01		1.00	1.4109	1.4109		120	83.87	4,035,763	4,444,920	
1997/07		1.00	1.0917	1.0917		120	85.30	4,079,821	4,493,400	
1998/01		1.00	1.1663	1.1663		120	85.30	4,127,404	4,545,840	
1998/07	20,514	1.00	1.0794	1.0794		120	84.34	4,192,469	4,594,920	
1999/01		1.00	1.4499	1.4499		120	84.34	4,253,256	4,661,520	
1999/07		1.00	1.2299	1.2299		120	82.07	4,305,567	4,718,880	
2000/01		1.00	1.3356	1.3356		120	82.07	4,363,072	4,781,880	
2000/07		1.00	1.1129	1.1129		120	90.48	4,411,629	4,835,040	



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203.68

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/01		1.00	1.2976	1.2976		120	90.48	4,468,874	4,897,800	
2001/07		1.00	0.9615	0.9615		120	79.18	4,511,842	4,944,840	
2002/01		1.00	1.0301	1.0301		120	79.18	4,558,318	4,995,720	
2002/07		1.00	0.8337	0.8337		120	79.18	4,596,321	5,037,360	
2003/01		1.00	1.3271	1.3271		120	79.18	4,657,319	5,104,200	
2003/07		1.00	1.1664	1.1664		120	79.18	4,711,642	5,163,720	
2004/01		1.00	1.1103	1.1103		120	79.27	4,711,642	5,221,080	5
2004/07		1.00	0.8378	0.8378		120	79.27	4,803,867	5,264,880	
2005/01		1.00	0.8595	0.8595		120	79.27	4,845,156	5,310,120	
2005/07		1.00	0.7364	0.7364		120	81.32	4,880,836	5,349,240	
2006/01		1.00	0.9068	0.9068		120	81.32	4,925,095	5,397,720	
2006/07		0.95	0.8133	0.8133		120	77.13	4,963,146	5,441,640	
2007/01		0.95	1.0133	1.0133		120	77.13	5,010,921	5,496,720	
2007/07		0.90	1.1050	1.1050		120	75.80	5,060,755	5,557,440	
2008/01		0.90	0.8556	0.8556		120	78.27	5,099,723	5,604,960	
2008/07		0.85	0.6104	0.6104		120	78.27	5,126,180	5,639,160	
2009/01		0.85	1.3268	1.3268		120	78.27	5,183,993	5,714,040	
2009/07		0.80	0.6841	0.6841		120	77.46	5,212,365	5,753,160	
2010/01		0.80	0.8643	0.8643		120	77.46	5,248,403	5,802,840	
2010/07		0.75	0.7107	0.7107		120	77.00	5,276,377	5,844,120	
2011/01		0.75	0.9198	0.9198		120	77.00	5,312,779	5,897,880	
2011/07		0.70	0.9028	0.9028		120	72.30	5,346,356	5,951,160	
2012/01	36,842	0.70	0.3865	0.3865		120	70.24	5,397,665	5,974,200	
2012/07		0.65	0.9417	0.9417		120	70.24	5,430,704	6,030,480	
2013/01		0.65	0.4901	0.4901		120	70.24	5,448,006	6,060,000	
2013/07	40,046	0.60	0.6196	0.6196		120	66.11	5,508,308	6,097,560	
2014/01		0.60	0.8564	0.8564		120	66.11	5,536,610	6,149,760	
2014/07		0.55	1.2383	1.2383		120	66.11	5,574,320	6,225,960	
2015/01		0.55	0.7571	0.7571		120	66.11	5,597,531	6,273,120	
2015/09		0.50	1.5736	1.5736		120	66.11	5,641,572	6,371,880	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2016/09		0.45	1.9890	1.9890		120	66.11	5,692,070	6,498,600	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 102419022820151201201301072016113346



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The Crossroads

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
206 W ORANGE ST	12/30/2013-7/31/2014	Number of Beds: 60	Superior: 0
DAVENPORT, FL 33837	Days in CR 214	Maximum: 12,840	Standard: 366
County: Polk [53]	First Used : 2013/07	Max Annualized: 21,900	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 10,910	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,913	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 6,179	FY Index: 1.33689974
Class at 1/94: South Small	Medicaid Utilization	56.63611%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	84.96885%	Cost: 1.07977764
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	107.45757%	DC Sem Index: 1.30450000
Med # Active Date: 12/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 045471			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	452,179	766,956	578,617	145,886		1,943,638
1a	Audit Adjustments						
2	Cost Per Diem	73.1800	124.1230	93.6425	23.6100		314.5555
3	Cost Per Diem Inflated	79.0181	131.9989	101.1131			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	79.0181	131.9989	101.1131	23.6100		335.7401
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	80.0647		102.4524			
7	Provider Target Rate	84.5185		108.1516			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	66.8502	108.0204	86.7059	13.6500		
9	Prior Semester: Class Ceiling Target Base	64.9876		76.7674			
10	Target Rate Class Ceiling	67.5182		79.7567			
10a	New Provider Target Limitation	69.3349		83.9541			
10b	Base for line 10a	65.6812		79.5300			
11	Lesser of 5,7,8,10, 10a	66.8502	108.0204	79.7567	13.6500		268.2773
12/13	Medicaid Adjustment Rate		0.8064	0.5954			
14	Prospective Per Diem 11	66.8502	108.8268	80.3521	13.6500		269.6791
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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The Crossroads

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,024,000.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Fixed	80% Capital(1):	1,466,786	6.6581
Indexed Asset Value	1,833,482	<60% of Base:	False	20% ROE(2):	366,696	0.4303
FRVS Base Asset:	971,248	Interest Rate:	6.5000%	Insurance Cost(3):	4,484	0.4110
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	8,150	0.7470
ROE Factor	0.023130	Amortization Rate:	6.5000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	131,232	Total FRVS PD:		8.2464

(1) 80% Capital (\$1,466,786) amortized at 6.5000 % for 20 years Principal & Interest of \$131,232 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$6.6581

(2) 20% ROE (\$366,696) times the ROE factor (0.023130) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.4303

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	66.8502	66.8502	3.0330	63.8172
Direct Care	108.8268	108.8268	4.9374	103.8894
Indirect Care	80.3521	80.3521	3.6455	76.7066
Property	13.6500	8.2464	0.3741	7.8723
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.8954
Supplemental Rate				8.1814
Totals	269.6791	264.2755	11.9900	279.3623

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1971/07	39,369	0.00				60	100.00	39,369	615,660	
1972/01		0.10	3.9787	3.0000	0.9787	60	100.00	39,487	640,140	
1972/07		0.10	5.9113	3.0000	2.9113	60	100.00	39,605	671,700	
1973/01		0.20	8.0622	3.0000	5.0622	60	100.00	39,843	706,320	
1973/07		0.20	10.7186	3.0000	7.7186	60	100.00	40,082	746,280	
1974/01		0.30	12.9457	3.0000	9.9457	60	100.00	40,443	785,280	
1974/07		0.30	13.0494	3.0000	10.0494	60	100.00	40,807	809,640	
1975/01		0.40	13.1399	3.0000	10.1399	60	100.00	41,297	834,660	
1975/07		0.40	14.2033	3.0000	11.2033	60	100.00	41,793	868,620	
1976/01		0.50	15.2478	3.0000	12.2478	60	100.00	42,420	903,720	
1976/07		0.50	15.7330	3.0000	12.7330	60	100.00	43,056	935,220	
1977/01	557,147	0.60	16.4836	3.0000	13.4836	60	100.00	600,978	970,320	
1977/07		0.60	18.5412	3.0000	15.5412	60	100.00	611,796	1,019,340	
1978/01		0.70	20.2809	3.0000	17.2809	60	100.00	624,644	1,067,700	
1978/07		0.70	22.8203	3.0000	19.8203	60	100.00	637,762	1,126,800	
1979/01		0.80	24.9476	3.0000	21.9476	60	100.00	653,068	1,184,580	
1979/07		0.80	26.1458	3.0000	23.1458	60	100.00	668,742	1,234,320	
1980/01	2,240	0.90	29.3115	3.0000	26.3115	60	64.35	689,038	1,310,460	
1980/07		0.90	30.1222	3.0000	27.1222	60	64.35	707,642	1,360,380	
1981/01		1.00	30.9462	3.0000	27.9462	60	64.32	728,871	1,412,400	
1981/07		1.00	30.5350	3.0000	27.5350	60	64.32	750,737	1,448,940	
1982/01	8,477	1.00	30.2110	3.0000	27.2110	60	70.84	781,736	1,487,760	
1982/07		1.00	29.5087	3.0000	26.5087	60	100.00	805,188	1,521,900	
1983/04	8,463	1.00	29.1375	3.0000	26.1375	60	100.00	837,807	1,561,920	
1983/07		1.00	30.0953	3.0000	27.0953	60	65.80	862,941	1,623,720	
1984/01		1.00	28.3905	3.0000	25.3905	60	68.12	888,829	1,644,780	
1984/07		1.00	27.3084	3.0000	24.3084	60	65.80	915,494	1,676,340	
1985/01		1.00	25.4555	3.0000	22.4555	60	65.80	942,959	1,695,540	
1985/10		1.00	23.3077	3.0000	20.3077	60	100.00	971,248	1,710,000	
1986/01		1.00	21.1376	3.0000	18.1376	60	100.00	1,000,385	1,724,220	



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1986/07	20,215	1.00	18.4350	3.0000	15.4350	60	100.00	1,050,612	1,720,920	
1987/01		1.00	16.4441	3.0000	13.4441	60	100.00	1,082,130	1,751,700	
1987/07		1.00	14.3448	3.0000	11.3448	60	62.05	1,114,594	1,765,380	
1988/01		1.00	12.2455	3.0000	9.2455	60	62.05	1,148,032	1,779,720	
1988/07		1.00	9.8354	3.0000	6.8354	60	51.67	1,180,388	1,778,760	
1989/01		1.00	7.4253	3.0000	4.4253	60	51.67	1,213,656	1,789,260	
1989/07		1.00	5.0152	3.0000	2.0152	60	55.07	1,250,066	1,801,380	
1990/01		1.00	2.6051	2.6051		60	55.07	1,282,631	1,810,440	
1990/07		1.00	0.5899	0.5899		60	55.44	1,290,197	1,821,120	
1991/01		1.00	0.5899	0.5899		60	55.44	1,297,808	1,831,800	
1991/07		1.00	1.4932	1.4932		60	55.44	1,317,187	1,859,160	
1992/01		0.95	2.0117	2.0117		60	67.26	1,342,360	1,896,540	
1992/07		0.95	1.8152	1.8152		60	67.26	1,365,508	1,930,980	
1993/01		0.90	1.7710	1.7710		60	68.24	1,387,273	1,965,180	
1993/07		0.90	1.5329	1.5329		60	69.49	1,406,412	1,995,300	
1994/01		0.85	1.6983	1.6983		60	69.49	1,426,715	2,029,200	
1994/07		0.85	1.5991	1.5991		60	66.21	1,426,715	2,061,660	5
1995/01		0.80	1.5812	1.5812		60	66.21	1,446,107	2,094,240	5
1995/07	9,994	0.80	1.5250	1.5250		60	72.74	1,492,260	2,126,160	
1996/01		0.75	1.7228	1.7228		60	72.74	1,511,541	2,162,820	
1996/07	17,084	0.75	1.3294	1.3294		60	75.47	1,543,697	2,191,560	
1997/01		0.70	1.4109	1.4109		60	75.47	1,558,943	2,222,460	
1997/07	15,041	0.70	1.0917	1.0917		60	77.73	1,585,897	2,246,700	
1998/01		0.65	1.1663	1.1663		60	77.73	1,597,920	2,272,920	
1998/07	18,352	0.65	1.0794	1.0794		60	79.38	1,627,483	2,297,460	
1999/01		0.60	1.4499	1.4499		60	79.38	1,641,640	2,330,760	
1999/07	14,048	0.60	1.2299	1.2299		60	80.46	1,667,802	2,359,440	
2000/01		0.55	1.3356	1.3356		60	80.46	1,680,054	2,390,940	
2000/07		0.55	1.1129	1.1129		60	76.55	1,690,338	2,417,520	
2001/01		0.50	1.2976	1.2976		60	76.55	1,701,305	2,448,900	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/07		0.50	0.9615	0.9615		60	63.80	1,709,485	2,472,420	
2002/01		0.45	1.0301	1.0301		60	63.80	1,717,408	2,497,860	
2002/07	11,988	0.45	0.8337	0.8337		60	71.59	1,735,840	2,518,680	
2003/01		0.40	1.3271	1.3271		60	71.59	1,745,054	2,552,100	
2003/07		0.40	1.1664	1.1664		60	62.21	1,753,196	2,581,860	
2004/01		0.35	1.1103	1.1103		60	63.05	1,760,009	2,610,540	
2004/07		0.35	0.8378	0.8378		60	63.05	1,765,169	2,632,440	
2005/01	35,510	0.30	0.8595	0.8595		60	63.05	1,805,231	2,655,060	
2005/07		0.30	0.7364	0.7364		60	63.05	1,809,219	2,674,620	
2006/01		0.25	0.9068	0.9068		60	63.05	1,809,219	2,698,860	5
2006/07		0.25	0.8133	0.8133		60	63.05	1,817,006	2,720,820	
2007/01		0.20	1.0133	1.0133		60	63.05	1,820,689	2,748,360	
2007/07		0.20	1.1050	1.1050		60	53.28	1,824,587	2,778,720	
2008/01		0.15	0.8556	0.8556		60	53.28	1,826,855	2,802,480	
2008/07		0.15	0.6104	0.6104		60	53.28	1,828,476	2,819,580	
2009/01		0.10	1.3268	1.3268		60	53.28	1,830,827	2,857,020	
2009/07		0.10	0.6841	0.6841		60	53.28	1,832,040	2,876,580	
2010/01		0.05	0.8643	0.8643		60	60.94	1,832,831	2,901,420	
2010/07		0.05	0.7107	0.7107		60	60.94	1,833,482	2,922,060	
2011/01		0.00	0.9198	0.9198		60	60.94	1,833,482	2,948,940	
2011/07		0.00	0.9028	0.9028		60	60.94	1,833,482	2,975,580	
2012/01		0.00	0.3865	0.3865		60	60.94	1,833,482	2,987,100	
2012/07		0.00	0.9417	0.9417		60	60.94	1,833,482	3,015,240	
2013/01		0.00	0.4901	0.4901		60	66.15	1,833,482	3,030,000	
2013/07		0.00	0.6196	0.6196		60	56.64	1,833,482	3,048,780	
2014/01		0.00	0.8564	0.8564		60	56.64	1,833,482	3,074,880	
2014/07		0.00	1.2383	1.2383		60	56.64	1,833,482	3,112,980	
2015/01		0.00	0.7571	0.7571		60	56.64	1,833,482	3,136,560	
2015/09		0.00	1.5736	1.5736		60	56.64	1,833,482	3,185,940	
2016/09		0.00	1.9890	1.9890		60	56.64	1,833,482	3,249,300	

Message Code:

5 Uncorrected Licensure Deficiency



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308.35

The Crossings

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4445 PINE FOREST DR	12/30/2013-7/31/2014	Number of Beds: 60	Superior: 0
LAKE WORTH, FL 33463-4676	Days in CR 214	Maximum: 12,840	Standard: 366
County: Palm Beach [50]	First Used : 2013/07	Max Annualized: 21,900	Conditional: 0
Region: South Area: 9	Last Used: 2016/09	Total Patient: 11,283	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,333	Inflation
Current Class South Small	Initial CR? False	Medicaid: 8,595	FY Index: 1.33689974
Class at 1/94: South Small	Medicaid Utilization	76.17655%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	87.87383%	Cost: 1.07977764
Open Date: 07/01/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 11/01/1988	Low Occupancy Adjustment Factor:	111.13141%	DC Sem Index: 1.30450000
Med # Active Date: 12/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 028100			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	595,719	970,450	756,259	221,665		2,544,093
1a	Audit Adjustments						
2	Cost Per Diem	69.3099	112.9087	87.9882	25.7900		295.9968
3	Cost Per Diem Inflated	74.8393	120.0730	95.0077			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	74.8393	120.0730	95.0077	25.7900		315.7100
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	75.8305		96.2661			
7	Provider Target Rate	80.0488		101.6212			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500		
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807			
10	Target Rate Class Ceiling	75.1765		88.3937			
10a	New Provider Target Limitation	76.6924		91.3440			
10b	Base for line 10a	72.6510		86.5305			
11	Lesser of 5,7,8,10, 10a	71.0408	115.1428	88.3937	13.6500		288.2273
12/13	Medicaid Adjustment Rate		3.3908	2.6031			
14	Prospective Per Diem 11	71.0408	118.5336	90.9968	13.6500		294.2212
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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The Crossings

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	11/01/1988	Amount:	2,376,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/07	Type:	Fixed	80% Capital(1):	1,784,334	8.0995
Indexed Asset Value	2,230,417	<60% of Base:	False	20% ROE(2):	446,083	0.5235
FRVS Base Asset:	1,264,851	Interest Rate:	6.5000%	Insurance Cost(3):	17,606	1.5604
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	28,336	2.5114
ROE Factor	0.023130	Amortization Rate:	6.5000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	159,642	Total FRVS PD:		12.6948

(1) 80% Capital (\$1,784,334) amortized at 6.5000 % for 20 years Principal & Interest of \$159,642 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$8.0995

(2) 20% ROE (\$446,083) times the ROE factor (0.023130) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.5235

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,662
Comparison Date: 01/01/1988	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,779,720

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	71.0408	71.0408	3.2231	67.8177
Direct Care	118.5336	118.5336	5.3778	113.1558
Indirect Care	90.9968	90.9968	4.1285	86.8683
Property	13.6500	12.6948	0.5760	12.1188
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.2072
Supplemental Rate				8.1814
Totals	294.2212	293.2660	13.3054	308.3492

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/07	1,264,851	0.00	0.5899	0.5899		60	40.17	1,264,851	1,778,760	
1989/01	43,593	0.10	0.5899	0.5899		60	40.17	1,308,989	1,789,260	
1989/07		0.10	0.5899	0.5899		60	40.17	1,309,553	1,801,380	
1990/01		0.20	0.5899	0.5899		60	40.17	1,310,682	1,810,440	
1990/07		0.20	0.5899	0.5899		60	40.17	1,311,812	1,821,120	
1991/01		0.30	0.5899	0.5899		60	40.17	1,313,508	1,831,800	
1991/07		0.30	1.4932	1.4932		60	40.17	1,317,806	1,859,160	
1992/01		0.40	2.0117	2.0117		60	47.82	1,317,806	1,896,540	5
1992/07		0.40	1.8152	1.8152		60	47.82	1,335,404	1,930,980	
1993/01		0.50	1.7710	1.7710		60	47.15	1,345,541	1,965,180	
1993/07		0.50	1.5329	1.5329		60	47.15	1,354,383	1,995,300	
1994/01		0.60	1.6983	1.6983		60	57.64	1,368,184	2,029,200	
1994/07		0.60	1.5991	1.5991		60	83.26	1,381,312	2,061,660	
1995/01		0.70	1.5812	1.5812		60	83.26	1,396,600	2,094,240	
1995/07		0.70	1.5250	1.5250		60	77.98	1,411,509	2,126,160	
1996/01		0.80	1.7228	1.7228		60	77.98	1,430,962	2,162,820	
1996/07		0.80	1.3294	1.3294		60	80.18	1,446,180	2,191,560	
1997/01		0.90	1.4109	1.4109		60	80.18	1,464,544	2,222,460	
1997/07		0.90	1.0917	1.0917		60	80.19	1,478,933	2,246,700	
1998/01		1.00	1.1663	1.1663		60	80.19	1,496,182	2,272,920	
1998/07		1.00	1.0794	1.0794		60	85.28	1,512,332	2,297,460	
1999/01		1.00	1.4499	1.4499		60	85.28	1,534,259	2,330,760	
1999/07	55,125	1.00	1.2299	1.2299		60	79.11	1,608,254	2,359,440	
2000/01		1.00	1.3356	1.3356		60	79.11	1,629,734	2,390,940	
2000/07	19,827	1.00	1.1129	1.1129		60	73.06	1,667,698	2,417,520	
2001/01		1.00	1.2976	1.2976		60	73.06	1,689,338	2,448,900	
2001/07	15,073	1.00	0.9615	0.9615		60	77.68	1,720,654	2,472,420	
2002/01		1.00	1.0301	1.0301		60	77.68	1,738,378	2,497,860	
2002/07	24,647	1.00	0.8337	0.8337		60	70.93	1,777,518	2,518,680	
2003/01		1.00	1.3271	1.3271		60	70.93	1,801,107	2,552,100	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/07		1.00	1.1664	1.1664		60	74.14	1,822,115	2,581,860	
2004/01		1.00	1.1103	1.1103		60	68.97	1,842,346	2,610,540	
2004/07		1.00	0.8378	0.8378		60	68.97	1,857,781	2,632,440	
2005/01	10,371	1.00	0.8595	0.8595		60	68.97	1,884,120	2,655,060	
2005/07		1.00	0.7364	0.7364		60	68.97	1,897,995	2,674,620	
2006/01		1.00	0.9068	0.9068		60	68.97	1,915,206	2,698,860	
2006/07		1.00	0.8133	0.8133		60	68.97	1,930,782	2,720,820	
2007/01		1.00	1.0133	1.0133		60	68.97	1,950,347	2,748,360	
2007/07		1.00	1.1050	1.1050		60	54.47	1,971,691	2,778,720	
2008/01		1.00	0.8556	0.8556		60	54.47	1,988,398	2,802,480	
2008/07		1.00	0.6104	0.6104		60	54.47	2,000,418	2,819,580	
2009/01		0.95	1.3268	1.3268		60	54.47	2,025,390	2,857,020	
2009/07		0.95	0.6841	0.6841		60	54.47	2,038,426	2,876,580	
2010/01		0.90	0.8643	0.8643		60	71.34	2,054,283	2,901,420	
2010/07		0.90	0.7107	0.7107		60	71.34	2,067,422	2,922,060	
2011/01		0.85	0.9198	0.9198		60	71.34	2,083,585	2,948,940	
2011/07		0.85	0.9028	0.9028		60	71.34	2,099,574	2,975,580	
2012/01		0.80	0.3865	0.3865		60	71.34	2,106,066	2,987,100	
2012/07		0.80	0.9417	0.9417		60	71.34	2,121,933	3,015,240	
2013/01		0.75	0.4901	0.4901		60	66.15	2,129,733	3,030,000	
2013/07		0.75	0.6196	0.6196		60	76.18	2,139,630	3,048,780	
2014/01		0.70	0.8564	0.8564		60	76.18	2,152,457	3,074,880	
2014/07		0.70	1.2383	1.2383		60	76.18	2,171,114	3,112,980	
2015/01		0.65	0.7571	0.7571		60	76.18	2,181,798	3,136,560	
2015/09		0.65	1.5736	1.5736		60	76.18	2,204,113	3,185,940	
2016/09		0.60	1.9890	1.9890		60	76.18	2,230,417	3,249,300	

Message Code:

5 Uncorrected Licensure Deficiency



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Cross Pointe Care Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
440 PHIPPEN WAITERS ROAD	12/30/2013-7/31/2014	Number of Beds: 88	Superior: 0
DANIA BEACH, FL 33004	Days in CR 214	Maximum: 18,832	Standard: 366
County: Broward [6]	First Used : 2013/07	Max Annualized: 32,120	Conditional: 0
Region: South Area: 10	Last Used: 2016/09	Total Patient: 17,582	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,811	Inflation
Current Class South Small	Initial CR? False	Medicaid: 15,470	FY Index: 1.33689974
Class at 1/94: South Small	Medicaid Utilization	87.98771%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	93.36236%	Cost: 1.07977764
Open Date: 02/01/1984	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/01/1984	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 02/01/1984	Low Occupancy Adjustment Factor:	118.07259%	DC Sem Index: 1.30450000
Med # Active Date: 12/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 028133			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	982,345	1,696,709	1,206,218	343,125		4,228,397	
1a	Audit Adjustments							
2	Cost Per Diem	63.5000	109.6774	77.9714	22.1800		273.3288	
3	Cost Per Diem Inflated	68.5659	116.6367	84.1918				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	68.5659	116.6367	84.1918	22.1800		291.5744	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	69.4740		85.3069				
7	Provider Target Rate	73.3387		90.0524				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500			
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807				
10	Target Rate Class Ceiling	75.1765		88.3937				
10a	New Provider Target Limitation	74.7750		87.6369				
10b	Base for line 10a	70.8346		83.0187				
11	Lesser of 5,7,8,10, 10a	68.5659	115.1428	84.1918	13.6500		281.5505	
12/13	Medicaid Adjustment Rate		4.9208	3.5980				
14	Prospective Per Diem 11	68.5659	120.0636	87.7898	13.6500		290.0693	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Cross Pointe Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/01/2000		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	None	80% Capital(1):	1,964,504	3.1829
Indexed Asset Value	2,455,630	<60% of Base:	True	20% ROE(2):	491,126	0.3930
FRVS Base Asset:	1,418,704	Interest Rate:	4.7500%	Insurance Cost(3):	19,312	1.0984
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	20,668	1.1755
ROE Factor	0.023130	Amortization Rate:	4.7500%	Home Office(3):	0	0.0000
		Interest Only:	True	Replacement(3&4):	0	0.0000
		Yearly Payment:	92,012	Total FRVS PD:		5.8498

(1) 80% Capital (\$1,964,504) amortized at 4.7500 % for 20 years Interest of \$92,012 divided by annual available days (32120) divided by Occup. Adj. (0.90) = \$3.1829

(2) 20% ROE (\$491,126) times the ROE factor (0.023130) divided by annual available days (32120) divided by Occup. Adj. (0.90) = \$0.3930

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 88	Effective PBS Limitation	2,508,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	68.5659	68.5659	3.1108	65.4551
Direct Care	120.0636	120.0636	5.4472	114.6164
Indirect Care	87.7898	87.7898	3.9830	83.8068
Property	13.6500	5.8498	0.2654	5.5844
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5913
Supplemental Rate				8.1814
Totals	290.0693	282.2691	12.8064	299.2354

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1984/01	1,411,960	0.00	1.2952	1.2952		88	90.94	1,411,960	2,412,344	
1984/07		0.10	1.9179	1.9179		88	90.94	1,414,668	2,458,632	
1985/01		0.10	1.1471	1.1471		88	89.78	1,416,291	2,486,792	
1985/10		0.20	0.8522	0.8522		88	89.78	1,418,704	2,508,000	
1986/01		0.20	0.8299	0.8299		88	89.78	1,421,059	2,528,856	
1986/07		0.30	0.2974	0.2974		88	89.78	1,422,327	2,524,016	
1987/01		0.30	1.0091	1.0091		88	93.67	1,426,632	2,569,160	
1987/07		0.40	0.9007	0.9007		88	93.67	1,431,772	2,589,224	
1988/01		0.40	0.9007	0.9007		88	93.67	1,436,931	2,610,256	
1988/07		0.50	0.5899	0.5899		88	93.67	1,441,170	2,608,848	
1989/01	28,115	0.50	0.5899	0.5899		88	93.67	1,473,536	2,624,248	
1989/07	12,913	0.60	0.5899	0.5899		88	94.24	1,491,664	2,642,024	
1990/01		0.60	0.5899	0.5899		88	94.24	1,496,943	2,655,312	
1990/07		0.70	0.5899	0.5899		88	85.38	1,503,124	2,670,976	
1991/01		0.70	0.5899	0.5899		88	85.38	1,509,330	2,686,640	
1991/07		0.80	1.4932	1.4932		88	85.38	1,527,360	2,726,768	
1992/01		0.80	2.0117	2.0117		88	86.84	1,551,941	2,781,592	
1992/07		0.90	1.8152	1.8152		88	80.67	1,577,295	2,832,104	
1993/01		0.90	1.7710	1.7710		88	80.67	1,602,436	2,882,264	
1993/07		1.00	1.5329	1.5329		88	75.81	1,627,000	2,926,440	
1994/01		1.00	1.6983	1.6983		88	75.81	1,654,631	2,976,160	
1994/07		1.00	1.5991	1.5991		88	83.15	1,681,090	3,023,768	
1995/01		1.00	1.5812	1.5812		88	81.63	1,707,671	3,071,552	
1995/07		1.00	1.5250	1.5250		88	81.63	1,733,713	3,118,368	
1996/01		1.00	1.7228	1.7228		88	83.69	1,763,581	3,172,136	
1996/07		1.00	1.3294	1.3294		88	83.69	1,787,026	3,214,288	
1997/01		1.00	1.4109	1.4109		88	83.69	1,812,239	3,259,608	
1997/07		1.00	1.0917	1.0917		88	80.95	1,832,023	3,295,160	
1998/01		1.00	1.1663	1.1663		88	80.95	1,853,390	3,333,616	
1998/07		1.00	1.0794	1.0794		88	83.83	1,873,395	3,369,608	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1999/01		1.00	1.4499	1.4499		88	61.19	1,900,557	3,418,448	
1999/07		1.00	1.2299	1.2299		88	61.19	1,923,932	3,460,512	
2000/01		1.00	1.3356	1.3356		88	82.86	1,923,932	3,506,712	5
2000/07		1.00	1.1129	1.1129		88	82.86	1,971,325	3,545,696	
2001/01		1.00	1.2976	1.2976		88	82.86	1,996,905	3,591,720	
2001/07		1.00	0.9615	0.9615		88	79.79	2,016,105	3,626,216	
2002/01		1.00	1.0301	1.0301		88	79.79	2,036,873	3,663,528	
2002/07		1.00	0.8337	0.8337		88	79.79	2,053,854	3,694,064	
2003/01		1.00	1.3271	1.3271		88	79.79	2,053,854	3,743,080	5
2003/07		1.00	1.1664	1.1664		88	79.79	2,105,385	3,786,728	
2004/01		1.00	1.1103	1.1103		88	79.79	2,128,761	3,828,792	
2004/07		0.95	0.8378	0.8378		88	80.24	2,145,704	3,860,912	
2005/01		0.95	0.8595	0.8595		88	80.24	2,163,224	3,894,088	
2005/07		0.90	0.7364	0.7364		88	83.07	2,177,562	3,922,776	
2006/01		0.90	0.9068	0.9068		88	83.07	2,195,333	3,958,328	
2006/07		0.85	0.8133	0.8133		88	82.39	2,210,509	3,990,536	
2007/01		0.85	1.0133	1.0133		88	82.39	2,210,509	4,030,928	5
2007/07		0.80	1.1050	1.1050		88	80.23	2,249,257	4,075,456	
2008/01		0.80	0.8556	0.8556		88	80.23	2,264,653	4,110,304	
2008/07		0.75	0.6104	0.6104		88	80.23	2,275,021	4,135,384	
2009/01		0.75	1.3268	1.3268		88	80.23	2,297,660	4,190,296	
2009/07		0.70	0.6841	0.6841		88	80.23	2,308,663	4,218,984	
2010/01		0.70	0.8643	0.8643		88	79.59	2,322,630	4,255,416	
2010/07		0.65	0.7107	0.7107		88	79.59	2,333,361	4,285,688	
2011/01		0.65	0.9198	0.9198		88	79.59	2,347,312	4,325,112	
2011/07		0.60	0.9028	0.9028		88	79.59	2,360,027	4,364,184	
2012/01		0.60	0.3865	0.3865		88	79.59	2,365,500	4,381,080	
2012/07		0.55	0.9417	0.9417		88	79.59	2,377,751	4,422,352	
2013/01		0.55	0.4901	0.4901		88	79.54	2,384,161	4,444,000	
2013/07		0.50	0.6196	0.6196		88	87.99	2,391,547	4,471,544	



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299.24

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/01		0.50	0.8564	0.8564		88	87.99	2,401,788	4,509,824	
2014/07		0.45	1.2383	1.2383		88	87.99	2,415,171	4,565,704	
2015/01		0.45	0.7571	0.7571		88	87.99	2,423,399	4,600,288	
2015/09		0.40	1.5736	1.5736		88	87.99	2,438,652	4,672,712	
2016/09		0.35	1.9890	1.9890		88	87.99	2,455,630	4,765,640	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 102787073120141230201301122016134425



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0102791-00 - 2016/09

257.28

Cross Terrace Rehabilitation Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1351 SAN CHRISTOPHER DR	12/30/2013-7/31/2014	Number of Beds: 104	Superior: 0
DUNEDIN, FL 34698	Days in CR 214	Maximum: 22,256	Standard: 366
County: Pinellas [52]	First Used : 2013/07	Max Annualized: 37,960	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 15,840	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,304	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 11,619	FY Index: 1.33689974
Class at 1/94: North Large	Medicaid Utilization	73.35227%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	71.17182%	Cost: 1.07977764
Open Date: 05/01/1979	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/01/1979	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 05/01/1979	Low Occupancy Adjustment Factor:	90.00888%	DC Sem Index: 1.30450000
Med # Active Date: 12/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 028148			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	644,478	1,166,265	734,936	293,380		2,839,059
1a	Audit Adjustments						
2	Cost Per Diem	55.4676	100.3757	63.2529	25.2500		244.3462
3	Cost Per Diem Inflated	59.8927	106.7447	68.2991			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	59.8927	106.7447	68.2991	25.2500		260.1865
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	60.6860		69.2037			
7	Provider Target Rate	64.0618		73.0534			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	61.7056		67.3515			
10b	Base for line 10a	58.4539		63.8023			
11	Lesser of 5,7,8,10, 10a	56.8063	102.9392	67.3515	13.6500		240.7470
12/13	Medicaid Adjustment Rate		2.7043	1.7694			
14	Prospective Per Diem 11	56.8063	105.6435	69.1209	13.6500		245.2207
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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257.28

Cross Terrace Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,469,167.00		Total Amount	Per Diem
RS to Start Calcs:	1979/01	Type:	Variable	80% Capital(1):	1,812,809	4.3156
Indexed Asset Value	2,266,011	<60% of Base:	False	20% ROE(2):	453,202	0.3068
FRVS Base Asset:	1,371,112	Interest Rate:	5.3200%	Insurance Cost(3):	27,800	1.7551
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	22,113	1.3960
ROE Factor	0.023130	Amortization Rate:	5.3200%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	147,438	Total FRVS PD:		7.7735

(1) 80% Capital (\$1,812,809) amortized at 5.3200 % for 20 years Principal & Interest of \$147,438 divided by annual available days (37960) divided by Occup. Adj. (0.90) = \$4.3156

(2) 20% ROE (\$453,202) times the ROE factor (0.023130) divided by annual available days (37960) divided by Occup. Adj. (0.90) = \$0.3068

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 104	Effective PBS Limitation	2,964,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	105.6435	105.6435	4.7930	100.8505
Indirect Care	69.1209	69.1209	3.1360	65.9849
Property	13.6500	7.7735	0.3527	7.4208
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.6136
Supplemental Rate				8.1814
Totals	245.2207	239.3442	10.8590	257.2802

Medicaid Trend Adjustment



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257.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1979/01	1,254,768	0.00	5.1272	3.0000	2.1272	104	100.00	1,254,768	2,053,272	
1979/07		0.10	6.3255	3.0000	3.3255	104	100.00	1,258,532	2,139,488	
1980/01		0.10	9.4912	3.0000	6.4912	104	17.90	1,258,532	2,271,464	
1980/07	11,893	0.20	10.3018	3.0000	7.3018	104	17.90	1,270,425	2,357,992	
1981/01	5,372	0.20	11.1259	3.0000	8.1259	104	19.68	1,275,797	2,448,160	
1981/07		0.30	10.7147	3.0000	7.7147	104	19.68	1,275,797	2,511,496	
1982/01	743	0.30	10.3907	3.0000	7.3907	104	26.01	1,281,970	2,578,784	
1982/07		0.40	9.6883	3.0000	6.6883	104	26.01	1,289,245	2,637,960	
1983/04		0.40	9.3172	3.0000	6.3172	104	26.26	1,296,632	2,707,328	
1983/07	889	0.50	10.2750	3.0000	7.2750	104	26.26	1,306,807	2,814,448	
1984/01		0.50	8.5701	3.0000	5.5701	104	29.14	1,317,193	2,850,952	
1984/07	9,491	0.60	7.4880	3.0000	4.4880	104	29.14	1,339,246	2,905,656	
1985/01	1,072	0.60	5.6351	3.0000	2.6351	104	32.23	1,354,444	2,938,936	
1985/10		0.70	3.4873	3.0000	0.4873	104	32.23	1,371,112	2,964,000	
1986/01		0.70	1.3172	1.3172		104	32.23	1,378,520	2,988,648	
1986/07		0.80	0.2974	0.2974		104	40.19	1,380,916	2,982,928	
1987/01		0.80	1.0091	1.0091		104	40.19	1,389,062	3,036,280	
1987/07		0.90	0.9007	0.9007		104	40.19	1,397,290	3,059,992	
1988/01		0.90	0.9007	0.9007		104	40.19	1,405,567	3,084,848	
1988/07		1.00	0.5899	0.5899		104	40.19	1,411,626	3,083,184	
1989/01		1.00	0.5899	0.5899		104	43.25	1,418,174	3,101,384	
1989/07		1.00	0.5899	0.5899		104	43.25	1,424,753	3,122,392	
1990/01		1.00	0.5899	0.5899		104	50.77	1,432,511	3,138,096	
1990/07		1.00	0.5899	0.5899		104	50.77	1,432,511	3,156,608	5
1991/01		1.00	0.5899	0.5899		104	56.75	1,448,807	3,175,120	
1991/07		1.00	1.4932	1.4932		104	58.75	1,470,441	3,222,544	
1992/01		1.00	2.0117	2.0117		104	58.75	1,500,022	3,287,336	
1992/07		1.00	1.8152	1.8152		104	59.82	1,527,250	3,347,032	
1993/01		1.00	1.7710	1.7710		104	59.82	1,554,298	3,406,312	
1993/07		1.00	1.5329	1.5329		104	62.73	1,554,298	3,458,520	5



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257.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/01		1.00	1.6983	1.6983		104	64.88	1,578,124	3,517,280	5
1994/07		1.00	1.5991	1.5991		104	68.53	1,630,589	3,573,544	
1995/01		1.00	1.5812	1.5812		104	68.53	1,656,372	3,630,016	
1995/07		1.00	1.5250	1.5250		104	68.53	1,681,632	3,685,344	
1996/01		1.00	1.7228	1.7228		104	68.53	1,710,603	3,748,888	
1996/07		1.00	1.3294	1.3294		104	68.53	1,733,344	3,798,704	
1997/01		1.00	1.4109	1.4109		104	71.65	1,757,800	3,852,264	
1997/07		1.00	1.0917	1.0917		104	71.65	1,776,990	3,894,280	
1998/01	20,317	1.00	1.1663	1.1663		104	70.30	1,818,032	3,939,728	
1998/07		1.00	1.0794	1.0794		104	70.30	1,837,656	3,982,264	
1999/01		1.00	1.4499	1.4499		104	70.30	1,864,300	4,039,984	
1999/07		0.95	1.2299	1.2299		104	70.16	1,886,082	4,089,696	
2000/01		0.95	1.3356	1.3356		104	69.34	1,910,013	4,144,296	
2000/07		0.90	1.1129	1.1129		104	69.34	1,929,144	4,190,368	
2001/01		0.90	1.2976	1.2976		104	64.58	1,951,673	4,244,760	
2001/07		0.85	0.9615	0.9615		104	64.58	1,967,624	4,285,528	
2002/01	20,230	0.85	1.0301	1.0301		104	66.49	2,005,083	4,329,624	
2002/07		0.80	0.8337	0.8337		104	66.49	2,018,457	4,365,712	
2003/01		0.80	1.3271	1.3271		104	65.23	2,039,887	4,423,640	
2003/07		0.75	1.1664	1.1664		104	65.23	2,057,732	4,475,224	
2004/01		0.75	1.1103	1.1103		104	65.23	2,074,867	4,524,936	
2004/07		0.70	0.8378	0.8378		104	65.23	2,087,036	4,562,896	
2005/01		0.70	0.8595	0.8595		104	65.23	2,099,594	4,602,104	
2005/07		0.65	0.7364	0.7364		104	66.44	2,109,645	4,636,008	
2006/01		0.65	0.9068	0.9068		104	66.44	2,122,079	4,678,024	
2006/07		0.60	0.8133	0.8133		104	69.67	2,132,435	4,716,088	
2007/01		0.60	1.0133	1.0133		104	69.67	2,145,400	4,763,824	
2007/07		0.55	1.1050	1.1050		104	64.67	2,158,440	4,816,448	
2008/01		0.55	0.8556	0.8556		104	64.67	2,168,598	4,857,632	
2008/07		0.50	0.6104	0.6104		104	64.67	2,175,217	4,887,272	



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257.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/01		0.50	1.3268	1.3268		104	64.67	2,189,647	4,952,168	
2009/07		0.45	0.6841	0.6841		104	64.67	2,196,387	4,986,072	
2010/01		0.45	0.8643	0.8643		104	80.73	2,204,929	5,029,128	
2010/07		0.40	0.7107	0.7107		104	80.73	2,211,198	5,064,904	
2011/01		0.40	0.9198	0.9198		104	80.73	2,219,333	5,111,496	
2011/07		0.35	0.9028	0.9028		104	80.73	2,226,346	5,157,672	
2012/01		0.35	0.3865	0.3865		104	80.73	2,229,358	5,177,640	
2012/07		0.30	0.9417	0.9417		104	80.73	2,235,656	5,226,416	
2013/01		0.30	0.4901	0.4901		104	76.02	2,238,942	5,252,000	
2013/07		0.25	0.6196	0.6196		104	73.35	2,242,410	5,284,552	
2014/01		0.25	0.8564	0.8564		104	73.35	2,247,211	5,329,792	
2014/07		0.20	1.2383	1.2383		104	73.35	2,252,777	5,395,832	
2015/01		0.20	0.7571	0.7571		104	73.35	2,256,188	5,436,704	
2015/09		0.15	1.5736	1.5736		104	73.35	2,261,513	5,522,296	
2016/09		0.10	1.9890	1.9890		104	73.35	2,266,011	5,632,120	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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Florida Agency for Health Care Administration
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0102832-00 - 2016/09

269.83

Cross Landings Health and Rehabilitation Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1780 N JEFFERSON ST	12/30/2013-7/31/2014	Number of Beds: 60	Superior: 0
MONTICELLO, FL 32344	Days in CR 214	Maximum: 12,840	Standard: 366
County: Jefferson [33]	First Used : 2013/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 10,698	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,745	Inflation
Current Class North Small	Initial CR? False	Medicaid: 8,023	FY Index: 1.33689974
Class at 1/94: North Small	Medicaid Utilization	74.99533%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	83.31776%	Cost: 1.07977764
Open Date: 05/01/1980	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/01/1980	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 05/01/1980	Low Occupancy Adjustment Factor:	105.36949%	DC Sem Index: 1.30450000
Med # Active Date: 12/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 042138			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	470,308	761,425	655,695	48,780		1,936,208
1a	Audit Adjustments						
2	Cost Per Diem	58.6200	94.9053	81.7269	6.0800		241.3322
3	Cost Per Diem Inflated	63.2966	100.9272	88.2469			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	63.2966	100.9272	88.2469	6.0800		258.5507
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	64.1349		89.4158			
7	Provider Target Rate	67.7026		94.3898			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500		
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507			
10	Target Rate Class Ceiling	59.8766		72.7784			
10a	New Provider Target Limitation	63.2241		76.3996			
10b	Base for line 10a	59.8924		72.3736			
11	Lesser of 5,7,8,10, 10a	59.8766	100.8980	72.7784	6.0800		239.6330
12/13	Medicaid Adjustment Rate		2.8372	2.0465			
14	Prospective Per Diem 11	59.8766	103.7352	74.8249	6.0800		244.5167
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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269.83

Cross Landings Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 04/01/2009		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1980/01	Type:	Fixed	80% Capital(1):	2,305,414	10.2593
Indexed Asset Value	2,881,768	<60% of Base:	False	20% ROE(2):	576,354	0.6764
FRVS Base Asset:	752,956	Interest Rate:	6.5000%	Insurance Cost(3):	13,096	1.2242
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	9,136	0.8540
ROE Factor	0.023130	Amortization Rate:	6.2500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	202,211	Total FRVS PD:		13.0139

(1) 80% Capital (\$2,305,414) amortized at 6.2500 % for 20 years Principal & Interest of \$202,211 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$10.2593

(2) 20% ROE (\$576,354) times the ROE factor (0.023130) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.6764

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	60	Effective PBS Limitation	54,155
			1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	59.8766	59.8766	2.7166	57.1600
Direct Care	103.7352	103.7352	4.7064	99.0288
Indirect Care	74.8249	74.8249	3.3948	71.4301
Property	6.0800	13.0139	0.5904	12.4235
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.6047
Supplemental Rate				8.1814
Totals	244.5167	251.4506	11.4082	269.8285

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1980/01	687,322	0.00	6.1657	3.0000	3.1657	60	89.20	687,322	1,310,460	
1980/07		0.10	6.9764	3.0000	3.9764	60	89.20	689,384	1,360,380	
1981/01		0.10	7.8004	3.0000	4.8004	60	87.65	691,452	1,412,400	
1981/07		0.20	7.3892	3.0000	4.3892	60	87.65	695,601	1,448,940	
1982/01		0.20	7.0652	3.0000	4.0652	60	89.00	699,775	1,487,760	
1982/07		0.30	6.3629	3.0000	3.3629	60	89.00	706,073	1,521,900	
1983/04		0.30	5.9917	3.0000	2.9917	60	93.04	712,428	1,561,920	
1983/07		0.40	6.9495	3.0000	3.9495	60	93.04	720,977	1,623,720	
1984/01		0.40	5.2447	3.0000	2.2447	60	90.80	729,629	1,644,780	
1984/07		0.50	4.1626	3.0000	1.1626	60	90.80	740,573	1,676,340	
1985/01		0.50	2.3097	2.3097		60	55.00	749,126	1,695,540	
1985/10		0.60	0.8522	0.8522		60	55.00	752,956	1,710,000	
1986/01		0.60	0.8299	0.8299		60	55.00	756,705	1,724,220	
1986/07		0.70	0.2974	0.2974		60	55.00	758,280	1,720,920	
1987/01		0.70	1.0091	1.0091		60	55.00	763,636	1,751,700	
1987/07		0.80	0.9007	0.9007		60	92.81	769,139	1,765,380	
1988/01		0.80	0.9007	0.9007		60	55.00	774,681	1,779,720	
1988/07		0.90	0.5899	0.5899		60	55.00	778,794	1,778,760	
1989/01		0.90	0.5899	0.5899		60	92.81	782,929	1,789,260	
1989/07		1.00	0.5899	0.5899		60	92.81	787,547	1,801,380	
1990/01		1.00	0.5899	0.5899		60	91.19	792,193	1,810,440	
1990/07		1.00	0.5899	0.5899		60	91.19	796,866	1,821,120	
1991/01		1.00	0.5899	0.5899		60	92.24	801,567	1,831,800	
1991/07		1.00	1.4932	1.4932		60	92.24	813,536	1,859,160	
1992/01		1.00	2.0117	2.0117		60	95.75	829,902	1,896,540	
1992/07		1.00	1.8152	1.8152		60	95.75	844,966	1,930,980	
1993/01		1.00	1.7710	1.7710		60	93.11	859,930	1,965,180	
1993/07		1.00	1.5329	1.5329		60	93.11	873,112	1,995,300	
1994/01	12,217	1.00	1.6983	1.6983		60	95.55	900,157	2,029,200	
1994/07		1.00	1.5991	1.5991		60	95.55	914,551	2,061,660	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1995/01		1.00	1.5812	1.5812		60	92.46	929,012	2,094,240	
1995/07		1.00	1.5250	1.5250		60	92.46	943,179	2,126,160	
1996/01		1.00	1.7228	1.7228		60	93.90	959,428	2,162,820	
1996/07		1.00	1.3294	1.3294		60	93.90	972,183	2,191,560	
1997/01	40,295	1.00	1.4109	1.4109		60	94.27	1,026,195	2,222,460	
1997/07		1.00	1.0917	1.0917		60	94.27	1,037,398	2,246,700	
1998/01	11,248	1.00	1.1663	1.1663		60	90.25	1,060,745	2,272,920	
1998/07		1.00	1.0794	1.0794		60	90.25	1,072,195	2,297,460	
1999/01	2,520,596	1.00	1.4499	1.4499		60	85.24	2,330,760	2,330,760	8
1999/07		1.00	1.2299	1.2299		60	85.24	2,359,426	2,359,440	
2000/01		1.00	1.3356	1.3356		60	85.24	2,390,938	2,390,940	
2000/07		0.95	1.1129	1.1129		60	85.24	2,416,217	2,417,520	
2001/01		0.95	1.2976	1.2976		60	85.24	2,446,002	2,448,900	
2001/07		0.90	0.9615	0.9615		60	85.24	2,467,170	2,472,420	
2002/01	12,007	0.90	1.0301	1.0301		60	84.89	2,497,860	2,497,860	8
2002/07		0.85	0.8337	0.8337		60	80.89	2,515,560	2,518,680	
2003/01		0.85	1.3271	1.3271		60	80.89	2,543,936	2,552,100	
2003/07		0.80	1.1664	1.1664		60	76.88	2,567,673	2,581,860	
2004/01		0.80	1.1103	1.1103		60	76.88	2,590,479	2,610,540	
2004/07		0.75	0.8378	0.8378		60	76.93	2,606,758	2,632,440	
2005/01		0.75	0.8595	0.8595		60	76.93	2,623,561	2,655,060	
2005/07		0.70	0.7364	0.7364		60	67.14	2,637,085	2,674,620	
2006/01		0.70	0.9068	0.9068		60	67.14	2,653,825	2,698,860	
2006/07		0.65	0.8133	0.8133		60	70.12	2,653,825	2,720,820	5
2007/01		0.65	1.0133	1.0133		60	70.12	2,685,423	2,748,360	
2007/07		0.60	1.1050	1.1050		60	70.12	2,703,227	2,778,720	
2008/01		0.60	0.8556	0.8556		60	69.82	2,717,105	2,802,480	
2008/07	20,477	0.55	0.6104	0.6104		60	68.86	2,746,703	2,819,580	
2009/01		0.55	1.3268	1.3268		60	66.79	2,766,746	2,857,020	
2009/07		0.50	0.6841	0.6841		60	66.79	2,776,211	2,876,580	



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2010/01		0.50	0.8643	0.8643		60	66.79	2,788,210	2,901,420	
2010/07		0.45	0.7107	0.7107		60	66.79	2,797,127	2,922,060	
2011/01		0.45	0.9198	0.9198		60	68.86	2,808,704	2,948,940	
2011/07		0.40	0.9028	0.9028		60	68.86	2,818,846	2,975,580	
2012/01		0.40	0.3865	0.3865		60	68.86	2,823,204	2,987,100	
2012/07		0.35	0.9417	0.9417		60	68.86	2,832,509	3,015,240	
2013/01		0.35	0.4901	0.4901		60	68.86	2,837,367	3,030,000	
2013/07		0.30	0.6196	0.6196		60	75.00	2,842,642	3,048,780	
2014/01		0.30	0.8564	0.8564		60	75.00	2,849,945	3,074,880	
2014/07		0.25	1.2383	1.2383		60	75.00	2,858,768	3,112,980	
2015/01		0.25	0.7571	0.7571		60	75.00	2,864,180	3,136,560	
2015/09		0.20	1.5736	1.5736		60	75.00	2,873,194	3,185,940	
2016/09		0.15	1.9890	1.9890		60	75.00	2,881,768	3,249,300	

Message Code:

- | | |
|---|--|
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 102832073120141230201301052016104334



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Crosswinds Health and Rehabilitation Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
13455 W US HWY 90	12/30/2013-7/31/2014	Number of Beds: 58	Superior: 0
GREENVILLE, FL 32331	Days in CR 214	Maximum: 12,412	Standard: 366
County: Madison [40]	First Used : 2013/07	Max Annualized: 21,170	Conditional: 0
Region: North Area: 2	Last Used: 2016/09	Total Patient: 10,973	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 1,730	Inflation
Current Class North Small	Initial CR? False	Medicaid: 9,041	FY Index: 1.33689974
Class at 1/94: North Small	Medicaid Utilization	82.39315%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	88.40638%	Cost: 1.07977764
Open Date: 06/01/1983	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1983	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 06/01/1983	Low Occupancy Adjustment Factor:	111.80491%	DC Sem Index: 1.30450000
Med # Active Date: 12/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 042140			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	506,929	856,540	605,928	32,457		2,001,854	
1a	Audit Adjustments							
2	Cost Per Diem	56.0700	94.7395	67.0200	3.5900		221.4195	
3	Cost Per Diem Inflated	60.5431	100.7509	72.3667				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	60.5431	100.7509	72.3667	3.5900		237.2507	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.3450		73.3252				
7	Provider Target Rate	64.7575		77.4041				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500			
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507				
10	Target Rate Class Ceiling	59.8766		72.7784				
10a	New Provider Target Limitation	63.1007		75.8234				
10b	Base for line 10a	59.7755		71.8278				
11	Lesser of 5,7,8,10, 10a	59.8766	100.7509	72.3667	3.5900		236.5842	
12/13	Medicaid Adjustment Rate		3.6716	2.6372				
14	Prospective Per Diem 11	59.8766	104.4225	75.0039	3.5900		242.8930	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Crosswinds Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/01/1985	Amount:	3,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1983/04	Type:	Fixed	80% Capital(1):	1,378,609	6.3465
Indexed Asset Value	1,723,261	<60% of Base:	False	20% ROE(2):	344,652	0.4184
FRVS Base Asset:	721,404	Interest Rate:	6.5000%	Insurance Cost(3):	10,518	0.9585
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	10,426	0.9502
ROE Factor	0.023130	Amortization Rate:	6.2500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	120,920	Total FRVS PD:		8.6736

(1) 80% Capital (\$1,378,609) amortized at 6.2500 % for 20 years Principal & Interest of \$120,920 divided by annual available days (21170) divided by Occup. Adj. (0.90) = \$6.3465

(2) 20% ROE (\$344,652) times the ROE factor (0.023130) divided by annual available days (21170) divided by Occup. Adj. (0.90) = \$0.4184

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 58	Effective PBS Limitation	1,653,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	59.8766	59.8766	2.7166	57.1600
Direct Care	104.4225	104.4225	4.7376	99.6849
Indirect Care	75.0039	75.0039	3.4029	71.6010
Property	3.5900	8.6736	0.3935	8.2801
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.1686
Supplemental Rate				8.1814
Totals	242.8930	247.9766	11.2506	267.0760

Medicaid Trend Adjustment



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1983/04	706,245	0.00	2.6288	2.6288		58	95.07	706,245	1,509,856	
1983/07		0.10	3.9578	3.0000	0.9578	58	95.07	708,364	1,569,596	
1984/01	5,214	0.10	2.2530	2.2530		58	94.06	715,174	1,589,954	
1984/07		0.20	1.9179	1.9179		58	94.06	717,917	1,620,462	
1985/01		0.20	1.1471	1.1471		58	94.26	719,564	1,639,022	
1985/10		0.30	0.8522	0.8522		58	94.26	721,404	1,653,000	
1986/01		0.30	0.8299	0.8299		58	94.26	723,200	1,666,746	
1986/07		0.40	0.2974	0.2974		58	94.26	724,061	1,663,556	
1987/01		0.40	1.0091	1.0091		58	94.26	726,983	1,693,310	
1987/07		0.50	0.9007	0.9007		58	89.80	730,257	1,706,534	
1988/01		0.50	0.9007	0.9007		58	89.80	733,546	1,720,396	
1988/07		0.60	0.5899	0.5899		58	89.80	736,142	1,719,468	
1989/01		0.60	0.5899	0.5899		58	89.80	738,747	1,729,618	
1989/07		0.70	0.5899	0.5899		58	89.80	741,797	1,741,334	
1990/01		0.70	0.5899	0.5899		58	90.60	744,860	1,750,092	
1990/07		0.80	0.5899	0.5899		58	90.60	748,375	1,760,416	
1991/01		0.80	0.5899	0.5899		58	89.21	751,907	1,770,740	
1991/07		0.90	1.4932	1.4932		58	89.21	762,012	1,797,188	
1992/01		0.90	2.0117	2.0117		58	94.67	775,808	1,833,322	
1992/07		1.00	1.8152	1.8152		58	94.67	789,890	1,866,614	
1993/01		1.00	1.7710	1.7710		58	97.54	803,879	1,899,674	
1993/07		1.00	1.5329	1.5329		58	97.54	816,202	1,928,790	
1994/01	20,218	1.00	1.6983	1.6983		58	96.95	850,282	1,961,560	
1994/07		1.00	1.5991	1.5991		58	96.95	863,879	1,992,938	
1995/01		1.00	1.5812	1.5812		58	96.69	877,539	2,024,432	
1995/07		1.00	1.5250	1.5250		58	96.69	890,921	2,055,288	
1996/01		1.00	1.7228	1.7228		58	94.00	906,270	2,090,726	
1996/07		1.00	1.3294	1.3294		58	94.00	918,318	2,118,508	
1997/01	10,544	1.00	1.4109	1.4109		58	94.52	941,819	2,148,378	
1997/07		1.00	1.0917	1.0917		58	94.52	952,101	2,171,810	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1998/01	94,487	1.00	1.1663	1.1663		58	95.21	1,057,692	2,197,156	
1998/07		1.00	1.0794	1.0794		58	95.21	1,069,109	2,220,878	
1999/01	24,491	1.00	1.4499	1.4499		58	93.65	1,109,101	2,253,068	
1999/07		1.00	1.2299	1.2299		58	93.65	1,122,742	2,280,792	
2000/01	145,319	1.00	1.3356	1.3356		58	93.65	1,283,056	2,311,242	
2000/07		1.00	1.1129	1.1129		58	93.65	1,297,335	2,336,936	
2001/01		1.00	1.2976	1.2976		58	93.65	1,314,169	2,367,270	
2001/07		1.00	0.9615	0.9615		58	88.43	1,326,805	2,390,006	
2002/01		1.00	1.0301	1.0301		58	88.43	1,326,805	2,414,598	5
2002/07		1.00	0.8337	0.8337		58	93.36	1,351,648	2,434,724	
2003/01		1.00	1.3271	1.3271		58	93.36	1,369,586	2,467,030	
2003/07		0.95	1.1664	1.1664		58	91.76	1,384,762	2,495,798	
2004/01		0.95	1.1103	1.1103		58	91.76	1,399,368	2,523,522	
2004/07		0.90	0.8378	0.8378		58	93.81	1,409,919	2,544,692	
2005/01		0.90	0.8595	0.8595		58	93.81	1,420,826	2,566,558	
2005/07		0.85	0.7364	0.7364		58	93.81	1,429,719	2,585,466	
2006/01		0.85	0.9068	0.9068		58	88.59	1,440,739	2,608,898	
2006/07	62,969	0.80	0.8133	0.8133		58	88.07	1,513,081	2,630,126	
2007/01		0.80	1.0133	1.0133		58	88.07	1,525,346	2,656,748	
2007/07		0.75	1.1050	1.1050		58	88.07	1,537,988	2,686,096	
2008/01	53,180	0.75	0.8556	0.8556		58	84.41	1,601,037	2,709,064	
2008/07		0.70	0.6104	0.6104		58	89.46	1,607,878	2,725,594	
2009/01		0.70	1.3268	1.3268		58	94.82	1,622,812	2,761,786	
2009/07		0.65	0.6841	0.6841		58	94.82	1,630,029	2,780,694	
2010/01		0.65	0.8643	0.8643		58	94.82	1,639,187	2,804,706	
2010/07		0.60	0.7107	0.7107		58	94.82	1,646,176	2,824,658	
2011/01		0.60	0.9198	0.9198		58	86.16	1,655,261	2,850,642	
2011/07		0.55	0.9028	0.9028		58	86.16	1,663,479	2,876,394	
2012/01		0.55	0.3865	0.3865		58	86.16	1,667,016	2,887,530	
2012/07		0.50	0.9417	0.9417		58	86.16	1,674,866	2,914,732	



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267.08

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2013/01		0.50	0.4901	0.4901		58	86.16	1,678,971	2,929,000	
2013/07		0.45	0.6196	0.6196		58	82.39	1,683,652	2,947,154	
2014/01		0.45	0.8564	0.8564		58	82.39	1,690,141	2,972,384	
2014/07		0.40	1.2383	1.2383		58	82.39	1,698,512	3,009,214	
2015/01		0.40	0.7571	0.7571		58	82.39	1,703,655	3,032,008	
2015/09		0.35	1.5736	1.5736		58	82.39	1,713,039	3,079,742	
2016/09		0.30	1.9890	1.9890		58	82.39	1,723,261	3,140,990	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

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ID: 102833073120141230201301052016113234



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0103165-00 - 2016/09

214.81

Astoria Health & Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
701 OVERLOOK DR SE	7/1/2014-6/30/2015	Number of Beds: 120	Superior: 0
WINTER HAVEN, FL 33884-167	Days in CR 365	Maximum: 43,800	Standard: 366
County: Polk [53]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 41,593	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 12,013	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 17,986	FY Index: 1.35966457
Class at 1/94: South Large	Medicaid Utilization	43.24285%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	94.96119%	Cost: 1.06169895
Open Date: 11/04/2010	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 11/04/2010	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24000000
Entered Medicaid 11/04/2010	Low Occupancy Adjustment Factor:	120.09458%	DC Sem Index: 1.30450000
Med # Active Date: 12/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05201613
Previous Med # 023255			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	692,777	1,511,166	1,015,085	801,456		4,020,484	
1a	Audit Adjustments							
2	Cost Per Diem	38.5176	84.0190	56.4375	44.5600		223.5341	
3	Cost Per Diem Inflated	40.8941	88.3893	59.9196				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	40.8941	88.3893	59.9196	44.5600		233.7630	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	113.3413		108.1985				
7	Provider Target Rate	119.6463		114.2174				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	58.5382		68.0424				
10b	Base for line 10a	55.4534		64.4568				
11	Lesser of 5,7,8,10, 10a	40.8941	88.3893	59.9196	13.6500		202.8530	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	40.8941	88.3893	59.9196	13.6500		202.8530	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 103165-00 - 2016/09

214.81

Astoria Health & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	11/04/2010	Amount:	14,250,000.00		Total Amount	Per Diem
RS to Start Calcs:	2010/07	Type:	Variable	80% Capital(1):	4,806,685	9.0452
Indexed Asset Value	6,008,356	<60% of Base:	False	20% ROE(2):	1,201,671	0.6289
FRVS Base Asset:	5,802,840	Interest Rate:	4.2300%	Insurance Cost(3):	15,620	0.3755
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	93,326	2.2438
ROE Factor	0.020630	Amortization Rate:	4.2300%	Home Office(3):	18,485	0.4444
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	356,561	Total FRVS PD:		12.7378

(1) 80% Capital (\$4,806,685) amortized at 4.2300 % for 20 years Principal & Interest of \$356,561 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$9.0452

(2) 20% ROE (\$1,201,671) times the ROE factor (0.020630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6289

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/2010	Current RS PBS:	48,357
Comparison Bed	120	Effective PBS Limitation	54,155
			5,802,840

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	40.8941	40.8941	1.8553	39.0388
Direct Care	88.3893	88.3893	4.0102	84.3791
Indirect Care	59.9196	59.9196	2.7185	57.2011
Property	13.6500	12.7378	0.5779	12.1599
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.8470
Supplemental Rate				8.1814
Totals	202.8530	201.9408	9.1619	214.8073

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2015

0 103165-00 - 2016/09
214.81

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/07	19,718,601	0.00	0.7107	0.7107		120	27.22	5,802,840	5,802,840	1
2011/01	28,259	0.10	0.9198	0.9198		120	27.22	5,833,741	5,897,880	
2011/07		0.10	0.9028	0.9028		120	27.22	5,836,348	5,951,160	
2012/01		0.20	0.3865	0.3865		120	27.22	5,838,581	5,974,200	
2012/07		0.20	0.9417	0.9417		120	27.22	5,844,022	6,030,480	
2013/01		0.30	0.4901	0.4901		120	27.22	5,848,274	6,060,000	
2013/07		0.30	0.6196	0.6196		120	36.76	5,855,540	6,097,560	
2014/01		0.40	0.8564	0.8564		120	36.76	5,868,948	6,149,760	
2014/07		0.40	1.2383	1.2383		120	45.23	5,892,853	6,225,960	
2015/01		0.50	0.7571	0.7571		120	47.67	5,912,190	6,273,120	
2015/09		0.50	1.5736	1.5736		120	47.67	5,952,508	6,371,880	
2016/09		0.60	1.9890	1.9890		120	43.24	6,008,356	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 103165063020150701201410282015073332



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0103177-00 - 2016/09

280.89

Desoto Health and Rehab

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
475 NURSING HOME DR	12/31/2013-6/30/2014	Number of Beds: 45	Superior: 0
ARCADIA, FL 34266	Days in CR 182	Maximum: 8,038	Standard: 366
County: Desoto [14]	First Used : 2013/07	Max Annualized: 16,425	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 6,927	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 2,583	Inflation
Current Class South Small	Initial CR? False	Medicaid: 3,517	FY Index: 1.33439166
Class at 1/94: South Small	Medicaid Utilization	50.77234%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	86.17815%	Cost: 1.08180716
Open Date: 09/01/1980	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/01/1980	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22550000
Entered Medicaid 09/01/1980	Low Occupancy Adjustment Factor:	108.98694%	DC Sem Index: 1.30450000
Med # Active Date: 12/31/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06446348
Previous Med # 316229			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	214,783	369,280	287,824	167,374		1,039,261
1a	Audit Adjustments						
2	Cost Per Diem	61.0699	104.9986	81.8379	47.5900		295.4964
3	Cost Per Diem Inflated	66.0659	111.7672	88.5328			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	66.0659	111.7672	88.5328	47.5900		313.9559
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	66.9440		89.7097			
7	Provider Target Rate	70.6680		94.7001			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	71.0408	115.1428	97.4246	13.6500		
9	Prior Semester: Class Ceiling Target Base	72.3589		85.0807			
10	Target Rate Class Ceiling	75.1765		88.3937			
10a	New Provider Target Limitation	76.7081		93.3354			
10b	Base for line 10a	72.6658		88.4169			
11	Lesser of 5,7,8,10, 10a	66.0659	111.7672	88.3937	13.6500		279.8768
12/13	Medicaid Adjustment Rate		0.0971	0.0768			
14	Prospective Per Diem 11	66.0659	111.8643	88.4705	13.6500		280.0507
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Rate Semester 09/01/2016 through 08/31/2017

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280.89

Desoto Health and Rehab

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 09/01/1986		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,300,000.00		Total Amount	Per Diem
RS to Start Calcs:	1980/07	Type:	Fixed	80% Capital(1):	1,601,908	10.0819
Indexed Asset Value	2,002,385	<60% of Base:	False	20% ROE(2):	400,477	0.6288
FRVS Base Asset:	1,077,566	Interest Rate:	7.0000%	Insurance Cost(3):	32,262	4.6574
Occup Adj Factor	0.9000	Chase Rate:	5.5000%	Taxes Cost(3):	26,990	3.8963
ROE Factor	0.023210	Amortization Rate:	7.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	11,713	0.0000
		Yearly Payment:	149,035	Total FRVS PD:		19.2644

(1) 80% Capital (\$1,601,908) amortized at 7.0000 % for 20 years Principal & Interest of \$149,035 divided by annual available days (16425) divided by Occup. Adj. (0.90) = \$10.0819

(2) 20% ROE (\$400,477) times the ROE factor (0.023210) divided by annual available days (16425) divided by Occup. Adj. (0.90) = \$0.6288

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	66.0659	66.0659	2.9974	63.0685
Direct Care	111.8643	111.8643	5.0752	106.7891
Indirect Care	88.4705	88.4705	4.0139	84.4566
Property	13.6500	19.2644	0.8740	18.3904
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	280.0507	285.6651	12.9605	280.8860

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 6/30/2014

0 103177-00 - 2016/09

280.89

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1980/07	1,012,843	0.00	3.8106	3.0000	0.8106	60	63.16	1,012,843	1,360,380	
1981/01		0.10	4.6347	3.0000	1.6347	60	63.16	1,015,882	1,412,400	
1981/07		0.10	4.2235	3.0000	1.2235	60	63.16	1,018,930	1,448,940	
1982/01		0.20	3.8995	3.0000	0.8995	60	75.10	1,025,044	1,487,760	
1982/07		0.20	3.1971	3.0000	0.1971	60	75.10	1,031,194	1,521,900	
1983/04		0.30	2.8260	2.8260		60	75.10	1,039,936	1,561,920	
1983/07		0.30	3.9578	3.0000	0.9578	60	75.10	1,049,295	1,623,720	
1984/01		0.40	2.2530	2.2530		60	80.53	1,058,751	1,644,780	
1984/07		0.40	1.9179	1.9179		60	80.53	1,066,874	1,676,340	
1985/01		0.50	1.1471	1.1471		60	84.34	1,072,994	1,695,540	
1985/10		0.50	0.8522	0.8522		60	80.12	1,077,566	1,710,000	
1986/01		0.60	0.8299	0.8299		60	80.12	1,082,931	1,724,220	
1986/07		0.60	0.2974	0.2974		60	77.60	1,084,863	1,720,920	
1987/01		0.70	1.0091	1.0091		60	77.60	1,092,526	1,751,700	
1987/07		0.70	0.9007	0.9007		60	80.64	1,099,414	1,765,380	
1988/01		0.80	0.9007	0.9007		60	80.64	1,107,336	1,779,720	
1988/07	617,883	0.80	0.5899	0.5899		81	76.50	1,730,445	2,401,326	
1989/01		0.90	0.5899	0.5899		81	76.50	1,739,632	2,415,501	
1989/07		0.90	0.5899	0.5899		81	76.50	1,748,868	2,431,863	
1990/01		1.00	0.5899	0.5899		81	75.07	1,759,185	2,444,094	
1990/07		1.00	0.5899	0.5899		81	75.07	1,769,562	2,458,512	
1991/01		1.00	0.5899	0.5899		81	74.43	1,780,001	2,472,930	
1991/07		1.00	1.4932	1.4932		81	79.57	1,806,580	2,509,866	
1992/01	515,984	1.00	2.0117	2.0117		98	79.57	2,322,564	3,097,682	5
1992/07		1.00	1.8152	1.8152		98	84.40	2,401,726	3,153,934	
1993/01		1.00	1.7710	1.7710		98	84.40	2,444,261	3,209,794	
1993/07		1.00	1.5329	1.5329		98	84.16	2,481,729	3,258,990	
1994/01		1.00	1.6983	1.6983		98	84.16	2,523,876	3,314,360	
1994/07	74,411	1.00	1.5991	1.5991		118	87.28	2,638,646	4,054,598	
1995/01		1.00	1.5812	1.5812		118	87.28	2,680,368	4,118,672	



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280.89

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1995/07		1.00	1.5250	1.5250		118	82.64	2,721,244	4,181,448	
1996/01		1.00	1.7228	1.7228		118	82.64	2,768,126	4,253,546	
1996/07		1.00	1.3294	1.3294		118	82.00	2,768,126	4,310,068	5
1997/01		1.00	1.4109	1.4109		118	82.00	2,844,500	4,370,838	
1997/07		1.00	1.0917	1.0917		118	80.38	2,844,500	4,418,510	5
1998/01		1.00	1.1663	1.1663		118	80.38	2,909,091	4,470,076	
1998/07	18,254	1.00	1.0794	1.0794		118	86.18	2,927,345	4,518,338	5
1999/01		1.00	1.4499	1.4499		118	86.18	2,958,746	4,583,828	5
1999/07	25,503	1.00	1.2299	1.2299		118	89.13	3,027,148	4,640,232	5
2000/01		1.00	1.3356	1.3356		118	89.13	3,104,989	4,702,182	
2000/07		1.00	1.1129	1.1129		118	84.26	3,139,544	4,754,456	
2001/01		0.95	1.2976	1.2976		118	84.26	3,178,245	4,816,170	
2001/07		0.95	0.9615	0.9615		118	82.86	3,207,275	4,862,426	
2002/01		0.90	1.0301	1.0301		118	82.86	3,237,010	4,912,458	
2002/07		0.90	0.8337	0.8337		118	82.86	3,261,297	4,953,404	
2003/01		0.85	1.3271	1.3271		118	82.86	3,298,084	5,019,130	
2003/07		0.85	1.1664	1.1664		118	82.86	3,330,781	5,077,658	
2004/01		0.80	1.1103	1.1103		118	82.86	3,360,365	5,134,062	
2004/07		0.80	0.8378	0.8378		118	76.02	3,382,886	5,177,132	
2005/01		0.75	0.8595	0.8595		118	76.02	3,404,692	5,221,618	
2005/07		0.75	0.7364	0.7364		118	76.02	3,423,496	5,260,086	
2006/01		0.70	0.9068	0.9068		41	54.52	1,844,221	1,844,221	8
2006/07		0.70	0.8133	0.8133		41	54.52	1,854,629	1,859,227	
2007/01		0.65	1.0133	1.0133		41	54.52	1,866,737	1,878,046	
2007/07		0.65	1.1050	1.1050		41	54.52	1,880,029	1,898,792	
2008/01		0.60	0.8556	0.8556		41	54.52	1,889,597	1,915,028	
2008/07		0.60	0.6104	0.6104		41	54.52	1,896,456	1,926,713	
2009/01		0.55	1.3268	1.3268		41	54.52	1,910,174	1,952,297	
2009/07		0.55	0.6841	0.6841		41	71.42	1,917,362	1,965,663	
2010/01		0.50	0.8643	0.8643		41	71.42	1,925,649	1,982,637	



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280.89

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/07		0.50	0.7107	0.7107		41	71.42	1,932,493	1,996,741	
2011/01		0.45	0.9198	0.9198		41	69.97	1,940,492	2,015,109	
2011/07		0.45	0.9028	0.9028		41	64.41	1,948,376	2,033,313	
2012/01		0.40	0.3865	0.3865		41	64.41	1,951,388	2,041,185	
2012/07		0.40	0.9417	0.9417		41	64.41	1,958,739	2,060,414	
2013/01	6,871	0.35	0.4901	0.4901		41	59.81	1,968,969	2,070,500	
2013/07		0.35	0.6196	0.6196		45	50.77	1,972,911	2,286,585	
2014/01		0.30	0.8564	0.8564		45	50.77	1,977,590	2,306,160	
2014/07		0.30	1.2383	1.2383		45	50.77	1,984,372	2,334,735	
2015/01		0.25	0.7571	0.7571		45	50.77	1,987,840	2,352,420	
2015/09		0.25	1.5736	1.5736		45	50.77	1,995,059	2,389,455	
2016/09		0.20	1.9890	1.9890		45	50.77	2,002,385	2,436,975	

Message Code:

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| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |

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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0103425-00 - 2016/09

204.60

Community Convalescent Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
2202 W OAK AVE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
PLANT CITY, FL 33563	Days in CR 365	Maximum: 43,800	Standard: 366
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 43,052	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 6,719	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 30,249	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	70.26154%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	98.29224%	Cost: 1.04651568
Open Date: 07/01/1976	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1976	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 08/01/1976	Low Occupancy Adjustment Factor:	124.30726%	DC Sem Index: 1.30450000
Med # Active Date: 03/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 281913			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,219,764	2,325,347	1,442,463	1,032,701		6,020,275	
1a	Audit Adjustments							
2	Cost Per Diem	40.3241	76.8735	47.6863	34.1400		199.0239	
3	Cost Per Diem Inflated	42.1998	80.0012	49.9045				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.1998	80.0012	49.9045	34.1400		206.2455	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.8637		59.0692				
7	Provider Target Rate	51.5819		62.3551				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	42.1998	80.0012	49.9045	13.6500		185.7555	
12/13	Medicaid Adjustment Rate		1.8236	1.1375				
14	Prospective Per Diem 11	42.1998	81.8248	51.0420	13.6500		188.7166	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Community Convalescent Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/01/1985		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,432,920.00		Total Amount	Per Diem
RS to Start Calcs:	1976/07	Type:	Variable	80% Capital(1):	2,671,798	7.1875
Indexed Asset Value	3,339,747	<60% of Base:	False	20% ROE(2):	667,949	0.3424
FRVS Base Asset:	1,653,368	Interest Rate:	11.7683%	Insurance Cost(3):	89,325	2.0748
Occup Adj Factor	0.9000	Chase Rate:	6.7500%	Taxes Cost(3):	28,564	0.6635
ROE Factor	0.020210	Amortization Rate:	8.7500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	71,543	0.0000
		Yearly Payment:	283,332	Total FRVS PD:		10.2682

(1) 80% Capital (\$2,671,798) amortized at 8.7500 % for 20 years Principal & Interest of \$283,332 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$7.1875

(2) 20% ROE (\$667,949) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3424

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.1998	42.1998	1.9146	40.2852
Direct Care	81.8248	81.8248	3.7124	78.1124
Indirect Care	51.0420	51.0420	2.3158	48.7262
Property	13.6500	10.2682	0.4659	9.8023
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.4926
Supplemental Rate				8.1814
Totals	188.7166	185.3348	8.4087	204.6001

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1976/07	1,249,889	0.00	3.4853	3.0000	0.4853	120	100.00	1,249,889	1,870,440	
1977/01	15,500	0.10	4.2359	3.0000	1.2359	120	100.00	1,269,139	1,940,640	
1977/07		0.10	6.2934	3.0000	3.2934	120	100.00	1,272,946	2,038,680	
1978/01		0.20	8.0331	3.0000	5.0331	120	100.00	1,280,584	2,135,400	
1978/07		0.20	10.5726	3.0000	7.5726	120	100.00	1,288,268	2,253,600	
1979/01		0.30	12.6998	3.0000	9.6998	120	100.00	1,299,862	2,369,160	
1979/07		0.30	13.8980	3.0000	10.8980	120	100.00	1,311,561	2,468,640	
1980/01		0.40	17.0638	3.0000	14.0638	120	77.67	1,327,300	2,620,920	
1980/07		0.40	17.8744	3.0000	14.8744	120	77.67	1,343,228	2,720,760	
1981/01		0.50	18.6984	3.0000	15.6984	120	81.16	1,363,376	2,824,800	
1981/07		0.50	18.2872	3.0000	15.2872	120	81.16	1,383,827	2,897,880	
1982/01		0.60	17.9632	3.0000	14.9632	120	80.75	1,408,736	2,975,520	
1982/07		0.60	17.2609	3.0000	14.2609	120	100.00	1,434,093	3,043,800	
1983/04		0.70	16.8897	3.0000	13.8897	120	100.00	1,464,209	3,123,840	
1983/07		0.70	17.8475	3.0000	14.8475	120	75.77	1,494,957	3,247,440	
1984/01		0.80	16.1427	3.0000	13.1427	120	95.97	1,530,836	3,289,560	
1984/07		0.80	15.0606	3.0000	12.0606	120	95.97	1,567,576	3,352,680	
1985/01		0.90	13.2077	3.0000	10.2077	120	100.00	1,609,901	3,391,080	
1985/10		0.90	11.0599	3.0000	8.0599	120	100.00	1,653,368	3,420,000	
1986/01		1.00	8.8898	3.0000	5.8898	120	76.61	1,702,969	3,448,440	
1986/07		1.00	6.1872	3.0000	3.1872	120	76.61	1,754,058	3,441,840	
1987/01		1.00	4.1963	3.0000	1.1963	120	82.87	1,806,680	3,503,400	
1987/07		1.00	2.0970	2.0970		120	82.87	1,844,566	3,530,760	
1988/01		1.00	0.9007	0.9007		120	75.81	1,861,180	3,559,440	
1988/07		1.00	0.5899	0.5899		120	75.81	1,872,159	3,557,520	
1989/01		1.00	0.5899	0.5899		120	83.23	1,883,203	3,578,520	
1989/07		1.00	0.5899	0.5899		120	83.23	1,894,312	3,602,760	
1990/01	75,270	1.00	0.5899	0.5899		120	83.28	1,980,757	3,620,880	
1990/07		1.00	0.5899	0.5899		120	83.28	1,992,441	3,642,240	
1991/01		1.00	0.5899	0.5899		120	78.90	2,004,194	3,663,600	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/07		1.00	1.4932	1.4932		120	78.90	2,034,121	3,718,320	
1992/01		1.00	2.0117	2.0117		120	85.25	2,075,041	3,793,080	
1992/07		1.00	1.8152	1.8152		120	85.25	2,112,707	3,861,960	
1993/01	18,237	1.00	1.7710	1.7710		120	79.25	2,168,360	3,930,360	
1993/07		1.00	1.5329	1.5329		120	79.25	2,201,599	3,990,600	
1994/01	32,114	1.00	1.6983	1.6983		120	79.26	2,271,103	4,058,400	
1994/07		1.00	1.5991	1.5991		120	79.26	2,307,420	4,123,320	
1995/01		1.00	1.5812	1.5812		120	74.13	2,343,905	4,188,480	
1995/07		1.00	1.5250	1.5250		120	74.13	2,379,650	4,252,320	
1996/01		1.00	1.7228	1.7228		120	74.28	2,420,647	4,325,640	
1996/07		1.00	1.3294	1.3294		120	74.28	2,452,827	4,383,120	
1997/01		0.95	1.4109	1.4109		120	75.39	2,485,705	4,444,920	
1997/07		0.95	1.0917	1.0917		120	75.39	2,511,484	4,493,400	
1998/01		0.90	1.1663	1.1663		120	86.27	2,537,847	4,545,840	
1998/07		0.90	1.0794	1.0794		120	86.27	2,562,502	4,594,920	
1999/01	32,799	0.85	1.4499	1.4499		120	85.19	2,626,881	4,661,520	
1999/07		0.85	1.2299	1.2299		120	85.19	2,654,342	4,718,880	
2000/01	22,779	0.80	1.3356	1.3356		126	87.76	2,705,483	5,020,974	
2000/07		0.80	1.1129	1.1129		126	87.76	2,729,570	5,076,792	
2001/01	47,814	0.75	1.2976	1.2976		120	83.11	2,803,948	4,897,800	
2001/07		0.75	0.9615	0.9615		120	83.11	2,824,167	4,944,840	
2002/01		0.70	1.0301	1.0301		120	78.16	2,844,532	4,995,720	
2002/07		0.70	0.8337	0.8337		120	78.16	2,861,133	5,037,360	
2003/01		0.65	1.3271	1.3271		120	78.16	2,885,813	5,104,200	
2003/07		0.65	1.1664	1.1664		120	75.89	2,907,693	5,163,720	
2004/01		0.60	1.1103	1.1103		120	75.89	2,927,064	5,221,080	
2004/07		0.60	0.8378	0.8378		120	79.92	2,941,778	5,264,880	
2005/01		0.55	0.8595	0.8595		120	79.92	2,955,684	5,310,120	
2005/07		0.55	0.7364	0.7364		120	79.92	2,967,655	5,349,240	
2006/01		0.50	0.9068	0.9068		120	79.92	2,981,110	5,397,720	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/07		0.50	0.8133	0.8133		120	79.92	2,993,234	5,441,640	
2007/01		0.45	1.0133	1.0133		120	79.92	3,006,883	5,496,720	
2007/07		0.45	1.1050	1.1050		120	76.79	3,021,836	5,557,440	
2008/01		0.40	0.8556	0.8556		120	76.79	3,032,177	5,604,960	
2008/07		0.40	0.6104	0.6104		120	76.67	3,039,582	5,639,160	
2009/01		0.35	1.3268	1.3268		120	76.67	3,053,698	5,714,040	
2009/07		0.35	0.6841	0.6841		120	73.69	3,061,009	5,753,160	
2010/01	24,717	0.30	0.8643	0.8643		120	77.40	3,093,663	5,802,840	
2010/07		0.30	0.7107	0.7107		120	77.40	3,100,259	5,844,120	
2011/01	17,683	0.25	0.9198	0.9198		120	74.11	3,125,073	5,897,880	
2011/07		0.25	0.9028	0.9028		120	74.11	3,132,126	5,951,160	
2012/01		0.20	0.3865	0.3865		120	74.11	3,134,547	5,974,200	
2012/07	61,953	0.20	0.9417	0.9417		120	75.79	3,202,402	6,030,480	
2013/01		0.15	0.4901	0.4901		120	75.79	3,204,756	6,060,000	
2013/07		0.15	0.6196	0.6196		120	73.69	3,207,733	6,097,560	
2014/01	99,611	0.10	0.8564	0.8564		120	74.55	3,310,090	6,149,760	
2014/07		0.10	1.2383	1.2383		120	74.55	3,314,188	6,225,960	
2015/01		0.05	0.7571	0.7571		120	74.55	3,315,444	6,273,120	
2015/09	21,694	0.05	1.5736	1.5736		120	67.96	3,339,747	6,371,880	
2016/09		0.00	1.9890	1.9890		120	70.26	3,339,747	6,498,600	

Message Code:

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252.90

Westwood Nursing & Rehabilitation Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1001 MAR-WALT DRIVE	12/5/2013-8/31/2014	Number of Beds: 60	Superior: 0
FORT WALTON BEACH, FL 32	Days in CR 270	Maximum: 16,200	Standard: 366
County: Okaloosa [46]	First Used : 2013/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 13,755	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,172	Inflation
Current Class North Small	Initial CR? False	Medicaid: 5,436	FY Index: 1.33689974
Class at 1/94: North Small	Medicaid Utilization	39.52017%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	84.90741%	Cost: 1.07977764
Open Date: 07/01/1985	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1985	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22666556
Entered Medicaid 07/01/1985	Low Occupancy Adjustment Factor:	107.37987%	DC Sem Index: 1.30450000
Med # Active Date: 12/05/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06345205
Previous Med # 316075			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	294,914	499,758	394,927	166,940		1,356,539
1a	Audit Adjustments						
2	Cost Per Diem	54.2520	91.9349	72.6503	30.7101		249.5473
3	Cost Per Diem Inflated	58.5801	97.7684	78.4462			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	58.5801	97.7684	78.4462	30.7101		265.5048
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	59.3560		79.4852			
7	Provider Target Rate	62.6579		83.9068			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500		
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507			
10	Target Rate Class Ceiling	59.8766		72.7784			
10a	New Provider Target Limitation	61.5177		76.8471			
10b	Base for line 10a	58.2759		72.7975			
11	Lesser of 5,7,8,10, 10a	58.5801	97.7684	72.7784	13.6500		242.7769
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	58.5801	97.7684	72.7784	13.6500		242.7769
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

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Westwood Nursing & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On Payback FRV

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	19,625,000.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Variable	80% Capital(1):	1,108,101	4.1776
Indexed Asset Value	1,385,126	<60% of Base:	False	20% ROE(2):	277,025	0.3259
FRVS Base Asset:	892,330	Interest Rate:	4.2500%	Insurance Cost(3):	10,374	0.7542
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	20,602	1.4978
ROE Factor	0.023190	Amortization Rate:	4.2500%	Home Office(3):	1,238	0.0900
		Interest Only:	False	Replacement(3&4):	6,302	0.0000
		Yearly Payment:	82,341	Total FRVS PD:		6.8455

(1) 80% Capital (\$1,108,101) amortized at 4.2500 % for 20 years Principal & Interest of \$82,341 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$4.1776

(2) 20% ROE (\$277,025) times the ROE factor (0.023190) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.3259

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.5801	58.5801	2.6577	55.9224
Direct Care	97.7684	97.7684	4.4357	93.3327
Indirect Care	72.7784	72.7784	3.3019	69.4765
Property	13.6500	6.8455	0.6193	13.0307
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				12.9588
Supplemental Rate				8.1814
Totals	242.7769	235.9724	11.0146	252.9025

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/10	892,330	0.00	0.8522	0.8522		60	28.81	892,330	1,710,000	
1986/01		0.10	0.8299	0.8299		60	28.81	892,718	1,724,220	
1986/07		0.10	0.2974	0.2974		60	28.81	892,857	1,720,920	
1987/01		0.20	1.0091	1.0091		60	28.81	893,801	1,751,700	
1987/07		0.20	0.9007	0.9007		60	28.81	894,644	1,765,380	
1988/01		0.30	0.9007	0.9007		60	24.19	894,644	1,779,720	
1988/07		0.30	0.5899	0.5899		60	24.19	894,644	1,778,760	
1989/01		0.40	0.5899	0.5899		60	28.66	895,744	1,789,260	
1989/07		0.40	0.5899	0.5899		60	28.66	896,846	1,801,380	
1990/01		0.50	0.5899	0.5899		60	26.86	898,138	1,810,440	
1990/07		0.50	0.5899	0.5899		60	26.86	899,432	1,821,120	
1991/01		0.60	0.5899	0.5899		60	25.20	900,890	1,831,800	
1991/07		0.60	1.4932	1.4932		60	25.20	904,588	1,859,160	
1992/01	14,234	0.70	2.0117	2.0117		60	23.27	918,822	1,896,540	
1992/07		0.70	1.8152	1.8152		60	23.27	918,822	1,930,980	
1993/01		0.80	1.7710	1.7710		60	26.83	925,172	1,965,180	
1993/07		0.80	1.5329	1.5329		60	26.83	930,706	1,995,300	
1994/01	16,162	0.90	1.6983	1.6983		60	25.36	953,427	2,029,200	
1994/07		0.90	1.5991	1.5991		60	25.36	959,754	2,061,660	
1995/01		1.00	1.5812	1.5812		60	23.73	959,754	2,094,240	
1995/07		1.00	1.5250	1.5250		60	23.73	959,754	2,126,160	
1996/01		1.00	1.7228	1.7228		60	21.17	959,754	2,162,820	
1996/07		1.00	1.3294	1.3294		60	21.17	959,754	2,191,560	
1997/01		1.00	1.4109	1.4109		60	25.92	966,136	2,222,460	
1997/07		1.00	1.0917	1.0917		60	25.92	971,107	2,246,700	
1998/01		1.00	1.1663	1.1663		60	25.92	976,445	2,272,920	
1998/07		1.00	1.0794	1.0794		60	34.40	983,037	2,297,460	
1999/01	856	1.00	1.4499	1.4499		60	34.04	992,714	2,330,760	
1999/07		1.00	1.2299	1.2299		60	34.04	1,000,271	2,359,440	
2000/01	87,811	1.00	1.3356	1.3356		60	39.30	1,097,628	2,390,940	



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0 103475-00 - 2016/09

252.90

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07		1.00	1.1129	1.1129		60	39.30	1,106,357	2,417,520	
2001/01		1.00	1.2976	1.2976		60	39.30	1,116,615	2,448,900	
2001/07		1.00	0.9615	0.9615		60	39.30	1,124,287	2,472,420	
2002/01		1.00	1.0301	1.0301		60	39.30	1,124,287	2,497,860	5
2002/07	27,259	1.00	0.8337	0.8337		60	42.36	1,167,093	2,518,680	
2003/01		1.00	1.3271	1.3271		60	42.36	1,179,022	2,552,100	
2003/07		1.00	1.1664	1.1664		60	41.89	1,189,496	2,581,860	
2004/01		1.00	1.1103	1.1103		60	41.89	1,199,555	2,610,540	
2004/07		1.00	0.8378	0.8378		60	39.32	1,206,740	2,632,440	
2005/01		1.00	0.8595	0.8595		60	39.32	1,214,155	2,655,060	
2005/07		1.00	0.7364	0.7364		60	39.32	1,220,547	2,674,620	
2006/01		0.95	0.9068	0.9068		60	43.89	1,228,938	2,698,860	
2006/07		0.95	0.8133	0.8133		60	43.89	1,236,515	2,720,820	
2007/01		0.90	1.0133	1.0133		60	43.89	1,245,514	2,748,360	
2007/07		0.90	1.1050	1.1050		60	43.89	1,255,399	2,778,720	
2008/01		0.85	0.8556	0.8556		60	43.89	1,262,685	2,802,480	
2008/07		0.85	0.6104	0.6104		60	43.89	1,267,913	2,819,580	
2009/01	14,959	0.80	1.3268	1.3268		60	43.89	1,293,611	2,857,020	
2009/07		0.80	0.6841	0.6841		60	43.89	1,299,261	2,876,580	
2010/01		0.75	0.8643	0.8643		60	33.22	1,304,348	2,901,420	
2010/07		0.75	0.7107	0.7107		60	33.22	1,308,547	2,922,060	
2011/01		0.70	0.9198	0.9198		60	33.11	1,313,619	2,948,940	
2011/07		0.70	0.9028	0.9028		60	33.11	1,318,617	2,975,580	
2012/01		0.65	0.3865	0.3865		60	40.42	1,321,051	2,987,100	
2012/07		0.65	0.9417	0.9417		60	27.86	1,325,147	3,015,240	
2013/01		0.60	0.4901	0.4901		60	27.86	1,327,121	3,030,000	
2013/07	11,666	0.60	0.6196	0.6196		60	39.52	1,342,332	3,048,780	
2014/01	8,611	0.55	0.8564	0.8564		60	39.52	1,350,943	3,074,880	5
2014/07	2,704	0.55	1.2383	1.2383		60	39.52	1,364,824	3,112,980	
2015/01		0.50	0.7571	0.7571		60	39.52	1,368,537	3,136,560	



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252.90

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2015/09		0.50	1.5736	1.5736		60	39.52	1,376,274	3,185,940	
2016/09		0.45	1.9890	1.9890		60	39.52	1,385,126	3,249,300	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0103852-00 - 2016/09

232.57

Ocoee Health Care Center

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Partnership CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1556 MAGUIRE RD	3/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
OCOEE, FL 34761	Days in CR 306	Maximum: 36,720	Standard: 366
County: Orange [48]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 33,573	Total: 366
Control: Proprietary : Partnership	Unaudited	Medicare: 3,343	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 21,994	FY Index: 1.34462269
Class at 1/94: North Large	Medicaid Utilization	65.51098%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	91.42974%	Cost: 1.07357585
Open Date: 08/01/1990	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/01/1990	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23099675
Entered Medicaid 08/16/1990	Low Occupancy Adjustment Factor:	115.62847%	DC Sem Index: 1.30450000
Med # Active Date: 03/01/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05971035
Previous Med # 324159			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	913,091	2,089,817	962,060	480,569		4,445,537
1a	Audit Adjustments						
2	Cost Per Diem	41.5155	95.0176	43.7419	21.8500		202.1250
3	Cost Per Diem Inflated	44.5700	100.6911	46.9602			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	44.5700	100.6911	46.9602	21.8500		214.0713
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	44.3842		52.4510			
7	Provider Target Rate	46.8532		55.3687			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	52.7267		64.8951			
10b	Base for line 10a	49.9482		61.4753			
11	Lesser of 5,7,8,10, 10a	44.5700	100.6911	46.9602	13.6500		205.8713
12/13	Medicaid Adjustment Rate		1.7570	0.8194			
14	Prospective Per Diem 11	44.5700	102.4481	47.7796	13.6500		208.4477
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

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232.57

Ocoee Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/16/1990		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	3,420,145.00		Total Amount	Per Diem
RS to Start Calcs:	1990/07	Type:	Fixed	80% Capital(1):	5,117,426	17.1529
Indexed Asset Value	6,396,783	<60% of Base:	False	20% ROE(2):	1,279,357	0.7302
FRVS Base Asset:	3,620,880	Interest Rate:	12.0000%	Insurance Cost(3):	27,246	0.8115
Occup Adj Factor	0.9000	Chase Rate:	10.5000%	Taxes Cost(3):	71,513	2.1301
ROE Factor	0.022500	Amortization Rate:	12.0000%	Home Office(3):	1,480	0.0441
		Interest Only:	False	Replacement(3&4):	70,991	0.0000
		Yearly Payment:	676,167	Total FRVS PD:		20.8688

(1) 80% Capital (\$5,117,426) amortized at 12.0000 % for 20 years Principal & Interest of \$676,167 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$17.1529

(2) 20% ROE (\$1,279,357) times the ROE factor (0.022500) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.7302

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,174
Comparison Date: 01/01/1990	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,620,880

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.5700	44.5700	2.0221	42.5479
Direct Care	102.4481	102.4481	4.6480	97.8001
Indirect Care	47.7796	47.7796	2.1677	45.6119
Property	13.6500	20.8688	0.9468	19.9220
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.5087
Supplemental Rate				8.1814
Totals	208.4477	215.6665	9.7846	232.5720

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1990/07	5,334,248	0.00	0.5899	0.5899		120	69.01	3,620,880	3,620,880	1
1991/01		0.10	0.5899	0.5899		120	69.01	3,623,016	3,663,600	
1991/07	16,982	0.10	1.4932	1.4932		120	69.01	3,645,407	3,718,320	
1992/01		0.20	2.0117	2.0117		120	69.01	3,660,072	3,793,080	
1992/07		0.20	1.8152	1.8152		120	69.01	3,673,358	3,861,960	
1993/01		0.30	1.7710	1.7710		120	69.01	3,692,875	3,930,360	
1993/07	38,246	0.30	1.5329	1.5329		120	75.75	3,748,105	3,990,600	
1994/01		0.40	1.6983	1.6983		120	75.75	3,773,566	4,058,400	
1994/07		0.40	1.5991	1.5991		120	79.36	3,797,702	4,123,320	
1995/01		0.50	1.5812	1.5812		120	79.36	3,827,727	4,188,480	
1995/07	630,853	0.50	1.5250	1.5250		120	79.23	4,487,766	4,252,320	
1996/01	50,822	0.60	1.7228	1.7228		120	79.71	4,584,978	4,325,640	
1996/07		0.60	1.3294	1.3294		120	79.71	4,584,978	4,383,120	3
1997/01		0.70	1.4109	1.4109		120	79.71	4,584,978	4,444,920	3
1997/07	25,328	0.70	1.0917	1.0917		120	80.68	4,584,978	4,493,400	3
1998/01		0.80	1.1663	1.1663		120	80.68	4,584,978	4,545,840	3
1998/07		0.80	1.0794	1.0794		120	79.58	4,594,920	4,594,920	8
1999/01		0.90	1.4499	1.4499		120	77.57	4,654,879	4,661,520	
1999/07		0.90	1.2299	1.2299		120	77.57	4,706,404	4,718,880	
2000/01		1.00	1.3356	1.3356		120	74.55	4,769,263	4,781,880	
2000/07	28,300	1.00	1.1129	1.1129		120	75.03	4,835,040	4,835,040	8
2001/01		1.00	1.2976	1.2976		120	75.03	4,897,779	4,897,800	
2001/07		1.00	0.9615	0.9615		120	75.03	4,944,840	4,944,840	8
2002/01		1.00	1.0301	1.0301		120	75.03	4,995,720	4,995,720	8
2002/07		1.00	0.8337	0.8337		120	75.03	5,037,360	5,037,360	8
2003/01		1.00	1.3271	1.3271		120	75.03	5,104,200	5,104,200	8
2003/07		1.00	1.1664	1.1664		120	78.37	5,163,720	5,163,720	8
2004/01	29,242	1.00	1.1103	1.1103		120	74.68	5,221,080	5,221,080	8
2004/07		1.00	0.8378	0.8378		120	74.68	5,264,822	5,264,880	
2005/01	28,637	1.00	0.8595	0.8595		120	59.83	5,310,120	5,310,120	8



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232.57

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2005/07		1.00	0.7364	0.7364		120	59.83	5,349,224	5,349,240	
2006/01	12,172	1.00	0.9068	0.9068		120	58.39	5,397,720	5,397,720	8
2006/07	9,242	1.00	0.8133	0.8133		120	58.39	5,441,640	5,441,640	8
2007/01		1.00	1.0133	1.0133		120	58.39	5,496,720	5,496,720	8
2007/07	128,417	1.00	1.1050	1.1050		120	56.44	5,557,440	5,557,440	8
2008/01	58,309	1.00	0.8556	0.8556		120	56.44	5,604,960	5,604,960	8
2008/07	16,049	1.00	0.6104	0.6104		120	56.44	5,639,160	5,639,160	8
2009/01		1.00	1.3268	1.3268		120	56.44	5,713,980	5,714,040	
2009/07		1.00	0.6841	0.6841		120	56.44	5,753,069	5,753,160	
2010/01		1.00	0.8643	0.8643		120	56.44	5,802,793	5,802,840	
2010/07	35,495	1.00	0.7107	0.7107		120	67.08	5,844,120	5,844,120	8
2011/01		0.95	0.9198	0.9198		120	67.08	5,895,186	5,897,880	
2011/07	133,429	0.95	0.9028	0.9028		120	61.67	5,951,160	5,951,160	8
2012/01		0.90	0.3865	0.3865		120	61.67	5,971,864	5,974,200	
2012/07		0.90	0.9417	0.9417		120	61.67	6,022,476	6,030,480	
2013/01	57,585	0.85	0.4901	0.4901		120	58.12	6,060,000	6,060,000	8
2013/07	19,498	0.85	0.6196	0.6196		120	56.16	6,097,560	6,097,560	8
2014/01		0.80	0.8564	0.8564		120	65.51	6,139,334	6,149,760	
2014/07		0.80	1.2383	1.2383		120	65.51	6,200,150	6,225,960	
2015/01		0.75	0.7571	0.7571		120	65.51	6,235,354	6,273,120	
2015/09		0.75	1.5736	1.5736		120	65.51	6,308,944	6,371,880	
2016/09		0.70	1.9890	1.9890		120	65.51	6,396,783	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
3 Index Cost Limitation - January 1996
8 Limited to Current RS Per Bed Standard |
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Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

0103858-00 - 2016/09

255.21

North Campus Rehabilitation and Nursing Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : 501(c)(3) Organization

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
700 N PALMETTO ST	3/1/2014-2/28/2015	Number of Beds: 90	Superior: 0
LEESBURG, FL 34748	Days in CR 365	Maximum: 32,850	Standard: 366
County: Lake [35]	First Used : 2016/09	Max Annualized: 32,850	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 29,564	Total: 366
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 12,766	Inflation
Current Class North Small	Initial CR? False	Medicaid: 12,977	FY Index: 1.34732075
Class at 1/94: North Small	Medicaid Utilization	43.89460%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	89.99696%	Cost: 1.07142598
Open Date: 10/11/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 10/11/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23299675
Entered Medicaid 10/11/1988	Low Occupancy Adjustment Factor:	113.81647%	DC Sem Index: 1.30450000
Med # Active Date: 02/01/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05799143
Previous Med # 031880			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	781,052	1,211,638	1,016,876	573,324		3,582,890
1a	Audit Adjustments						
2	Cost Per Diem	60.1874	93.3681	78.3599	44.1800		276.0954
3	Cost Per Diem Inflated	64.4863	98.7826	83.9568			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	64.4863	98.7826	83.9568	44.1800		291.4057
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	62.7611		84.1538			
7	Provider Target Rate	66.2524		88.8351			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	62.6595	100.8980	75.9871	13.6500		
9	Prior Semester: Class Ceiling Target Base	57.6324		70.0507			
10	Target Rate Class Ceiling	59.8766		72.7784			
10a	New Provider Target Limitation	61.1811		70.0055			
10b	Base for line 10a	57.9571		66.3164			
11	Lesser of 5,7,8,10, 10a	59.8766	98.7826	70.0055	13.6500		242.3147
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	59.8766	98.7826	70.0055	13.6500		242.3147
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Rate Semester 09/01/2016 through 08/31/2017

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255.21

North Campus Rehabilitation and Nursing Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 10/11/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,600,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/07	Type:	Fixed	80% Capital(1):	3,801,811	13.2229
Indexed Asset Value	4,752,264	<60% of Base:	False	20% ROE(2):	950,453	0.7034
FRVS Base Asset:	2,402,622	Interest Rate:	8.3270%	Insurance Cost(3):	102,130	3.4545
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	1,510	0.0511
ROE Factor	0.021880	Amortization Rate:	8.3270%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	9,960	0.0000
		Yearly Payment:	390,935	Total FRVS PD:		17.4319

(1) 80% Capital (\$3,801,811) amortized at 8.3270 % for 20 years Principal & Interest of \$390,935 divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$13.2229

(2) 20% ROE (\$950,453) times the ROE factor (0.021880) divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$0.7034

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1988	Current RS PBS:	29,662
Comparison Bed	81	Effective PBS Limitation	54,155
			2,402,622

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	59.8766	59.8766	2.7166	57.1600
Direct Care	98.7826	98.7826	4.4817	94.3009
Indirect Care	70.0055	70.0055	3.1761	66.8294
Property	13.6500	17.4319	0.7909	16.6410
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				12.0929
Supplemental Rate				8.1814
Totals	242.3147	246.0966	11.1653	255.2056

Medicaid Trend Adjustment



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255.21

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1988/07	5,877,500	0.00	0.5899	0.5899		81	12.73	2,402,622	2,402,622	1
1989/01		0.10	0.5899	0.5899		81	12.73	2,402,622	2,415,501	
1989/07		0.10	0.5899	0.5899		81	12.73	2,402,622	2,431,863	
1990/01		0.20	0.5899	0.5899		81	12.73	2,402,622	2,444,094	
1990/07		0.20	0.5899	0.5899		81	12.73	2,402,622	2,458,512	
1991/01	1,170,897	0.30	0.5899	0.5899		120	40.62	3,576,660	3,663,600	
1991/07		0.30	1.4932	1.4932		120	40.62	3,588,494	3,718,320	
1992/01		0.40	2.0117	2.0117		120	58.16	3,617,371	3,793,080	
1992/07		0.40	1.8152	1.8152		120	58.16	3,643,637	3,861,960	
1993/01		0.50	1.7710	1.7710		120	62.98	3,675,901	3,930,360	
1993/07		0.50	1.5329	1.5329		120	62.98	3,704,077	3,990,600	
1994/01		0.60	1.6983	1.6983		120	62.98	3,741,822	4,058,400	
1994/07		0.60	1.5991	1.5991		120	62.45	3,777,725	4,123,320	
1995/01		0.70	1.5812	1.5812		120	57.55	3,819,537	4,188,480	
1995/07		0.70	1.5250	1.5250		120	57.55	3,860,311	4,252,320	
1996/01		0.80	1.7228	1.7228		120	57.55	3,913,514	4,325,640	
1996/07		0.80	1.3294	1.3294		120	50.65	3,951,842	4,383,120	
1997/01		0.90	1.4109	1.4109		120	43.45	3,991,485	4,444,920	
1997/07		0.90	1.0917	1.0917		120	43.45	4,022,466	4,493,400	
1998/01		1.00	1.1663	1.1663		120	43.45	4,059,528	4,545,840	
1998/07		1.00	1.0794	1.0794		120	51.45	4,100,518	4,594,920	
1999/01		1.00	1.4499	1.4499		120	51.06	4,155,712	4,661,520	
1999/07		1.00	1.2299	1.2299		120	51.06	4,203,162	4,718,880	
2000/01		1.00	1.3356	1.3356		120	51.06	4,255,278	4,781,880	
2000/07		1.00	1.1129	1.1129		120	56.14	4,302,635	4,835,040	
2001/01		1.00	1.2976	1.2976		120	56.14	4,358,466	4,897,800	
2001/07		1.00	0.9615	0.9615		120	58.28	4,400,373	4,944,840	
2002/01		1.00	1.0301	1.0301		120	56.77	4,445,701	4,995,720	
2002/07		1.00	0.8337	0.8337		120	56.77	4,482,765	5,037,360	
2003/01		1.00	1.3271	1.3271		120	56.77	4,482,765	5,104,200	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2003/07		1.00	1.1664	1.1664		120	56.77	4,595,237	5,163,720	
2004/01		1.00	1.1103	1.1103		120	56.77	4,646,258	5,221,080	
2004/07		1.00	0.8378	0.8378		120	56.77	4,685,184	5,264,880	
2005/01		1.00	0.8595	0.8595		120	56.77	4,725,453	5,310,120	
2005/07		1.00	0.7364	0.7364		120	56.77	4,760,251	5,349,240	
2006/01		1.00	0.9068	0.9068		120	56.77	4,803,417	5,397,720	
2006/07	17,841	1.00	0.8133	0.8133		120	48.81	4,855,927	5,441,640	
2007/01		1.00	1.0133	1.0133		120	48.81	4,899,594	5,496,720	
2007/07	60,451	1.00	1.1050	1.1050		120	48.31	5,007,600	5,557,440	
2008/01		1.00	0.8556	0.8556		120	48.31	5,045,234	5,604,960	
2008/07	152,832	1.00	0.6104	0.6104		120	47.35	5,224,579	5,639,160	
2009/01		0.95	1.3268	1.3268		120	47.35	5,281,275	5,714,040	
2009/07		0.95	0.6841	0.6841		120	47.35	5,310,824	5,753,160	
2010/01		0.90	0.8643	0.8643		120	47.35	5,346,391	5,802,840	
2010/07		0.90	0.7107	0.7107		120	47.35	5,375,830	5,844,120	
2011/01		0.85	0.9198	0.9198		120	55.54	5,417,858	5,897,880	
2011/07		0.85	0.9028	0.9028		120	55.54	5,459,435	5,951,160	
2012/01		0.80	0.3865	0.3865		120	55.54	5,476,316	5,974,200	
2012/07		0.80	0.9417	0.9417		120	55.54	5,517,575	6,030,480	
2013/01		0.75	0.4901	0.4901		120	55.54	5,537,858	6,060,000	
2013/07		0.75	0.6196	0.6196		120	55.54	5,563,592	6,097,560	
2014/01	19,371	0.70	0.8564	0.8564		90	53.60	4,612,320	4,612,320	8
2014/07		0.70	1.2383	1.2383		90	47.31	4,646,710	4,669,470	
2015/01		0.65	0.7571	0.7571		90	47.31	4,666,379	4,704,840	
2015/09		0.65	1.5736	1.5736		90	47.31	4,707,434	4,778,910	
2016/09		0.60	1.9890	1.9890		90	43.89	4,752,264	4,873,950	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 5 | Uncorrected Licensure Deficiency |
| 8 | Limited to Current RS Per Bed Standard |



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Rehabilitation Center at Park Place

Type of Cost Report: Cost Settled Interim CHOW Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1717 W AVERY ST	4/1/2014-9/30/2014	Number of Beds: 118	Superior: 0
PENSACOLA, FL 32501	Days in CR 183	Maximum: 21,594	Standard: 366
County: Escambia [17]	First Used : 2014/01	Max Annualized: 43,070	Conditional: 0
Region: North Area: 1	Last Used: 2016/09	Total Patient: 20,060	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 2,239	Inflation
Current Class North Large	Initial CR? False	Medicaid: 16,392	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	81.71486%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.89617%	Cost: 1.07573004
Open Date: 05/01/1975	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/01/1975	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 03/01/1984	Low Occupancy Adjustment Factor:	117.48302%	DC Sem Index: 1.30450000
Med # Active Date: 04/01/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 224243			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	762,158	1,558,700	996,821	298,498		3,616,177
1a	Audit Adjustments						
2	Cost Per Diem	46.4957	95.0891	60.8114	18.2100		220.6062
3	Cost Per Diem Inflated	50.0168	100.9306	65.4166			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.0168	100.9306	65.4166	18.2100		234.5740
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	50.6747		66.2769			
7	Provider Target Rate	53.4936		69.9638			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675			
10	Target Rate Class Ceiling	55.9464		66.1467			
10a	New Provider Target Limitation	54.2292		66.4356			
10b	Base for line 10a	51.3715		62.9347			
11	Lesser of 5,7,8,10, 10a	50.0168	100.9306	65.4166	13.6500		230.0140
12/13	Medicaid Adjustment Rate		3.6011	2.3340			
14	Prospective Per Diem 11	50.0168	104.5317	67.7506	13.6500		235.9491
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Rehabilitation Center at Park Place

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/30/1987		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,000,000.00		Total Amount	Per Diem
RS to Start Calcs:	1975/01	Type:	Variable	80% Capital(1):	1,921,688	4.0087
Indexed Asset Value	2,402,110	<60% of Base:	False	20% ROE(2):	480,422	0.2841
FRVS Base Asset:	1,100,592	Interest Rate:	7.0800%	Insurance Cost(3):	12,001	0.5983
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	20,937	1.0437
ROE Factor	0.022920	Amortization Rate:	5.2500%	Home Office(3):	8,312	0.4144
		Interest Only:	False	Replacement(3&4):	16,022	0.0000
		Yearly Payment:	155,390	Total FRVS PD:		6.3492

(1) 80% Capital (\$1,921,688) amortized at 5.2500 % for 20 years Principal & Interest of \$155,390 divided by annual available days (43070) divided by Occup. Adj. (0.90) = \$4.0087

(2) 20% ROE (\$480,422) times the ROE factor (0.022920) divided by annual available days (43070) divided by Occup. Adj. (0.90) = \$0.2841

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 118	Effective PBS Limitation	3,363,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.0168	50.0168	2.2692	47.7476
Direct Care	104.5317	104.5317	4.7426	99.7891
Indirect Care	67.7506	67.7506	3.0738	64.6768
Property	13.6500	6.3492	0.2881	6.0611
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.4913
Supplemental Rate				8.1814
Totals	235.9491	228.6483	10.3737	247.9473

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1975/01	561,359	0.00	3.0905	3.0000	0.0905	118	100.00	561,359	1,641,498	
1975/07		0.10	4.1539	3.0000	1.1539	118	100.00	563,043	1,708,286	
1976/01	10,100	0.10	5.1984	3.0000	2.1984	118	100.00	574,832	1,777,316	
1976/07		0.20	5.6836	3.0000	2.6836	118	100.00	578,281	1,839,266	
1977/01	2,956	0.20	6.4342	3.0000	3.4342	118	100.00	584,707	1,908,296	
1977/07		0.30	8.4918	3.0000	5.4918	118	100.00	589,969	2,004,702	
1978/01	7,944	0.30	10.2315	3.0000	7.2315	118	100.00	603,223	2,099,810	
1978/07		0.40	12.7709	3.0000	9.7709	118	100.00	610,462	2,216,040	
1979/01		0.40	14.8982	3.0000	11.8982	118	100.00	617,788	2,329,674	
1979/07		0.50	16.0964	3.0000	13.0964	118	100.00	627,055	2,427,496	
1980/01		0.50	19.2621	3.0000	16.2621	118	85.59	636,461	2,577,238	
1980/07		0.60	20.0727	3.0000	17.0727	118	85.59	647,917	2,675,414	
1981/01		0.60	20.8968	3.0000	17.8968	118	82.94	659,580	2,777,720	
1981/07	20,000	0.70	20.4856	3.0000	17.4856	118	82.94	693,431	2,849,582	
1982/01		0.70	20.1616	3.0000	17.1616	118	86.36	707,993	2,925,928	
1982/07		0.80	19.4593	3.0000	16.4593	118	86.36	724,985	2,993,070	
1983/04		0.80	19.0881	3.0000	16.0881	118	88.23	742,385	3,071,776	
1983/07		0.90	20.0459	3.0000	17.0459	118	88.23	762,429	3,193,316	
1984/01	189,374	0.90	18.3411	3.0000	15.3411	118	84.77	972,389	3,234,734	
1984/07	9,890	1.00	17.2590	3.0000	14.2590	118	84.77	1,011,451	3,296,802	
1985/01	12,763	1.00	15.4061	3.0000	12.4061	118	84.77	1,054,558	3,334,562	
1985/10	14,397	1.00	13.2583	3.0000	10.2583	118	84.77	1,100,592	3,363,000	
1986/01		1.00	11.0882	3.0000	8.0882	118	84.77	1,133,610	3,390,966	
1986/07		1.00	8.3856	3.0000	5.3856	118	84.77	1,167,618	3,384,476	
1987/01	17,512	1.00	6.3947	3.0000	3.3947	118	84.80	1,220,159	3,445,010	
1987/07		1.00	4.2954	3.0000	1.2954	118	84.80	1,256,764	3,471,914	
1988/01		1.00	2.1961	2.1961		118	82.82	1,284,364	3,500,116	
1988/07		1.00	0.5899	0.5899		118	82.82	1,291,940	3,498,228	
1989/01		1.00	0.5899	0.5899		118	81.17	1,299,561	3,518,878	
1989/07		1.00	0.5899	0.5899		118	81.17	1,307,227	3,542,714	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1990/01	49,723	1.00	0.5899	0.5899		118	70.69	1,364,661	3,560,532	
1990/07		1.00	0.5899	0.5899		118	70.69	1,372,711	3,581,536	
1991/01	47,870	1.00	0.5899	0.5899		118	59.65	1,428,679	3,602,540	
1991/07		1.00	1.4932	1.4932		118	59.65	1,450,012	3,656,348	
1992/01		1.00	2.0117	2.0117		118	75.41	1,479,182	3,729,862	
1992/07		1.00	1.8152	1.8152		118	75.41	1,506,032	3,797,594	
1993/01	30,949	1.00	1.7710	1.7710		118	76.71	1,563,653	3,864,854	
1993/07		1.00	1.5329	1.5329		118	76.71	1,587,622	3,924,090	
1994/01	41,100	1.00	1.6983	1.6983		118	74.20	1,655,685	3,990,760	
1994/07		1.00	1.5991	1.5991		118	74.20	1,682,161	4,054,598	
1995/01	227,395	1.00	1.5812	1.5812		118	75.11	1,936,154	4,118,672	
1995/07		0.95	1.5250	1.5250		118	75.11	1,964,205	4,181,448	
1996/01		0.95	1.7228	1.7228		118	73.38	1,996,353	4,253,546	
1996/07		0.90	1.3294	1.3294		118	73.38	2,020,239	4,310,068	
1997/01		0.90	1.4109	1.4109		118	78.24	2,045,892	4,370,838	
1997/07		0.85	1.0917	1.0917		118	78.23	2,064,876	4,418,510	
1998/01		0.85	1.1663	1.1663		118	78.23	2,085,347	4,470,076	
1998/07		0.80	1.0794	1.0794		118	64.57	2,103,354	4,518,338	
1999/01		0.80	1.4499	1.4499		118	64.57	2,127,751	4,583,828	
1999/07		0.75	1.2299	1.2299		118	64.57	2,127,751	4,640,232	5
2000/01		0.75	1.3356	1.3356		118	76.90	2,168,887	4,702,182	
2000/07		0.70	1.1129	1.1129		118	76.90	2,185,783	4,754,456	
2001/01		0.70	1.2976	1.2976		118	76.90	2,205,636	4,816,170	
2001/07		0.65	0.9615	0.9615		118	76.90	2,219,421	4,862,426	
2002/01		0.65	1.0301	1.0301		118	76.90	2,234,282	4,912,458	
2002/07		0.60	0.8337	0.8337		118	76.47	2,245,458	4,953,404	
2003/01		0.60	1.3271	1.3271		118	75.31	2,263,339	5,019,130	
2003/07		0.55	1.1664	1.1664		118	75.31	2,263,339	5,077,658	5
2004/01		0.55	1.1103	1.1103		118	75.77	2,291,769	5,134,062	
2004/07		0.50	0.8378	0.8378		118	75.77	2,301,369	5,177,132	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2005/01		0.50	0.8595	0.8595		118	80.02	2,311,260	5,221,618	
2005/07		0.45	0.7364	0.7364		118	80.02	2,318,920	5,260,086	
2006/01		0.45	0.9068	0.9068		118	80.02	2,328,384	5,307,758	
2006/07		0.40	0.8133	0.8133		118	77.32	2,335,958	5,350,946	
2007/01		0.40	1.0133	1.0133		118	75.72	2,345,426	5,405,108	
2007/07		0.35	1.1050	1.1050		118	75.72	2,354,498	5,464,816	
2008/01		0.35	0.8556	0.8556		118	75.72	2,361,550	5,511,544	
2008/07		0.30	0.6104	0.6104		118	76.24	2,365,874	5,545,174	
2009/01		0.30	1.3268	1.3268		118	73.38	2,375,290	5,618,806	
2009/07		0.25	0.6841	0.6841		118	73.38	2,379,352	5,657,274	
2010/01		0.25	0.8643	0.8643		118	73.38	2,384,494	5,706,126	
2010/07		0.20	0.7107	0.7107		118	74.29	2,387,882	5,746,718	
2011/01		0.20	0.9198	0.9198		118	79.31	2,387,882	5,799,582	5
2011/07		0.15	0.9028	0.9028		118	79.31	2,395,515	5,851,974	
2012/01		0.15	0.3865	0.3865		118	83.27	2,396,904	5,874,630	
2012/07		0.10	0.9417	0.9417		118	83.27	2,399,162	5,929,972	
2013/01		0.10	0.4901	0.4901		118	83.27	2,400,338	5,959,000	
2013/07		0.05	0.6196	0.6196		118	81.61	2,401,082	5,995,934	
2014/01		0.05	0.8564	0.8564		118	81.71	2,402,110	6,047,264	
2014/07		0.00	1.2383	1.2383		118	81.71	2,402,110	6,122,194	
2015/01		0.00	0.7571	0.7571		118	81.71	2,402,110	6,168,568	
2015/09		0.00	1.5736	1.5736		118	81.71	2,402,110	6,265,682	
2016/09		0.00	1.9890	1.9890		118	81.71	2,402,110	6,390,290	

Message Code:

5 Uncorrected Licensure Deficiency

2Z0S4

Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 104875093020140401201403182015154529



Florida Agency for Health Care Administration
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227.79

The Terrace of Jacksonville

Type of Cost Report: Interim Change of Ownership - Budget Type of Cost: Estimated Type of Rate: Interim

Type of Ownership: Proprietary : Partnership

CHOW Status based on this Cost Report: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
10680 OLD ST AUGUSTINE RD JACKSONVILLE, FL 32257	5/1/2014-4/30/2015	Number of Beds: 180	Superior: 0
County: Duval [16]	Days in CR 365	Maximum: 65,700	Standard: 366
Region: North Area: 4	First Used : 2014/01	Max Annualized: 65,700	Conditional: 0
Control: Proprietary : Partnership	Last Used: 2016/09	Total Patient: 61,947	Total: 366
Current Class North Large	Unaudited	Medicare: 14,034	Inflation
Class at 1/94: North Large	Initial CR? False	Medicaid: 33,811	FY Index: 1.35323005
Operating Ex > 18 months	Medicaid Utilization	54.58053%	Semester Index: 1.44355445
Open Date: 11/01/1982	Occupancy:	94.28767%	Cost: 1.00000000
Acquired Date: 11/01/1982	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 11/01/1982	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.23666442
Med # Active Date: 05/01/2014	Low Occupancy Adjustment Factor:	119.24280%	DC Sem Index: 1.30450000
Previous Med # 312371	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,600,230	2,860,419	1,880,904	1,061,327		7,402,880	
1a	Audit Adjustments							
2	Cost Per Diem	47.3287	84.6002	55.6299	31.3900		218.9488	
3	Cost Per Diem Inflated	47.3287	84.6002	55.6299				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.3287	84.6002	55.6299	31.3900		218.9488	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	57.1074		66.2567				
10b	Base for line 10a	54.0980		62.7652				
11	Lesser of 5,7,8,10, 10a	47.3287	84.6002	55.6299	13.6500		201.2088	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	47.3287	84.6002	55.6299	13.6500		201.2088	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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The Terrace of Jacksonville

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,188,421.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	7,199,309	18.3810
Indexed Asset Value	8,999,136	<60% of Base:	False	20% ROE(2):	1,799,827	0.6976
FRVS Base Asset:	3,420,000	Interest Rate:	15.1200%	Insurance Cost(3):	117,328	1.8940
Occup Adj Factor	0.9000	Chase Rate:	11.2000%	Taxes Cost(3):	87,062	1.4054
ROE Factor	0.022920	Amortization Rate:	14.2000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	1,086,871	Total FRVS PD:		22.3780

(1) 80% Capital (\$7,199,309) amortized at 14.2000 % for 20 years Principal & Interest of \$1,086,871 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$18.3810

(2) 20% ROE (\$1,799,827) times the ROE factor (0.022920) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.6976

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	28,500
Comparison Date:	07/01/1985	Current RS PBS:	54,155
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.3287	47.3287	2.1473	45.1814
Direct Care	84.6002	84.6002	3.8383	80.7619
Indirect Care	55.6299	55.6299	2.5239	53.1060
Property	13.6500	22.3780	1.0153	21.3627
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1952
Supplemental Rate				8.1814
Totals	201.2088	209.9368	9.5248	227.7886

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1982/07	3,394,737	0.00	2.2977	2.2977		120	49.23	3,394,737	3,043,800	
1983/04	17,334	0.10	2.6288	2.6288		120	41.94	3,418,877	3,123,840	
1983/07		0.10	3.9578	3.0000	0.9578	120	41.94	3,426,698	3,247,440	
1984/01	1,500	0.20	2.2530	2.2530		120	52.19	3,442,850	3,289,560	
1984/07		0.20	1.9179	1.9179		120	52.19	3,455,382	3,352,680	
1985/01	4,420	0.30	1.1471	1.1471		120	53.57	3,471,383	3,391,080	
1985/10		0.30	0.8522	0.8522		120	86.31	3,420,000	3,420,000	1
1986/01		0.40	0.8299	0.8299		120	52.20	3,430,776	3,448,440	
1986/07		0.40	0.2974	0.2974		120	52.20	3,434,651	3,441,840	
1987/01		0.50	1.0091	1.0091		120	53.35	3,451,462	3,503,400	
1987/07		0.50	0.9007	0.9007		120	61.24	3,467,007	3,530,760	
1988/01		0.60	0.9007	0.9007		120	61.24	3,485,743	3,559,440	
1988/07		0.60	0.5899	0.5899		120	62.11	3,498,079	3,557,520	
1989/01		0.70	0.5899	0.5899		120	62.11	3,512,523	3,578,520	
1989/07		0.70	0.5899	0.5899		120	61.41	3,527,026	3,602,760	
1990/01		0.80	0.5899	0.5899		120	61.41	3,543,670	3,620,880	
1990/07		0.80	0.5899	0.5899		120	61.41	3,560,393	3,642,240	
1991/01		0.90	0.5899	0.5899		120	62.20	3,579,295	3,663,600	
1991/07		0.90	1.4932	1.4932		120	62.20	3,627,397	3,718,320	
1992/01		1.00	2.0117	2.0117		120	61.71	3,700,369	3,793,080	
1992/07		1.00	1.8152	1.8152		120	68.43	3,767,538	3,861,960	
1993/01		1.00	1.7710	1.7710		120	68.43	3,834,261	3,930,360	
1993/07	49,360	1.00	1.5329	1.5329		120	76.02	3,942,396	3,990,600	
1994/01		1.00	1.6983	1.6983		120	76.02	4,009,350	4,058,400	
1994/07	76,593	1.00	1.5991	1.5991		120	76.89	4,150,057	4,123,320	
1995/01		1.00	1.5812	1.5812		120	76.89	4,215,678	4,188,480	
1995/07		1.00	1.5250	1.5250		120	76.89	4,279,967	4,252,320	
1996/01	17,720	1.00	1.7228	1.7228		120	78.82	4,371,422	4,325,640	
1996/07	2,129,717	1.00	1.3294	1.3294		180	78.61	6,559,253	6,574,680	
1997/01		1.00	1.4109	1.4109		180	78.61	6,559,253	6,667,380	5



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/07		1.00	1.0917	1.0917		180	72.72	6,724,416	6,740,100	
1998/01		1.00	1.1663	1.1663		180	72.72	6,802,843	6,818,760	
1998/07		1.00	1.0794	1.0794		180	75.09	6,876,273	6,892,380	
1999/01		1.00	1.4499	1.4499		180	75.09	6,975,972	6,992,280	
1999/07		1.00	1.2299	1.2299		180	75.09	7,061,769	7,078,320	
2000/01		1.00	1.3356	1.3356		180	75.09	7,156,086	7,172,820	
2000/07		1.00	1.1129	1.1129		180	75.09	7,235,726	7,252,560	
2001/01		1.00	1.2976	1.2976		180	83.02	7,329,617	7,346,700	
2001/07		1.00	0.9615	0.9615		180	83.02	7,400,091	7,417,260	
2002/01		1.00	1.0301	1.0301		180	79.06	7,476,319	7,493,580	
2002/07		1.00	0.8337	0.8337		180	76.00	7,538,649	7,556,040	
2003/01		0.95	1.3271	1.3271		180	76.00	7,633,689	7,656,300	
2003/07		0.95	1.1664	1.1664		180	75.54	7,718,278	7,745,580	
2004/01		0.90	1.1103	1.1103		180	75.54	7,795,407	7,831,620	
2004/07		0.90	0.8378	0.8378		180	74.48	7,854,184	7,897,320	
2005/01		0.85	0.8595	0.8595		180	74.48	7,911,567	7,965,180	
2005/07		0.85	0.7364	0.7364		180	66.59	7,961,085	8,023,860	
2006/01		0.80	0.9068	0.9068		180	66.59	8,018,835	8,096,580	
2006/07		0.80	0.8133	0.8133		180	66.59	8,071,006	8,162,460	
2007/01		0.75	1.0133	1.0133		180	66.59	8,132,346	8,245,080	
2007/07		0.75	1.1050	1.1050		180	66.59	8,199,747	8,336,160	
2008/01		0.70	0.8556	0.8556		180	66.59	8,248,855	8,407,440	
2008/07		0.70	0.6104	0.6104		180	63.82	8,284,102	8,458,740	
2009/01		0.65	1.3268	1.3268		180	63.82	8,355,544	8,571,060	
2009/07	53,600	0.65	0.6841	0.6841		180	63.08	8,446,301	8,629,740	
2010/01		0.60	0.8643	0.8643		180	59.49	8,490,104	8,704,260	
2010/07		0.60	0.7107	0.7107		180	59.49	8,526,306	8,766,180	
2011/01	32,920	0.55	0.9198	0.9198		180	58.47	8,602,361	8,846,820	
2011/07		0.55	0.9028	0.9028		180	58.47	8,645,072	8,926,740	
2012/01		0.50	0.3865	0.3865		180	58.65	8,661,783	8,961,300	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07		0.50	0.9417	0.9417		180	58.65	8,702,571	9,045,720	
2013/01	54,636	0.45	0.4901	0.4901		180	56.78	8,776,396	9,090,000	
2013/07		0.45	0.6196	0.6196		180	56.78	8,800,865	9,146,340	
2014/01		0.40	0.8564	0.8564		180	54.58	8,830,787	9,224,640	
2014/07		0.40	1.2383	1.2383		180	54.58	8,874,192	9,338,940	
2015/01		0.35	0.7571	0.7571		180	54.58	8,897,529	9,409,680	
2015/09		0.35	1.5736	1.5736		180	54.58	8,946,162	9,557,820	
2016/09		0.30	1.9890	1.9890		180	54.58	8,999,136	9,747,900	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

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Viera Health & Rehabilitation Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
8050 SPYGLASS HILL RD	1/1/2015-12/31/2015	Number of Beds: 114	Superior: 0
VIERA, FL 32940	Days in CR 365	Maximum: 41,610	Standard: 366
County: Brevard [5]	First Used : 2016/09	Max Annualized: 41,610	Conditional: 0
Region: Central Area: 7	Last Used: 2016/09	Total Patient: 37,683	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 15,078	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 12,194	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	32.35942%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	90.56236%	Cost: 1.04651568
Open Date: 05/30/1995	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 05/30/1995	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 05/30/1995	Low Occupancy Adjustment Factor:	114.53152%	DC Sem Index: 1.30450000
Med # Active Date: 06/01/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 028602			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	685,529	1,189,878	675,898	420,815	38,192	3,010,312	
1a	Audit Adjustments							
2	Cost Per Diem	56.2186	97.5790	55.4287	34.5100	3.1320	246.8683	
3	Cost Per Diem Inflated	58.8336	101.5491	58.0070				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	58.8336	101.5491	58.0070	34.5100	3.1320	256.0317	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.5900		61.5554				
7	Provider Target Rate	59.7380		64.9796				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	60.6915		65.7757				
10b	Base for line 10a	57.4933		62.3095				
11	Lesser of 5,7,8,10, 10a	56.8063	101.5491	58.0070	13.6500	3.1320	233.1444	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	56.8063	101.5491	58.0070	13.6500	3.1320	233.1444	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Viera Health & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 05/30/1995		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	10,900,000.00		Total Amount	Per Diem
RS to Start Calcs:	1995/01	Type:	Variable	80% Capital(1):	4,022,877	8.2601
Indexed Asset Value	5,028,596	<60% of Base:	False	20% ROE(2):	1,005,719	0.5428
FRVS Base Asset:	3,917,154	Interest Rate:	4.6500%	Insurance Cost(3):	86,167	2.2866
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	93,174	2.4726
ROE Factor	0.020210	Amortization Rate:	4.6500%	Home Office(3):	25,379	0.6735
		Interest Only:	False	Replacement(3&4):	304,144	0.0000
		Yearly Payment:	309,331	Total FRVS PD:		14.2356

(1) 80% Capital (\$4,022,877) amortized at 4.6500 % for 20 years Principal & Interest of \$309,331 divided by annual available days (41610) divided by Occup. Adj. (0.90) = \$8.2601

(2) 20% ROE (\$1,005,719) times the ROE factor (0.020210) divided by annual available days (41610) divided by Occup. Adj. (0.90) = \$0.5428

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1994	Current RS PBS:	34,361
Comparison Bed	114	Effective PBS Limitation	54,155
			3,917,154

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	101.5491	101.5491	4.6072	96.9419
Indirect Care	58.0070	58.0070	2.6317	55.3753
Property	13.6500	14.2356	0.6459	13.5897
ROE	3.1320	3.1220	0.1416	2.9804
ROE Adjustment	-3.1220	-3.1220	-0.1416	-2.9804
Quality Assess-Medicaid Share				13.1188
Supplemental Rate				8.1814
Totals	230.0224	230.5980	10.4621	241.4361

Medicaid Trend Adjustment



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241.44

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1995/01	6,549,825	0.00	1.5812	1.5812		114	32.64	3,917,154	3,917,154	1
1995/07		0.10	1.5250	1.5250		114	32.64	3,920,699	4,039,704	
1996/01		0.10	1.7228	1.7228		114	32.64	3,924,708	4,109,358	
1996/07		0.20	1.3294	1.3294		114	32.64	3,930,901	4,163,964	
1997/01		0.20	1.4109	1.4109		114	32.64	3,937,484	4,222,674	
1997/07		0.30	1.0917	1.0917		114	32.64	3,945,137	4,268,730	
1998/01		0.30	1.1663	1.1663		114	32.64	3,953,329	4,318,548	
1998/07		0.40	1.0794	1.0794		114	42.61	3,966,554	4,365,174	
1999/01		0.40	1.4499	1.4499		114	42.61	3,984,377	4,428,444	
1999/07	42,946	0.50	1.2299	1.2299		114	43.53	4,046,717	4,482,936	
2000/01		0.50	1.3356	1.3356		114	43.53	4,068,105	4,542,786	
2000/07		0.60	1.1129	1.1129		114	43.39	4,089,534	4,593,288	
2001/01		0.60	1.2976	1.2976		114	43.39	4,089,534	4,652,910	5
2001/07		0.70	0.9615	0.9615		114	40.20	4,134,897	4,697,598	
2002/01		0.70	1.0301	1.0301		114	40.20	4,156,690	4,745,934	
2002/07	26,984	0.80	0.8337	0.8337		114	42.64	4,205,169	4,785,492	
2003/01		0.80	1.3271	1.3271		114	42.64	4,239,782	4,848,990	
2003/07		0.90	1.1664	1.1664		114	42.77	4,274,394	4,905,534	
2004/01		0.90	1.1103	1.1103		114	42.77	4,307,610	4,960,026	
2004/07		1.00	0.8378	0.8378		114	47.98	4,339,093	5,001,636	
2005/01		1.00	0.8595	0.8595		114	47.98	4,371,627	5,044,614	
2005/07		1.00	0.7364	0.7364		114	46.10	4,398,610	5,081,778	
2006/01		1.00	0.9068	0.9068		114	46.10	4,432,042	5,127,834	
2006/07		1.00	0.8133	0.8133		114	37.68	4,456,737	5,169,558	
2007/01		1.00	1.0133	1.0133		114	37.68	4,487,676	5,221,884	
2007/07		1.00	1.1050	1.1050		114	37.68	4,521,649	5,279,568	
2008/01		1.00	0.8556	0.8556		114	35.56	4,546,662	5,324,712	
2008/07		1.00	0.6104	0.6104		114	33.06	4,563,344	5,357,202	
2009/01		1.00	1.3268	1.3268		114	33.06	4,599,738	5,428,338	
2009/07		1.00	0.6841	0.6841		114	28.91	4,616,278	5,465,502	



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

0 110482-00 - 2016/09

241.44

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2010/01		1.00	0.8643	0.8643		114	28.91	4,637,250	5,512,698	
2010/07		1.00	0.7107	0.7107		114	22.58	4,637,250	5,551,914	
2011/01		1.00	0.9198	0.9198		114	22.58	4,637,250	5,602,986	
2011/07		1.00	0.9028	0.9028		114	22.58	4,637,250	5,653,602	
2012/01		1.00	0.3865	0.3865		114	22.58	4,637,250	5,675,490	
2012/07		1.00	0.9417	0.9417		114	22.58	4,637,250	5,728,956	
2013/01		1.00	0.4901	0.4901		114	22.58	4,637,250	5,757,000	
2013/07		1.00	0.6196	0.6196		114	21.66	4,637,250	5,792,682	
2014/01	97,253	1.00	0.8564	0.8564		114	36.52	4,760,873	5,842,272	
2014/07	47,299	1.00	1.2383	1.2383		114	36.52	4,847,317	5,914,662	
2015/01		1.00	0.7571	0.7571		114	36.52	4,871,685	5,959,464	
2015/09		0.95	1.5736	1.5736		114	36.52	4,920,042	6,053,286	
2016/09	56,735	0.90	1.9890	1.9890		114	32.36	5,028,596	6,173,670	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0111543-00 - 2016/09

237.97

St. Catherine Laboure Manor, Inc.

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Nonprofit : Church

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
1750 STOCKTON ST	7/1/2014-6/30/2015	Number of Beds: 240	Superior: 366
JACKSONVILLE, FL 32204	Days in CR 365	Maximum: 87,600	Standard: 0
County: Duval [16]	First Used : 2016/09	Max Annualized: 87,600	Conditional: 0
Region: North Area: 4	Last Used: 2016/09	Total Patient: 84,768	Total: 366
Control: Nonprofit : Church	Unaudited	Medicare: 15,653	Inflation
Current Class North Large	Initial CR? False	Medicaid: 49,302	FY Index: 1.35966457
Class at 1/94: North Large	Medicaid Utilization	58.16110%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	96.76712%	Cost: 1.06169895
Open Date: 02/01/1979	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 02/01/1979	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.24000000
Entered Medicaid 02/01/1979	Low Occupancy Adjustment Factor:	122.37849%	DC Sem Index: 1.30450000
Med # Active Date: 07/01/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.05201613
Previous Med # 205150			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,649,670	4,986,394	3,178,829	833,697		11,648,590	
1a	Audit Adjustments							
2	Cost Per Diem	53.7437	101.1398	64.4767	16.9100		236.2702	
3	Cost Per Diem Inflated	57.0596	106.4007	68.4548				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.0596	106.4007	68.4548	16.9100		248.8251	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	61.7299		66.7514				
7	Provider Target Rate	65.1638		70.4647				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	54.8223	101.4900	66.1467	13.6500		236.1090	
12/13	Medicaid Adjustment Rate		0.9318	0.6073				
14	Prospective Per Diem 11	54.8223	102.4218	66.7540	13.6500		237.6481	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 111543-00 - 2016/09

237.97

St. Catherine Laboure Manor, Inc.

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/1993		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	9,999,999.00		Total Amount	Per Diem
RS to Start Calcs:	1979/01	Type:	Variable	80% Capital(1):	9,267,100	8.4733
Indexed Asset Value	11,583,875	<60% of Base:	False	20% ROE(2):	2,316,775	0.6062
FRVS Base Asset:	4,097,511	Interest Rate:	3.9000%	Insurance Cost(3):	8,954	0.1056
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	0	0.0000
ROE Factor	0.020630	Amortization Rate:	3.9000%	Home Office(3):	318,301	3.7550
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	668,036	Total FRVS PD:		12.9401

(1) 80% Capital (\$9,267,100) amortized at 3.9000 % for 20 years Principal & Interest of \$668,036 divided by annual available days (87600) divided by Occup. Adj. (0.90) = \$8.4733

(2) 20% ROE (\$2,316,775) times the ROE factor (0.020630) divided by annual available days (87600) divided by Occup. Adj. (0.90) = \$0.6062

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 232	Effective PBS Limitation	6,612,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	102.4218	102.4218	4.6468	97.7750
Indirect Care	66.7540	66.7540	3.0286	63.7254
Property	13.6500	12.9401	0.5871	12.3530
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				3.5998
Supplemental Rate				8.1814
Totals	237.6481	236.9382	10.7498	237.9696

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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237.97

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1979/01	2,758,231	0.00	5.1272	3.0000	2.1272	232	100.00	2,758,231	4,580,376	
1979/07		0.10	6.3255	3.0000	3.3255	232	100.00	2,766,506	4,772,704	
1980/01	431,991	0.10	9.4912	3.0000	6.4912	232	79.43	3,206,797	5,067,112	
1980/07		0.20	10.3018	3.0000	7.3018	232	79.43	3,226,038	5,260,136	
1981/01	143,151	0.20	11.1259	3.0000	8.1259	232	64.46	3,388,545	5,461,280	
1981/07		0.30	10.7147	3.0000	7.7147	232	64.46	3,419,042	5,602,568	
1982/01	44,627	0.30	10.3907	3.0000	7.3907	232	69.60	3,494,440	5,752,672	
1982/07		0.40	9.6883	3.0000	6.6883	232	94.92	3,536,373	5,884,680	
1983/04	63,939	0.40	9.3172	3.0000	6.3172	232	94.92	3,642,748	6,039,424	
1983/07		0.50	10.2750	3.0000	7.2750	232	94.92	3,697,389	6,278,384	
1984/01	119,716	0.50	8.5701	3.0000	5.5701	232	61.07	3,872,566	6,359,816	
1984/07		0.60	7.4880	3.0000	4.4880	232	65.89	3,942,272	6,481,848	
1985/01		0.60	5.6351	3.0000	2.6351	232	65.89	4,013,233	6,556,088	
1985/10		0.70	3.4873	3.0000	0.4873	232	61.06	4,097,511	6,612,000	
1986/01		0.70	1.3172	1.3172		232	61.06	4,135,290	6,666,984	
1986/07		0.80	0.2974	0.2974		232	61.06	4,145,128	6,654,224	
1987/01		0.80	1.0091	1.0091		232	100.00	4,178,592	6,773,240	
1987/07		0.90	0.9007	0.9007		232	67.63	4,212,464	6,826,136	
1988/01		0.90	0.9007	0.9007		232	67.63	4,246,610	6,881,584	
1988/07	153,120	1.00	0.5899	0.5899		232	69.23	4,424,781	6,877,872	
1989/01		1.00	0.5899	0.5899		232	69.23	4,450,883	6,918,472	
1989/07		1.00	0.5899	0.5899		232	69.23	4,477,139	6,965,336	
1990/01		1.00	0.5899	0.5899		232	70.17	4,503,550	7,000,368	
1990/07		1.00	0.5899	0.5899		232	64.38	4,530,116	7,041,664	
1991/01		1.00	0.5899	0.5899		232	64.38	4,556,839	7,082,960	
1991/07	80,187	1.00	1.4932	1.4932		232	67.11	4,705,069	7,188,752	
1992/01		1.00	2.0117	2.0117		232	67.11	4,799,721	7,333,288	
1992/07		1.00	1.8152	1.8152		232	72.79	4,886,846	7,466,456	
1993/01		1.00	1.7710	1.7710		232	72.79	4,973,392	7,598,696	
1993/07	2,681,369	1.00	1.5329	1.5329		240	72.79	7,730,998	7,981,200	



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237.97

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/01		1.00	1.6983	1.6983		240	72.79	7,862,294	8,116,800	
1994/07		1.00	1.5991	1.5991		240	65.56	7,988,020	8,246,640	
1995/01		1.00	1.5812	1.5812		240	65.56	8,114,327	8,376,960	
1995/07		1.00	1.5250	1.5250		240	65.56	8,238,070	8,504,640	
1996/01	356,978	1.00	1.7228	1.7228		240	56.59	8,736,973	8,651,280	
1996/07		1.00	1.3294	1.3294		240	53.34	8,766,240	8,766,240	8
1997/01		1.00	1.4109	1.4109		240	53.34	8,886,190	8,889,840	
1997/07	185,057	1.00	1.0917	1.0917		240	55.90	8,986,800	8,986,800	8
1998/01		1.00	1.1663	1.1663		240	55.90	9,091,613	9,091,680	
1998/07		1.00	1.0794	1.0794		240	55.90	9,189,748	9,189,840	
1999/01		1.00	1.4499	1.4499		240	55.90	9,322,990	9,323,040	
1999/07	110,109	0.95	1.2299	1.2299		240	58.45	9,437,760	9,437,760	8
2000/01		0.95	1.3356	1.3356		240	58.45	9,557,506	9,563,760	
2000/07	104,251	0.90	1.1129	1.1129		240	57.35	9,670,080	9,670,080	8
2001/01		0.90	1.2976	1.2976		240	57.35	9,783,007	9,795,600	
2001/07	59,128	0.85	0.9615	0.9615		240	63.02	9,889,680	9,889,680	8
2002/01	54,640	0.85	1.0301	1.0301		240	65.43	9,991,440	9,991,440	8
2002/07		0.80	0.8337	0.8337		240	65.43	10,058,083	10,074,720	
2003/01	767,049	0.80	1.3271	1.3271		240	73.78	10,208,400	10,208,400	8
2003/07		0.75	1.1664	1.1664		240	73.78	10,297,703	10,327,440	
2004/01	70,218	0.75	1.1103	1.1103		240	77.30	10,442,160	10,442,160	8
2004/07		0.70	0.8378	0.8378		240	77.30	10,503,403	10,529,760	
2005/01		0.70	0.8595	0.8595		240	78.94	10,566,602	10,620,240	
2005/07		0.65	0.7364	0.7364		240	78.94	10,617,184	10,698,480	
2006/01		0.65	0.9068	0.9068		240	78.86	10,679,762	10,795,440	
2006/07		0.60	0.8133	0.8133		240	78.86	10,731,879	10,883,280	
2007/01		0.60	1.0133	1.0133		240	69.22	10,797,129	10,993,440	
2007/07		0.55	1.1050	1.1050		240	69.22	10,862,754	11,114,880	
2008/01		0.55	0.8556	0.8556		240	69.22	10,913,874	11,209,920	
2008/07	186,971	0.50	0.6104	0.6104		240	59.89	11,134,154	11,278,320	



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237.97

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/01		0.50	1.3268	1.3268		240	59.89	11,208,018	11,428,080	
2009/07		0.45	0.6841	0.6841		240	53.52	11,241,588	11,506,320	
2010/01		0.45	0.8643	0.8643		240	52.45	11,283,280	11,605,680	
2010/07		0.40	0.7107	0.7107		240	52.45	11,313,871	11,688,240	
2011/01		0.40	0.9198	0.9198		240	52.45	11,353,565	11,795,760	
2011/07		0.35	0.9028	0.9028		240	51.24	11,386,990	11,902,320	
2012/01		0.35	0.3865	0.3865		240	51.24	11,401,343	11,948,400	
2012/07		0.30	0.9417	0.9417		240	51.99	11,431,789	12,060,960	
2013/01		0.30	0.4901	0.4901		240	51.99	11,447,674	12,120,000	
2013/07		0.25	0.6196	0.6196		240	53.67	11,464,978	12,195,120	
2014/01		0.25	0.8564	0.8564		240	53.67	11,488,931	12,299,520	
2014/07		0.20	1.2383	1.2383		240	56.25	11,517,389	12,451,920	
2015/01		0.20	0.7571	0.7571		240	56.25	11,534,826	12,546,240	
2015/09		0.15	1.5736	1.5736		240	52.64	11,560,880	12,743,760	
2016/09		0.10	1.9890	1.9890		240	58.16	11,583,875	12,997,200	

Message Code:

8 Limited to Current RS Per Bed Standard

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Florida Agency for Health Care Administration
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 Rate Semester 09/01/2016 through 08/31/2017

0122229-00 - 2016/09

220.06

Harbour Health Center

Type of Cost Report: Interim Change of Ownership - Budget Type of Cost: Estimated Type of Rate: Interim

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
23013 WESTCHESTER BLVD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
PORT CHARLOTTE, FL 33980	Days in CR 365	Maximum: 43,800	Standard: 366
County: Charlotte [8]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2016/09	Total Patient: 37,048	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 12,044	Inflation
Current Class South Large	Initial CR? False	Medicaid: 15,059	FY Index: 1.37939113
Class at 1/94: South Large	Medicaid Utilization	40.64727%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	84.58447%	Cost: 1.00000000
Open Date: 06/01/1986	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/01/1986	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 06/01/1986	Low Occupancy Adjustment Factor:	106.97146%	DC Sem Index: 1.30450000
Med # Active Date: 08/29/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 319333			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	815,926	1,459,049	926,174	438,819		3,639,968	
1a	Audit Adjustments							
2	Cost Per Diem	54.1820	96.8888	61.5030	29.1400		241.7138	
3	Cost Per Diem Inflated	54.1820	96.8888	61.5030				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.1820	96.8888	61.5030	29.1400		241.7138	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	58.7902	104.3884	73.0969	13.6500			
9	Prior Semester: Class Ceiling Target Base	59.9093		67.7181				
10	Target Rate Class Ceiling	62.2421		70.3550				
10a	New Provider Target Limitation	61.1923		73.2282				
10b	Base for line 10a	57.9677		69.3693				
11	Lesser of 5,7,8,10, 10a	54.1820	96.8888	61.5030	13.6500		226.2238	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	54.1820	96.8888	61.5030	13.6500		226.2238	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 122229-00 - 2016/09

220.06

Harbour Health Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:	11/01/2000	Amount:	0.00	Total Amount	Per Diem
RS to Start Calcs:	1986/01	Type:	None	80% Capital(1):	4,105,935 3.3295
Indexed Asset Value	5,132,419	<60% of Base:	True	20% ROE(2):	1,026,484 0.5372
FRVS Base Asset:	3,420,000	Interest Rate:	3.2500%	Insurance Cost(3):	111,947 3.0217
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	92,293 2.4912
ROE Factor	0.020630	Amortization Rate:	3.2500%	Home Office(3):	0 0.0000
		Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	131,248	Total FRVS PD:	9.3796

(1) 80% Capital (\$4,105,935) amortized at 3.2500 % for 20 years Interest of \$131,248 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$3.3295

(2) 20% ROE (\$1,026,484) times the ROE factor (0.020630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5372

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	54,155
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.1820	54.1820	2.4582	51.7238
Direct Care	96.8888	96.8888	4.3958	92.4930
Indirect Care	61.5030	61.5030	2.7904	58.7126
Property	13.6500	9.3796	0.4255	8.9541
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	226.2238	221.9534	10.0699	220.0649

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1986/01	3,650,000	0.00	0.8299	0.8299		120	18.76	3,420,000	3,420,000	1
1986/07		0.10	0.2974	0.2974		120	18.76	3,420,000	3,441,840	
1987/01		0.10	1.0091	1.0091		120	18.76	3,420,000	3,503,400	
1987/07		0.20	0.9007	0.9007		120	18.76	3,420,000	3,530,760	
1988/01		0.20	0.9007	0.9007		120	18.76	3,420,000	3,559,440	
1988/07		0.30	0.5899	0.5899		120	18.76	3,420,000	3,557,520	
1989/01	42,544	0.30	0.5899	0.5899		120	18.76	3,462,544	3,578,520	
1989/07		0.40	0.5899	0.5899		120	27.59	3,466,643	3,602,760	
1990/01		0.40	0.5899	0.5899		120	27.59	3,470,747	3,620,880	
1990/07		0.50	0.5899	0.5899		120	27.59	3,475,883	3,642,240	
1991/01		0.50	0.5899	0.5899		120	33.76	3,482,177	3,663,600	
1991/07		0.60	1.4932	1.4932		120	33.76	3,501,326	3,718,320	
1992/01		0.60	2.0117	2.0117		120	32.22	3,526,083	3,793,080	
1992/07		0.70	1.8152	1.8152		120	35.95	3,555,367	3,861,960	
1993/01		0.70	1.7710	1.7710		120	35.95	3,584,177	3,930,360	
1993/07		0.80	1.5329	1.5329		120	39.03	3,615,367	3,990,600	
1994/01		0.80	1.6983	1.6983		120	39.03	3,650,223	4,058,400	
1994/07		0.90	1.5991	1.5991		120	42.58	3,690,894	4,123,320	
1995/01		0.90	1.5812	1.5812		120	42.58	3,731,558	4,188,480	
1995/07	27,572	1.00	1.5250	1.5250		120	45.93	3,806,652	4,252,320	
1996/01		1.00	1.7228	1.7228		120	45.93	3,861,418	4,325,640	
1996/07	18,306	1.00	1.3294	1.3294		120	46.52	3,923,143	4,383,120	
1997/01		1.00	1.4109	1.4109		120	46.52	3,969,960	4,444,920	
1997/07		1.00	1.0917	1.0917		120	44.02	4,004,648	4,493,400	
1998/01		1.00	1.1663	1.1663		120	44.02	4,042,030	4,545,840	
1998/07		1.00	1.0794	1.0794		120	40.77	4,074,371	4,594,920	
1999/01		1.00	1.4499	1.4499		120	40.77	4,118,161	4,661,520	
1999/07		1.00	1.2299	1.2299		120	40.77	4,155,706	4,718,880	
2000/01		1.00	1.3356	1.3356		120	40.94	4,197,021	4,781,880	
2000/07		1.00	1.1129	1.1129		120	40.26	4,231,212	4,835,040	



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220.06

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2001/01		1.00	1.2976	1.2976		120	40.26	4,271,402	4,897,800	
2001/07		1.00	0.9615	0.9615		120	41.93	4,302,712	4,944,840	
2002/01		1.00	1.0301	1.0301		120	41.93	4,336,502	4,995,720	
2002/07		1.00	0.8337	0.8337		120	38.65	4,361,908	5,037,360	
2003/01		1.00	1.3271	1.3271		120	38.65	4,402,587	5,104,200	
2003/07	163,829	1.00	1.1664	1.1664		120	36.77	4,600,747	5,163,720	
2004/01		1.00	1.1103	1.1103		120	36.77	4,634,898	5,221,080	
2004/07		1.00	0.8378	0.8378		120	34.79	4,659,460	5,264,880	
2005/01		1.00	0.8595	0.8595		120	34.79	4,659,460	5,310,120	5
2005/07		1.00	0.7364	0.7364		120	22.29	4,684,792	5,349,240	
2006/01		1.00	0.9068	0.9068		120	22.29	4,684,792	5,397,720	
2006/07		0.95	0.8133	0.8133		120	22.29	4,684,792	5,441,640	
2007/01		0.95	1.0133	1.0133		120	22.29	4,684,792	5,496,720	
2007/07		0.90	1.1050	1.1050		120	22.29	4,684,792	5,557,440	
2008/01		0.90	0.8556	0.8556		120	22.29	4,684,792	5,604,960	
2008/07		0.85	0.6104	0.6104		120	22.29	4,684,792	5,639,160	
2009/01	85,165	0.85	1.3268	1.3268		120	30.51	4,799,266	5,714,040	
2009/07	50,164	0.80	0.6841	0.6841		120	33.64	4,865,495	5,753,160	
2010/01		0.80	0.8643	0.8643		120	33.64	4,886,070	5,802,840	
2010/07		0.75	0.7107	0.7107		120	33.64	4,901,999	5,844,120	
2011/01		0.75	0.9198	0.9198		120	35.51	4,923,834	5,897,880	
2011/07		0.70	0.9028	0.9028		120	31.77	4,941,809	5,951,160	
2012/01		0.70	0.3865	0.3865		120	31.77	4,949,533	5,974,200	
2012/07		0.65	0.9417	0.9417		120	36.83	4,969,820	6,030,480	
2013/01		0.65	0.4901	0.4901		120	36.83	4,980,423	6,060,000	
2013/07		0.60	0.6196	0.6196		120	36.83	4,992,823	6,097,560	
2014/01	18,073	0.60	0.8564	0.8564		120	37.41	5,028,345	6,149,760	
2014/07		0.55	1.2383	1.2383		120	40.65	5,053,657	6,225,960	
2015/01		0.55	0.7571	0.7571		120	40.65	5,069,210	6,273,120	
2015/09		0.50	1.5736	1.5736		120	40.65	5,098,688	6,371,880	



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220.06

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2016/09		0.45	1.9890	1.9890		120	40.65	5,132,419	6,498,600	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016 ID:



Florida Agency for Health Care Administration
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220.03

Plaza West

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
912 AMERICAN EAGLE BLVD	1/1/2014-12/31/2014	Number of Beds: 113	Superior: 0
SUN CITY CENTER, FL 33573	Days in CR 365	Maximum: 41,245	Standard: 366
County: Hillsborough [29]	First Used : 2016/09	Max Annualized: 41,245	Conditional: 0
Region: Central Area: 6	Last Used: 2016/09	Total Patient: 36,595	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 16,345	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 5,720	FY Index: 1.34193004
Class at 1/94: North Large	Medicaid Utilization	15.63055%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	88.72591%	Cost: 1.07573004
Open Date: 06/10/1994	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 06/10/1994	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.22900000
Entered Medicaid 06/10/1994	Low Occupancy Adjustment Factor:	112.20901%	DC Sem Index: 1.30450000
Med # Active Date: 08/29/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.06143206
Previous Med # 211885			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	286,488	484,728	450,872	42,557		1,264,645	
1a	Audit Adjustments							
2	Cost Per Diem	50.0853	84.7427	78.8238	7.4400		221.0918	
3	Cost Per Diem Inflated	53.8783	89.9486	84.7931				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.8783	89.9486	84.7931	7.4400		236.0600	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	58.8024		67.6068				
7	Provider Target Rate	62.0735		71.3676				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	53.8783	89.9486	68.1848	7.4400		219.4517	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	53.8783	89.9486	68.1848	7.4400		219.4517	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

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Plaza West

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 06/10/1994		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	0.00		Total Amount	Per Diem
RS to Start Calcs:	1994/01	Type:	None	80% Capital(1):	4,195,206	3.6126
Indexed Asset Value	5,244,007	<60% of Base:	True	20% ROE(2):	1,048,801	0.6416
FRVS Base Asset:	1,396,710	Interest Rate:	3.2500%	Insurance Cost(3):	21,335	0.5830
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	49,576	1.3547
ROE Factor	0.022710	Amortization Rate:	3.2500%	Home Office(3):	135,723	3.7088
		Interest Only:	True	Replacement(3&4):	908,772	0.0000
		Yearly Payment:	134,102	Total FRVS PD:		9.9007

(1) 80% Capital (\$4,195,206) amortized at 3.2500 % for 20 years Interest of \$134,102 divided by annual available days (41245) divided by Occup. Adj. (0.90) = \$3.6126

(2) 20% ROE (\$1,048,801) times the ROE factor (0.022710) divided by annual available days (41245) divided by Occup. Adj. (0.90) = \$0.6416

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1993	Current RS PBS:	33,255
Comparison Bed	42	Effective PBS Limitation	54,155
			1,396,710

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.8783	53.8783	2.4444	51.4339
Direct Care	89.9486	89.9486	4.0809	85.8677
Indirect Care	68.1848	68.1848	3.0935	65.0913
Property	7.4400	9.9007	0.4492	9.4515
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	219.4517	221.9124	10.0680	220.0258

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/01	1,575,790	0.00	1.6983	1.6983		42	2.05	1,396,710	1,396,710	1
1994/07		0.10	1.5991	1.5991		42	2.05	1,396,710	1,443,162	
1995/01		0.10	1.5812	1.5812		42	2.05	1,396,710	1,465,968	
1995/07		0.20	1.5250	1.5250		42	2.05	1,396,710	1,488,312	
1996/01		0.20	1.7228	1.7228		42	2.05	1,396,710	1,513,974	
1996/07		0.30	1.3294	1.3294		42	2.05	1,396,710	1,534,092	5
1997/01		0.30	1.4109	1.4109		42	2.05	1,396,710	1,555,722	
1997/07		0.40	1.0917	1.0917		42	2.05	1,396,710	1,572,690	
1998/01	12,365	0.40	1.1663	1.1663		42	3.59	1,409,075	1,591,044	
1998/07		0.50	1.0794	1.0794		42	5.11	1,409,075	1,608,222	
1999/01		0.50	1.4499	1.4499		42	5.11	1,409,075	1,631,532	1
1999/07		0.60	1.2299	1.2299		42	5.11	1,409,075	1,651,608	
2000/01		0.60	1.3356	1.3356		42	5.11	1,409,075	1,673,658	
2000/07		0.70	1.1129	1.1129		42	7.29	1,409,075	1,692,264	
2001/01		0.70	1.2976	1.2976		42	7.29	1,409,075	1,714,230	
2001/07	2,829,279	0.80	0.9615	0.9615		113	9.67	4,238,354	4,656,391	
2002/01		0.80	1.0301	1.0301		113	9.67	4,238,354	4,704,303	
2002/07		0.90	0.8337	0.8337		113	6.16	4,238,354	4,743,514	
2003/01		0.90	1.3271	1.3271		113	6.16	4,238,354	4,806,455	
2003/07		1.00	1.1664	1.1664		113	12.25	4,238,354	4,862,503	
2004/01		1.00	1.1103	1.1103		113	12.25	4,238,354	4,916,517	
2004/07	38,827	1.00	0.8378	0.8378		113	22.19	4,277,181	4,957,762	
2005/01		1.00	0.8595	0.8595		113	22.19	4,277,181	5,000,363	
2005/07		1.00	0.7364	0.7364		113	26.02	4,292,082	5,037,201	
2006/01		1.00	0.9068	0.9068		113	26.02	4,310,495	5,082,853	
2006/07		1.00	0.8133	0.8133		113	26.02	4,327,080	5,124,211	
2007/01		1.00	1.0133	1.0133		113	23.38	4,327,080	5,176,078	
2007/07		1.00	1.1050	1.1050		113	23.38	4,327,080	5,233,256	
2008/01		1.00	0.8556	0.8556		113	21.38	4,327,080	5,278,004	
2008/07		1.00	0.6104	0.6104		113	21.38	4,327,080	5,310,209	



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220.03

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/01		1.00	1.3268	1.3268		113	19.35	4,327,080	5,380,721	
2009/07		1.00	0.6841	0.6841		113	19.35	4,327,080	5,417,559	
2010/01	35,179	1.00	0.8643	0.8643		113	26.47	4,380,258	5,464,341	
2010/07		1.00	0.7107	0.7107		113	26.47	4,395,240	5,503,213	
2011/01	33,856	1.00	0.9198	0.9198		113	23.69	4,429,096	5,553,837	
2011/07		1.00	0.9028	0.9028		113	27.75	4,449,271	5,604,009	
2012/01		1.00	0.3865	0.3865		113	27.75	4,457,947	5,625,705	
2012/07		1.00	0.9417	0.9417		113	26.37	4,478,075	5,678,702	
2013/01		1.00	0.4901	0.4901		113	26.37	4,488,598	5,706,500	
2013/07		1.00	0.6196	0.6196		113	26.37	4,501,932	5,741,869	
2014/01		1.00	0.8564	0.8564		113	21.08	4,501,932	5,791,024	
2014/07		0.95	1.2383	1.2383		113	21.08	4,501,932	5,862,779	
2015/01		0.95	0.7571	0.7571		113	17.33	4,501,932	5,907,188	
2015/09		0.90	1.5736	1.5736		113	17.33	4,501,932	6,000,187	
2016/09	742,075	0.85	1.9890	1.9890		113	15.63	5,244,007	6,119,515	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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220.18

Seminole Pavilion Rehabilitation & Nursing Services

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
10800 TEMPLE TERRACE	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
SEMINOLE, FL 33772	Days in CR 365	Maximum: 43,800	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 40,392	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 12,572	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 14,594	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	36.13092%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.21918%	Cost: 1.04651568
Open Date: 07/01/1982	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 07/01/1982	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 07/01/1982	Low Occupancy Adjustment Factor:	116.62685%	DC Sem Index: 1.30450000
Med # Active Date: 08/29/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 324230			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	848,473	1,164,129	953,599	86,980		3,053,181	
1a	Audit Adjustments							
2	Cost Per Diem	58.1385	79.7676	65.3419	5.9600		209.2080	
3	Cost Per Diem Inflated	60.8429	83.0130	68.3813				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	60.8429	83.0130	68.3813	5.9600		218.1972	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	60.5704		79.0626				
7	Provider Target Rate	63.9398		83.4607				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500			
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292				
10	Target Rate Class Ceiling	59.0945		68.1848				
10a	New Provider Target Limitation	63.9446		77.0828				
10b	Base for line 10a	60.5749		73.0208				
11	Lesser of 5,7,8,10, 10a	56.8063	83.0130	68.1848	5.9600		213.9641	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	56.8063	83.0130	68.1848	5.9600		213.9641	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

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Seminole Pavilion Rehabilitation & Nursing Services

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/01/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,600,000.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	4,023,385	8.6129
Indexed Asset Value	5,029,231	<60% of Base:	False	20% ROE(2):	1,005,846	0.5157
FRVS Base Asset:	3,420,000	Interest Rate:	5.7700%	Insurance Cost(3):	33,521	0.8299
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	51,919	1.2854
ROE Factor	0.020210	Amortization Rate:	5.7700%	Home Office(3):	114,084	2.8244
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	339,522	Total FRVS PD:		14.0683

(1) 80% Capital (\$4,023,385) amortized at 5.7700 % for 20 years Principal & Interest of \$339,522 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$8.6129

(2) 20% ROE (\$1,005,846) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5157

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	07/01/1985	Current RS PBS:	28,500
Comparison Bed	120	Effective PBS Limitation	54,155
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	83.0130	83.0130	3.7663	79.2467
Indirect Care	68.1848	68.1848	3.0935	65.0913
Property	5.9600	14.0683	0.6383	13.4300
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	213.9641	222.0724	10.0754	220.1784

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1982/07	3,491,068	0.00	2.2977	2.2977		120	9.89	3,491,068	3,043,800	
1983/04		0.10	2.6288	2.6288		120	8.36	3,491,068	3,123,840	
1983/07		0.10	3.9578	3.0000	0.9578	120	8.36	3,491,068	3,247,440	
1984/01		0.20	2.2530	2.2530		120	11.42	3,491,068	3,289,560	
1984/07		0.20	1.9179	1.9179		120	8.23	3,491,068	3,352,680	
1985/01		0.30	1.1471	1.1471		120	8.23	3,491,068	3,391,080	
1985/10		0.30	0.8522	0.8522		120	8.23	3,420,000	3,420,000	1
1986/01		0.40	0.8299	0.8299		120	11.49	3,420,000	3,448,440	
1986/07		0.40	0.2974	0.2974		120	11.49	3,420,000	3,441,840	
1987/01		0.50	1.0091	1.0091		120	11.39	3,420,000	3,503,400	
1987/07		0.50	0.9007	0.9007		120	14.92	3,420,000	3,530,760	
1988/01		0.60	0.9007	0.9007		120	14.92	3,420,000	3,559,440	
1988/07	13,983	0.60	0.5899	0.5899		120	16.11	3,433,983	3,557,520	
1989/01		0.70	0.5899	0.5899		120	16.11	3,433,983	3,578,520	
1989/07	30,697	0.70	0.5899	0.5899		120	14.29	3,464,680	3,602,760	
1990/01		0.80	0.5899	0.5899		120	14.29	3,464,680	3,620,880	
1990/07	55,066	0.80	0.5899	0.5899		120	18.50	3,519,746	3,642,240	
1991/01		0.90	0.5899	0.5899		120	18.50	3,519,746	3,663,600	
1991/07		0.90	1.4932	1.4932		120	18.50	3,519,746	3,718,320	
1992/01		1.00	2.0117	2.0117		120	30.38	3,519,746	3,793,080	5
1992/07		1.00	1.8152	1.8152		120	30.38	3,558,857	3,861,960	5
1993/01	28,035	1.00	1.7710	1.7710		120	39.26	3,668,016	3,930,360	
1993/07	22,350	1.00	1.5329	1.5329		120	39.01	3,730,246	3,990,600	
1994/01		1.00	1.6983	1.6983		120	39.01	3,775,179	4,058,400	
1994/07		1.00	1.5991	1.5991		120	36.08	3,814,781	4,123,320	
1995/01		1.00	1.5812	1.5812		120	36.08	3,854,350	4,188,480	
1995/07		1.00	1.5250	1.5250		120	36.08	3,892,909	4,252,320	
1996/01		1.00	1.7228	1.7228		120	36.08	3,892,909	4,325,640	5
1996/07	18,705	1.00	1.3294	1.3294		120	35.29	3,989,191	4,383,120	
1997/01		1.00	1.4109	1.4109		120	35.29	4,025,305	4,444,920	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1997/07		1.00	1.0917	1.0917		120	34.04	4,052,502	4,493,400	
1998/01		1.00	1.1663	1.1663		120	34.04	4,081,754	4,545,840	
1998/07	32,011	1.00	1.0794	1.0794		120	35.21	4,141,970	4,594,920	
1999/01		1.00	1.4499	1.4499		120	35.21	4,180,416	4,661,520	
1999/07		1.00	1.2299	1.2299		120	31.74	4,210,087	4,718,880	
2000/01		1.00	1.3356	1.3356		120	31.74	4,242,537	4,781,880	
2000/07		1.00	1.1129	1.1129		120	34.50	4,272,154	4,835,040	
2001/01		1.00	1.2976	1.2976		120	34.50	4,306,927	4,897,800	
2001/07	29,990	1.00	0.9615	0.9615		120	35.56	4,363,691	4,944,840	
2002/01		1.00	1.0301	1.0301		120	35.56	4,392,753	4,995,720	
2002/07		1.00	0.8337	0.8337		120	37.34	4,417,616	5,037,360	
2003/01		0.95	1.3271	1.3271		120	37.34	4,455,426	5,104,200	
2003/07		0.95	1.1664	1.1664		120	37.09	4,488,720	5,163,720	
2004/01		0.90	1.1103	1.1103		120	37.09	4,518,969	5,221,080	
2004/07		0.90	0.8378	0.8378		120	39.35	4,543,347	5,264,880	
2005/01		0.85	0.8595	0.8595		120	39.35	4,567,096	5,310,120	
2005/07		0.85	0.7364	0.7364		120	39.35	4,587,548	5,349,240	
2006/01		0.80	0.9068	0.9068		120	38.46	4,610,818	5,397,720	
2006/07		0.80	0.8133	0.8133		120	31.80	4,628,162	5,441,640	
2007/01		0.75	1.0133	1.0133		120	31.80	4,648,499	5,496,720	
2007/07	47,103	0.75	1.1050	1.1050		120	32.33	4,718,249	5,557,440	
2008/01		0.70	0.8556	0.8556		120	32.33	4,734,859	5,604,960	
2008/07		0.70	0.6104	0.6104		120	32.33	4,746,752	5,639,160	
2009/01		0.65	1.3268	1.3268		120	32.33	4,770,815	5,714,040	
2009/07		0.65	0.6841	0.6841		120	32.33	4,783,286	5,753,160	
2010/01	31,327	0.60	0.8643	0.8643		120	33.82	4,829,867	5,802,840	
2010/07		0.60	0.7107	0.7107		120	33.82	4,842,531	5,844,120	
2011/01		0.55	0.9198	0.9198		120	35.34	4,858,272	5,897,880	
2011/07		0.55	0.9028	0.9028		120	35.34	4,873,771	5,951,160	
2012/01		0.50	0.3865	0.3865		120	37.89	4,880,261	5,974,200	



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07		0.50	0.9417	0.9417		120	37.89	4,896,093	6,030,480	
2013/01	38,322	0.45	0.4901	0.4901		120	41.52	4,942,565	6,060,000	
2013/07		0.45	0.6196	0.6196		120	41.52	4,952,968	6,097,560	
2014/01		0.40	0.8564	0.8564		120	39.10	4,965,031	6,149,760	
2014/07		0.40	1.2383	1.2383		120	39.10	4,982,514	6,225,960	
2015/01		0.35	0.7571	0.7571		120	36.60	4,991,300	6,273,120	
2015/09		0.35	1.5736	1.5736		120	36.60	5,009,595	6,371,880	
2016/09		0.30	1.9890	1.9890		120	36.13	5,029,231	6,498,600	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
|---|

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Report Calculated: 6/30/2016 8:16:40 AM

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Freedom Square Rehabilitation & Nursing Services

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
10801 JOHNSON BLVD	1/1/2015-12/31/2015	Number of Beds: 116	Superior: 0
SEMINOLE, FL 33772	Days in CR 365	Maximum: 42,340	Standard: 366
County: Pinellas [52]	First Used : 2016/09	Max Annualized: 42,340	Conditional: 0
Region: Central Area: 5	Last Used: 2016/09	Total Patient: 39,357	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 6,222	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 17,903	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	45.48873%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	92.95465%	Cost: 1.04651568
Open Date: 09/14/1988	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 09/14/1988	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 02/19/2002	Low Occupancy Adjustment Factor:	117.55697%	DC Sem Index: 1.30450000
Med # Active Date: 08/29/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
Previous Med # 324248			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,412,979	1,403,481	1,445,121	218,059		4,479,640
1a	Audit Adjustments						
2	Cost Per Diem	78.9241	78.3936	80.7195	12.1800		250.2172
3	Cost Per Diem Inflated	82.5953	81.5831	84.4742			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	82.5953	81.5831	84.4742	12.1800		260.8326
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	77.6298		82.7806			
7	Provider Target Rate	81.9482		87.3855			
7a	Interim Adjustment						
7b	Interim Adjusted Target Rate						
8	Cost Based Class Ceilings	56.8063	102.9392	71.0026	13.6500		
9	Prior Semester: Class Ceiling Target Base	56.8796		65.6292			
10	Target Rate Class Ceiling	59.0945		68.1848			
10a	New Provider Target Limitation	66.6609		74.4560			
10b	Base for line 10a	63.1481		70.5324			
11	Lesser of 5,7,8,10, 10a	56.8063	81.5831	68.1848	12.1800		218.7542
12/13	Medicaid Adjustment Rate						
14	Prospective Per Diem 11	56.8063	81.5831	68.1848	12.1800		218.7542
15	Inflated Usual & Customary Charge						0.00

Usual and Customary Limitations not applied after 7/1/2002.



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Freedom Square Rehabilitation & Nursing Services

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	02/19/2002	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	7,700,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/07	Type:	Fixed	80% Capital(1):	3,138,751	6.9509
Indexed Asset Value	3,923,439	<60% of Base:	False	20% ROE(2):	784,688	0.4162
FRVS Base Asset:	0	Interest Rate:	5.7700%	Insurance Cost(3):	64,794	1.6463
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	176,681	4.4892
ROE Factor	0.020210	Amortization Rate:	5.7700%	Home Office(3):	183,538	4.6634
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	264,870	Total FRVS PD:		18.1660

(1) 80% Capital (\$3,138,751) amortized at 5.7700 % for 20 years Principal & Interest of \$264,870 divided by annual available days (42340) divided by Occup. Adj. (0.90) = \$6.9509

(2) 20% ROE (\$784,688) times the ROE factor (0.020210) divided by annual available days (42340) divided by Occup. Adj. (0.90) = \$0.4162

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	29,662
Comparison Date: 01/01/1988	Current RS PBS:	54,155
Comparison Bed 116	Effective PBS Limitation	3,440,792

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	56.8063	56.8063	2.5773	54.2290
Direct Care	81.5831	81.5831	3.7014	77.8817
Indirect Care	68.1848	68.1848	3.0935	65.0913
Property	12.1800	18.1660	0.8242	17.3418
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	218.7542	224.7402	10.1964	222.7252

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2002/01	4,864,754	0.00	1.0301	1.0301		116	15.67	3,440,792	3,440,792	1
2002/07		0.10	0.8337	0.8337		116	15.67	3,440,792	4,869,448	
2003/01		0.10	1.3271	1.3271		116	15.67	3,440,792	4,934,060	
2003/07		0.20	1.1664	1.1664		116	15.67	3,440,792	4,991,596	
2004/01		0.20	1.1103	1.1103		116	15.67	3,440,792	5,047,044	
2004/07		0.30	0.8378	0.8378		116	31.55	3,445,752	5,089,384	
2005/01		0.30	0.8595	0.8595		116	31.55	3,450,850	5,133,116	
2005/07		0.40	0.7364	0.7364		116	31.55	3,456,682	5,170,932	
2006/01		0.40	0.9068	0.9068		116	36.54	3,465,011	5,217,796	
2006/07		0.50	0.8133	0.8133		116	33.55	3,473,607	5,260,252	
2007/01		0.50	1.0133	1.0133		116	33.55	3,484,343	5,313,496	
2007/07	23,733	0.60	1.1050	1.1050		116	40.15	3,524,940	5,372,192	
2008/01		0.60	0.8556	0.8556		116	40.15	3,538,151	5,418,128	
2008/07		0.70	0.6104	0.6104		116	40.15	3,549,188	5,451,188	
2009/01		0.70	1.3268	1.3268		116	40.15	3,573,252	5,523,572	
2009/07		0.80	0.6841	0.6841		116	40.15	3,587,528	5,561,388	
2010/01		0.80	0.8643	0.8643		116	40.15	3,605,635	5,609,412	
2010/07		0.90	0.7107	0.7107		116	45.86	3,624,864	5,649,316	
2011/01		0.90	0.9198	0.9198		116	45.86	3,649,884	5,701,284	
2011/07		1.00	0.9028	0.9028		116	45.12	3,676,916	5,752,788	
2012/01		1.00	0.3865	0.3865		116	45.12	3,688,574	5,775,060	
2012/07		1.00	0.9417	0.9417		116	39.08	3,713,255	5,829,464	
2013/01		1.00	0.4901	0.4901		116	39.08	3,726,186	5,858,000	
2013/07		1.00	0.6196	0.6196		116	39.08	3,742,591	5,894,308	
2014/01		1.00	0.8564	0.8564		116	36.99	3,764,147	5,944,768	
2014/07		1.00	1.2383	1.2383		116	36.99	3,795,495	6,018,428	
2015/01		1.00	0.7571	0.7571		116	39.92	3,816,352	6,064,016	
2015/09		1.00	1.5736	1.5736		116	39.92	3,859,940	6,159,484	
2016/09		1.00	1.9890	1.9890		116	45.49	3,923,439	6,281,980	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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Cypress Village

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective

Type of Ownership: Proprietary : Corporation CHOW Status based on this Cost Report: No Change

Provider Information	Cost Report	Patient Days	Ratings Days
4600 MIDDLETON PARK CIR E JACKSONVILLE, FL 32224	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
County: Duval [16]	Days in CR 365	Maximum: 43,800	Standard: 366
Region: North Area: 4	First Used : 2016/09	Max Annualized: 43,800	Conditional: 0
Control: Proprietary : Corporation	Last Used: 2016/09	Total Patient: 41,559	Total: 366
Current Class North Large	Unaudited	Medicare: 18,000	Inflation
Class at 1/94: North Large	Initial CR? False	Medicaid: 11,464	FY Index: 1.37939113
Operating Ex > 18 months	Medicaid Utilization	27.58488%	Semester Index: 1.44355445
Open Date: 08/30/1991	Occupancy:	94.88356%	Cost: 1.04651568
Acquired Date: 08/30/1991	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Entered Medicaid 10/14/1991	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Med # Active Date: 08/29/2014	Low Occupancy Adjustment Factor:	119.99641%	DC Sem Index: 1.30450000
Previous Med # 307998	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04068608
			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	733,076	1,040,609	749,851	350,225		2,873,761	
1a	Audit Adjustments							
2	Cost Per Diem	63.9459	90.7719	65.4092	30.5500		250.6770	
3	Cost Per Diem Inflated	66.9204	94.4651	68.4518				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	66.9204	94.4651	68.4518	30.5500		260.3873	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.7661		92.6656				
7	Provider Target Rate	57.8126		97.8204				
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	54.8223	94.4651	66.1467	13.6500		229.0841	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	54.8223	94.4651	66.1467	13.6500		229.0841	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



Florida Agency for Health Care Administration

Office of Medicaid Cost Reimbursement Planning and Finance

Computation of Nursing Home Medicaid Reimbursement Rate

Rate Semester 09/01/2016 through 08/31/2017

0 122242-00 - 2016/09

231.59

Cypress Village

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	10/14/1991	Amount:	8,103,119.00		Total Amount	Per Diem
RS to Start Calcs:	1991/07	Type:	Fixed	80% Capital(1):	4,864,922	11.1464
Indexed Asset Value	6,081,152	<60% of Base:	False	20% ROE(2):	1,216,230	0.6235
FRVS Base Asset:	1,831,800	Interest Rate:	6.6200%	Insurance Cost(3):	34,690	0.8347
Occup Adj Factor	0.9000	Chase Rate:	5.7500%	Taxes Cost(3):	119,490	2.8752
ROE Factor	0.020210	Amortization Rate:	6.6200%	Home Office(3):	129,317	3.1116
		Interest Only:	False	Replacement(3&4):	2,850,631	0.0000
		Yearly Payment:	439,393	Total FRVS PD:		18.5914

(1) 80% Capital (\$4,864,922) amortized at 6.6200 % for 20 years Principal & Interest of \$439,393 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.1464

(2) 20% ROE (\$1,216,230) times the ROE factor (0.020210) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6235

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination	Used Per Bed Standard:	30,530
Comparison Date: 01/01/1991	Current RS PBS:	54,155
Comparison Bed 60	Effective PBS Limitation	1,831,800

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	94.4651	94.4651	4.2858	90.1793
Indirect Care	66.1467	66.1467	3.0010	63.1457
Property	13.6500	18.5914	0.8435	17.7479
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	229.0841	234.0255	10.6176	231.5893

Medicaid Trend Adjustment



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 Rate Semester 9/1/2016 through 8/31/2017 Based on Cost Report: 12/31/2015

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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/07	3,694,000	0.00	1.4932	1.4932		60	41.39	1,831,800	1,831,800	1
1992/01		0.10	2.0117	2.0117		60	41.39	1,834,574	1,896,540	
1992/07		0.10	1.8152	1.8152		60	41.39	1,837,080	1,930,980	
1993/01		0.20	1.7710	1.7710		60	41.39	1,841,977	1,965,180	
1993/07		0.20	1.5329	1.5329		60	41.39	1,846,227	1,995,300	
1994/01		0.30	1.6983	1.6983		60	41.39	1,853,306	2,029,200	
1994/07		0.30	1.5991	1.5991		60	41.39	1,859,996	2,061,660	
1995/01		0.40	1.5812	1.5812		60	51.82	1,871,080	2,094,240	
1995/07		0.40	1.5250	1.5250		60	60.27	1,882,494	2,126,160	
1996/01		0.50	1.7228	1.7228		60	60.27	1,898,710	2,162,820	
1996/07	44,954	0.50	1.3294	1.3294		60	50.43	1,955,236	2,191,560	
1997/01		0.60	1.4109	1.4109		60	50.43	1,970,412	2,222,460	
1997/07	2,165,065	0.60	1.0917	1.0917		120	39.21	4,144,678	4,493,400	
1998/01		0.70	1.1663	1.1663		120	39.21	4,168,801	4,545,840	
1998/07		0.70	1.0794	1.0794		120	39.21	4,191,257	4,594,920	
1999/01	83,354	0.80	1.4499	1.4499		120	33.86	4,304,540	4,661,520	
1999/07		0.80	1.2299	1.2299		120	34.98	4,331,476	4,718,880	
2000/01		0.90	1.3356	1.3356		120	34.98	4,364,589	4,781,880	
2000/07		0.90	1.1129	1.1129		120	34.98	4,392,392	4,835,040	
2001/01	136,821	1.00	1.2976	1.2976		120	38.38	4,568,986	4,897,800	
2001/07	30,029	1.00	0.9615	0.9615		120	42.24	4,632,754	4,944,840	
2002/01		1.00	1.0301	1.0301		120	42.24	4,669,404	4,995,720	
2002/07	37,206	1.00	0.8337	0.8337		120	54.70	4,745,326	5,037,360	
2003/01		1.00	1.3271	1.3271		120	54.70	4,807,958	5,104,200	
2003/07		1.00	1.1664	1.1664		120	56.69	4,864,038	5,163,720	
2004/01		1.00	1.1103	1.1103		120	56.69	4,918,043	5,221,080	
2004/07	17,575	1.00	0.8378	0.8378		120	61.50	4,976,821	5,264,880	
2005/01		1.00	0.8595	0.8595		120	56.26	5,019,597	5,310,120	
2005/07		1.00	0.7364	0.7364		120	56.26	5,056,561	5,349,240	
2006/01		1.00	0.9068	0.9068		120	56.26	5,102,414	5,397,720	



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231.59

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/07		1.00	0.8133	0.8133		120	56.26	5,143,912	5,441,640	
2007/01		1.00	1.0133	1.0133		120	56.26	5,196,035	5,496,720	
2007/07		1.00	1.1050	1.1050		120	56.26	5,253,451	5,557,440	
2008/01	56,848	1.00	0.8556	0.8556		120	48.25	5,349,731	5,604,960	
2008/07		1.00	0.6104	0.6104		120	48.25	5,378,378	5,639,160	
2009/01		1.00	1.3268	1.3268		120	54.91	5,449,622	5,714,040	
2009/07		1.00	0.6841	0.6841		120	54.91	5,486,842	5,753,160	
2010/01		1.00	0.8643	0.8643		120	55.25	5,534,265	5,802,840	
2010/07		1.00	0.7107	0.7107		120	55.25	5,573,597	5,844,120	
2011/01		1.00	0.9198	0.9198		120	58.78	5,624,863	5,897,880	
2011/07		1.00	0.9028	0.9028		120	58.78	5,675,644	5,951,160	
2012/01	120,491	0.95	0.3865	0.3865		120	45.50	5,813,376	5,974,200	
2012/07		0.95	0.9417	0.9417		120	36.03	5,847,445	6,030,480	
2013/01		0.90	0.4901	0.4901		120	36.03	5,864,342	6,060,000	
2013/07		0.90	0.6196	0.6196		120	36.03	5,864,342	6,097,560	5
2014/01	38,193	0.85	0.8564	0.8564		120	28.59	5,946,226	6,149,760	
2014/07		0.85	1.2383	1.2383		120	28.59	5,978,761	6,225,960	
2015/01		0.80	0.7571	0.7571		120	28.18	5,997,315	6,273,120	
2015/09		0.80	1.5736	1.5736		120	28.18	6,035,999	6,371,880	
2016/09		0.75	1.9890	1.9890		120	27.58	6,081,152	6,498,600	

Message Code:

- | |
|------------------------------------|
| 1 Per Bed Standard Limitation |
| 5 Uncorrected Licensure Deficiency |

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Report Calculated: 6/30/2016 8:16:40 AM

Report Printed: 6/30/2016

ID: 122242123120150101201505242016143421



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 09/01/2016 through 08/31/2017

0122243-00 - 2016/09

206.06

Lake Harris Health Center

Type of Cost Report: Interim Change of Ownership - Budget Type of Cost: Estimated Type of Rate: Interim

Type of Ownership: Proprietary : Corporation

CHOW Status based on this Cost Report: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
701 LAKE PORT BLVD	1/1/2015-12/31/2015	Number of Beds: 120	Superior: 0
LEESBURG, FL 34748	Days in CR 365	Maximum: 43,800	Standard: 366
County: Lake [35]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2016/09	Total Patient: 41,817	Total: 366
Control: Proprietary : Corporation	Unaudited	Medicare: 15,768	Inflation
Current Class North Large	Initial CR? False	Medicaid: 13,387	FY Index: 1.37939113
Class at 1/94: North Large	Medicaid Utilization	32.01330%	Semester Index: 1.44355445
Operating Ex > 18 months	Occupancy:	95.47260%	Cost: 1.00000000
Open Date: 08/16/1990	Statewide Low Occupancy Threshold:	79.07200%	Target: 1.03893965
Acquired Date: 08/16/1990	Medicaid Low Occupancy Threshold:	41.01610%	DC FY Index: 1.25350000
Entered Medicaid 08/17/1990	Low Occupancy Adjustment Factor:	120.74135%	DC Sem Index: 1.30450000
Med # Active Date: 08/29/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 228966			PS Target: 1.05562807

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	745,601	1,157,386	802,965	262,921		2,968,873	
1a	Audit Adjustments							
2	Cost Per Diem	55.6959	86.4560	59.9810	19.6400		221.7729	
3	Cost Per Diem Inflated	55.6959	86.4560	59.9810				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.6959	86.4560	59.9810	19.6400		221.7729	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjusted Target Rate							
8	Cost Based Class Ceilings	54.8223	101.4900	68.9084	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.8495		63.6675				
10	Target Rate Class Ceiling	55.9464		66.1467				
10a	New Provider Target Limitation	56.9930		68.8480				
10b	Base for line 10a	53.9897		65.2199				
11	Lesser of 5,7,8,10, 10a	54.8223	86.4560	59.9810	13.6500		214.9093	
12/13	Medicaid Adjustment Rate							
14	Prospective Per Diem 11	54.8223	86.4560	59.9810	13.6500		214.9093	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Lake Harris Health Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 08/17/1990		Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:		Amount:	0.00	Total Amount	Per Diem
RS to Start Calcs:	1990/07	Type:	None	80% Capital(1):	4,448,771 3.6075
Indexed Asset Value	5,560,964	<60% of Base:	True	20% ROE(2):	1,112,193 0.5967
FRVS Base Asset:	1,810,440	Interest Rate:	3.2500%	Insurance Cost(3):	0 0.0000
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	76,279 1.8241
ROE Factor	0.021150	Amortization Rate:	3.2500%	Home Office(3):	0 0.0000
		Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	142,207	Total FRVS PD:	6.0283

(1) 80% Capital (\$4,448,771) amortized at 3.2500 % for 20 years Interest of \$142,207 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$3.6075

(2) 20% ROE (\$1,112,193) times the ROE factor (0.021150) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5967

(3) Pass-throughs: Cost divided by Total Patient Days

(4) Replacement effective for Providers on FRVS phase-in Only

Per Bed Standard Determination		Used Per Bed Standard:	
Comparison Date:	01/01/1990	Current RS PBS:	30,174
Comparison Bed	60	Effective PBS Limitation	54,155
			1,810,440

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8223	54.8223	2.4873	52.3350
Direct Care	86.4560	86.4560	3.9225	82.5335
Indirect Care	59.9810	59.9810	2.7213	57.2597
Property	13.6500	6.0283	0.2735	5.7548
ROE				
ROE Adjustment				
Supplemental Rate				8.1814
Totals	214.9093	207.2876	9.4046	206.0644

Medicaid Trend Adjustment



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Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1990/07	2,678,000	0.00	0.5899	0.5899		60	28.88	1,810,440	1,810,440	1
1991/01		0.10	0.5899	0.5899		60	28.88	1,811,001	1,831,800	
1991/07		0.10	1.4932	1.4932		60	28.88	1,812,421	1,859,160	
1992/01		0.20	2.0117	2.0117		60	28.88	1,816,250	1,896,540	
1992/07		0.20	1.8152	1.8152		60	28.88	1,819,712	1,930,980	
1993/01		0.30	1.7710	1.7710		60	28.88	1,824,789	1,965,180	
1993/07		0.30	1.5329	1.5329		60	32.35	1,829,725	1,995,300	
1994/01		0.40	1.6983	1.6983		60	32.35	1,837,036	2,029,200	
1994/07		0.40	1.5991	1.5991		60	30.00	1,843,445	2,061,660	
1995/01		0.50	1.5812	1.5812		60	30.00	1,851,395	2,094,240	
1995/07		0.50	1.5250	1.5250		60	36.32	1,860,717	2,126,160	
1996/01		0.60	1.7228	1.7228		60	36.32	1,873,419	2,162,820	
1996/07		0.60	1.3294	1.3294		60	33.35	1,882,480	2,191,560	
1997/01		0.70	1.4109	1.4109		60	33.35	1,893,753	2,222,460	
1997/07		0.70	1.0917	1.0917		60	32.99	1,902,434	2,246,700	
1998/01		0.80	1.1663	1.1663		60	32.99	1,913,081	2,272,920	
1998/07		0.80	1.0794	1.0794		60	31.63	1,922,581	2,297,460	
1999/01		0.90	1.4499	1.4499		60	31.63	1,937,009	2,330,760	
1999/07		0.90	1.2299	1.2299		60	31.63	1,949,339	2,359,440	
2000/01		1.00	1.3356	1.3356		60	31.63	1,964,312	2,390,940	
2000/07	2,246,700	1.00	1.1129	1.1129		120	19.42	4,211,012	4,835,040	
2001/01		1.00	1.2976	1.2976		120	19.42	4,211,012	4,897,800	
2001/07		1.00	0.9615	0.9615		120	37.24	4,238,427	4,944,840	
2002/01		1.00	1.0301	1.0301		120	37.24	4,267,989	4,995,720	
2002/07		1.00	0.8337	0.8337		120	46.64	4,298,163	5,037,360	
2003/01		1.00	1.3271	1.3271		120	46.64	4,346,534	5,104,200	
2003/07	162,787	1.00	1.1664	1.1664		120	42.59	4,548,580	5,163,720	
2004/01		1.00	1.1103	1.1103		120	42.59	4,587,688	5,221,080	
2004/07		1.00	0.8378	0.8378		120	45.61	4,619,562	5,264,880	
2005/01		1.00	0.8595	0.8595		120	45.61	4,652,488	5,310,120	



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206.06

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2005/07		1.00	0.7364	0.7364		120	50.29	4,683,815	5,349,240	
2006/01		1.00	0.9068	0.9068		120	50.29	4,722,651	5,397,720	
2006/07		1.00	0.8133	0.8133		120	50.29	4,757,771	5,441,640	
2007/01		1.00	1.0133	1.0133		120	47.36	4,799,285	5,496,720	
2007/07		1.00	1.1050	1.1050		120	47.36	4,844,950	5,557,440	
2008/01		1.00	0.8556	0.8556		120	42.08	4,876,666	5,604,960	
2008/07		1.00	0.6104	0.6104		120	42.08	4,899,441	5,639,160	
2009/01	58,833	1.00	1.3268	1.3268		120	43.94	5,010,208	5,714,040	
2009/07	27,339	1.00	0.6841	0.6841		120	42.80	5,064,219	5,753,160	
2010/01		1.00	0.8643	0.8643		120	42.80	5,098,280	5,802,840	
2010/07		1.00	0.7107	0.7107		120	42.80	5,126,476	5,844,120	
2011/01		0.95	0.9198	0.9198		120	39.12	5,158,338	5,897,880	
2011/07		0.95	0.9028	0.9028		120	39.80	5,190,354	5,951,160	
2012/01		0.90	0.3865	0.3865		120	39.80	5,203,421	5,974,200	
2012/07	51,239	0.90	0.9417	0.9417		120	40.79	5,287,365	6,030,480	
2013/01		0.85	0.4901	0.4901		120	40.79	5,303,701	6,060,000	
2013/07		0.85	0.6196	0.6196		120	40.79	5,324,418	6,097,560	
2014/01		0.80	0.8564	0.8564		120	38.29	5,349,813	6,149,760	
2014/07		0.80	1.2383	1.2383		120	32.01	5,380,656	6,225,960	
2015/01	80,197	0.75	0.7571	0.7571		120	32.01	5,478,634	6,273,120	
2015/09		0.75	1.5736	1.5736		120	32.01	5,516,265	6,371,880	
2016/09		0.70	1.9890	1.9890		120	32.01	5,560,964	6,498,600	

Message Code:

1 Per Bed Standard Limitation

2Z0S4 Report Calculated: 6/30/2016 8:16:40 AM

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