



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 001135-00 - 2014/07

228.12

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	10/1/2012-9/30/2013	Number of Beds: 60	Superior: 0
LIVE OAK, FL 32060	Days in CR 365	Maximum: 21,900	Standard: 184
County: Suwannee [61]	First Used : 2014/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 20,706	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,502	Inflation
Current Class North Small	Initial CR? False	Medicaid: 12,082	FY Index: 1.30932625
Class at 1/94: North Small	Medical Utilization	58.35024%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.54795%	Cost: 1.02881379
Open Date: 01/21/1988	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/21/1988	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 01/21/1988	Low Occupancy Adjustment Factor:	120.36490%	DC Sem Index: 1.24200000
Med # Active Date: 06/01/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 257109			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	663,976	824,348	643,846	451,988		2,584,158	
1a	Audit Adjustments							
2	Cost Per Diem	54.9558	68.2294	53.2897	37.4100		213.8849	
3	Cost Per Diem Inflated	56.5393	69.9471	54.8252				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	56.5393	69.9471	54.8252	37.4100		218.7216	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.4975		56.3577				
7	Provider Target Rate	57.6747		57.5320				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	53.3690	69.9471	54.8252	13.6500		191.7913	
12/13	Medical Adjustment Rate		0.6571	0.5150				
14	Prospective Per Diem 11	53.3690	70.6042	55.3402	13.6500		192.9634	
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:	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):	2,453,172	16.4558
Indexed Asset Value	3,066,465	<60% of Base:	False	20% ROE(2):	613,293	0.5187
FRVS Base Asset:	1,765,380	Interest Rate:	12.0100%	Insurance Cost(3):	33,929	1.6386
Occup Adj Factor	0.9000	Chase Rate:	10.5000%	Taxes Cost(3):	41,268	1.9930
ROE Factor	0.016670	Amortization Rate:	12.0100%	Home Office(3):	15,663	0.7564
		Interest Only:	False	Replacement(3&4):	28,390	0.0000
		Yearly Payment:	324,344	Total FRVS PD:		21.3625

- (1) 80% Capital (\$2,453,172) amortized at 12.0100 % for 20 years Principal & Interest of \$324,344 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$16.4558
- (2) 20% ROE (\$613,293) times the ROE factor (0.016670) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.5187
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,765,380

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3690	53.3690	0.9476	52.4214
Direct Care	70.6042	70.6042	1.2536	69.3506
Indirect Care	55.3402	55.3402	0.9826	54.3576
Property	13.6500	21.3625	0.3793	20.9832
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.1086
Supplemental Rate Add-on				9.9025
Totals	192.9634	200.6759	3.5631	228.1239

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	18,913	1.00	0.8133	0.8133		60	72.08	2,705,698	2,720,820	
2007/01		1.00	1.0133	1.0133		60	72.08	2,733,115	2,748,360	
2007/07		1.00	1.1050	1.1050		60	75.91	2,763,316	2,778,720	
2008/01		1.00	0.8556	0.8556		60	75.91	2,786,959	2,802,480	
2008/07		0.95	0.6104	0.6104		60	70.06	2,803,121	2,819,580	
2009/01		0.95	1.3268	1.3268		60	68.65	2,838,454	2,857,020	
2009/07		0.90	0.6841	0.6841		60	68.65	2,855,930	2,876,580	
2010/01		0.90	0.8643	0.8643		60	68.65	2,878,146	2,901,420	
2010/07		0.85	0.7107	0.7107		60	60.74	2,895,533	2,922,060	
2011/01		0.85	0.9198	0.9198		60	61.34	2,918,170	2,948,940	
2011/07		0.80	0.9028	0.9028		60	61.34	2,939,245	2,975,580	
2012/01	9,050	0.80	0.3865	0.3865		60	62.56	2,957,383	2,987,100	
2012/07		0.75	0.9417	0.9417		60	62.56	2,978,271	3,015,240	
2013/01		0.75	0.4901	0.4901		60	62.56	2,989,219	3,030,000	
2013/07	21,669	0.70	0.6196	0.6196		60	55.87	3,023,852	3,048,780	
2014/01		0.70	0.8564	0.8564		60	55.87	3,041,980	3,074,880	
2014/07		0.65	1.2383	1.2383		60	58.35	3,066,465	3,112,980	

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	10/1/2012-9/30/2013	Number of Beds: 120	Superior: 0
LAKE WORTH, FL 33461	Days in CR 365	Maximum: 43,800	Standard: 184
County: Palm Beach [50]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 36,524	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,479	Inflation
Current Class South Large	Initial CR? False	Medicaid: 20,805	FY Index: 1.30932625
Class at 1/94: South Large	Medical Utilization	56.96255%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	83.38813%	Cost: 1.02881379
Open Date: 07/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 07/01/1984	Low Occupancy Adjustment Factor:	106.15781%	DC Sem Index: 1.24200000
Med # Active Date: 06/01/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 257117			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,068,891	1,617,577	1,250,737	968,057		4,905,262	
1a	Audit Adjustments							
2	Cost Per Diem	51.3766	77.7494	60.1171	46.5300		235.7731	
3	Cost Per Diem Inflated	52.8570	79.7068	61.8493				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.8570	79.7068	61.8493	46.5300		240.9431	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.1804		55.4668				
7	Provider Target Rate	52.2468		56.6225				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	52.2468	79.7068	56.6225	13.6500		202.2261	
12/13	Medical Adjustment Rate		0.6243	0.4435				
14	Prospective Per Diem 11	52.2468	80.3311	57.0660	13.6500		203.2939	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,646,747 12.2907
Indexed Asset Value	5,808,434	<60% of Base:	True	20% ROE(2):	1,161,687 0.4913
FRVS Base Asset:	3,420,000	Interest Rate:	10.5000%	Insurance Cost(3):	55,079 1.5080
Occup Adj Factor	0.9000	Chase Rate:	10.5000%	Taxes Cost(3):	72,378 1.9817
ROE Factor	0.016670	Amortization Rate:	10.5000%	Home Office(3):	29,669 0.8123
		Interest Only:	True	Replacement(3&4):	142,906 0.0000
		Yearly Payment:	484,499	Total FRVS PD:	17.0840

- (1) 80% Capital (\$4,646,747) amortized at 10.5000 % for 20 years Interest of \$484,499 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$12.2907
- (2) 20% ROE (\$1,161,687) times the ROE factor (0.016670) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4913
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.2468	52.2468	0.9276	51.3192
Direct Care	80.3311	80.3311	1.4263	78.9048
Indirect Care	57.0660	57.0660	1.0132	56.0528
Property	13.6500	17.0840	0.3033	16.7807
ROE				
ROE Adjustment				
Quality - Assess Medicaid Share				18.5064
Supplemental Rate Add-on				9.9025
Totals	203.2939	206.7279	3.6704	231.4664

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	50.16	5,274,729	5,441,640	
2007/01		0.85	1.0133	1.0133		120	50.16	5,316,162	5,496,720	
2007/07		0.85	1.1050	1.1050		120	58.34	5,366,097	5,557,440	
2008/01		0.80	0.8556	0.8556		120	58.34	5,402,828	5,604,960	
2008/07		0.80	0.6104	0.6104		120	59.26	5,402,828	5,639,160	5
2009/01		0.75	1.3268	1.3268		120	58.92	5,483,236	5,714,040	
2009/07		0.75	0.6841	0.6841		120	58.92	5,511,370	5,753,160	
2010/01		0.70	0.8643	0.8643		120	58.92	5,544,714	5,802,840	
2010/07		0.70	0.7107	0.7107		120	51.95	5,570,769	5,844,120	
2011/01		0.65	0.9198	0.9198		120	46.65	5,599,020	5,897,880	
2011/07		0.65	0.9028	0.9028		120	46.65	5,626,887	5,951,160	
2012/01		0.60	0.3865	0.3865		120	52.95	5,639,449	5,974,200	
2012/07		0.60	0.9417	0.9417		120	52.95	5,670,124	6,030,480	
2013/01		0.55	0.4901	0.4901		120	52.95	5,684,841	6,060,000	
2013/07	45,880	0.55	0.6196	0.6196		120	52.47	5,749,204	6,097,560	
2014/01		0.50	0.8564	0.8564		120	52.47	5,772,690	6,149,760	



Florida Agency for Health Care Administration
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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
2014/07		0.50	1.2383	1.2383		120	56.96	5,808,434	6,225,960	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 001136093020131001201204222014154910



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 001416-00 - 2014/07

208.56

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	1/1/2012-12/31/2012	Number of Beds: 24	Superior: 0
VERO BEACH, FL 32960	Days in CR 366	Maximum: 8,784	Standard: 184
County: Indian River [31]	First Used : 2014/01	Max Annualized: 8,760	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 8,251	Total: 184
Control: Nonprofit : Church	Unaudited	Medicare: 0	Inflation
Current Class South Small	Initial CR? False	Medicaid: 3,799	FY Index: 1.28335532
Class at 1/94: South Small	Medical Utilization	46.04290%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.93215%	Cost: 1.04963363
Open Date: 01/01/1955	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1955	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 07/30/2008	Low Occupancy Adjustment Factor:	119.58095%	DC Sem Index: 1.24200000
Med # Active Date: 07/30/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	179,314	280,953	266,214	14,094		740,574
1a	Audit Adjustments						
2	Cost Per Diem	47.2003	73.9544	70.0748	3.7099		194.9394
3	Cost Per Diem Inflated	49.5430	76.3837	73.5529			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	49.5430	76.3837	73.5529	3.7099		203.1895
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	58.0009		85.1378			
7	Provider Target Rate	59.2094		86.9117			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500		
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810			
10	Target Rate Class Ceiling	68.3236		80.3359			
10a	New Provider Target Limitation	70.9994		78.4901			
10b	Base for line 10a	69.5503		76.8881			
11	Lesser of 5,7,8,10, 10a	49.5430	76.3837	73.5529	3.7099		203.1895
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	49.5430	76.3837	73.5529	3.7099		203.1895
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

0 001416-00 - 2014/07

208.56

Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	208,298 1.5661
RS to Start Calcs:	1971/07	<60% of Base:	True	20% ROE(2):	52,075 0.0963
Indexed Asset Value	260,373	Interest Rate:	0.0000%	Insurance Cost(3):	9,130 1.1065
FRVS Base Asset:	0	Chase Rate:	6.0000%	Taxes Cost(3):	0 0.0000
Occup Adj Factor	0.9000	Amortization Rate:	6.0000%	Home Office(3):	0 0.0000
ROE Factor	0.014580	Interest Only:	True	Replacement(3&4):	1,514 0.0000
		Yearly Payment:	12,347	Total FRVS PD:	2.7689

- (1) 80% Capital (\$208,298) amortized at 6.0000 % for 20 years Interest of \$12,347 divided by annual available days (8760) divided by Occup. Adj. (0.900) = \$1.5661
- (2) 20% ROE (\$52,075) times the ROE factor (0.014580) divided by annual available days (8760) divided by Occup. Adj. (0.900) = \$0.0963
- (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:	51,883
Comparison Bed	24	Effective PBS Limitation	256,056

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.5430	49.5430	0.8796	48.6634
Direct Care	76.3837	76.3837	1.3562	75.0275
Indirect Care	73.5529	73.5529	1.3059	72.2470
Property	3.7099	2.7689	0.0492	2.7197
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Totals	203.1895	202.2485	3.5909	208.5601

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 001416-00 - 2014/07
208.56

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

0 002400-00 - 2014/07

255.70

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	1/1/2013-12/31/2013	Number of Beds: 104	Superior: 0
PORT CHARLOTTE, FL 33952	Days in CR 365	Maximum: 37,960	Standard: 184
County: Charlotte [8]	First Used : 2014/07	Max Annualized: 37,960	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 35,296	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 11,622	Inflation
Current Class South Large	Initial CR? False	Medicaid: 16,497	FY Index: 1.31456505
Class at 1/94: South Large	Medical Utilization	46.73901%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.98209%	Cost: 1.02471376
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 09/22/1987	Low Occupancy Adjustment Factor:	118.37147%	DC Sem Index: 1.24200000
Med # Active Date: 09/30/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 317179			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	963,492	1,601,279	1,032,665	382,235	4,587	3,984,258	
1a	Audit Adjustments							
2	Cost Per Diem	58.4041	97.0649	62.5971	23.1700	0.2781	241.5142	
3	Cost Per Diem Inflated	59.8475	99.2219	64.1441				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	59.8475	99.2219	64.1441	23.1700	0.2781	246.6616	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	76.5447		73.5793				
7	Provider Target Rate	78.1396		75.1124				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	60.7949		68.5904				
10b	Base for line 10a	59.5540		67.1904				
11	Lesser of 5,7,8,10, 10a	54.4176	98.4475	63.9416	13.6500	0.2781	230.7348	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	54.4176	98.4475	63.9416	13.6500	0.2781	230.7348	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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255.70

Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	5,200,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,316,666 12.6822
RS to Start Calcs:	1987/07	<60% of Base:	False	20% ROE(2):	1,079,166 0.5923
Indexed Asset Value	5,395,832	Interest Rate:	8.0000%	Insurance Cost(3):	74,020 2.0971
FRVS Base Asset:	3,036,280	Chase Rate:	5.0000%	Taxes Cost(3):	49,696 1.4080
Occup Adj Factor	0.9000	Amortization Rate:	8.0000%	Home Office(3):	32,855 0.9308
ROE Factor	0.018750	Interest Only:	False	Replacement(3&4):	319,476 0.0000
		Yearly Payment:	433,276	Total FRVS PD:	17.7104

- (1) 80% Capital (\$4,316,666) amortized at 8.0000 % for 20 years Principal & Interest of \$433,276 divided by annual available days (37960) divided by Occup. Adj. (0.900) = \$12.6822
- (2) 20% ROE (\$1,079,166) times the ROE factor (0.018750) divided by annual available days (37960) divided by Occup. Adj. (0.900) = \$0.5923
- (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:	51,883
Comparison Bed	104	Effective PBS Limitation	3,036,280

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	98.4475	98.4475	1.7479	96.6996
Indirect Care	63.9416	63.9416	1.1353	62.8063
Property	13.6500	17.7104	0.3144	17.3960
ROE	0.2781	0.2782	0.0049	0.2733
ROE Adjustment	-0.2781	-0.2782	-0.0049	-0.2733
Quality Assess-Medicaid Share				15.4440
Supplemental Rate Add-on				9.9025
Totals	230.4567	234.5171	4.1638	255.6998

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 002400-00 - 2014/07

255.70

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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255.70

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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

Message Code:

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



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 005219-00 - 2014/07

227.53

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	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
SAINT CLOUD, FL 34772	Days in CR 365	Maximum: 43,800	Standard: 184
County: Osceola [49]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 41,484	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,412	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,068	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	67.65982%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.71233%	Cost: 1.03716397
Open Date: 06/11/1991	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/11/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 10/28/1991	Low Occupancy Adjustment Factor:	120.57416%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 217859			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,194,471	2,176,321	1,524,469	634,056		5,529,317	
1a	Audit Adjustments							
2	Cost Per Diem	42.5563	77.5374	54.3134	22.5900		196.9971	
3	Cost Per Diem Inflated	44.1379	79.6868	56.3319				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.1379	79.6868	56.3319	22.5900		202.7466	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.3957		62.8937				
7	Provider Target Rate	58.5916		64.2041				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	51.9035		60.3116				
10b	Base for line 10a	50.8441		59.0806				
11	Lesser of 5,7,8,10, 10a	44.1379	79.6868	56.3319	13.6500		193.8066	
12/13	Medical Adjustment Rate		1.5832	1.1192				
14	Prospective Per Diem 11	44.1379	81.2700	57.4511	13.6500		196.5090	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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0 005219-00 - 2014/07

227.53

Rate Semester 07/01/2014 through 12/31/2014

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):	4,524,642 14.2170
Indexed Asset Value	5,655,803	<60% of Base:	False	20% ROE(2):	1,131,161 0.4126
FRVS Base Asset:	3,642,240	Interest Rate:	12.0000%	Insurance Cost(3):	64,152 1.5464
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	50,903 1.2271
ROE Factor	0.014380	Amortization Rate:	11.0000%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	560,434	Total FRVS PD:	17.4031

- (1) 80% Capital (\$4,524,642) amortized at 11.0000 % for 20 years Principal & Interest of \$560,434 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.2170
- (2) 20% ROE (\$1,131,161) times the ROE factor (0.014380) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4126
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.1379	44.1379	0.7837	43.3542
Direct Care	81.2700	81.2700	1.4430	79.8270
Indirect Care	57.4511	57.4511	1.0201	56.4310
Property	13.6500	17.4031	0.3090	17.0941
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9236
Supplemental Rate Add-on				9.9025
Totals	196.5090	200.2621	3.5558	227.5324

Medicaid Trend Adjustment



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227.53

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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227.53

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

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



Florida Agency for Health Care Administration
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0 005372-00 - 2014/07

206.20

Debary 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
60 N HWY 17/92	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 184
DEBARY, FL 32713	Days in CR 366	Maximum: 43,920	Standard: 0
County: Volusia [64]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 41,463	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,736	Inflation
Current Class North Large	Initial CR? False	Medicaid: 28,630	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization		Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy: 94.40574%	69.04951%	Cost: 1.04963363
Open Date: 07/01/1983	Statewide Low Occupancy Threshold: 78.55110%	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1983	Medicaid Low Occupancy Threshold: 41.17760%	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 07/01/1983	Low Occupancy Adjustment Factor: 120.18385%	120.18385%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor: 100.00000%	100.00000%	DC Inflation: 1.03284823
Previous Med # 213551			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,082,857	2,259,897	1,114,216	776,732		5,233,701	
1a	Audit Adjustments							
2	Cost Per Diem	37.8225	78.9346	38.9178	27.1300		182.8049	
3	Cost Per Diem Inflated	39.6998	81.5275	40.8494				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	39.6998	81.5275	40.8494	27.1300		189.2067	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	43.4351		57.4316				
7	Provider Target Rate	44.3401		58.6282				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	49.3728		60.0463				
10b	Base for line 10a	48.3651		58.8207				
11	Lesser of 5,7,8,10, 10a	39.6998	81.5275	40.8494	13.6500		175.7267	
12/13	Medical Adjustment Rate		1.7472	0.8754				
14	Prospective Per Diem 11	39.6998	83.2747	41.7248	13.6500		178.3493	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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206.20

Rate Semester 07/01/2014 through 12/31/2014

Debary Manor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	02/01/1998	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,008,973.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Variable	80% Capital(1):	4,006,315	10.4875
Indexed Asset Value	5,007,894	<60% of Base:	False	20% ROE(2):	1,001,579	0.3704
FRVS Base Asset:	1,460,322	Interest Rate:	8.3750%	Insurance Cost(3):	31,910	0.7696
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	43,900	1.0588
ROE Factor	0.014580	Amortization Rate:	8.3750%	Home Office(3):	63,532	1.5323
		Interest Only:	False	Replacement(3&4):	155,212	0.0000
		Yearly Payment:	413,417	Total FRVS PD:		14.2186

- (1) 80% Capital (\$4,006,315) amortized at 8.3750 % for 20 years Principal & Interest of \$413,417 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.4875
- (2) 20% ROE (\$1,001,579) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3704
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	39.6998	39.6998	0.7049	38.9949
Direct Care	83.2747	83.2747	1.4786	81.7961
Indirect Care	41.7248	41.7248	0.7408	40.9840
Property	13.6500	14.2186	0.2525	13.9661
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.5600
Supplemental Rate Add-on				9.9025
Totals	178.3493	178.9179	3.1768	206.2036

Medicaid Trend Adjustment



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206.20

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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206.20

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 - 2014/07

206.20

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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 005372123120120101201205112013132015



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 005374-00 - 2014/07

219.83

Flagler Pines

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	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 0
BUNNELL, FL 32110	Days in CR 365	Maximum: 43,800	Standard: 184
County: Flagler [18]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 40,018	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,325	Inflation
Current Class North Large	Initial CR? False	Medicaid: 22,500	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	56.22470%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.36530%	Cost: 1.02471376
Open Date: 11/25/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/25/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 11/25/1985	Low Occupancy Adjustment Factor:	116.31320%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 213519			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,019,407	1,866,150	1,106,779	594,450		4,586,786	
1a	Audit Adjustments							
2	Cost Per Diem	45.3070	82.9400	49.1902	26.4200		203.8572	
3	Cost Per Diem Inflated	46.4267	84.7831	50.4059				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.4267	84.7831	50.4059	26.4200		208.0357	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	43.0010		60.1864				
7	Provider Target Rate	43.8970		61.4404				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.9880		60.1008				
10b	Base for line 10a	47.0085		58.8741				
11	Lesser of 5,7,8,10, 10a	43.8970	84.7831	50.4059	13.6500		192.7360	
12/13	Medical Adjustment Rate		0.5937	0.3530				
14	Prospective Per Diem 11	43.8970	85.3768	50.7589	13.6500		193.6827	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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219.83

Rate Semester 07/01/2014 through 12/31/2014

Flagler Pines

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	07/01/2004	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	3,100,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	3,334,964	10.8265
RS to Start Calcs:	1985/10	<60% of Base:	False	20% ROE(2):	833,741	0.3966
Indexed Asset Value	4,168,705	Interest Rate:	11.5000%	Insurance Cost(3):	34,457	0.8610
FRVS Base Asset:	2,444,854	Chase Rate:	8.5000%	Taxes Cost(3):	33,288	0.8318
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	61,208	1.5295
ROE Factor	0.018750	Interest Only:	False	Replacement(3&4):	79,253	0.0000
		Yearly Payment:	426,781	Total FRVS PD:		14.4454

- (1) 80% Capital (\$3,334,964) amortized at 11.5000 % for 20 years Principal & Interest of \$426,781 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.8265
- (2) 20% ROE (\$833,741) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3966
- (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:	51,883
Comparison Bed	100	Effective PBS Limitation	2,850,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.8970	43.8970	0.7794	43.1176
Direct Care	85.3768	85.3768	1.5159	83.8609
Indirect Care	50.7589	50.7589	0.9012	49.8577
Property	13.6500	14.4454	0.2565	14.1889
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.9046
Supplemental Rate Add-on				9.9025
Totals	193.6827	194.4781	3.4530	219.8322

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	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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219.83

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	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 005379-00 - 2014/07

214.19

Longwood 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
1520 S GRANT ST	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
LONGWOOD, FL 32750	Days in CR 366	Maximum: 43,920	Standard: 184
County: Seminole [59]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 41,039	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,539	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,336	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	66.60981%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.44035%	Cost: 1.04963363
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	118.95486%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 214159			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,194,891	2,084,872	1,222,315	734,245		5,236,322	
1a	Audit Adjustments							
2	Cost Per Diem	43.7113	76.2684	44.7145	26.8600		191.5542	
3	Cost Per Diem Inflated	45.8809	78.7737	46.9338				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.8809	78.7737	46.9338	26.8600		198.4484	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	45.6280		60.5159				
7	Provider Target Rate	46.5787		61.7768				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	51.3154		61.9619				
10b	Base for line 10a	50.2680		60.6972				
11	Lesser of 5,7,8,10, 10a	45.8809	78.7737	46.9338	13.6500		185.2384	
12/13	Medical Adjustment Rate		1.4720	0.8770				
14	Prospective Per Diem 11	45.8809	80.2457	47.8108	13.6500		187.5874	
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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214.19

Rate Semester 07/01/2014 through 12/31/2014

Longwood Health Care 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):	3,350,080 8.3326
Indexed Asset Value	4,187,600	<60% of Base:	False	20% ROE(2):	837,520 0.3098
FRVS Base Asset:	2,415,321	Interest Rate:	7.6872%	Insurance Cost(3):	30,345 0.7394
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	38,922 0.9484
ROE Factor	0.014580	Amortization Rate:	7.6872%	Home Office(3):	63,364 1.5440
		Interest Only:	False	Replacement(3&4):	156,600 0.0000
		Yearly Payment:	328,473	Total FRVS PD:	11.8742

- (1) 80% Capital (\$3,350,080) amortized at 7.6872 % for 20 years Principal & Interest of \$328,473 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$8.3326
 (2) 20% ROE (\$837,520) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3098
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.8809	45.8809	0.8146	45.0663
Direct Care	80.2457	80.2457	1.4248	78.8209
Indirect Care	47.8108	47.8108	0.8489	46.9619
Property	13.6500	11.8742	0.2108	11.6634
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.7707
Supplemental Rate Add-on				9.9025
Totals	187.5874	185.8116	3.2991	214.1857

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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214.19

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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214.19

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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214.19

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 005379123120120101201204252013120320



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 005380-00 - 2014/07

218.07

The Rehabilitation Center of Winter 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
1700 MONROE AVE	1/1/2012-12/31/2012	Number of Beds: 180	Superior: 0
MAITLAND, FL 32751	Days in CR 366	Maximum: 65,880	Standard: 184
County: Orange [48]	First Used : 2014/01	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 50,466	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,477	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 35,234	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	69.81730%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	76.60291%	Cost: 1.04963363
Open Date: 03/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 03/01/1983	Low Occupancy Adjustment Factor:	97.51984%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 214167			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,398,298	2,713,005	1,669,985	801,926		6,583,214
1a	Audit Adjustments						
2	Cost Per Diem	39.6860	76.9996	47.3970	22.7600		186.8426
3	Cost Per Diem Inflated	41.6558	79.5289	49.7495			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	41.6558	79.5289	49.7495	22.7600		193.6942
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	54.3499		62.5143			
7	Provider Target Rate	55.4823		63.8168			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	56.0239		63.5749			
10b	Base for line 10a	54.8804		62.2773			
11	Lesser of 5,7,8,10, 10a	41.6558	79.5289	49.7495	13.6500		184.5842
12/13	Medical Adjustment Rate		1.7731	1.1091			
14	Prospective Per Diem 11	41.6558	81.3020	50.8586	13.6500		187.4664
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

The Rehabilitation Center of Winter Park

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/01/1985	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	3,800,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,919,998 12.9388
RS to Start Calcs:	1982/07	<60% of Base:	False	20% ROE(2):	1,229,999 0.3033
Indexed Asset Value	6,149,997	Interest Rate:	14.7160%	Insurance Cost(3):	45,983 0.9112
FRVS Base Asset:	3,384,742	Chase Rate:	13.0000%	Taxes Cost(3):	64,947 1.2869
Occup Adj Factor	0.9000	Amortization Rate:	14.7160%	Home Office(3):	72,594 1.4385
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	161,138 0.0000
		Yearly Payment:	765,072	Total FRVS PD:	16.8787

- (1) 80% Capital (\$4,919,998) amortized at 14.7160 % for 20 years Principal & Interest of \$765,072 divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$12.9388
- (2) 20% ROE (\$1,229,999) times the ROE factor (0.014580) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.3033
- (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:	51,883
Comparison Bed	180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	41.6558	41.6558	0.7396	40.9162
Direct Care	81.3020	81.3020	1.4435	79.8585
Indirect Care	50.8586	50.8586	0.9030	49.9556
Property	13.6500	16.8787	0.2997	16.5790
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.8630
Supplemental Rate Add-on				9.9025
Totals	187.4664	190.6951	3.3858	218.0748

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	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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218.07

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		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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218.07

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		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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 005380123120120101201205112013141029



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 005381-00 - 2014/07

210.30

Brynwood 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 STREET	1/1/2012-12/31/2012	Number of Beds: 97	Superior: 0
MONTICELLO, FL 32344	Days in CR 366	Maximum: 35,502	Standard: 184
County: Jefferson [33]	First Used : 2014/01	Max Annualized: 35,405	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 30,675	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,493	Inflation
Current Class North Small	Initial CR? False	Medicaid: 21,790	FY Index: 1.28335532
Class at 1/94: North Small	Medical Utilization	71.03504%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	86.40358%	Cost: 1.04963363
Open Date: 04/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 04/01/1987	Low Occupancy Adjustment Factor:	109.99665%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 253855			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	917,676	1,705,320	766,742	445,823		3,835,560	
1a	Audit Adjustments							
2	Cost Per Diem	42.1145	78.2616	35.1878	20.4600		176.0239	
3	Cost Per Diem Inflated	44.2048	80.8324	36.9343				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.2048	80.8324	36.9343	20.4600		182.4315	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	45.7025		56.3577				
7	Provider Target Rate	46.6548		57.5320				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	49.8171		62.4173				
10b	Base for line 10a	48.8003		61.1433				
11	Lesser of 5,7,8,10, 10a	44.2048	80.8324	36.9343	13.6500		175.6215	
12/13	Medical Adjustment Rate		1.9129	0.8740				
14	Prospective Per Diem 11	44.2048	82.7453	37.8083	13.6500		178.4084	
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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0 005381-00 - 2014/07

210.30

Rate Semester 07/01/2014 through 12/31/2014

Brynwood Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/01/2002	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	1,684,000.00		Total Amount	Per Diem
RS to Start Calcs:	1987/01	Type:	Fixed	80% Capital(1):	2,908,162	10.8975
Indexed Asset Value	3,635,202	<60% of Base:	False	20% ROE(2):	727,040	0.3327
FRVS Base Asset:	1,720,920	Interest Rate:	10.4500%	Insurance Cost(3):	19,423	0.6332
Occup Adj Factor	0.9000	Chase Rate:	10.0000%	Taxes Cost(3):	35,462	1.1561
ROE Factor	0.014580	Amortization Rate:	10.4500%	Home Office(3):	52,087	1.6980
		Interest Only:	False	Replacement(3&4):	124,752	0.0000
		Yearly Payment:	347,243	Total FRVS PD:		14.7175

(1) 80% Capital (\$2,908,162) amortized at 10.4500 % for 20 years Principal & Interest of \$347,243 divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$10.8975

(2) 20% ROE (\$727,040) times the ROE factor (0.014580) divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$0.3327

(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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,720,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.2048	44.2048	0.7849	43.4199
Direct Care	82.7453	82.7453	1.4692	81.2761
Indirect Care	37.8083	37.8083	0.6713	37.1370
Property	13.6500	14.7175	0.2613	14.4562
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.1078
Supplemental Rate Add-on				9.9025
Totals	178.4084	179.4759	3.1867	210.2995

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	

Message Code:

1 Per Bed Standard Limitation



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Nursing Pavilion at Chipola Retirement 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
4294 3RD AVENUE	1/1/2013-12/31/2013	Number of Beds: 60	Superior: 0
MARIANNA , FL 32446	Days in CR 365	Maximum: 21,900	Standard: 184
County: Jackson [32]	First Used : 2014/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 17,610	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,511	Inflation
Current Class North Small	Initial CR? False	Medicaid: 10,527	FY Index: 1.31456505
Class at 1/94: North Small	Medical Utilization	59.77853%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	80.41096%	Cost: 1.02471376
Open Date: 05/07/1991	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/07/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 05/07/1991	Low Occupancy Adjustment Factor:	102.36771%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 212237			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	543,333	770,294	545,732	308,441		2,167,800
1a	Audit Adjustments						
2	Cost Per Diem	51.6133	73.1732	51.8412	29.3000		205.9277
3	Cost Per Diem Inflated	52.8889	74.7993	53.1224			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	52.8889	74.7993	53.1224	29.3000		210.1106
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	46.4648		63.9254			
7	Provider Target Rate	47.4329		65.2573			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation	51.9835		62.6529			
10b	Base for line 10a	50.9225		61.3741			
11	Lesser of 5,7,8,10, 10a	47.4329	74.7993	53.1224	13.6500		189.0046
12/13	Medical Adjustment Rate		0.8229	0.5844			
14	Prospective Per Diem 11	47.4329	75.6222	53.7068	13.6500		190.4119
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

Nursing Pavilion at Chipola Retirement 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):	2,089,743	12.9167
Indexed Asset Value	2,612,179	<60% of Base:	False	20% ROE(2):	522,436	0.4970
FRVS Base Asset:	1,711,770	Interest Rate:	10.7500%	Insurance Cost(3):	369	0.0210
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	9,194	0.5221
ROE Factor	0.018750	Amortization Rate:	10.7500%	Home Office(3):	36,488	2.0720
		Interest Only:	False	Replacement(3&4):	41,682	0.0000
		Yearly Payment:	254,588	Total FRVS PD:		16.0288

- (1) 80% Capital (\$2,089,743) amortized at 10.7500 % for 20 years Principal & Interest of \$254,588 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$12.9167
- (2) 20% ROE (\$522,436) times the ROE factor (0.018750) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.4970
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,821,120

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.4329	47.4329	0.8422	46.5907
Direct Care	75.6222	75.6222	1.3427	74.2795
Indirect Care	53.7068	53.7068	0.9536	52.7532
Property	13.6500	16.0288	0.2846	15.7442
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5904
Supplemental Rate Add-on				9.9025
Totals	190.4119	192.7907	3.4231	220.8605

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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220.86

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:



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226.58

Glencove Nursing Pavilion

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	1/1/2012-12/31/2012	Number of Beds: 115	Superior: 0
PANAMA CITY, FL 32401	Days in CR 366	Maximum: 42,090	Standard: 184
County: Bay [3]	First Used : 2014/01	Max Annualized: 41,975	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 39,983	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,615	Inflation
Current Class North Large	Initial CR? False	Medicaid: 26,489	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	66.25066%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.99406%	Cost: 1.04963363
Open Date: 09/01/1992	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1992	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 09/01/1992	Low Occupancy Adjustment Factor:	120.93282%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 212181			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,050,295	2,209,102	1,336,182	821,954		5,417,533	
1a	Audit Adjustments							
2	Cost Per Diem	39.6502	83.3970	50.4429	31.0300		204.5201	
3	Cost Per Diem Inflated	41.6182	86.1364	52.9466				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	41.6182	86.1364	52.9466	31.0300		211.7312	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	45.6890		61.6967				
7	Provider Target Rate	46.6410		62.9822				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	49.9476		62.5273				
10b	Base for line 10a	48.9281		61.2511				
11	Lesser of 5,7,8,10, 10a	41.6182	86.1364	52.9466	13.6500		194.3512	
12/13	Medical Adjustment Rate		1.5747	0.9680				
14	Prospective Per Diem 11	41.6182	87.7111	53.9146	13.6500		196.8939	
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

0 005384-00 - 2014/07

226.58

Rate Semester 07/01/2014 through 12/31/2014

Glencove Nursing Pavilion

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):	4,130,273	13.3196
Indexed Asset Value	5,162,841	<60% of Base:	False	20% ROE(2):	1,032,568	0.3985
FRVS Base Asset:	3,635,035	Interest Rate:	10.7500%	Insurance Cost(3):	31,815	0.7957
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	63,145	1.5793
ROE Factor	0.014580	Amortization Rate:	10.7500%	Home Office(3):	64,751	1.6195
		Interest Only:	False	Replacement(3&4):	163,954	0.0000
		Yearly Payment:	503,181	Total FRVS PD:		17.7126

- (1) 80% Capital (\$4,130,273) amortized at 10.7500 % for 20 years Principal & Interest of \$503,181 divided by annual available days (41975) divided by Occup. Adj. (0.900) = \$13.3196
- (2) 20% ROE (\$1,032,568) times the ROE factor (0.014580) divided by annual available days (41975) divided by Occup. Adj. (0.900) = \$0.3985
- (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:	51,883
Comparison Bed	115	Effective PBS Limitation	3,635,035

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	41.6182	41.6182	0.7389	40.8793
Direct Care	87.7111	87.7111	1.5573	86.1538
Indirect Care	53.9146	53.9146	0.9573	52.9573
Property	13.6500	17.7126	0.3145	17.3981
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.2929
Supplemental Rate Add-on				9.9025
Totals	196.8939	200.9565	3.5680	226.5839

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
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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226.58

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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Panama City 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
924 W 13TH ST	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
PANAMA CITY, FL 32401	Days in CR 366	Maximum: 43,920	Standard: 184
County: Bay [3]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 40,967	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,871	Inflation
Current Class North Large	Initial CR? False	Medicaid: 28,157	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	68.73093%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.27641%	Cost: 1.04963363
Open Date: 08/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/01/1984	Low Occupancy Adjustment Factor:	118.74615%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 211851			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,032,314	2,264,042	1,311,278	577,782		5,185,416	
1a	Audit Adjustments							
2	Cost Per Diem	36.6628	80.4078	46.5702	20.5200		184.1608	
3	Cost Per Diem Inflated	38.4825	83.0491	48.8816				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	38.4825	83.0491	48.8816	20.5200		190.9332	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	44.0854		60.6538				
7	Provider Target Rate	45.0040		61.9176				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	48.1030		60.5542				
10b	Base for line 10a	47.1212		59.3182				
11	Lesser of 5,7,8,10, 10a	38.4825	83.0491	48.8816	13.6500		184.0632	
12/13	Medical Adjustment Rate		1.7500	1.0300				
14	Prospective Per Diem 11	38.4825	84.7991	49.9116	13.6500		186.8432	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Panama City Nursing Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	08/01/2004	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	600,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	2,005,412	6.3249
RS to Start Calcs:	1984/07	<60% of Base:	True	20% ROE(2):	501,353	0.1854
Indexed Asset Value	2,506,765	Interest Rate:	12.5000%	Insurance Cost(3):	29,561	0.7216
FRVS Base Asset:	1,395,468	Chase Rate:	12.5000%	Taxes Cost(3):	24,955	0.6091
Occup Adj Factor	0.9000	Amortization Rate:	12.5000%	Home Office(3):	62,209	1.5185
ROE Factor	0.014580	Interest Only:	True	Replacement(3&4):	233,177	0.0000
		Yearly Payment:	249,328	Total FRVS PD:		9.3595

- (1) 80% Capital (\$2,005,412) amortized at 12.5000 % for 20 years Interest of \$249,328 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$6.3249
- (2) 20% ROE (\$501,353) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.1854
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	38.4825	38.4825	0.6833	37.7992
Direct Care	84.7991	84.7991	1.5056	83.2935
Indirect Care	49.9116	49.9116	0.8862	49.0254
Property	13.6500	9.3595	0.1662	9.1933
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.1290
Supplemental Rate Add-on				9.9025
Totals	186.8432	182.5527	3.2413	213.3429

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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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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 005385123120120101201205112013123307



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 005386-00 - 2014/07

215.66

Riverchase 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
1017 STRONG RD	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 0
QUINCY, FL 32351	Days in CR 365	Maximum: 43,800	Standard: 184
County: Gadsden [20]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 41,375	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,375	Inflation
Current Class North Large	Initial CR? False	Medicaid: 34,220	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	82.70695%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.46347%	Cost: 1.02471376
Open Date: 11/19/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/19/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 11/19/1985	Low Occupancy Adjustment Factor:	120.25735%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 253413			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,472,435	2,423,349	1,559,632	792,193		6,247,609	
1a	Audit Adjustments							
2	Cost Per Diem	43.0285	70.8167	45.5766	23.1500		182.5718	
3	Cost Per Diem Inflated	44.0919	72.3904	46.7030				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.0919	72.3904	46.7030	23.1500		186.3353	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	45.5284		56.4720				
7	Provider Target Rate	46.4770		57.6486				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.9975		56.8423				
10b	Base for line 10a	47.0178		55.6821				
11	Lesser of 5,7,8,10, 10a	44.0919	72.3904	46.7030	13.6500		176.8353	
12/13	Medical Adjustment Rate		2.6636	1.7185				
14	Prospective Per Diem 11	44.0919	75.0540	48.4215	13.6500		181.2174	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Riverchase Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/01/1994	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:	1985/10	Type:	Fixed	80% Capital(1):	4,608,370	13.9587
Indexed Asset Value	5,760,463	<60% of Base:	False	20% ROE(2):	1,152,093	0.5480
FRVS Base Asset:	3,420,000	Interest Rate:	10.4500%	Insurance Cost(3):	28,199	0.6815
Occup Adj Factor	0.9000	Chase Rate:	11.5000%	Taxes Cost(3):	40,860	0.9876
ROE Factor	0.018750	Amortization Rate:	10.4500%	Home Office(3):	56,824	1.3734
		Interest Only:	False	Replacement(3&4):	70,206	0.0000
		Yearly Payment:	550,252	Total FRVS PD:		17.5492

- (1) 80% Capital (\$4,608,370) amortized at 10.4500 % for 20 years Principal & Interest of \$550,252 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$13.9587
- (2) 20% ROE (\$1,152,093) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.5480
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.0919	44.0919	0.7829	43.3090
Direct Care	75.0540	75.0540	1.3326	73.7214
Indirect Care	48.4215	48.4215	0.8597	47.5618
Property	13.6500	17.5492	0.3116	17.2376
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.9326
Supplemental Rate Add-on				9.9025
Totals	181.2174	185.1166	3.2868	215.6649

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	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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Suwannee 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
1620 E HELVENSTON ST	1/1/2012-12/31/2012	Number of Beds: 180	Superior: 0
LIVE OAK, FL 32064	Days in CR 366	Maximum: 65,880	Standard: 184
County: Suwannee [61]	First Used : 2014/01	Max Annualized: 65,700	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 62,883	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 12,117	Inflation
Current Class North Large	Initial CR? False	Medicaid: 49,184	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	78.21510%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.45082%	Cost: 1.04963363
Open Date: 04/01/1982	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/01/1982	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 09/01/1983	Low Occupancy Adjustment Factor:	121.51430%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 223719	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,953,535	3,681,656	2,186,094	1,401,252		9,222,537
1a	Audit Adjustments						
2	Cost Per Diem	39.7189	74.8547	44.4473	28.4900		187.5109
3	Cost Per Diem Inflated	41.6903	77.3135	46.6534			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	41.6903	77.3135	46.6534	28.4900		194.1472
5a	Interim Adjustment	0.0090	0.3128	0.1685			
5b	Interim Adjusted Per Diem	41.6993	77.6263	46.8219			
6	Prior Semester: Provider Target Base	46.2232		59.7801			
7	Provider Target Rate	47.1863		61.0257			
7a	Interim Adjustment	0.0090		0.1685			
7b	Interim Adjustment Provider Target Rate	47.1953		61.1942			
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	52.0272		61.9237			
10b	Base for line 10a	50.9565		60.4947			
11	Lesser of 5,7,8,10, 10a	41.6993	77.6263	46.8219	13.6500		179.7975
12/13	Medical Adjustment Rate		2.4640	1.4862			
14	Prospective Per Diem 11	41.6993	80.0903	48.3081	13.6500		183.7477
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Suwannee Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	09/01/1988	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	2,800,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	6,927,818	15.2851
RS to Start Calcs:	1982/01	<60% of Base:	False	20% ROE(2):	1,731,954	0.4271
Indexed Asset Value	8,659,772	Interest Rate:	11.8000%	Insurance Cost(3):	48,408	0.7698
FRVS Base Asset:	3,332,561	Chase Rate:	13.0000%	Taxes Cost(3):	79,293	1.2610
Occup Adj Factor	0.9000	Amortization Rate:	11.8000%	Home Office(3):	79,689	1.2673
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	252,515	0.0000
		Yearly Payment:	903,810	Total FRVS PD:		19.0103

- (1) 80% Capital (\$6,927,818) amortized at 11.8000 % for 20 years Principal & Interest of \$903,810 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$15.2851
- (2) 20% ROE (\$1,731,954) times the ROE factor (0.014580) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.4271
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	41.6993	41.6993	0.7404	40.9589
Direct Care	80.0903	80.0903	1.4220	78.6683
Indirect Care	48.3081	48.3081	0.8577	47.4504
Property	13.6500	19.0103	0.3375	18.6728
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.8993
Supplemental Rate Add-on				9.9025
Totals	183.7477	189.1080	3.3576	218.5522

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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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	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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218.55

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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ID: 005387123120120101201205112013141302



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243.51

Berkshire Manor

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
1255 NE 135TH STREET	1/1/2012-12/31/2012	Number of Beds: 245	Superior: 0
NORTH MIAMI , FL 33161	Days in CR 366	Maximum: 89,670	Standard: 184
County: Dade [13]	First Used : 2014/01	Max Annualized: 89,425	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 40,235	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 1,521	Inflation
Current Class South Large	Initial CR? False	Medicaid: 35,953	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	89.35752%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	44.87008%	Cost: 1.04963363
Open Date: 12/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 12/01/1983	Low Occupancy Adjustment Factor:	57.12215%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 228915	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,617,041	2,923,963	1,832,255	979,000		7,352,259
1a	Audit Adjustments						
2	Cost Per Diem	44.9765	81.3274	50.9625	27.2300		204.4964
3	Cost Per Diem Inflated	47.2088	83.9989	53.4920			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	47.2088	83.9989	53.4920	27.2300		211.9297
5a	Interim Adjustment	0.0301	2.4285	1.3076			
5b	Interim Adjusted Per Diem	47.2389	86.4274	54.7996			
6	Prior Semester: Provider Target Base	54.1833		64.0101			
7	Provider Target Rate	55.3123		65.3438			
7a	Interim Adjustment	0.0301		1.3076			
7b	Interim Adjustment Provider Target Rate	55.3424		66.6514			
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	58.0977		67.3016			
10b	Base for line 10a	56.8824		64.6470			
11	Lesser of 5,7,8,10, 10a	47.2389	86.4274	54.7996	13.6500		202.1159
12/13	Medical Adjustment Rate		3.8268	2.4264			
14	Prospective Per Diem 11	47.2389	90.2542	57.2260	13.6500		208.3691
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

Berkshire Manor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	02/01/1998	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	10,100,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	7,773,491	12.3603
RS to Start Calcs:	1983/07	<60% of Base:	False	20% ROE(2):	1,943,373	0.3521
Indexed Asset Value	9,716,864	Interest Rate:	11.5000%	Insurance Cost(3):	36,417	0.9051
FRVS Base Asset:	5,509,033	Chase Rate:	8.5000%	Taxes Cost(3):	56,677	1.4086
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	61,925	1.5391
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	89,058	0.0000
		Yearly Payment:	994,786	Total FRVS PD:		16.5652

- (1) 80% Capital (\$7,773,491) amortized at 11.5000 % for 20 years Principal & Interest of \$994,786 divided by annual available days (89425) divided by Occup. Adj. (0.900) = \$12.3603
- (2) 20% ROE (\$1,943,373) times the ROE factor (0.014580) divided by annual available days (89425) divided by Occup. Adj. (0.900) = \$0.3521
- (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:	51,883
Comparison Bed	245	Effective PBS Limitation	6,982,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.2389	47.2389	0.8387	46.4002
Direct Care	90.2542	90.2542	1.6025	88.6517
Indirect Care	57.2260	57.2260	1.0161	56.2099
Property	13.6500	16.5652	0.2941	16.2711
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				26.0735
Supplemental Rate Add-on				9.9025
Totals	208.3691	211.2843	3.7514	243.5089

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	5,464,260	0.00	3.9578	3.0000	0.9578	245	90.36	5,464,260	6,630,190	
1984/01		0.10	2.2530	2.2530		245	90.36	5,476,571	6,716,185	
1984/07		0.10	1.9179	1.9179		245	90.36	5,487,075	6,845,055	
1985/01		0.20	1.1471	1.1471		245	90.36	5,499,662	6,923,455	
1985/10		0.20	0.8522	0.8522		245	90.36	5,509,033	6,982,500	
1986/01		0.30	0.8299	0.8299		245	91.18	5,522,750	7,040,565	
1986/07		0.30	0.2974	0.2974		245	91.18	5,527,676	7,027,090	
1987/01		0.40	1.0091	1.0091		245	91.18	5,549,986	7,152,775	
1987/07		0.40	0.9007	0.9007		245	90.16	5,569,983	7,208,635	
1988/01		0.50	0.9007	0.9007		245	90.16	5,595,070	7,267,190	
1988/07		0.50	0.5899	0.5899		245	85.93	5,611,575	7,263,270	
1989/01		0.60	0.5899	0.5899		245	85.93	5,631,434	7,306,145	
1989/07		0.60	0.5899	0.5899		245	85.93	5,651,364	7,355,635	
1990/01		0.70	0.5899	0.5899		245	85.93	5,674,698	7,392,630	
1990/07		0.70	0.5899	0.5899		245	85.93	5,698,129	7,436,240	
1991/01		0.80	0.5899	0.5899		245	85.93	5,725,018	7,479,850	
1991/07	243,570	0.80	1.4932	1.4932		245	82.53	5,968,588	7,591,570	5
1992/01		0.90	2.0117	2.0117		245	82.53	6,146,279	7,744,205	
1992/07	68,648	0.90	1.8152	1.8152		245	87.00	6,315,339	7,884,835	
1993/01		1.00	1.7710	1.7710		245	87.00	6,427,184	8,024,485	
1993/07		1.00	1.5329	1.5329		245	88.78	6,525,706	8,147,475	
1994/01		1.00	1.6983	1.6983		245	88.78	6,525,706	8,285,900	5
1994/07		1.00	1.5991	1.5991		245	89.39	6,742,657	8,418,445	
1995/01		1.00	1.5812	1.5812		245	89.39	6,849,272	8,551,480	
1995/07		1.00	1.5250	1.5250		245	89.66	6,953,723	8,681,820	
1996/01		1.00	1.7228	1.7228		245	89.66	7,073,522	8,831,515	
1996/07		1.00	1.3294	1.3294		245	88.91	7,167,557	8,948,870	
1997/01		1.00	1.4109	1.4109		245	88.91	7,268,684	9,075,045	
1997/07		1.00	1.0917	1.0917		245	90.48	7,348,036	9,174,025	
1998/01		1.00	1.1663	1.1663		245	89.43	7,348,036	9,281,090	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
1998/07		1.00	1.0794	1.0794		245	89.43	7,433,736	9,381,295	5
1999/01		1.00	1.4499	1.4499		245	89.43	7,622,921	9,517,270	
1999/07		1.00	1.2299	1.2299		245	89.43	7,716,675	9,634,380	
2000/01		1.00	1.3356	1.3356		245	89.43	7,819,739	9,763,005	
2000/07		1.00	1.1129	1.1129		245	89.43	7,906,765	9,871,540	
2001/01		1.00	1.2976	1.2976		245	89.13	8,009,363	9,999,675	
2001/07	31,941	1.00	0.9615	0.9615		245	89.13	8,118,314	10,095,715	
2002/01		1.00	1.0301	1.0301		245	89.13	8,201,941	10,199,595	
2002/07		1.00	0.8337	0.8337		245	89.13	8,270,321	10,284,610	
2003/01		1.00	1.3271	1.3271		245	89.13	8,380,076	10,421,075	
2003/07		1.00	1.1664	1.1664		245	86.37	8,477,821	10,542,595	
2004/01		0.95	1.1103	1.1103		245	86.37	8,567,245	10,659,705	
2004/07		0.95	0.8378	0.8378		245	84.13	8,635,432	10,749,130	
2005/01		0.90	0.8595	0.8595		245	84.13	8,702,236	10,841,495	
2005/07		0.90	0.7364	0.7364		245	85.77	8,759,914	10,921,365	
2006/01		0.85	0.9068	0.9068		245	85.77	8,827,435	11,020,345	
2006/07		0.85	0.8133	0.8133		245	83.50	8,888,459	11,110,015	
2007/01		0.80	1.0133	1.0133		245	83.50	8,960,509	11,222,470	
2007/07		0.80	1.1050	1.1050		245	86.55	9,039,720	11,346,440	
2008/01		0.75	0.8556	0.8556		245	86.55	9,097,728	11,443,460	
2008/07		0.75	0.6104	0.6104		245	83.42	9,097,728	11,513,285	5
2009/01		0.70	1.3268	1.3268		245	83.42	9,224,264	11,666,165	
2009/07		0.70	0.6841	0.6841		245	83.42	9,268,439	11,746,035	
2010/01		0.65	0.8643	0.8643		245	83.42	9,320,509	11,847,465	
2010/07		0.65	0.7107	0.7107		245	83.42	9,363,570	11,931,745	
2011/01		0.60	0.9198	0.9198		245	83.42	9,415,248	12,041,505	
2011/07		0.60	0.9028	0.9028		245	83.42	9,466,250	12,150,285	
2012/01		0.55	0.3865	0.3865		245	85.99	9,486,375	12,197,325	
2012/07		0.55	0.9417	0.9417		245	85.99	9,535,505	12,312,230	
2013/01	37,318	0.50	0.4901	0.4901		245	86.45	9,596,195	12,372,500	



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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		245	86.45	9,625,924	12,449,185	
2014/01		0.45	0.8564	0.8564		245	89.36	9,663,022	12,555,760	
2014/07		0.45	1.2383	1.2383		245	89.36	9,716,864	12,711,335	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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229.45

Carnegie Gardens 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
1415 S HICKORY ST	1/1/2012-12/31/2012	Number of Beds: 138	Superior: 0
MELBOURNE, FL 32901	Days in CR 366	Maximum: 50,508	Standard: 184
County: Brevard [5]	First Used : 2013/07	Max Annualized: 50,370	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 42,779	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,407	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 31,767	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	74.25840%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	84.69747%	Cost: 1.04963363
Open Date: 08/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/01/1983	Low Occupancy Adjustment Factor:	107.82468%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 212008			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,279,138	2,779,960	1,467,417	819,271		6,345,785
1a	Audit Adjustments						
2	Cost Per Diem	40.2663	87.5109	46.1931	25.7900		199.7603
3	Cost Per Diem Inflated	42.2649	90.3855	48.4858			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	42.2649	90.3855	48.4858	25.7900		206.9262
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.5662		58.5094			
7	Provider Target Rate	50.5990		59.7285			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	50.6943		59.1699			
10b	Base for line 10a	49.6596		57.9622			
11	Lesser of 5,7,8,10, 10a	42.2649	90.3855	48.4858	13.6500		194.7862
12/13	Medical Adjustment Rate		2.4667	1.3232			
14	Prospective Per Diem 11	42.2649	92.8522	49.8090	13.6500		198.5761
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Carnegie Gardens Nursing Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/01/1992	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):	5,433,698	10.6968
Indexed Asset Value	6,792,122	<60% of Base:	False	20% ROE(2):	1,358,424	0.4369
FRVS Base Asset:	3,933,000	Interest Rate:	6.4680%	Insurance Cost(3):	33,324	0.7790
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	45,494	1.0635
ROE Factor	0.014580	Amortization Rate:	6.4680%	Home Office(3):	67,061	1.5676
		Interest Only:	False	Replacement(3&4):	110,844	0.0000
		Yearly Payment:	484,919	Total FRVS PD:		14.5438

- (1) 80% Capital (\$5,433,698) amortized at 6.4680 % for 20 years Principal & Interest of \$484,919 divided by annual available days (50370) divided by Occup. Adj. (0.900) = \$10.6968
 (2) 20% ROE (\$1,358,424) times the ROE factor (0.014580) divided by annual available days (50370) divided by Occup. Adj. (0.900) = \$0.4369
 (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:	51,883
Comparison Bed	138	Effective PBS Limitation	3,933,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.2649	42.2649	0.7504	41.5145
Direct Care	92.8522	92.8522	1.6486	91.2036
Indirect Care	49.8090	49.8090	0.8844	48.9246
Property	13.6500	14.5438	0.2582	14.2856
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.6172
Supplemental Rate Add-on				9.9025
Totals	198.5761	199.4699	3.5416	229.4480

Medicaid Trend Adjustment



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229.45

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	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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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		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	

Message Code:

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

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Fountainhead Care Center

Type of Cost Report: Prospective with Interim Component 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
390 NE 135TH ST	1/1/2013-12/31/2013	Number of Beds: 146	Superior: 0
NORTH MIAMI, FL 33161	Days in CR 365	Maximum: 53,290	Standard: 184
County: Dade [13]	First Used : 2014/07	Max Annualized: 53,290	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 40,983	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 1,798	Inflation
Current Class South Large	Initial CR? False	Medicaid: 36,981	FY Index: 1.31456505
Class at 1/94: South Large	Medical Utilization	90.23498%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	76.90561%	Cost: 1.02471376
Open Date: 07/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 07/01/1984	Low Occupancy Adjustment Factor:	97.90520%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 228907	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,742,977	2,869,203	1,650,568	491,477		6,754,225	
1a	Audit Adjustments							
2	Cost Per Diem	47.1317	77.5859	44.6329	13.2900		182.6405	
3	Cost Per Diem Inflated	48.2965	79.3100	45.7359				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.2965	79.3100	45.7359	13.2900		186.6324	
5a	Interim Adjustment	2.4400						
5b	Interim Adjusted Per Diem	50.7365						
6	Prior Semester: Provider Target Base	45.9315		59.0279				
7	Provider Target Rate	46.8885		60.2578				
7a	Interim Adjustment	2.4400						
7b	Interim Adjustment Provider Target Rate	49.3285						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	55.3163		64.3594				
10b	Base for line 10a	51.7971		63.0458				
11	Lesser of 5,7,8,10, 10a	49.3285	79.3100	45.7359	13.2900		187.6644	
12/13	Medical Adjustment Rate		3.5690	2.0581				
14	Prospective Per Diem 11	49.3285	82.8790	47.7940	13.2900		193.2915	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Fountainhead Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	02/01/1998	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,100,000.00		Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Fixed	80% Capital(1):	5,630,355	15.0231
Indexed Asset Value	7,037,944	<60% of Base:	False	20% ROE(2):	1,407,589	0.5503
FRVS Base Asset:	4,161,000	Interest Rate:	11.5000%	Insurance Cost(3):	28,198	0.6880
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	34,022	0.8301
ROE Factor	0.018750	Amortization Rate:	11.5000%	Home Office(3):	55,499	1.3542
		Interest Only:	False	Replacement(3&4):	60,630	0.0000
		Yearly Payment:	720,525	Total FRVS PD:		18.4457

- (1) 80% Capital (\$5,630,355) amortized at 11.5000 % for 20 years Principal & Interest of \$720,525 divided by annual available days (53290) divided by Occup. Adj. (0.900) = \$15.0231
- (2) 20% ROE (\$1,407,589) times the ROE factor (0.018750) divided by annual available days (53290) divided by Occup. Adj. (0.900) = \$0.5503
- (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:	51,883
Comparison Bed	146	Effective PBS Limitation	4,161,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.3285	49.3285	0.8758	48.4527
Direct Care	82.8790	82.8790	1.4715	81.4075
Indirect Care	47.7940	47.7940	0.8486	46.9454
Property	13.2900	18.4457	0.3275	18.1182
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				26.3155
Supplemental Rate Add-on				9.9025
Totals	193.2915	198.4472	3.5234	231.1418

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	5,668,582	0.00	3.9578	3.0000	0.9578	146		5,668,582	3,951,052	
1984/01		0.10	2.2530	2.2530		146		5,668,582	4,002,298	
1984/07	227,126	0.10	1.9179	1.9179		146	29.00	5,901,441	4,079,094	
1985/01		0.20	1.1471	1.1471		146	29.00	5,908,579	4,125,814	
1985/10		0.20	0.8522	0.8522		146	29.00	4,161,000	4,161,000	1
1986/01		0.30	0.8299	0.8299		146	29.00	4,166,463	4,195,602	
1986/07		0.30	0.2974	0.2974		146	29.00	4,168,423	4,187,572	
1987/01		0.40	1.0091	1.0091		146	29.00	4,177,294	4,262,470	
1987/07		0.40	0.9007	0.9007		146	50.35	4,191,072	4,295,758	
1988/01		0.50	0.9007	0.9007		146	50.35	4,208,353	4,330,652	
1988/07		0.50	0.5899	0.5899		146	77.13	4,220,768	4,328,316	
1989/01		0.60	0.5899	0.5899		146	77.13	4,235,705	4,353,866	
1989/07		0.60	0.5899	0.5899		146	77.13	4,250,695	4,383,358	
1990/01		0.70	0.5899	0.5899		146	77.13	4,268,246	4,405,404	
1990/07		0.70	0.5899	0.5899		146	77.13	4,285,870	4,431,392	
1991/01		0.80	0.5899	0.5899		146	77.13	4,306,095	4,457,380	
1991/07		0.80	1.4932	1.4932		146	87.28	4,357,536	4,523,956	
1992/01		0.90	2.0117	2.0117		146	87.28	4,436,429	4,614,914	
1992/07		0.90	1.8152	1.8152		146	89.72	4,508,907	4,698,718	
1993/01		1.00	1.7710	1.7710		146	89.72	4,588,760	4,781,938	
1993/07		1.00	1.5329	1.5329		146	89.74	4,659,101	4,855,230	
1994/01		1.00	1.6983	1.6983		146	89.74	4,738,227	4,937,720	
1994/07		1.00	1.5991	1.5991		146	89.80	4,813,996	5,016,706	
1995/01		1.00	1.5812	1.5812		146	89.80	4,890,115	5,095,984	
1995/07		1.00	1.5250	1.5250		146	88.86	4,964,689	5,173,656	
1996/01		1.00	1.7228	1.7228		146	88.86	5,050,221	5,262,862	
1996/07		1.00	1.3294	1.3294		146	88.95	5,117,359	5,332,796	
1997/01		1.00	1.4109	1.4109		146	88.95	5,189,560	5,407,986	
1997/07	87,850	1.00	1.0917	1.0917		146	92.42	5,334,064	5,466,970	
1998/01		1.00	1.1663	1.1663		146	88.14	5,334,064	5,530,772	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
1998/07		1.00	1.0794	1.0794		146	88.14	5,396,275	5,590,486	5
1999/01		1.00	1.4499	1.4499		146	88.14	5,454,522	5,671,516	5
1999/07		1.00	1.2299	1.2299		146	88.14	5,533,607	5,741,304	5
2000/01		1.00	1.3356	1.3356		146	88.14	5,601,665	5,817,954	5
2000/07		1.00	1.1129	1.1129		146	88.14	5,676,481	5,882,632	5
2001/01		1.00	1.2976	1.2976		146	88.62	5,739,655	5,958,990	5
2001/07		1.00	0.9615	0.9615		146	88.62	5,870,036	6,016,222	
2002/01		1.00	1.0301	1.0301		146	88.62	5,930,503	6,078,126	
2002/07		1.00	0.8337	0.8337		146	88.62	5,979,946	6,128,788	
2003/01		1.00	1.3271	1.3271		146	88.62	6,059,306	6,210,110	
2003/07		1.00	1.1664	1.1664		146	88.75	6,129,982	6,282,526	
2004/01		0.95	1.1103	1.1103		146	88.75	6,194,641	6,352,314	
2004/07		0.95	0.8378	0.8378		146	88.28	6,243,944	6,405,604	
2005/01		0.90	0.8595	0.8595		146	88.28	6,292,247	6,460,646	
2005/07		0.90	0.7364	0.7364		146	92.70	6,333,952	6,508,242	
2006/01		0.85	0.9068	0.9068		146	92.70	6,382,774	6,567,226	
2006/07		0.85	0.8133	0.8133		146	91.84	6,426,898	6,620,662	
2007/01		0.80	1.0133	1.0133		146	91.84	6,478,994	6,687,676	
2007/07		0.80	1.1050	1.1050		146	89.54	6,536,268	6,761,552	
2008/01		0.75	0.8556	0.8556		146	89.54	6,578,211	6,819,368	
2008/07		0.75	0.6104	0.6104		146	94.57	6,608,326	6,860,978	
2009/01		0.70	1.3268	1.3268		146	94.57	6,608,326	6,952,082	5
2009/07		0.70	0.6841	0.6841		146	94.57	6,701,645	6,999,678	
2010/01		0.65	0.8643	0.8643		146	94.57	6,739,295	7,060,122	
2010/07		0.65	0.7107	0.7107		146	94.57	6,770,431	7,110,346	
2011/01		0.60	0.9198	0.9198		146	94.57	6,807,797	7,175,754	
2011/07		0.60	0.9028	0.9028		146	94.57	6,844,675	7,240,578	
2012/01		0.55	0.3865	0.3865		146	90.80	6,859,227	7,268,610	
2012/07	38,798	0.55	0.9417	0.9417		146	90.77	6,933,549	7,337,084	
2013/01		0.50	0.4901	0.4901		146	90.77	6,950,543	7,373,000	



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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		146	90.77	6,972,076	7,418,698	
2014/01		0.45	0.8564	0.8564		146	89.80	6,998,946	7,482,208	
2014/07		0.45	1.2383	1.2383		146	90.23	7,037,944	7,574,918	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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Manor on the Green

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
324 WILDER BLVD	1/1/2012-12/31/2012	Number of Beds: 192	Superior: 0
DAYTONA BEACH, FL 32114	Days in CR 366	Maximum: 70,272	Standard: 184
County: Volusia [64]	First Used : 2014/01	Max Annualized: 70,080	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 46,030	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,619	Inflation
Current Class North Large	Initial CR? False	Medicaid: 38,167	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	82.91766%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	65.50262%	Cost: 1.04963363
Open Date: 08/01/1981	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1981	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/01/1981	Low Occupancy Adjustment Factor:	83.38855%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 213527			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,780,070	2,971,781	1,780,912	764,867		7,297,630	
1a	Audit Adjustments							
2	Cost Per Diem	46.6390	77.8626	46.6610	20.0400		191.2026	
3	Cost Per Diem Inflated	48.9539	80.4202	48.9770				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.9539	80.4202	48.9770	20.0400		198.3911	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.3319		65.5218				
7	Provider Target Rate	51.3806		66.8870				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	50.1152		61.8955				
10b	Base for line 10a	49.0923		60.6322				
11	Lesser of 5,7,8,10, 10a	48.9539	80.4202	48.9770	13.6500		192.0011	
12/13	Medical Adjustment Rate		2.9782	1.8137				
14	Prospective Per Diem 11	48.9539	83.3984	50.7907	13.6500		196.7930	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Manor on the Green

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):	5,055,485 8.2712
Indexed Asset Value	6,319,356	<60% of Base:	False	20% ROE(2):	1,263,871 0.2922
FRVS Base Asset:	3,805,956	Interest Rate:	8.3750%	Insurance Cost(3):	36,455 0.7920
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	44,357 0.9637
ROE Factor	0.014580	Amortization Rate:	8.3750%	Home Office(3):	66,645 1.4479
		Interest Only:	False	Replacement(3&4):	178,660 0.0000
		Yearly Payment:	521,682	Total FRVS PD:	11.7670

- (1) 80% Capital (\$5,055,485) amortized at 8.3750 % for 20 years Principal & Interest of \$521,682 divided by annual available days (70080) divided by Occup. Adj. (0.900) = \$8.2712
 (2) 20% ROE (\$1,263,871) times the ROE factor (0.014580) divided by annual available days (70080) divided by Occup. Adj. (0.900) = \$0.2922
 (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	51,883
			5,472,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.9539	48.9539	0.8692	48.0847
Direct Care	83.3984	83.3984	1.4807	81.9177
Indirect Care	50.7907	50.7907	0.9018	49.8889
Property	13.6500	11.7670	0.2089	11.5581
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				25.0611
Supplemental Rate Add-on				9.9025
Totals	196.7930	194.9100	3.4606	226.4130

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	2,977,213	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	

Message Code:

5 Uncorrected Licensure Deficiency



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Oakwood Garden of Deland

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	1/1/2012-12/31/2012	Number of Beds: 122	Superior: 0
DELAND, FL 32724	Days in CR 366	Maximum: 44,652	Standard: 184
County: Volusia [64]	First Used : 2014/01	Max Annualized: 44,530	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 39,991	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,499	Inflation
Current Class North Large	Initial CR? False	Medicaid: 31,570	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	78.94276%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	89.56150%	Cost: 1.04963363
Open Date: 01/01/1978	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1978	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 01/01/1978	Low Occupancy Adjustment Factor:	114.01686%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 213543			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,280,140	2,337,405	1,452,668	792,723		5,862,936	
1a	Audit Adjustments							
2	Cost Per Diem	40.5493	74.0388	46.0142	25.1100		185.7123	
3	Cost Per Diem Inflated	42.5619	76.4708	48.2981				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.5619	76.4708	48.2981	25.1100		192.4408	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.5597		60.6387				
7	Provider Target Rate	51.6132		61.9022				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	54.6457		63.6764				
10b	Base for line 10a	53.5303		62.3767				
11	Lesser of 5,7,8,10, 10a	42.5619	76.4708	48.2981	13.6500		180.9808	
12/13	Medical Adjustment Rate		2.4899	1.5726				
14	Prospective Per Diem 11	42.5619	78.9607	49.8707	13.6500		185.0433	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Oakwood Garden of Deland

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:	3,586,938.00		Total Amount	Per Diem
RS to Start Calcs:	1978/01	Type:	Variable	80% Capital(1):	2,852,137	7.3438
Indexed Asset Value	3,565,171	<60% of Base:	False	20% ROE(2):	713,034	0.2594
FRVS Base Asset:	2,076,193	Interest Rate:	8.3750%	Insurance Cost(3):	31,662	0.7917
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	36,605	0.9153
ROE Factor	0.014580	Amortization Rate:	8.3750%	Home Office(3):	62,345	1.5590
		Interest Only:	False	Replacement(3&4):	156,001	0.0000
		Yearly Payment:	294,316	Total FRVS PD:		10.8692

- (1) 80% Capital (\$2,852,137) amortized at 8.3750 % for 20 years Principal & Interest of \$294,316 divided by annual available days (44530) divided by Occup. Adj. (0.90) = \$7.3438
- (2) 20% ROE (\$713,034) times the ROE factor (0.014580) divided by annual available days (44530) divided by Occup. Adj. (0.90) = \$0.2594
- (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:	51,883
Comparison Bed	122	Effective PBS Limitation	3,477,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.5619	42.5619	0.7557	41.8062
Direct Care	78.9607	78.9607	1.4020	77.5587
Indirect Care	49.8707	49.8707	0.8855	48.9852
Property	13.6500	10.8692	0.1930	10.6762
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.2329
Supplemental Rate Add-on				9.9025
Totals	185.0433	182.2625	3.2362	213.1617

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
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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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	



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
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213.16

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014

ID: 005547123120120101201205112013132933



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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221.04

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	1/1/2012-12/31/2012	Number of Beds: 59	Superior: 0
KISSIMMEE, FL 34741	Days in CR 366	Maximum: 21,594	Standard: 184
County: Osceola [49]	First Used : 2014/01	Max Annualized: 21,535	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 19,539	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,203	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 12,899	FY Index: 1.28335532
Class at 1/94: North Small	Medical Utilization	66.01668%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.48347%	Cost: 1.04963363
Open Date: 11/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 11/01/1985	Low Occupancy Adjustment Factor:	115.19058%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 213501			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	576,971	986,158	668,575	336,664		2,568,368
1a	Audit Adjustments						
2	Cost Per Diem	44.7299	76.4523	51.8315	26.1000		199.1137
3	Cost Per Diem Inflated	46.9500	78.9636	54.4041			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.9500	78.9636	54.4041	26.1000		206.4177
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	56.1477		66.4590			
7	Provider Target Rate	57.3176		67.8437			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500		
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442			
10	Target Rate Class Ceiling	61.3634		72.4862			
10a	New Provider Target Limitation	59.9005		66.3397			
10b	Base for line 10a	58.6779		64.9857			
11	Lesser of 5,7,8,10, 10a	46.9500	78.9636	54.4041	13.6500		193.9677
12/13	Medical Adjustment Rate		1.4228	0.9803			
14	Prospective Per Diem 11	46.9500	80.3864	55.3844	13.6500		196.3708
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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Rate Semester 07/01/2014 through 12/31/2014

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):	1,422,156	7.4337
Indexed Asset Value	1,777,695	<60% of Base:	False	20% ROE(2):	355,539	0.2675
FRVS Base Asset:	923,314	Interest Rate:	8.1250%	Insurance Cost(3):	17,991	0.9208
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	24,719	1.2651
ROE Factor	0.014580	Amortization Rate:	8.1250%	Home Office(3):	46,258	2.3675
		Interest Only:	False	Replacement(3&4):	39,717	0.0000
		Yearly Payment:	144,076	Total FRVS PD:		12.2546

- (1) 80% Capital (\$1,422,156) amortized at 8.1250 % for 20 years Principal & Interest of \$144,076 divided by annual available days (21535) divided by Occup. Adj. (0.900) = \$7.4337
 (2) 20% ROE (\$355,539) times the ROE factor (0.014580) divided by annual available days (21535) divided by Occup. Adj. (0.900) = \$0.2675
 (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:	51,883
Comparison Bed	59	Effective PBS Limitation	1,681,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.9500	46.9500	0.8336	46.1164
Direct Care	80.3864	80.3864	1.4273	78.9591
Indirect Care	55.3844	55.3844	0.9834	54.4010
Property	13.6500	12.2546	0.2176	12.0370
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.6247
Supplemental Rate Add-on				9.9025
Totals	196.3708	194.9754	3.4619	221.0407

Medicaid Trend Adjustment



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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
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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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
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	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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232.71

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	6/1/2012-5/31/2013	Number of Beds: 133	Superior: 0
OCALA, FL 34471	Days in CR 365	Maximum: 48,545	Standard: 184
County: Marion [42]	First Used : 2014/01	Max Annualized: 48,545	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 39,711	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,962	Inflation
Current Class North Large	Initial CR? False	Medicaid: 22,192	FY Index: 1.29575017
Class at 1/94: North Large	Medical Utilization	55.88376%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	81.80245%	Cost: 1.03959307
Open Date: 09/01/1968	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1968	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20749917
Entered Medicaid 11/01/1980	Low Occupancy Adjustment Factor:	104.13915%	DC Sem Index: 1.24200000
Med # Active Date: 11/15/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02857214
Previous Med # 228699			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	939,901	2,091,962	1,467,316	295,154		4,794,332	
1a	Audit Adjustments							
2	Cost Per Diem	42.3531	94.2665	66.1191	13.3000		216.0387	
3	Cost Per Diem Inflated	44.0300	96.9599	68.7370				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.0300	96.9599	68.7370	13.3000		223.0269	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	75.0507		93.0492				
7	Provider Target Rate	76.6145		94.9880				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	45.2291		52.2722				
10b	Base for line 10a	44.3059		51.2053				
11	Lesser of 5,7,8,10, 10a	44.0300	95.0998	52.2722	13.3000		204.7020	
12/13	Medical Adjustment Rate		0.6295	0.3460				
14	Prospective Per Diem 11	44.0300	95.7293	52.6182	13.3000		205.6775	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Avante at Ocala

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/1992	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	4,134,349 11.7649
RS to Start Calcs:	1971/07	<60% of Base:	True	20% ROE(2):	1,033,587 0.3326
Indexed Asset Value	5,167,936	Interest Rate:	12.5000%	Insurance Cost(3):	42,238 1.0636
FRVS Base Asset:	1,786,469	Chase Rate:	12.5000%	Taxes Cost(3):	42,083 1.0597
Occup Adj Factor	0.9000	Amortization Rate:	12.5000%	Home Office(3):	36,510 0.9194
ROE Factor	0.014060	Interest Only:	True	Replacement(3&4):	9,949 0.0000
		Yearly Payment:	514,013	Total FRVS PD:	15.1402

- (1) 80% Capital (\$4,134,349) amortized at 12.5000 % for 20 years Interest of \$514,013 divided by annual available days (48545) divided by Occup. Adj. (0.900) = \$11.7649
- (2) 20% ROE (\$1,033,587) times the ROE factor (0.014060) divided by annual available days (48545) divided by Occup. Adj. (0.900) = \$0.3326
- (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:	51,883
Comparison Bed	133	Effective PBS Limitation	3,790,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.0300	44.0300	0.7818	43.2482
Direct Care	95.7293	95.7293	1.6997	94.0296
Indirect Care	52.6182	52.6182	0.9342	51.6840
Property	13.3000	15.1402	0.2688	14.8714
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.9708
Supplemental Rate Add-on				9.9025
Totals	205.6775	207.5177	3.6845	232.7065

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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232.71

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	199,478	0.10	0.6841	0.6841		133	43.63	3,466,834	6,376,419	
2010/01		0.05	0.8643	0.8643		133	43.63	3,468,022	6,431,481	
2010/07		0.05	0.7107	0.7107		133	43.63	3,468,999	6,477,233	
2011/01		0.00	0.9198	0.9198		133	43.63	3,468,999	6,536,817	
2011/07		0.00	0.9028	0.9028		133	43.63	3,468,999	6,595,869	
2012/01		0.00	0.3865	0.3865		133	43.63	3,468,999	6,621,405	
2012/07		0.00	0.9417	0.9417		133	43.63	3,468,999	6,683,782	
2013/01	20,712	0.00	0.4901	0.4901		133	54.41	3,489,711	6,716,500	
2013/07		0.00	0.6196	0.6196		133	54.41	3,489,711	6,758,129	
2014/01	1,678,225	0.00	0.8564	0.8564		133	55.88	5,167,936	6,815,984	
2014/07		0.00	1.2383	1.2383		133	55.88	5,167,936	6,900,439	

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	7/1/2012-6/30/2013	Number of Beds: 180	Superior: 0
PALATKA, FL 32177	Days in CR 365	Maximum: 65,700	Standard: 184
County: Putnam [54]	First Used : 2014/07	Max Annualized: 65,700	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 62,782	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 15,202	Inflation
Current Class North Large	Initial CR? False	Medicaid: 41,164	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	65.56656%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.55860%	Cost: 1.03716397
Open Date: 05/26/1989	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/26/1989	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 05/26/1989	Low Occupancy Adjustment Factor:	121.65151%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 226025			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,742,989	3,417,990	2,203,792	660,271		8,025,042
1a	Audit Adjustments						
2	Cost Per Diem	42.3426	83.0335	53.5369	16.0400		194.9530
3	Cost Per Diem Inflated	43.9162	85.3352	55.5265			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	43.9162	85.3352	55.5265	16.0400		200.8179
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	54.9873		64.0337			
7	Provider Target Rate	56.1330		65.3679			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	48.4979		58.2352			
10b	Base for line 10a	47.5080		57.0466			
11	Lesser of 5,7,8,10, 10a	43.9162	85.3352	55.5265	13.6500		198.4279
12/13	Medical Adjustment Rate		1.4944	0.9724			
14	Prospective Per Diem 11	43.9162	86.8296	56.4989	13.6500		200.8947
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

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):	6,582,259	12.6024
Indexed Asset Value	8,227,824	<60% of Base:	False	20% ROE(2):	1,645,565	0.4002
FRVS Base Asset:	1,778,760	Interest Rate:	9.6724%	Insurance Cost(3):	81,909	1.3047
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	138,928	2.2129
ROE Factor	0.014380	Amortization Rate:	9.6724%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	1,678	0.0000
		Yearly Payment:	745,179	Total FRVS PD:		16.5202

- (1) 80% Capital (\$6,582,259) amortized at 9.6724 % for 20 years Principal & Interest of \$745,179 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$12.6024
- (2) 20% ROE (\$1,645,565) times the ROE factor (0.014380) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.4002
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,778,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.9162	43.9162	0.7797	43.1365
Direct Care	86.8296	86.8296	1.5417	85.2879
Indirect Care	56.4989	56.4989	1.0031	55.4958
Property	13.6500	16.5202	0.2933	16.2269
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.6388
Supplemental Rate Add-on				9.9025
Totals	200.8947	203.7649	3.6178	230.6884

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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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	

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 07/01/2014 through 12/31/2014

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252.37

Boynton 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
7900 VENTURE CENTER WAY	1/1/2012-12/31/2012	Number of Beds: 81	Superior: 0
BOYNTON BEACH , FL	Days in CR 366	Maximum: 29,646	Standard: 184
33437	First Used : 2013/07	Max Annualized: 29,565	Conditional: 0
County: Palm Beach [50]	Last Used: 2014/07	Total Patient: 25,566	Total: 184
Region: South Area: 9	Unaudited	Medicare: 9,798	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 10,700	FY Index: 1.28335532
Current Class South Small	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: South Small	Occupancy:	41.85246%	Cost: 1.04963363
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	86.23760%	Target: 1.01458517
Open Date: 09/14/1999	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20250000
Acquired Date: 09/01/1983	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 09/14/1999	Weighted Low Occ Adjustment Factor:	109.78535%	DC Inflation: 1.03284823
Med # Active Date: 12/04/2008		100.00000%	PS Target: 1.02083595
Previous Med # 218952			

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	640,371	955,747	672,626	360,911		2,629,654	
1a	Audit Adjustments							
2	Cost Per Diem	59.8478	89.3221	62.8622	33.7300		245.7621	
3	Cost Per Diem Inflated	62.8183	92.2562	65.9823				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	62.8183	92.2562	65.9823	33.7300		254.7868	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.7300		72.4502				
7	Provider Target Rate	54.8495		73.9598				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	63.3851		73.2096				
10b	Base for line 10a	62.0914		71.7153				
11	Lesser of 5,7,8,10, 10a	54.8495	92.2562	65.9823	13.6500		226.7380	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	54.8495	92.2562	65.9823	13.6500		226.7380	
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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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	4,280,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	2,588,048	10.5688
RS to Start Calcs:	1983/07	<60% of Base:	False	20% ROE(2):	647,012	0.3545
Indexed Asset Value	3,235,060	Interest Rate:	9.0898%	Insurance Cost(3):	24,941	0.9756
FRVS Base Asset:	0	Chase Rate:	8.5000%	Taxes Cost(3):	68,498	2.6793
Occup Adj Factor	0.9000	Amortization Rate:	9.0898%	Home Office(3):	58,738	2.2975
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	200,851	0.0000
		Yearly Payment:	281,220	Total FRVS PD:		16.8757

- (1) 80% Capital (\$2,588,048) amortized at 9.0898 % for 20 years Principal & Interest of \$281,220 divided by annual available days (29565) divided by Occup. Adj. (0.900) = \$10.5688
- (2) 20% ROE (\$647,012) times the ROE factor (0.014580) divided by annual available days (29565) divided by Occup. Adj. (0.900) = \$0.3545
- (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:	51,883
Comparison Bed	71	Effective PBS Limitation	2,758,066

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.8495	54.8495	0.9739	53.8756
Direct Care	92.2562	92.2562	1.6380	90.6182
Indirect Care	65.9823	65.9823	1.1715	64.8108
Property	13.6500	16.8757	0.2996	16.5761
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.5841
Supplemental Rate Add-on				9.9025
Totals	226.7380	229.9637	4.0830	252.3673

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

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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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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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 005814123120120101201205242013141849



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 005826-00 - 2014/07

200.78

Accentia Health & Rehab. Center of Tampa

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
1818 E FLETCHER AVE	1/1/2012-12/31/2012	Number of Beds: 266	Superior: 0
TAMPA, FL 33612	Days in CR 366	Maximum: 97,356	Standard: 184
County: Hillsborough [29]	First Used : 2014/01	Max Annualized: 97,090	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 83,365	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 11,249	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 65,926	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	79.08115%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	85.62903%	Cost: 1.04963363
Open Date: 01/01/1975	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1975	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/01/1981	Low Occupancy Adjustment Factor:	109.01061%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 213039			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,734,813	5,565,420	2,848,584	1,008,668		12,157,485
1a	Audit Adjustments						
2	Cost Per Diem	41.4831	84.4192	43.2088	15.3000		184.4111
3	Cost Per Diem Inflated	43.5421	87.1922	45.3534			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	43.5421	87.1922	45.3534	15.3000		191.3877
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	48.3498		58.7041			
7	Provider Target Rate	49.3572		59.9273			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	50.6943		59.7869			
10b	Base for line 10a	49.6596		58.5666			
11	Lesser of 5,7,8,10, 10a	43.5421	87.1922	45.3534	13.6500		189.7377
12/13	Medical Adjustment Rate		2.8526	1.4838			
14	Prospective Per Diem 11	43.5421	90.0448	46.8372	13.6500		194.0741
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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Rate Semester 07/01/2014 through 12/31/2014

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	0.2362
FRVS Base Asset:	3,288,408	Interest Rate:	9.5000%	Insurance Cost(3):	42,889	0.5145
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	73,911	0.8866
ROE Factor	0.014580	Amortization Rate:	12.5000%	Home Office(3):	125,696	1.5078
		Interest Only:	True	Replacement(3&4):	255,845	0.0000
		Yearly Payment:	703,864	Total FRVS PD:		11.2002

- (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. (0.900) = \$8.0551
- (2) 20% ROE (\$1,415,343) times the ROE factor (0.014580) divided by annual available days (97090) divided by Occup. Adj. (0.900) = \$0.2362
- (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:	51,883
Comparison Bed	266	Effective PBS Limitation	7,581,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.5421	43.5421	0.7731	42.7690
Direct Care	90.0448	90.0448	1.5988	88.4460
Indirect Care	46.8372	46.8372	0.8316	46.0056
Property	13.6500	11.2002	0.1989	11.0013
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				2.6600
Supplemental Rate Add-on				9.9025
Totals	194.0741	191.6243	3.4024	200.7844

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	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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0 005826-00 - 2014/07

200.78

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	84.36	6,898,801	12,500,138	
2009/01		0.30	1.3268	1.3268		266	84.36	6,926,258	12,666,122	
2009/07		0.25	0.6841	0.6841		266	84.36	6,938,102	12,752,838	
2010/01		0.25	0.8643	0.8643		266	84.36	6,953,095	12,862,962	
2010/07		0.20	0.7107	0.7107		266	84.36	6,962,975	12,954,466	
2011/01		0.20	0.9198	0.9198		266	84.36	6,975,787	13,073,634	
2011/07		0.15	0.9028	0.9028		266	84.36	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	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 005849-00 - 2014/07

249.05

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 PINE ST	1/1/2012-12/31/2012	Number of Beds: 76	Superior: 0
CLEARWATER, FL 33756	Days in CR 366	Maximum: 27,816	Standard: 184
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 27,740	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 23,722	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,848	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 20,273	FY Index: 1.28335532
Class at 1/94: North Small	Medical Utilization	85.46075%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	85.28185%	Cost: 1.04963363
Open Date: 02/06/1989	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/06/1989	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 02/06/1989	Low Occupancy Adjustment Factor:	108.56863%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 255840			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,034,403	1,705,356	1,041,460	564,806		4,346,024	
1a	Audit Adjustments							
2	Cost Per Diem	51.0237	84.1195	51.3718	27.8600		214.3750	
3	Cost Per Diem Inflated	53.5562	86.8827	53.9216				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.5562	86.8827	53.9216	27.8600		222.2205	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.0109		69.2190				
7	Provider Target Rate	57.1779		70.6612				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	60.7629		72.1178				
10b	Base for line 10a	59.5227		70.6458				
11	Lesser of 5,7,8,10, 10a	53.5562	86.8827	53.9216	13.6500		208.0105	
12/13	Medical Adjustment Rate		3.4660	2.1511				
14	Prospective Per Diem 11	53.5562	90.3487	56.0727	13.6500		213.6276	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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249.05

Rate Semester 07/01/2014 through 12/31/2014

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):	2,898,196	13.8610
Indexed Asset Value	3,622,745	<60% of Base:	False	20% ROE(2):	724,549	0.4231
FRVS Base Asset:	2,253,096	Interest Rate:	10.4500%	Insurance Cost(3):	21,212	0.8942
Occup Adj Factor	0.9000	Chase Rate:	11.0000%	Taxes Cost(3):	23,458	0.9889
ROE Factor	0.014580	Amortization Rate:	10.4500%	Home Office(3):	49,432	2.0838
		Interest Only:	False	Replacement(3&4):	111,020	0.0000
		Yearly Payment:	346,053	Total FRVS PD:		18.2510

- (1) 80% Capital (\$2,898,196) amortized at 10.4500 % for 20 years Principal & Interest of \$346,053 divided by annual available days (27740) divided by Occup. Adj. (0.900) = \$13.8610
- (2) 20% ROE (\$724,549) times the ROE factor (0.014580) divided by annual available days (27740) divided by Occup. Adj. (0.900) = \$0.4231
- (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:	51,883
Comparison Bed	76	Effective PBS Limitation	2,253,096

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.5562	53.5562	0.9509	52.6053
Direct Care	90.3487	90.3487	1.6042	88.7445
Indirect Care	56.0727	56.0727	0.9956	55.0771
Property	13.6500	18.2510	0.3240	17.9270
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.7928
Supplemental Rate Add-on				9.9025
Totals	213.6276	218.2286	3.8747	249.0492

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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249.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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249.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

0 005850-00 - 2014/07

221.05

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	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 0
DADE CITY, FL 33525	Days in CR 365	Maximum: 43,800	Standard: 184
County: Pasco [51]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 40,880	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,439	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,252	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	69.10959%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.333333%	Cost: 1.02471376
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	118.81862%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 214132			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,260,937	2,283,131	1,377,359	792,751		5,714,178	
1a	Audit Adjustments							
2	Cost Per Diem	44.6318	80.8131	48.7526	28.0600		202.2575	
3	Cost Per Diem Inflated	45.7348	82.6089	49.9575				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.7348	82.6089	49.9575	28.0600		206.3612	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.7198		57.8047				
7	Provider Target Rate	47.6933		59.0091				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	51.0756		59.5848				
10b	Base for line 10a	50.0331		58.3686				
11	Lesser of 5,7,8,10, 10a	45.7348	82.6089	49.9575	13.6500		191.9512	
12/13	Medical Adjustment Rate		1.7759	1.0740				
14	Prospective Per Diem 11	45.7348	84.3848	51.0315	13.6500		194.8011	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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 Computation of Nursing Home Medicaid Reimbursement Rate

0 005850-00 - 2014/07

221.05

Rate Semester 07/01/2014 through 12/31/2014

Heritage Park

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:	09/01/1997	Amount:	5,455,094.00	Total Amount	Per Diem	
RS to Start Calcs:	1982/07	Type:	Variable	80% Capital(1):	3,093,832	7.6953
Indexed Asset Value	3,867,290	<60% of Base:	False	20% ROE(2):	773,458	0.3679
FRVS Base Asset:	2,122,271	Interest Rate:	7.6872%	Insurance Cost(3):	30,201	0.7388
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	58,391	1.4284
ROE Factor	0.018750	Amortization Rate:	7.6872%	Home Office(3):	59,629	1.4586
		Interest Only:	False	Replacement(3&4):	80,086	0.0000
		Yearly Payment:	303,348	Total FRVS PD:	11.6890	

- (1) 80% Capital (\$3,093,832) amortized at 7.6872 % for 20 years Principal & Interest of \$303,348 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.6953
- (2) 20% ROE (\$773,458) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3679
- (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	51,883
			3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.7348	45.7348	0.8120	44.9228
Direct Care	84.3848	84.3848	1.4983	82.8865
Indirect Care	51.0315	51.0315	0.9061	50.1254
Property	13.6500	11.6890	0.2075	11.4815
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.7290
Supplemental Rate Add-on				9.9025
Totals	194.8011	192.8401	3.4239	221.0477

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 005850-00 - 2014/07

221.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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221.05

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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Florida Agency for Health Care Administration
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0 005851-00 - 2014/07

217.49

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	1/1/2013-12/31/2013	Number of Beds: 90	Superior: 0
EUSTIS, FL 32726	Days in CR 365	Maximum: 32,850	Standard: 184
County: Lake [35]	First Used : 2014/07	Max Annualized: 32,850	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 30,538	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,154	Inflation
Current Class North Small	Initial CR? False	Medicaid: 18,548	FY Index: 1.31456505
Class at 1/94: North Small	Medical Utilization	60.73744%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.96195%	Cost: 1.02471376
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 02/01/1982	Low Occupancy Adjustment Factor:	118.34583%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 213870			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	776,162	1,368,656	1,072,604	524,908		3,742,330
1a	Audit Adjustments						
2	Cost Per Diem	41.8461	73.7900	57.8286	28.3000		201.7647
3	Cost Per Diem Inflated	42.8803	75.4298	59.2578			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	42.8803	75.4298	59.2578	28.3000		205.8679
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	45.9221		67.8043			
7	Provider Target Rate	46.8789		69.2171			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation	52.2145		69.2425			
10b	Base for line 10a	51.1488		67.8292			
11	Lesser of 5,7,8,10, 10a	42.8803	75.4298	59.2578	13.6500		191.2179
12/13	Medical Adjustment Rate		0.9112	0.7158			
14	Prospective Per Diem 11	42.8803	76.3410	59.9736	13.6500		192.8449
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	2,624,895.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	2,550,234 9.4802
RS to Start Calcs:	1982/07	<60% of Base:	False	20% ROE(2):	637,558 0.4043
Indexed Asset Value	3,187,792	Interest Rate:	9.5350%	Insurance Cost(3):	23,463 0.7683
FRVS Base Asset:	1,010,008	Chase Rate:	7.2500%	Taxes Cost(3):	33,607 1.1005
Occup Adj Factor	0.9000	Amortization Rate:	9.2500%	Home Office(3):	53,568 1.7541
ROE Factor	0.018750	Interest Only:	False	Replacement(3&4):	48,035 0.0000
		Yearly Payment:	280,281	Total FRVS PD:	13.5074

- (1) 80% Capital (\$2,550,234) amortized at 9.2500 % for 20 years Principal & Interest of \$280,281 divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$9.4802
- (2) 20% ROE (\$637,558) times the ROE factor (0.018750) divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$0.4043
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.8803	42.8803	0.7613	42.1190
Direct Care	76.3410	76.3410	1.3554	74.9856
Indirect Care	59.9736	59.9736	1.0648	58.9088
Property	13.6500	13.5074	0.2398	13.2676
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.3055
Supplemental Rate Add-on				9.9025
Totals	192.8449	192.7023	3.4213	217.4890

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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217.49

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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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Florida Agency for Health Care Administration
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0 006339-00 - 2014/07

214.36

Lake Placid 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
125 TOMOKA BLVD S	1/1/2012-12/31/2012	Number of Beds: 180	Superior: 0
LAKE PLACID, FL 33852	Days in CR 366	Maximum: 65,880	Standard: 184
County: Highlands [28]	First Used : 2014/01	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 60,424	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 14,826	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 40,374	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	66.81782%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.71828%	Cost: 1.04963363
Open Date: 01/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 01/01/1984	Low Occupancy Adjustment Factor:	116.76257%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 214124			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,499,566	3,153,339	1,943,135	1,207,183		7,803,222
1a	Audit Adjustments						
2	Cost Per Diem	37.1419	78.1032	48.1284	29.9000		193.2735
3	Cost Per Diem Inflated	38.9854	80.6688	50.5172			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	38.9854	80.6688	50.5172	29.9000		200.0714
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	43.1753		60.6586			
7	Provider Target Rate	44.0749		61.9225			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	50.1960		59.1699			
10b	Base for line 10a	49.1715		57.9622			
11	Lesser of 5,7,8,10, 10a	38.9854	80.6688	50.5172	13.6500		183.8214
12/13	Medical Adjustment Rate		1.5263	0.9558			
14	Prospective Per Diem 11	38.9854	82.1951	51.4730	13.6500		186.3035
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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0 006339-00 - 2014/07

214.36

Rate Semester 07/01/2014 through 12/31/2014

Lake Placid Health Care 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):	6,500,695	10.7795
Indexed Asset Value	8,125,869	<60% of Base:	False	20% ROE(2):	1,625,174	0.4007
FRVS Base Asset:	2,984,578	Interest Rate:	7.6872%	Insurance Cost(3):	46,289	0.7661
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	89,794	1.4861
ROE Factor	0.014580	Amortization Rate:	7.6872%	Home Office(3):	81,717	1.3524
		Interest Only:	False	Replacement(3&4):	237,635	0.0000
		Yearly Payment:	637,389	Total FRVS PD:		14.7848

- (1) 80% Capital (\$6,500,695) amortized at 7.6872 % for 20 years Principal & Interest of \$637,389 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$10.7795
- (2) 20% ROE (\$1,625,174) times the ROE factor (0.014580) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.4007
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	38.9854	38.9854	0.6922	38.2932
Direct Care	82.1951	82.1951	1.4594	80.7357
Indirect Care	51.4730	51.4730	0.9139	50.5591
Property	13.6500	14.7848	0.2625	14.5223
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.3433
Supplemental Rate Add-on				9.9025
Totals	186.3035	187.4383	3.3280	214.3561

Medicaid Trend Adjustment



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214.36

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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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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214.36

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 006339123120120101201205112013140006



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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216.52

Windsor 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
602 E LAURA ST	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
STARKE, FL 32091	Days in CR 366	Maximum: 43,920	Standard: 184
County: Bradford [4]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 41,436	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,885	Inflation
Current Class North Large	Initial CR? False	Medicaid: 27,943	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	67.43653%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.34426%	Cost: 1.04963363
Open Date: 06/25/1990	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/25/1990	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 07/02/1990	Low Occupancy Adjustment Factor:	120.10559%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 213888			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,133,885	2,122,727	1,238,411	897,250		5,392,272	
1a	Audit Adjustments							
2	Cost Per Diem	40.5785	75.9663	44.3192	32.1100		192.9740	
3	Cost Per Diem Inflated	42.5926	78.4617	46.5189				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.5926	78.4617	46.5189	32.1100		199.6832	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	44.8694		57.7016				
7	Provider Target Rate	45.8043		58.9039				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.9880		58.7816				
10b	Base for line 10a	47.0085		57.5818				
11	Lesser of 5,7,8,10, 10a	42.5926	78.4617	46.5189	13.6500		181.2232	
12/13	Medical Adjustment Rate		1.5391	0.9125				
14	Prospective Per Diem 11	42.5926	80.0008	47.4314	13.6500		183.6748	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Windsor Manor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	07/02/1990	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,618,667.00		Total Amount	Per Diem
RS to Start Calcs:	1990/01	Type:	Fixed	80% Capital(1):	4,462,060	14.4855
Indexed Asset Value	5,577,575	<60% of Base:	False	20% ROE(2):	1,115,515	0.4126
FRVS Base Asset:	3,595,587	Interest Rate:	11.5000%	Insurance Cost(3):	26,621	0.6425
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	41,470	1.0008
ROE Factor	0.014580	Amortization Rate:	11.5000%	Home Office(3):	62,784	1.5152
		Interest Only:	False	Replacement(3&4):	90,780	0.0000
		Yearly Payment:	571,017	Total FRVS PD:		18.0566

- (1) 80% Capital (\$4,462,060) amortized at 11.5000 % for 20 years Principal & Interest of \$571,017 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.4855
- (2) 20% ROE (\$1,115,515) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4126
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,602,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.5926	42.5926	0.7562	41.8364
Direct Care	80.0008	80.0008	1.4204	78.5804
Indirect Care	47.4314	47.4314	0.8421	46.5893
Property	13.6500	18.0566	0.3206	17.7360
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.8771
Supplemental Rate Add-on				9.9025
Totals	183.6748	188.0814	3.3393	216.5217

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	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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216.52

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:



Florida Agency for Health Care Administration
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0 006483-00 - 2014/07

228.23

Salerno Bay Manor

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
4801 SE COVE ROAD	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
STUART, FL 34997	Days in CR 366	Maximum: 43,920	Standard: 184
County: Martin [43]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 39,657	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,041	Inflation
Current Class South Large	Initial CR? False	Medicaid: 25,854	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	65.19404%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.29372%	Cost: 1.04963363
Open Date: 06/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 07/01/1985	Low Occupancy Adjustment Factor:	114.94902%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 214141	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,062,564	2,070,161	1,369,634	757,264		5,259,623	
1a	Audit Adjustments							
2	Cost Per Diem	41.0986	80.0712	52.9757	29.2900		203.4355	
3	Cost Per Diem Inflated	43.1385	82.7014	55.6051				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.1385	82.7014	55.6051	29.2900		210.7350	
5a	Interim Adjustment	0.0267	0.8903	0.4794				
5b	Interim Adjusted Per Diem	43.1652	83.5917	56.0845				
6	Prior Semester: Provider Target Base	48.8081		64.8248				
7	Provider Target Rate	49.8251		66.1755				
7a	Interim Adjustment	0.0267		0.4794				
7b	Interim Adjustment Provider Target Rate	49.8518		66.6549				
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	54.4061		67.5902				
10b	Base for line 10a	53.2695		65.7410				
11	Lesser of 5,7,8,10, 10a	43.1652	83.5917	56.0845	13.6500		196.4914	
12/13	Medical Adjustment Rate		1.4289	0.9587				
14	Prospective Per Diem 11	43.1652	85.0206	57.0432	13.6500		198.8790	
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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Rate Semester 07/01/2014 through 12/31/2014

Salerno Bay Manor

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):	4,335,610	10.7840
Indexed Asset Value	5,419,512	<60% of Base:	False	20% ROE(2):	1,083,902	0.4009
FRVS Base Asset:	3,321,973	Interest Rate:	7.6872%	Insurance Cost(3):	29,199	0.7363
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	82,213	2.0731
ROE Factor	0.014580	Amortization Rate:	7.6872%	Home Office(3):	64,719	1.6320
		Interest Only:	False	Replacement(3&4):	150,038	0.0000
		Yearly Payment:	425,104	Total FRVS PD:		15.6263

- (1) 80% Capital (\$4,335,610) amortized at 7.6872 % for 20 years Principal & Interest of \$425,104 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.7840
 (2) 20% ROE (\$1,083,902) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4009
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.1652	43.1652	0.7664	42.3988
Direct Care	85.0206	85.0206	1.5095	83.5111
Indirect Care	57.0432	57.0432	1.0128	56.0304
Property	13.6500	15.6263	0.2774	15.3489
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.0429
Supplemental Rate Add-on				9.9025
Totals	198.8790	200.8553	3.5661	228.2346

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
1985/01	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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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	

Message Code:



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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Royal Manor

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective		CHOW Status based on this Cost Report: No Change	
Type of Ownership: Proprietary : Corporation			
Provider Information	Cost Report	Patient Days	Ratings Days
600 BUSINESS PARKWAY	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
ROYAL PALM BEACH , FL	Days in CR 366	Maximum: 43,920	Standard: 184
33411	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
County: Palm Beach [50]	Last Used: 2014/07	Total Patient: 40,937	Total: 184
Region: South Area: 9	Unaudited	Medicare: 5,725	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 26,869	FY Index: 1.28335532
Current Class South Large	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: South Large	Occupancy:	65.63500%	Cost: 1.04963363
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	93.20811%	Target: 1.01458517
Open Date: 02/01/1985	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20250000
Acquired Date: 02/01/1985	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 02/01/1985	Weighted Low Occ Adjustment Factor:	118.65920%	DC Inflation: 1.03284823
Med # Active Date: 12/04/2008		100.00000%	PS Target: 1.02083595
Previous Med # 214108			

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,265,972	2,241,975	1,350,242	866,525		5,724,715	
1a	Audit Adjustments							
2	Cost Per Diem	47.1165	83.4410	50.2528	32.2500		213.0603	
3	Cost Per Diem Inflated	49.4551	86.1819	52.7470				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.4551	86.1819	52.7470	32.2500		220.6340	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.4359		64.5098				
7	Provider Target Rate	52.5076		65.8539				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	54.6871		64.0036				
10b	Base for line 10a	53.5709		62.6972				
11	Lesser of 5,7,8,10, 10a	49.4551	86.1819	52.7470	13.6500		202.0340	
12/13	Medical Adjustment Rate		1.5159	0.9278				
14	Prospective Per Diem 11	49.4551	87.6978	53.6748	13.6500		204.4777	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Royal Manor

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):	4,780,610	11.8908
Indexed Asset Value	5,975,763	<60% of Base:	False	20% ROE(2):	1,195,153	0.4420
FRVS Base Asset:	3,420,000	Interest Rate:	7.6872%	Insurance Cost(3):	33,782	0.8252
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	108,674	2.6547
ROE Factor	0.014580	Amortization Rate:	7.6872%	Home Office(3):	66,441	1.6230
		Interest Only:	False	Replacement(3&4):	200,043	0.0000
		Yearly Payment:	468,736	Total FRVS PD:		17.4357

- (1) 80% Capital (\$4,780,610) amortized at 7.6872 % for 20 years Principal & Interest of \$468,736 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.8908
 (2) 20% ROE (\$1,195,153) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4420
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.4551	49.4551	0.8781	48.5770
Direct Care	87.6978	87.6978	1.5571	86.1407
Indirect Care	53.6748	53.6748	0.9530	52.7218
Property	13.6500	17.4357	0.3096	17.1261
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.1077
Supplemental Rate Add-on				9.9025
Totals	204.4777	208.2634	3.6978	236.5758

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	

Message Code:

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 006489123120120101201205112013134849



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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Oakbrook of LaBelle

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	1/1/2012-12/31/2012	Number of Beds: 93	Superior: 0
LABELLE, FL 33935	Days in CR 366	Maximum: 34,038	Standard: 184
County: Hendry [26]	First Used : 2014/01	Max Annualized: 33,945	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 29,816	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,698	Inflation
Current Class South Small	Initial CR? False	Medicaid: 18,676	FY Index: 1.28335532
Class at 1/94: South Small	Medical Utilization	62.63751%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	87.59622%	Cost: 1.04963363
Open Date: 11/01/1986	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1986	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 11/25/1986	Low Occupancy Adjustment Factor:	111.51495%	DC Sem Index: 1.24200000
Med # Active Date: 12/04/2008	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 213497			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	823,109	1,595,911	990,508	459,616		3,869,144
1a	Audit Adjustments						
2	Cost Per Diem	44.0731	85.4525	53.0364	24.6100		207.1720
3	Cost Per Diem Inflated	46.2606	88.2595	55.6688			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.2606	88.2595	55.6688	24.6100		214.7989
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	51.6333		67.7484			
7	Provider Target Rate	52.7091		69.1600			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500		
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810			
10	Target Rate Class Ceiling	68.3236		80.3359			
10a	New Provider Target Limitation	59.7841		69.1600			
10b	Base for line 10a	58.5639		67.7484			
11	Lesser of 5,7,8,10, 10a	46.2606	88.2595	55.6688	13.6500		203.8389
12/13	Medical Adjustment Rate		1.2548	0.7915			
14	Prospective Per Diem 11	46.2606	89.5143	56.4603	13.6500		205.8852
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Oakbrook of LaBelle

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/01/2001	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	4,700,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	3,181,820	13.3282
RS to Start Calcs:	1986/07	<60% of Base:	False	20% ROE(2):	795,455	0.3796
Indexed Asset Value	3,977,275	Interest Rate:	11.5000%	Insurance Cost(3):	25,705	0.8621
FRVS Base Asset:	1,397,653	Chase Rate:	8.5000%	Taxes Cost(3):	43,051	1.4439
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	55,744	1.8696
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	50,550	0.0000
		Yearly Payment:	407,183	Total FRVS PD:		17.8834

(1) 80% Capital (\$3,181,820) amortized at 11.5000 % for 20 years Principal & Interest of \$407,183 divided by annual available days (33945) divided by Occup. Adj. (0.90) = \$13.3282

(2) 20% ROE (\$795,455) times the ROE factor (0.014580) divided by annual available days (33945) divided by Occup. Adj. (0.90) = \$0.3796

(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:	51,883
Comparison Bed 60	Effective PBS Limitation	1,724,220

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.2606	46.2606	0.8214	45.4392
Direct Care	89.5143	89.5143	1.5893	87.9250
Indirect Care	56.4603	56.4603	1.0025	55.4578
Property	13.6500	17.8834	0.3175	17.5659
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5199
Supplemental Rate Add-on				9.9025
Totals	205.8852	210.1186	3.7307	237.8103

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 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

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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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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	

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 07/01/2014 through 12/31/2014

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232.96

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	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 0
BRADENTON, FL 34203	Days in CR 365	Maximum: 43,800	Standard: 184
County: Manatee [41]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 37,278	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,912	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 25,862	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	69.37604%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	85.10959%	Cost: 1.02471376
Open Date: 08/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 08/01/1985	Low Occupancy Adjustment Factor:	108.34933%	DC Sem Index: 1.24200000
Med # Active Date: 07/01/2007	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 316610			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,277,419	2,223,195	1,012,808	1,145,428		5,658,850	
1a	Audit Adjustments							
2	Cost Per Diem	49.3937	85.9638	39.1620	44.2900		218.8095	
3	Cost Per Diem Inflated	50.6144	87.8741	40.1298				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.6144	87.8741	40.1298	44.2900		222.9083	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.5274		55.8124				
7	Provider Target Rate	52.6010		56.9753				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	58.3338		63.9973				
10b	Base for line 10a	57.1432		62.6911				
11	Lesser of 5,7,8,10, 10a	50.6144	87.8741	40.1298	13.6500		192.2683	
12/13	Medical Adjustment Rate		1.9155	0.8748				
14	Prospective Per Diem 11	50.6144	89.7896	41.0046	13.6500		195.0586	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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	0.6723
FRVS Base Asset:	3,420,000	Interest Rate:	13.2450%	Insurance Cost(3):	45,684	1.2255
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	84,070	2.2552
ROE Factor	0.018750	Amortization Rate:	13.2450%	Home Office(3):	5,183	0.1390
		Interest Only:	False	Replacement(3&4):	84,783	0.0000
		Yearly Payment:	806,743	Total FRVS PD:		24.7573

- (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. (0.900) = \$20.4653
- (2) 20% ROE (\$1,413,467) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$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:	28,500
Comparison Date:	07/01/1985	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.6144	50.6144	0.8987	49.7157
Direct Care	89.7896	89.7896	1.5942	88.1954
Indirect Care	41.0046	41.0046	0.7280	40.2766
Property	13.6500	24.7573	0.4396	24.3177
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.5486
Supplemental Rate Add-on				9.9025
Totals	195.0586	206.1659	3.6605	232.9565

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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232.96

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
3 Index Cost Limitation - January 1996 |
|---|



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 Rate Semester 07/01/2014 through 12/31/2014

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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 AVENUE	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
JUPITER, FL 33458	Days in CR 365	Maximum: 43,800	Standard: 184
County: Palm Beach [50]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 38,920	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,554	Inflation
Current Class South Large	Initial CR? False	Medicaid: 19,674	FY Index: 1.29878490
Class at 1/94: South Large	Medical Utilization	50.54985%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	88.85845%	Cost: 1.03716397
Open Date: 10/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 07/08/1986	Low Occupancy Adjustment Factor:	113.12184%	DC Sem Index: 1.24200000
Med # Active Date: 06/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 224928			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	842,365	1,532,938	989,685	312,030		3,677,018
1a	Audit Adjustments						
2	Cost Per Diem	42.8162	77.9169	50.3042	15.8600		186.8973
3	Cost Per Diem Inflated	44.4074	80.0768	52.1737			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	44.4074	80.0768	52.1737	15.8600		192.5179
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	56.2033		67.0273			
7	Provider Target Rate	57.3743		68.4239			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	53.9008		62.3886			
10b	Base for line 10a	52.8006		61.1152			
11	Lesser of 5,7,8,10, 10a	44.4074	80.0768	52.1737	13.6500		190.3079
12/13	Medical Adjustment Rate		0.0495	0.0323			
14	Prospective Per Diem 11	44.4074	80.1263	52.2060	13.6500		190.3897
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	4,580,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:	1984/07	Type:	Variable	80% Capital(1):	4,498,197	9.0369
RS to Start Calcs:	1984/07	<60% of Base:	False	20% ROE(2):	1,124,549	0.4102
Indexed Asset Value	5,622,746	Interest Rate:	5.0000%	Insurance Cost(3):	67,531	1.7351
FRVS Base Asset:	3,289,560	Chase Rate:	3.2500%	Taxes Cost(3):	71,824	1.8454
Occup Adj Factor	0.9000	Amortization Rate:	5.0000%	Home Office(3):	0	0.0000
ROE Factor	0.014380	Interest Only:	False	Replacement(3&4):	282,364	0.0000
		Yearly Payment:	356,233	Total FRVS PD:		13.0276

- (1) 80% Capital (\$4,498,197) amortized at 5.0000 % for 20 years Principal & Interest of \$356,233 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.0369
- (2) 20% ROE (\$1,124,549) times the ROE factor (0.014380) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4102
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,289,560

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.4074	44.4074	0.7885	43.6189
Direct Care	80.1263	80.1263	1.4227	78.7036
Indirect Care	52.2060	52.2060	0.9269	51.2791
Property	13.6500	13.0276	0.2313	12.7963
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.2670
Supplemental Rate Add-on				9.9025
Totals	190.3897	189.7673	3.3694	219.5674

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		3,289,560	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



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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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219.57

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		120	50.55	5,622,746	6,225,960	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 010082063020130701201204252014142709



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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233.90

Heartland of Sarasota FL, 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
5401 SAWYER RD	1/1/2012-12/31/2012	Number of Beds: 140	Superior: 0
SARASOTA , FL 34233	Days in CR 366	Maximum: 51,240	Standard: 184
County: Sarasota [58]	First Used : 2014/01	Max Annualized: 51,100	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 35,194	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 16,288	Inflation
Current Class South Large	Initial CR? False	Medicaid: 5,099	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	14.48827%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	68.68462%	Cost: 1.04963363
Open Date: 10/01/1994	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1994	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 07/10/2009	Low Occupancy Adjustment Factor:	87.43941%	DC Sem Index: 1.24200000
Med # Active Date: 07/10/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	238,926	477,680	286,650	105,039	6,745	1,115,039	
1a	Audit Adjustments							
2	Cost Per Diem	46.8574	93.6811	56.2169	20.5999	1.3228	218.6781	
3	Cost Per Diem Inflated	49.1831	96.7584	59.0071				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.1831	96.7584	59.0071	20.5999	1.3228	226.8713	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	90.4436		78.8338				
7	Provider Target Rate	92.3281		80.4764				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	54.8832		62.6589				
10b	Base for line 10a	53.7630		61.3800				
11	Lesser of 5,7,8,10, 10a	49.1831	96.7584	59.0071	13.6500	1.3228	219.9214	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	49.1831	96.7584	59.0071	13.6500	1.3228	219.9214	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Heartland of Sarasota FL, LLC

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):	3,893,690	5.5132
Indexed Asset Value	4,867,112	<60% of Base:	False	20% ROE(2):	973,422	0.3086
FRVS Base Asset:	0	Interest Rate:	2.7600%	Insurance Cost(3):	23,467	0.6668
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	84,296	2.3952
ROE Factor	0.014580	Amortization Rate:	2.7600%	Home Office(3):	28,420	0.8075
		Interest Only:	False	Replacement(3&4):	200,233	0.0000
		Yearly Payment:	253,554	Total FRVS PD:		9.6913

- (1) 80% Capital (\$3,893,690) amortized at 2.7600 % for 20 years Principal & Interest of \$253,554 divided by annual available days (51100) divided by Occup. Adj. (0.900) = \$5.5132
- (2) 20% ROE (\$973,422) times the ROE factor (0.014580) divided by annual available days (51100) divided by Occup. Adj. (0.900) = \$0.3086
- (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:	51,883
Comparison Bed	140	Effective PBS Limitation	4,734,800

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.1831	49.1831	0.8733	48.3098
Direct Care	96.7584	96.7584	1.7180	95.0404
Indirect Care	59.0071	59.0071	1.0477	57.9594
Property	13.6500	9.6913	0.1721	9.5192
ROE	1.3228	0.2812	0.0050	0.2762
ROE Adjustment	-0.2812	-0.2812	-0.0050	-0.2762
Quality Assess-Medicaid Share				13.1714
Supplemental Rate Add-on				9.9025
Totals	219.6402	214.6399	3.8111	233.9027

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 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

0 010453-00 - 2014/07

233.90

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

0 011997-00 - 2014/07

224.51

Heartland of Boca Raton FL, 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
7225 BOCA DEL MAR DRIVE	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
BOCA RATON, FL 33433	Days in CR 366	Maximum: 43,920	Standard: 184
County: Palm Beach [50]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 28,552	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 18,708	Inflation
Current Class South Large	Initial CR? False	Medicaid: 4,644	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	16.26506%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	65.00911%	Cost: 1.04963363
Open Date: 12/01/1994	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/01/1994	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/05/2009	Low Occupancy Adjustment Factor:	82.76028%	DC Sem Index: 1.24200000
Med # Active Date: 08/05/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	303,351	367,706	311,374	150,698	949	1,134,077
1a	Audit Adjustments						
2	Cost Per Diem	65.3211	79.1787	67.0487	32.4500	0.2043	244.2028
3	Cost Per Diem Inflated	68.5632	81.7796	70.3766			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	68.5632	81.7796	70.3766	32.4500	0.2043	253.3737
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	85.3656		85.9082			
7	Provider Target Rate	87.1443		87.6982			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	55.7126		62.2509			
10b	Base for line 10a	54.5755		60.9803			
11	Lesser of 5,7,8,10, 10a	54.4176	81.7796	62.2509	13.6500	0.2043	212.3024
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	54.4176	81.7796	62.2509	13.6500	0.2043	212.3024
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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224.51

Rate Semester 07/01/2014 through 12/31/2014

Heartland of Boca Raton FL, LLC

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	0.3080
FRVS Base Asset:	0	Interest Rate:	2.7600%	Insurance Cost(3):	19,290	0.6756
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	107,431	3.7626
ROE Factor	0.014580	Amortization Rate:	2.7600%	Home Office(3):	25,998	0.9105
		Interest Only:	False	Replacement(3&4):	155,761	0.0000
		Yearly Payment:	216,924	Total FRVS PD:		11.1596

- (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. (0.900) = \$5.5029
- (2) 20% ROE (\$832,794) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3080
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,058,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	81.7796	81.7796	1.4520	80.3276
Indirect Care	62.2509	62.2509	1.1053	61.1456
Property	13.6500	11.1596	0.1981	10.9615
ROE	0.2043			
ROE Adjustment				
Quality Assess-Medicaid Share				8.7173
Supplemental Rate Add-on				9.9025
Totals	212.3024	209.6077	3.7216	224.5059

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 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

0 011997-00 - 2014/07

224.51

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

0 011998-00 - 2014/07
242.97

Royal Palm 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
2180 10TH AVENUE	1/1/2012-12/31/2012	Number of Beds: 72	Superior: 0
VERO BEACH , FL 32960	Days in CR 366	Maximum: 26,352	Standard: 184
County: Indian River [31]	First Used : 2014/01	Max Annualized: 26,280	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 19,860	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,026	Inflation
Current Class South Small	Initial CR? False	Medicaid: 3,386	FY Index: 1.28335532
Class at 1/94: South Small	Medical Utilization	17.04935%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	75.36430%	Cost: 1.04963363
Open Date: 04/01/2004	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/01/2004	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 03/07/2009	Low Occupancy Adjustment Factor:	95.94302%	DC Sem Index: 1.24200000
Med # Active Date: 03/07/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	176,765	263,440	245,283	194,187		879,675
1a	Audit Adjustments						
2	Cost Per Diem	52.2047	77.8028	72.4403	57.3500		259.7978
3	Cost Per Diem Inflated	54.7958	80.3585	76.0358			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	54.7958	80.3585	76.0358	57.3500		268.5401
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	56.0431		84.6642			
7	Provider Target Rate	57.2108		86.4283			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500		
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810			
10	Target Rate Class Ceiling	68.3236		80.3359			
10a	New Provider Target Limitation	71.0857		78.8488			
10b	Base for line 10a	69.6348		77.2394			
11	Lesser of 5,7,8,10, 10a	54.7958	80.3585	76.0358	13.6500		224.8401
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	54.7958	80.3585	76.0358	13.6500		224.8401
15	Inflated Usual & Customary Charge						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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242.97

Rate Semester 07/01/2014 through 12/31/2014

Royal Palm Healthcare & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	03/07/2009	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	3,500,207.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	2,586,229	8.8418
RS to Start Calcs:	2004/01	<60% of Base:	False	20% ROE(2):	646,557	0.3986
Indexed Asset Value	3,232,786	Interest Rate:	7.0000%	Insurance Cost(3):	10,826	0.5451
FRVS Base Asset:	0	Chase Rate:	3.2500%	Taxes Cost(3):	34,098	1.7169
Occup Adj Factor	0.9000	Amortization Rate:	5.2500%	Home Office(3):	8,476	0.4268
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	52,512	0.0000
		Yearly Payment:	209,126	Total FRVS PD:		11.9292

- (1) 80% Capital (\$2,586,229) amortized at 5.2500 % for 20 years Principal & Interest of \$209,126 divided by annual available days (26280) divided by Occup. Adj. (0.900) = \$8.8418
- (2) 20% ROE (\$646,557) times the ROE factor (0.014580) divided by annual available days (26280) divided by Occup. Adj. (0.900) = \$0.3986
- (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:	51,883
Comparison Bed	72	Effective PBS Limitation	3,098,232

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.7958	54.7958	0.9729	53.8229
Direct Care	80.3585	80.3585	1.4268	78.9317
Indirect Care	76.0358	76.0358	1.3500	74.6858
Property	13.6500	11.9292	0.2118	11.7174
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.9144
Supplemental Rate Add-on				9.9025
Totals	224.8401	223.1193	3.9615	242.9747

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 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

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242.97

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	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	

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 07/01/2014 through 12/31/2014

0 014169-00 - 2014/07

238.33

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	2/1/2012-1/31/2013	Number of Beds: 120	Superior: 0
PINELLAS PARK, FL 33782	Days in CR 366	Maximum: 43,920	Standard: 184
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 41,031	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 15,749	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 21,876	FY Index: 1.28546739
Class at 1/94: North Large	Medical Utilization	53.31579%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.42213%	Cost: 1.04790904
Open Date: 02/06/1998	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/06/1998	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20349917
Entered Medicaid 02/06/1998	Low Occupancy Adjustment Factor:	118.93166%	DC Sem Index: 1.24200000
Med # Active Date: 07/31/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03199074
Previous Med # 264351			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	932,347	2,040,042	1,338,452	722,564		5,033,405
1a	Audit Adjustments						
2	Cost Per Diem	42.6196	93.2548	61.1836	33.0300		230.0880
3	Cost Per Diem Inflated	44.6615	96.2381	64.1148			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	44.6615	96.2381	64.1148	33.0300		238.0444
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	52.2757		72.8154			
7	Provider Target Rate	53.3649		74.3326			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	57.4820		66.9079			
10b	Base for line 10a	56.3088		65.5423			
11	Lesser of 5,7,8,10, 10a	44.6615	96.2381	61.9692	13.6500		216.5188
12/13	Medical Adjustment Rate		0.3590	0.2312			
14	Prospective Per Diem 11	44.6615	96.5971	62.2004	13.6500		217.1090
15	Inflated Usual & Customary Charge						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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Rate Semester 07/01/2014 through 12/31/2014

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):	2,409,766	6.7375
Indexed Asset Value	3,012,207	<60% of Base:	False	20% ROE(2):	602,441	0.2228
FRVS Base Asset:	2,246,700	Interest Rate:	9.2900%	Insurance Cost(3):	120,015	2.9250
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	116,781	2.8462
ROE Factor	0.014580	Amortization Rate:	9.2900%	Home Office(3):	13,032	0.3176
		Interest Only:	False	Replacement(3&4):	41,962	0.0000
		Yearly Payment:	265,593	Total FRVS PD:		13.0491

- (1) 80% Capital (\$2,409,766) amortized at 9.2900 % for 20 years Principal & Interest of \$265,593 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$6.7375
- (2) 20% ROE (\$602,441) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.2228
- (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	51,883
			2,246,700

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.6615	44.6615	0.7930	43.8685
Direct Care	96.5971	96.5971	1.7151	94.8820
Indirect Care	62.2004	62.2004	1.1044	61.0960
Property	13.6500	13.0491	0.2317	12.8174
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.7587
Supplemental Rate Add-on				9.9025
Totals	217.1090	216.5081	3.8442	238.3251

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 7/1/2014 through 12/31/2014 Based on Cost Report: 1/31/2013

0 014169-00 - 2014/07

238.33

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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0 014169-00 - 2014/07

238.33

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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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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 07/01/2014 through 12/31/2014

0 015613-00 - 2014/07

218.35

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	1/1/2012-12/31/2012	Number of Beds: 90	Superior: 0
CARRABELLE, FL 32322	Days in CR 366	Maximum: 32,940	Standard: 184
County: Franklin [19]	First Used : 2014/01	Max Annualized: 32,850	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 26,397	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,097	Inflation
Current Class North Small	Initial CR? False	Medicaid: 22,273	FY Index: 1.28335532
Class at 1/94: North Small	Medical Utilization	84.37701%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	80.13661%	Cost: 1.04963363
Open Date: 05/26/2009	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/26/2009	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 05/26/2009	Low Occupancy Adjustment Factor:	102.01844%	DC Sem Index: 1.24200000
Med # Active Date: 05/26/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	900,939	1,608,566	1,064,086	1,096,945		4,670,535	
1a	Audit Adjustments							
2	Cost Per Diem	40.4498	72.2204	47.7747	49.2500		209.6949	
3	Cost Per Diem Inflated	42.4575	74.5927	50.1459				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.4575	74.5927	50.1459	49.2500		216.4461	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	111.2690		112.0784				
7	Provider Target Rate	113.5874		114.4137				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	52.9683		62.1379				
10b	Base for line 10a	51.8872		60.8696				
11	Lesser of 5,7,8,10, 10a	42.4575	74.5927	50.1459	13.6500		180.8461	
12/13	Medical Adjustment Rate		2.8848	1.9393				
14	Prospective Per Diem 11	42.4575	77.4775	52.0852	13.6500		185.6702	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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218.35

Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	7,799,191.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	3,505,714	7.7034
RS to Start Calcs:	2009/01	<60% of Base:	False	20% ROE(2):	876,429	0.4322
Indexed Asset Value	4,382,143	Interest Rate:	2.7341%	Insurance Cost(3):	73,059	2.7677
FRVS Base Asset:	4,229,370	Chase Rate:	3.2500%	Taxes Cost(3):	67,039	2.5396
Occup Adj Factor	0.9000	Amortization Rate:	2.7341%	Home Office(3):	15,943	0.6040
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	21,596	0.0000
		Yearly Payment:	227,751	Total FRVS PD:		14.0469

- (1) 80% Capital (\$3,505,714) amortized at 2.7341 % for 20 years Principal & Interest of \$227,751 divided by annual available days (32850) divided by Occup. Adj. (0.900) = \$7.7034
- (2) 20% ROE (\$876,429) times the ROE factor (0.014580) divided by annual available days (32850) divided by Occup. Adj. (0.900) = \$0.4322
- (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:	46,993
Comparison Date:	07/01/2008	Current RS PBS:	51,883
Comparison Bed	90	Effective PBS Limitation	4,229,370

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.4575	42.4575	0.7538	41.7037
Direct Care	77.4775	77.4775	1.3756	76.1019
Indirect Care	52.0852	52.0852	0.9248	51.1604
Property	13.6500	14.0469	0.2494	13.7975
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				25.6840
Supplemental Rate Add-on				9.9025
Totals	185.6702	186.0671	3.3036	218.3500

Medicaid Trend Adjustment



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218.35

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	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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216.32

Bayside 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
4343 LANGLEY AVENUE	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
PENSACOLA , FL 32504	Days in CR 366	Maximum: 43,920	Standard: 184
County: Escambia [17]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 42,749	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,266	Inflation
Current Class North Large	Initial CR? False	Medicaid: 28,102	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	65.73721%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	97.33379%	Cost: 1.04963363
Open Date: 10/01/1979	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1979	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 10/01/1979	Low Occupancy Adjustment Factor:	123.91143%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 213853			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,296,901	2,111,546	1,300,146	742,455		5,451,048	
1a	Audit Adjustments							
2	Cost Per Diem	46.1498	75.1386	46.2652	26.4200		193.9736	
3	Cost Per Diem Inflated	48.4404	77.6068	48.5615				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.4404	77.6068	48.5615	26.4200		201.0287	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	47.1670		62.7659				
7	Provider Target Rate	48.1498		64.0737				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.6384		57.9717				
10b	Base for line 10a	46.6661		56.7885				
11	Lesser of 5,7,8,10, 10a	47.6384	77.6068	48.5615	13.6500		187.4567	
12/13	Medical Adjustment Rate		1.3740	0.8598				
14	Prospective Per Diem 11	47.6384	78.9808	49.4213	13.6500		189.6905	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Bayside Manor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	05/01/1992	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	2,652,500.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	2,395,881 7.7779
RS to Start Calcs:	1979/07	<60% of Base:	False	20% ROE(2):	598,970 0.2215
Indexed Asset Value	2,994,851	Interest Rate:	11.5000%	Insurance Cost(3):	37,897 0.8865
FRVS Base Asset:	1,740,980	Chase Rate:	8.5000%	Taxes Cost(3):	50,683 1.1856
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	65,350 1.5287
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	180,627 0.0000
		Yearly Payment:	306,605	Total FRVS PD:	11.6002

- (1) 80% Capital (\$2,395,881) amortized at 11.5000 % for 20 years Principal & Interest of \$306,605 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.7779
- (2) 20% ROE (\$598,970) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2215
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.6384	47.6384	0.8458	46.7926
Direct Care	78.9808	78.9808	1.4023	77.5785
Indirect Care	49.4213	49.4213	0.8775	48.5438
Property	13.6500	11.6002	0.2060	11.3942
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.1110
Supplemental Rate Add-on				9.9025
Totals	189.6905	187.6407	3.3316	216.3226

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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216.32

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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216.32

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07		0.50	0.6841	0.6841		120	60.66	2,893,114	5,753,160	
2010/01	20,434	0.45	0.8643	0.8643		120	60.79	2,924,799	5,802,840	
2010/07		0.45	0.7107	0.7107		120	60.79	2,934,153	5,844,120	
2011/01		0.40	0.9198	0.9198		120	60.79	2,944,948	5,897,880	
2011/07		0.40	0.9028	0.9028		120	60.79	2,955,582	5,951,160	
2012/01		0.35	0.3865	0.3865		120	60.79	2,959,581	5,974,200	
2012/07		0.35	0.9417	0.9417		120	60.79	2,969,336	6,030,480	
2013/01		0.30	0.4901	0.4901		120	61.06	2,973,701	6,060,000	
2013/07		0.30	0.6196	0.6196		120	61.06	2,979,229	6,097,560	
2014/01		0.25	0.8564	0.8564		120	65.74	2,985,608	6,149,760	
2014/07		0.25	1.2383	1.2383		120	65.74	2,994,851	6,225,960	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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236.13

Margate 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
5951 COLONIAL DRIVE	1/1/2012-12/31/2012	Number of Beds: 170	Superior: 0
MARGATE, FL 33063	Days in CR 366	Maximum: 62,220	Standard: 184
County: Broward [6]	First Used : 2014/01	Max Annualized: 62,050	Conditional: 0
Region: South Area: 10	Last Used: 2014/07	Total Patient: 56,620	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,618	Inflation
Current Class South Large	Initial CR? False	Medicaid: 35,095	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	61.98340%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.99968%	Cost: 1.04963363
Open Date: 06/10/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/10/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 06/10/1985	Low Occupancy Adjustment Factor:	115.84775%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 214931			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,537,744	2,987,540	1,758,895	1,435,035		7,719,214
1a	Audit Adjustments						
2	Cost Per Diem	43.8166	85.1272	50.1181	40.8900		219.9519
3	Cost Per Diem Inflated	45.9914	87.9235	52.6056			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.9914	87.9235	52.6056	40.8900		227.4105
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.4067		61.4767			
7	Provider Target Rate	50.4361		62.7576			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	50.5666		60.5809			
10b	Base for line 10a	49.5345		59.3444			
11	Lesser of 5,7,8,10, 10a	45.9914	87.9235	52.6056	13.6500		200.1705
12/13	Medical Adjustment Rate		1.1853	0.7092			
14	Prospective Per Diem 11	45.9914	89.1088	53.3148	13.6500		202.0650
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

Margate Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	02/01/2005	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	13,125,000.00		Total Amount	Per Diem
RS to Start Calcs:	1985/01	Type:	Fixed	80% Capital(1):	6,533,030	14.2520
Indexed Asset Value	8,166,287	<60% of Base:	False	20% ROE(2):	1,633,257	0.4264
FRVS Base Asset:	3,420,000	Interest Rate:	10.7500%	Insurance Cost(3):	49,597	0.8760
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	273,045	4.8224
ROE Factor	0.014580	Amortization Rate:	10.7500%	Home Office(3):	82,813	1.4626
		Interest Only:	False	Replacement(3&4):	327,512	0.0000
		Yearly Payment:	795,903	Total FRVS PD:		21.8394

- (1) 80% Capital (\$6,533,030) amortized at 10.7500 % for 20 years Principal & Interest of \$795,903 divided by annual available days (62050) divided by Occup. Adj. (0.900) = \$14.2520
- (2) 20% ROE (\$1,633,257) times the ROE factor (0.014580) divided by annual available days (62050) divided by Occup. Adj. (0.900) = \$0.4264
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.9914	45.9914	0.8166	45.1748
Direct Care	89.1088	89.1088	1.5821	87.5267
Indirect Care	53.3148	53.3148	0.9466	52.3682
Property	13.6500	21.8394	0.3878	21.4516
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7038
Supplemental Rate Add-on				9.9025
Totals	202.0650	210.2544	3.7331	236.1276

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	27,307	0.75	0.8643	0.8643		170	58.43	7,825,824	8,220,690	
2010/07		0.70	0.7107	0.7107		170	58.43	7,864,757	8,279,170	
2011/01		0.70	0.9198	0.9198		170	58.43	7,915,398	8,355,330	
2011/07		0.65	0.9028	0.9028		170	58.43	7,961,846	8,430,810	
2012/01		0.65	0.3865	0.3865		170	58.43	7,981,846	8,463,450	
2012/07		0.60	0.9417	0.9417		170	58.43	8,026,943	8,543,180	
2013/01		0.60	0.4901	0.4901		170	57.43	8,050,550	8,585,000	
2013/07		0.55	0.6196	0.6196		170	57.43	8,077,986	8,638,210	
2014/01		0.55	0.8564	0.8564		170	61.98	8,116,033	8,712,160	
2014/07		0.50	1.2383	1.2383		170	61.98	8,166,287	8,820,110	

Message Code:

1 Per Bed Standard Limitation

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 017222123120120101201205112013140758



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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214.55

Rosewood 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
3107 NORTH H STREET	1/1/2012-12/31/2012	Number of Beds: 155	Superior: 0
PENSACOLA, FL 32501-1043	Days in CR 366	Maximum: 56,730	Standard: 184
County: Escambia [17]	First Used : 2014/01	Max Annualized: 56,575	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 53,483	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,237	Inflation
Current Class North Large	Initial CR? False	Medicaid: 39,461	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	73.78232%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.27640%	Cost: 1.04963363
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	120.01920%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 211842			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,510,014	3,247,680	1,756,982	821,578		7,336,254	
1a	Audit Adjustments							
2	Cost Per Diem	38.2660	82.3010	44.5245	20.8200		185.9115	
3	Cost Per Diem Inflated	40.1653	85.0044	46.7344				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	40.1653	85.0044	46.7344	20.8200		192.7241	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.0447		56.1538				
7	Provider Target Rate	47.0041		57.3238				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	46.7812		57.6811				
10b	Base for line 10a	45.8264		56.5038				
11	Lesser of 5,7,8,10, 10a	40.1653	85.0044	46.7344	13.6500		185.5541	
12/13	Medical Adjustment Rate		2.2743	1.2504				
14	Prospective Per Diem 11	40.1653	87.2787	47.9848	13.6500		189.0788	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Rosewood Manor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	3,487,500.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	2,607,974	5.5300
RS to Start Calcs:	1971/07	<60% of Base:	False	20% ROE(2):	651,993	0.1867
Indexed Asset Value	3,259,967	Interest Rate:	9.0000%	Insurance Cost(3):	42,292	0.7908
FRVS Base Asset:	1,485,746	Chase Rate:	6.0000%	Taxes Cost(3):	27,742	0.5187
Occup Adj Factor	0.9000	Amortization Rate:	9.0000%	Home Office(3):	71,406	1.3351
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	179,744	0.0000
		Yearly Payment:	281,575	Total FRVS PD:		8.3613

- (1) 80% Capital (\$2,607,974) amortized at 9.0000 % for 20 years Principal & Interest of \$281,575 divided by annual available days (56575) divided by Occup. Adj. (0.900) = \$5.5300
- (2) 20% ROE (\$651,993) times the ROE factor (0.014580) divided by annual available days (56575) divided by Occup. Adj. (0.900) = \$0.1867
- (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:	51,883
Comparison Bed	155	Effective PBS Limitation	4,417,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	40.1653	40.1653	0.7131	39.4522
Direct Care	87.2787	87.2787	1.5496	85.7291
Indirect Care	47.9848	47.9848	0.8520	47.1328
Property	13.6500	8.3613	0.1485	8.2128
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.1218
Supplemental Rate Add-on				9.9025
Totals	189.0788	183.7901	3.2632	214.5512

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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214.55

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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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	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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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		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	58,298	0.05	0.8643	0.8643		155	71.64	3,258,810	7,495,335	
2010/07		0.05	0.7107	0.7107		155	71.64	3,259,967	7,548,655	
2011/01		0.00	0.9198	0.9198		155	71.64	3,259,967	7,618,095	
2011/07		0.00	0.9028	0.9028		155	71.64	3,259,967	7,686,915	
2012/01		0.00	0.3865	0.3865		155	71.64	3,259,967	7,716,675	
2012/07		0.00	0.9417	0.9417		155	71.64	3,259,967	7,789,370	
2013/01		0.00	0.4901	0.4901		155	74.11	3,259,967	7,827,500	
2013/07		0.00	0.6196	0.6196		155	74.11	3,259,967	7,876,015	
2014/01		0.00	0.8564	0.8564		155	73.78	3,259,967	7,943,440	
2014/07		0.00	1.2383	1.2383		155	73.78	3,259,967	8,041,865	

Message Code:

5 Uncorrected Licensure Deficiency



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Bay Breeze Nursing & Retirement 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
3387 GULF BREEZE PARKWAY	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
GULF BREEZE, FL 32563	Days in CR 366	Maximum: 43,920	Standard: 184
County: Santa Rosa [57]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 40,051	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,943	Inflation
Current Class North Large	Initial CR? False	Medicaid: 24,285	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	60.63519%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.19080%	Cost: 1.04963363
Open Date: 08/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/01/1984	Low Occupancy Adjustment Factor:	116.09105%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 213861			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	957,261	2,075,252	1,206,386	741,178		4,980,077	
1a	Audit Adjustments							
2	Cost Per Diem	39.4178	85.4541	49.6762	30.5200		205.0681	
3	Cost Per Diem Inflated	41.3742	88.2611	52.1418				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	41.3742	88.2611	52.1418	30.5200		212.2971	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	45.1232		60.6591				
7	Provider Target Rate	46.0634		61.9230				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	45.7256		57.9717				
10b	Base for line 10a	44.7923		56.7885				
11	Lesser of 5,7,8,10, 10a	41.3742	88.2611	52.1418	13.6500		195.4271	
12/13	Medical Adjustment Rate		1.0560	0.6239				
14	Prospective Per Diem 11	41.3742	89.3171	52.7657	13.6500		197.1070	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Bay Breeze Nursing & Retirement Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	06/30/1994	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	3,767,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	3,961,066	12.8591
RS to Start Calcs:	1984/07	<60% of Base:	False	20% ROE(2):	990,266	0.3663
Indexed Asset Value	4,951,332	Interest Rate:	11.5000%	Insurance Cost(3):	31,048	0.7752
FRVS Base Asset:	1,698,423	Chase Rate:	8.5000%	Taxes Cost(3):	34,908	0.8716
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	63,429	1.5837
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	214,607	0.0000
		Yearly Payment:	506,904	Total FRVS PD:		16.4559

(1) 80% Capital (\$3,961,066) amortized at 11.5000 % for 20 years Principal & Interest of \$506,904 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$12.8591

(2) 20% ROE (\$990,266) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3663

(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:	51,883
Comparison Bed 60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	41.3742	41.3742	0.7346	40.6396
Direct Care	89.3171	89.3171	1.5858	87.7313
Indirect Care	52.7657	52.7657	0.9369	51.8288
Property	13.6500	16.4559	0.2922	16.1637
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.6953
Supplemental Rate Add-on				9.9025
Totals	197.1070	199.9129	3.5495	226.9612

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	35,224	0.70	0.8643	0.8643		120	56.71	4,751,171	5,802,840	
2010/07		0.70	0.7107	0.7107		120	56.71	4,774,808	5,844,120	
2011/01		0.65	0.9198	0.9198		120	56.71	4,803,357	5,897,880	
2011/07		0.65	0.9028	0.9028		120	56.71	4,831,543	5,951,160	
2012/01		0.60	0.3865	0.3865		120	56.71	4,842,747	5,974,200	
2012/07		0.60	0.9417	0.9417		120	56.71	4,870,109	6,030,480	
2013/01		0.55	0.4901	0.4901		120	58.10	4,883,239	6,060,000	
2013/07		0.55	0.6196	0.6196		120	58.10	4,899,881	6,097,560	
2014/01		0.50	0.8564	0.8564		120	60.64	4,920,862	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	4,951,332	6,225,960	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 017225123120120101201205112013133815



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216.26

Silvercrest 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
910 BROOKMEADE DRIVE	1/1/2013-12/31/2013	Number of Beds: 60	Superior: 0
CRESTVIEW, FL 32539	Days in CR 365	Maximum: 21,900	Standard: 184
County: Okaloosa [46]	First Used : 2014/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 20,776	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,498	Inflation
Current Class North Small	Initial CR? False	Medicaid: 14,029	FY Index: 1.31456505
Class at 1/94: North Small	Medical Utilization	67.52503%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.86758%	Cost: 1.02471376
Open Date: 07/01/1988	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1988	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 08/01/1988	Low Occupancy Adjustment Factor:	120.77180%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 213926			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	613,009	959,317	705,361	488,770		2,766,457
1a	Audit Adjustments						
2	Cost Per Diem	43.6958	68.3810	50.2788	34.8400		197.1956
3	Cost Per Diem Inflated	44.7757	69.9006	51.5214			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	44.7757	69.9006	51.5214	34.8400		201.0377
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	52.9368		61.6883			
7	Provider Target Rate	54.0398		62.9736			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation	53.0522		63.3149			
10b	Base for line 10a	51.9694		62.0226			
11	Lesser of 5,7,8,10, 10a	44.7757	69.9006	51.5214	13.6500		179.8477
12/13	Medical Adjustment Rate		1.3781	1.0158			
14	Prospective Per Diem 11	44.7757	71.2787	52.5372	13.6500		182.2416
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Silvercrest Manor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	08/04/1988	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	1,309,333.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	2,324,102	15.0898
RS to Start Calcs:	1988/07	<60% of Base:	False	20% ROE(2):	581,026	0.5527
Indexed Asset Value	2,905,128	Interest Rate:	11.5000%	Insurance Cost(3):	20,406	0.9822
FRVS Base Asset:	1,779,720	Chase Rate:	8.5000%	Taxes Cost(3):	20,885	1.0052
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	43,817	2.1090
ROE Factor	0.018750	Interest Only:	False	Replacement(3&4):	31,773	0.0000
		Yearly Payment:	297,419	Total FRVS PD:		19.7389

- (1) 80% Capital (\$2,324,102) amortized at 11.5000 % for 20 years Principal & Interest of \$297,419 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$15.0898
- (2) 20% ROE (\$581,026) times the ROE factor (0.018750) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.5527
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,779,720

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.7757	44.7757	0.7950	43.9807
Direct Care	71.2787	71.2787	1.2656	70.0131
Indirect Care	52.5372	52.5372	0.9328	51.6044
Property	13.6500	19.7389	0.3505	19.3884
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.3675
Supplemental Rate Add-on				9.9025
Totals	182.2416	188.3305	3.3439	216.2566

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	



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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	25,192	0.90	0.8643	0.8643		60	63.00	2,732,012	2,901,420	
2010/07		0.90	0.7107	0.7107		60	63.00	2,749,486	2,922,060	
2011/01		0.85	0.9198	0.9198		60	63.00	2,770,981	2,948,940	
2011/07		0.85	0.9028	0.9028		60	63.00	2,792,246	2,975,580	
2012/01		0.80	0.3865	0.3865		60	63.00	2,800,880	2,987,100	
2012/07		0.80	0.9417	0.9417		60	63.00	2,821,982	3,015,240	
2013/01	17,400	0.75	0.4901	0.4901		60	62.67	2,849,756	3,030,000	
2013/07		0.75	0.6196	0.6196		60	62.67	2,862,999	3,048,780	
2014/01		0.70	0.8564	0.8564		60	67.66	2,880,163	3,074,880	
2014/07		0.70	1.2383	1.2383		60	67.53	2,905,128	3,112,980	

Message Code:

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



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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Specialty Center 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
6984 PINE FOREST ROAD	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 0
PENSACOLA, FL 32526	Days in CR 365	Maximum: 43,800	Standard: 184
County: Escambia [17]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 41,335	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 11,145	Inflation
Current Class North Large	Initial CR? False	Medicaid: 25,199	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	60.96286%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.37215%	Cost: 1.02471376
Open Date: 12/09/1991	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/09/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 12/16/1991	Low Occupancy Adjustment Factor:	120.14109%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 213918			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,072,777	2,141,462	1,227,284	743,119		5,184,642	
1a	Audit Adjustments							
2	Cost Per Diem	42.5722	84.9820	48.7037	29.4900		205.7479	
3	Cost Per Diem Inflated	43.6243	86.8705	49.9074				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.6243	86.8705	49.9074	29.4900		209.8922	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.3965		61.3967				
7	Provider Target Rate	47.3632		62.6760				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.6384		57.9773				
10b	Base for line 10a	46.6661		56.7939				
11	Lesser of 5,7,8,10, 10a	43.6243	86.8705	49.9074	13.6500		194.0522	
12/13	Medical Adjustment Rate		1.0714	0.6155				
14	Prospective Per Diem 11	43.6243	87.9419	50.5229	13.6500		195.7391	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Specialty Center of Pensacola

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/16/1991	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	2,652,500.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,348,283	14.1161
RS to Start Calcs:	1991/07	<60% of Base:	False	20% ROE(2):	1,087,071	0.5171
Indexed Asset Value	5,435,354	Interest Rate:	11.5000%	Insurance Cost(3):	40,026	0.9683
FRVS Base Asset:	3,576,837	Chase Rate:	8.5000%	Taxes Cost(3):	37,392	0.9046
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	62,010	1.5002
ROE Factor	0.018750	Interest Only:	False	Replacement(3&4):	63,029	0.0000
		Yearly Payment:	556,457	Total FRVS PD:		18.0063

- (1) 80% Capital (\$4,348,283) amortized at 11.5000 % for 20 years Principal & Interest of \$556,457 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.1161
- (2) 20% ROE (\$1,087,071) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5171
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,663,600

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.6243	43.6243	0.7746	42.8497
Direct Care	87.9419	87.9419	1.5614	86.3805
Indirect Care	50.5229	50.5229	0.8970	49.6259
Property	13.6500	18.0063	0.3197	17.6866
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.9743
Supplemental Rate Add-on				9.9025
Totals	195.7391	200.0954	3.5527	226.4195

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	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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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	9,795	1.00	0.8643	0.8643		120	57.11	5,072,271	5,802,840	
2010/07	18,698	1.00	0.7107	0.7107		120	57.11	5,127,018	5,844,120	
2011/01		1.00	0.9198	0.9198		120	57.11	5,174,176	5,897,880	
2011/07		1.00	0.9028	0.9028		120	57.11	5,220,888	5,951,160	
2012/01		0.95	0.3865	0.3865		120	57.11	5,240,059	5,974,200	
2012/07		0.95	0.9417	0.9417		120	57.11	5,286,937	6,030,480	
2013/01		0.90	0.4901	0.4901		120	57.89	5,310,258	6,060,000	
2013/07		0.90	0.6196	0.6196		120	57.89	5,339,868	6,097,560	
2014/01		0.85	0.8564	0.8564		120	60.75	5,378,737	6,149,760	
2014/07		0.85	1.2383	1.2383		120	60.96	5,435,354	6,225,960	

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 07/01/2014 through 12/31/2014

0 017242-00 - 2014/07

255.41

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	1/1/2013-12/31/2013	Number of Beds: 97	Superior: 0
MIRAMAR BEACH, FL 32550	Days in CR 365	Maximum: 35,405	Standard: 184
County: Walton [66]	First Used : 2014/07	Max Annualized: 35,405	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 23,655	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,242	Inflation
Current Class North Small	Initial CR? False	Medicaid: 13,605	FY Index: 1.31456505
Class at 1/94: North Small	Medical Utilization	57.51427%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	66.81260%	Cost: 1.02471376
Open Date: 02/24/1988	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/24/1988	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 02/24/1988	Low Occupancy Adjustment Factor:	85.05622%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 211621			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	661,056	1,258,706	872,509	682,971		3,475,242	
1a	Audit Adjustments							
2	Cost Per Diem	48.5892	92.5179	64.1315	50.2000		255.4386	
3	Cost Per Diem Inflated	49.7900	94.5739	65.7164				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.7900	94.5739	65.7164	50.2000		260.2803	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.6120		63.0665				
7	Provider Target Rate	53.7082		64.3806				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	51.3434		63.6506				
10b	Base for line 10a	50.2954		62.3514				
11	Lesser of 5,7,8,10, 10a	49.7900	93.7426	63.6506	13.6500		220.8332	
12/13	Medical Adjustment Rate		0.7925	0.5381				
14	Prospective Per Diem 11	49.7900	94.5351	64.1887	13.6500		222.1638	
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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Rate Semester 07/01/2014 through 12/31/2014

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):	3,829,100	14.3968
Indexed Asset Value	4,786,375	<60% of Base:	False	20% ROE(2):	957,275	0.5633
FRVS Base Asset:	1,765,380	Interest Rate:	11.5000%	Insurance Cost(3):	29,651	1.2535
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	24,308	1.0276
ROE Factor	0.018750	Amortization Rate:	10.5000%	Home Office(3):	49,498	2.0925
		Interest Only:	False	Replacement(3&4):	109,492	0.0000
		Yearly Payment:	458,748	Total FRVS PD:		19.3337

(1) 80% Capital (\$3,829,100) amortized at 10.5000 % for 20 years Principal & Interest of \$458,748 divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$14.3968

(2) 20% ROE (\$957,275) times the ROE factor (0.018750) divided by annual available days (35405) divided by Occup. Adj. (0.90) = \$0.5633

(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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,765,380

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.7900	49.7900	0.8840	48.9060
Direct Care	94.5351	94.5351	1.6785	92.8566
Indirect Care	64.1887	64.1887	1.1397	63.0490
Property	13.6500	19.3337	0.3433	18.9904
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.7065
Supplemental Rate Add-on				9.9025
Totals	222.1638	227.8475	4.0455	255.4110

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 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2013

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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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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	30,351	0.90	0.8643	0.8643		97	64.62	4,538,744	4,690,629	
2010/07		0.85	0.7107	0.7107		97	64.62	4,566,163	4,723,997	
2011/01		0.85	0.9198	0.9198		97	64.62	4,601,861	4,767,453	
2011/07		0.80	0.9028	0.9028		97	64.62	4,635,096	4,810,521	
2012/01		0.80	0.3865	0.3865		97	64.62	4,635,096	4,829,145	5
2012/07		0.75	0.9417	0.9417		97	64.62	4,682,267	4,874,638	
2013/01		0.75	0.4901	0.4901		97	60.70	4,699,479	4,898,500	
2013/07		0.70	0.6196	0.6196		97	60.70	4,719,861	4,928,861	
2014/01		0.70	0.8564	0.8564		97	56.56	4,748,157	4,971,056	
2014/07		0.65	1.2383	1.2383		97	57.51	4,786,375	5,032,651	

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 07/01/2014 through 12/31/2014

0 017301-00 - 2014/07

223.52

Lake Bennett 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
1091 KELTON AVE	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
OCOEE, FL 34761	Days in CR 365	Maximum: 43,800	Standard: 184
County: Orange [48]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 41,372	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,645	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 21,975	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	53.11563%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.45662%	Cost: 1.03716397
Open Date: 07/06/1997	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/08/1997	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 09/08/1997	Low Occupancy Adjustment Factor:	120.24863%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 318761			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,023,612	1,691,127	1,237,778	790,661		4,743,179	
1a	Audit Adjustments							
2	Cost Per Diem	46.5808	76.9569	56.3266	35.9800		215.8443	
3	Cost Per Diem Inflated	48.3119	79.0902	58.4199				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.3119	79.0902	58.4199	35.9800		221.8020	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.6719		65.8978				
7	Provider Target Rate	56.8319		67.2708				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	48.7144		62.9243				
10b	Base for line 10a	47.7201		61.6400				
11	Lesser of 5,7,8,10, 10a	48.3119	79.0902	58.4199	13.6500		199.4720	
12/13	Medical Adjustment Rate		0.2772	0.2048				
14	Prospective Per Diem 11	48.3119	79.3674	58.6247	13.6500		199.9540	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Lake Bennett Health and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	09/08/1997	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:	1997/07	Type:	Fixed	80% Capital(1):	4,405,366	10.3972
Indexed Asset Value	5,506,707	<60% of Base:	False	20% ROE(2):	1,101,341	0.4018
FRVS Base Asset:	4,407,879	Interest Rate:	7.9000%	Insurance Cost(3):	48,816	1.1799
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	70,212	1.6971
ROE Factor	0.014380	Amortization Rate:	7.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	409,857	Total FRVS PD:		13.6760

- (1) 80% Capital (\$4,405,366) amortized at 7.0000 % for 20 years Principal & Interest of \$409,857 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.3972
- (2) 20% ROE (\$1,101,341) times the ROE factor (0.014380) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4018
- (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:	51,883
Comparison Bed	119	Effective PBS Limitation	4,407,879

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.3119	48.3119	0.8578	47.4541
Direct Care	79.3674	79.3674	1.4092	77.9582
Indirect Care	58.6247	58.6247	1.0409	57.5838
Property	13.6500	13.6760	0.2428	13.4332
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.1857
Supplemental Rate Add-on				9.9025
Totals	199.9540	199.9800	3.5507	223.5175

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 6/30/2013

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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	7,257,345	0.00	1.0917	1.0917		119	75.67	4,407,879	4,407,879	1
1998/01		0.10	1.1663	1.1663		119	75.67	4,413,019	4,507,958	
1998/07		0.10	1.0794	1.0794		119	75.67	4,417,781	4,556,629	
1999/01		0.20	1.4499	1.4499		119	75.67	4,417,781	4,622,674	5
1999/07		0.20	1.2299	1.2299		119	75.67	4,441,492	4,679,556	
2000/01		0.30	1.3356	1.3356		119	75.67	4,459,289	4,742,031	
2000/07		0.30	1.1129	1.1129		119	75.67	4,474,179	4,794,748	
2001/01		0.40	1.2976	1.2976		119	78.77	4,497,400	4,856,985	
2001/07		0.40	0.9615	0.9615		119	78.77	4,514,697	4,903,633	
2002/01		0.50	1.0301	1.0301		119	80.72	4,514,697	4,954,089	5
2002/07		0.50	0.8337	0.8337		119	87.83	4,556,871	4,995,382	
2003/01		0.60	1.3271	1.3271		119	87.83	4,556,871	5,061,665	5
2003/07		0.60	1.1664	1.1664		119	83.29	4,625,300	5,120,689	
2004/01		0.70	1.1103	1.1103		120	80.50	4,661,248	5,221,080	
2004/07		0.70	0.8378	0.8378		120	80.50	4,688,586	5,264,880	
2005/01		0.80	0.8595	0.8595		120	80.50	4,720,825	5,310,120	
2005/07		0.80	0.7364	0.7364		120	80.50	4,748,635	5,349,240	
2006/01		0.90	0.9068	0.9068		120	80.50	4,787,389	5,397,720	
2006/07		0.90	0.8133	0.8133		120	80.50	4,822,433	5,441,640	
2007/01		1.00	1.0133	1.0133		120	54.72	4,871,050	5,496,720	
2007/07		1.00	1.1050	1.1050		120	54.72	4,924,601	5,557,440	
2008/01		1.00	0.8556	0.8556		120	54.72	4,966,521	5,604,960	
2008/07		1.00	0.6104	0.6104		120	54.72	4,996,682	5,639,160	
2009/01		1.00	1.3268	1.3268		120	54.72	5,062,640	5,714,040	
2009/07		1.00	0.6841	0.6841		120	53.41	5,096,272	5,753,160	
2010/01		1.00	0.8643	0.8643		120	53.94	5,139,470	5,802,840	
2010/07		1.00	0.7107	0.7107		120	53.94	5,175,292	5,844,120	
2011/01		1.00	0.9198	0.9198		120	53.94	5,221,977	5,897,880	
2011/07		1.00	0.9028	0.9028		120	53.94	5,268,212	5,951,160	
2012/01		1.00	0.3865	0.3865		120	53.94	5,288,181	5,974,200	



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223.52

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07		1.00	0.9417	0.9417		120	54.72	5,337,726	6,030,480	
2013/01		1.00	0.4901	0.4901		120	54.72	5,363,753	6,060,000	
2013/07		1.00	0.6196	0.6196		120	58.75	5,396,987	6,097,560	
2014/01		1.00	0.8564	0.8564		120	53.12	5,441,627	6,149,760	
2014/07		1.00	1.2383	1.2383		120	53.12	5,506,707	6,225,960	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 017301063020130701201210302013092602



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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222.87

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	7/1/2012-6/30/2013	Number of Beds: 35	Superior: 184
CORAL SPRINGS, FL 33065	Days in CR 365	Maximum: 12,775	Standard: 0
County: Broward [6]	First Used : 2014/07	Max Annualized: 12,775	Conditional: 0
Region: South Area: 10	Last Used: 2014/07	Total Patient: 12,090	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,204	Inflation
Current Class South Small	Initial CR? False	Medicaid: 5,510	FY Index: 1.29878490
Class at 1/94: South Small	Medical Utilization	45.57486%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.63796%	Cost: 1.03716397
Open Date: 06/01/1986	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1986	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 06/01/1986	Low Occupancy Adjustment Factor:	120.47948%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 254134			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	230,225	438,356	484,606	124,581		1,277,768	
1a	Audit Adjustments							
2	Cost Per Diem	41.7831	79.5564	87.9503	22.6100		231.8998	
3	Cost Per Diem Inflated	43.3359	81.7617	91.2189				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.3359	81.7617	91.2189	22.6100		238.9265	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	74.6640		110.7910				
7	Provider Target Rate	76.2197		113.0994				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	43.3359	81.7617	80.3359	13.6500		219.0835	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	43.3359	81.7617	80.3359	13.6500		219.0835	
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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222.87

Rate Semester 07/01/2014 through 12/31/2014

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):	1,065,751	8.7361
Indexed Asset Value	1,332,189	<60% of Base:	True	20% ROE(2):	266,438	0.3332
FRVS Base Asset:	997,500	Interest Rate:	9.5000%	Insurance Cost(3):	8,158	0.6748
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	18,694	1.5462
ROE Factor	0.014380	Amortization Rate:	9.5000%	Home Office(3):	1,170	0.0968
		Interest Only:	True	Replacement(3&4):	710,751	0.0000
		Yearly Payment:	100,443	Total FRVS PD:		11.3871

- (1) 80% Capital (\$1,065,751) amortized at 9.5000 % for 20 years Interest of \$100,443 divided by annual available days (12775) divided by Occup. Adj. (0.900) = \$8.7361
 (2) 20% ROE (\$266,438) times the ROE factor (0.014380) divided by annual available days (12775) divided by Occup. Adj. (0.900) = \$0.3332
 (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:	51,883
Comparison Bed	35	Effective PBS Limitation	997,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.3359	43.3359	0.7694	42.5665
Direct Care	81.7617	81.7617	1.4517	80.3100
Indirect Care	80.3359	80.3359	1.4264	78.9095
Property	13.6500	11.3871	0.2022	11.1849
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Totals	219.0835	216.8206	3.8497	222.8734

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 6/30/2013

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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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222.87

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	40.24	1,298,843	1,720,215	
2011/07		0.70	0.9028	0.9028		35	40.24	1,304,849	1,735,755	
2012/01		0.70	0.3865	0.3865		35	36.44	1,307,188	1,742,475	
2012/07		0.65	0.9417	0.9417		35	36.44	1,312,489	1,758,890	
2013/01		0.65	0.4901	0.4901		35	42.41	1,315,713	1,767,500	
2013/07		0.60	0.6196	0.6196		35	42.41	1,319,485	1,778,455	
2014/01		0.60	0.8564	0.8564		35	42.41	1,324,713	1,793,680	
2014/07		0.55	1.2383	1.2383		35	45.57	1,332,189	1,815,905	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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255.80

Bay Village of Sarasota

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective		CHOW Status based on this Cost Report: No Change	
Type of Ownership: Nonprofit : 501(c)(3) Organization			
Provider Information	Cost Report	Patient Days	Ratings Days
8400 VAMO ROAD	11/1/2011-12/31/2012	Number of Beds: 95	Superior: 0
SARASOTA, FL 34231	Days in CR 427	Maximum: 40,565	Standard: 184
County: Sarasota [58]	First Used : 2013/07	Max Annualized: 34,675	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 22,313	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 2,234	Inflation
Current Class South Small	Initial CR? False	Medicaid: 4,883	FY Index: 1.28118151
Class at 1/94: South Small	Medical Utilization	21.88410%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	55.00555%	Cost: 1.05141456
Open Date: 12/05/1975	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/05/1975	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20166609
Entered Medicaid 02/22/2010	Low Occupancy Adjustment Factor:	70.02518%	DC Sem Index: 1.24200000
Med # Active Date: 02/22/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03356499
Previous Med #			PS Target: 1.02083595

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	409,292	666,976	394,377	128,081		1,598,726	
1a	Audit Adjustments							
2	Cost Per Diem	83.8198	136.5915	80.7653	26.2300		327.4066	
3	Cost Per Diem Inflated	88.1294	141.1762	84.9178				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	88.1294	141.1762	84.9178	26.2300		340.4534	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	80.5022		92.9091				
7	Provider Target Rate	82.1795		94.8449				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	63.4408		76.0733				
10b	Base for line 10a	62.1459		74.5206				
11	Lesser of 5,7,8,10, 10a	62.8974	105.8360	76.0733	13.6500		258.4567	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	62.8974	105.8360	76.0733	13.6500		258.4567	
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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255.80

Rate Semester 07/01/2014 through 12/31/2014

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):	1,074,193 2.5501
Indexed Asset Value	1,342,741	<60% of Base:	False	20% ROE(2):	268,548 0.1291
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):	63,760 2.8575
ROE Factor	0.015000	Amortization Rate:	4.2150%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	79,581	Total FRVS PD:	5.5367

- (1) 80% Capital (\$1,074,193) amortized at 4.2150 % for 20 years Principal & Interest of \$79,581 divided by annual available days (34675) divided by Occup. Adj. (0.900) = \$2.5501
- (2) 20% ROE (\$268,548) times the ROE factor (0.015000) divided by annual available days (34675) divided by Occup. Adj. (0.900) = \$0.1291
- (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:	51,883
Comparison Bed	95	Effective PBS Limitation	1,321,545

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	62.8974	62.8974	1.1167	61.7807
Direct Care	105.8360	105.8360	1.8791	103.9569
Indirect Care	76.0733	76.0733	1.3507	74.7226
Property	13.6500	5.5367	0.0983	5.4384
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Totals	258.4567	250.3434	4.4448	255.8011

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

0 018777-00 - 2014/07

255.80

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	14,729	0.10	0.7107	0.7107		95	9.05	1,336,274	4,626,595	
2011/01	5,687	0.10	0.9198	0.9198		95	9.05	1,341,961	4,669,155	
2011/07	780	0.20	0.9028	0.9028		95	9.05	1,342,741	4,711,335	
2012/01		0.20	0.3865	0.3865		95	9.05	1,342,741	4,729,575	
2012/07		0.30	0.9417	0.9417		95	9.05	1,342,741	4,774,130	
2013/01		0.30	0.4901	0.4901		95	9.05	1,342,741	4,797,500	
2013/07		0.40	0.6196	0.6196		95	21.88	1,342,741	4,827,235	
2014/01		0.40	0.8564	0.8564		95	21.88	1,342,741	4,868,560	
2014/07		0.50	1.2383	1.2383		95	21.88	1,342,741	4,928,885	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 019085-00 - 2014/07
225.52

Golfview Healthcare Center

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective		CHOW Status based on this Cost Report: No Change	
Type of Ownership: Proprietary : Corporation			
Provider Information	Cost Report	Patient Days	Ratings Days
3636 10TH AVE N	10/1/2012-9/30/2013	Number of Beds: 56	Superior: 0
SAINT PETERSBURG, FL 33713	Days in CR 365	Maximum: 20,440	Standard: 184
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 20,440	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 16,397	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,638	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 10,579	FY Index: 1.30932625
Class at 1/94: North Small	Medical Utilization	64.51790%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	80.22016%	Cost: 1.02881379
Open Date: 03/01/1980	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/15/1986	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 12/15/1986	Low Occupancy Adjustment Factor:	102.12481%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 262722			PS Target: 1.02083595

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	531,487	783,269	568,829	176,352		2,059,936	
1a	Audit Adjustments							
2	Cost Per Diem	50.2398	74.0399	53.7696	16.6700		194.7193	
3	Cost Per Diem Inflated	51.6874	75.9039	55.3189				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.6874	75.9039	55.3189	16.6700		199.5802	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	70.6846		75.6796				
7	Provider Target Rate	72.1574		77.2565				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	59.0635		63.8728				
10b	Base for line 10a	57.8580		62.5691				
11	Lesser of 5,7,8,10, 10a	51.6874	75.9039	55.3189	13.6500		196.5602	
12/13	Medical Adjustment Rate		1.2397	0.9035				
14	Prospective Per Diem 11	51.6874	77.1436	56.2224	13.6500		198.7034	
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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Rate Semester 07/01/2014 through 12/31/2014

Golfview Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/15/1986	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	0.00		Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	1,422,710	10.0034
RS to Start Calcs:	1986/07	<60% of Base:	True	20% ROE(2):	355,677	0.3223
Indexed Asset Value	1,778,387	Interest Rate:	0.0000%	Insurance Cost(3):	23,726	1.4470
FRVS Base Asset:	1,114,559	Chase Rate:	13.0000%	Taxes Cost(3):	20,831	1.2704
Occup Adj Factor	0.9000	Amortization Rate:	13.0000%	Home Office(3):	11,009	0.6714
ROE Factor	0.016670	Interest Only:	True	Replacement(3&4):	17,596	0.0000
		Yearly Payment:	184,022	Total FRVS PD:		13.7145

- (1) 80% Capital (\$1,422,710) amortized at 13.0000 % for 20 years Interest of \$184,022 divided by annual available days (20440) divided by Occup. Adj. (0.900) = \$10.0034
- (2) 20% ROE (\$355,677) times the ROE factor (0.016670) divided by annual available days (20440) divided by Occup. Adj. (0.900) = \$0.3223
- (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:	20,572
Comparison Date:	07/01/1979	Current RS PBS:	51,883
Comparison Bed	56	Effective PBS Limitation	1,152,032

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.6874	51.6874	0.9177	50.7697
Direct Care	77.1436	77.1436	1.3697	75.7739
Indirect Care	56.2224	56.2224	0.9982	55.2242
Property	13.6500	13.7145	0.2435	13.4710
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.3764
Supplemental Rate Add-on				9.9025
Totals	198.7034	198.7679	3.5291	225.5177

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	1,114,559	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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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	

Message Code:

5 Uncorrected Licensure Deficiency



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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	10/1/2012-9/30/2013	Number of Beds: 120	Superior: 0
NEW PORT RICHEY, FL 34653	Days in CR 365	Maximum: 43,800	Standard: 184
County: Pasco [51]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 32,944	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,722	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 22,004	FY Index: 1.30932625
Class at 1/94: North Large	Medical Utilization	66.79213%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	75.21461%	Cost: 1.02881379
Open Date: 03/01/1980	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/01/1980	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 03/01/1980	Low Occupancy Adjustment Factor:	95.75246%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 262706			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	881,105	1,547,692	853,073	461,204		3,743,073	
1a	Audit Adjustments							
2	Cost Per Diem	40.0429	70.3368	38.7690	20.9600		170.1087	
3	Cost Per Diem Inflated	41.1967	72.1076	39.8861				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	41.1967	72.1076	39.8861	20.9600		174.1504	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.5347		54.3761				
7	Provider Target Rate	53.6293		55.5091				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	49.8887		53.8325				
10b	Base for line 10a	48.8704		52.7337				
11	Lesser of 5,7,8,10, 10a	41.1967	72.1076	39.8861	13.6500		166.8404	
12/13	Medical Adjustment Rate		1.3622	0.7535				
14	Prospective Per Diem 11	41.1967	73.4698	40.6396	13.6500		168.9561	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Southern Pines Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	09/01/1987	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	0.00		Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	2,555,198	8.3842
RS to Start Calcs:	1980/01	<60% of Base:	True	20% ROE(2):	638,800	0.2701
Indexed Asset Value	3,193,998	Interest Rate:	0.0000%	Insurance Cost(3):	39,495	1.1989
FRVS Base Asset:	1,765,697	Chase Rate:	13.0000%	Taxes Cost(3):	30,015	0.9111
Occup Adj Factor	0.9000	Amortization Rate:	13.0000%	Home Office(3):	19,833	0.6020
ROE Factor	0.016670	Interest Only:	True	Replacement(3&4):	6,048	0.0000
		Yearly Payment:	330,504	Total FRVS PD:		11.3663

- (1) 80% Capital (\$2,555,198) amortized at 13.0000 % for 20 years Interest of \$330,504 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$8.3842
- (2) 20% ROE (\$638,800) times the ROE factor (0.016670) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2701
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	41.1967	41.1967	0.7315	40.4652
Direct Care	73.4698	73.4698	1.3045	72.1653
Indirect Care	40.6396	40.6396	0.7216	39.9180
Property	13.6500	11.3663	0.2018	11.1645
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.8612
Supplemental Rate Add-on				9.9025
Totals	168.9561	166.6724	2.9594	195.4767

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	1,608,640	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	

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 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 019284-00 - 2014/07

208.68

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	10/1/2012-9/30/2013	Number of Beds: 180	Superior: 0
JACKSONVILLE, FL 32210	Days in CR 365	Maximum: 65,700	Standard: 184
County: Duval [16]	First Used : 2014/01	Max Annualized: 65,700	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 52,983	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,370	Inflation
Current Class North Large	Initial CR? False	Medicaid: 45,075	FY Index: 1.30932625
Class at 1/94: North Large	Medical Utilization	85.07446%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	80.64384%	Cost: 1.02881379
Open Date: 07/01/1972	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1972	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 07/01/1972	Low Occupancy Adjustment Factor:	102.66418%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 262714			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,719,512	3,338,271	1,983,661	782,502		7,823,945
1a	Audit Adjustments						
2	Cost Per Diem	38.1478	74.0604	44.0080	17.3600		173.5762
3	Cost Per Diem Inflated	39.2470	75.9249	45.2760			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	39.2470	75.9249	45.2760	17.3600		177.8079
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	46.4887		50.0513			
7	Provider Target Rate	47.4573		51.0942			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	45.0646		51.5925			
10b	Base for line 10a	44.1448		50.5395			
11	Lesser of 5,7,8,10, 10a	39.2470	75.9249	45.2760	13.6500		174.0979
12/13	Medical Adjustment Rate		2.9959	1.7865			
14	Prospective Per Diem 11	39.2470	78.9208	47.0625	13.6500		178.8803
15	Inflated Usual & Customary Charge						0.00



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FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/1993	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		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	0.2961
FRVS Base Asset:	2,853,841	Interest Rate:	0.0000%	Insurance Cost(3):	62,565	1.1809
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	54,148	1.0220
ROE Factor	0.016670	Amortization Rate:	13.0000%	Home Office(3):	30,576	0.5771
		Interest Only:	True	Replacement(3&4):	24,558	0.0000
		Yearly Payment:	543,321	Total FRVS PD:		12.2647

- (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. (0.900) = \$9.1886
- (2) 20% ROE (\$1,050,134) times the ROE factor (0.016670) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.2961
- (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:	51,883
Comparison Bed	180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	39.2470	39.2470	0.6968	38.5502
Direct Care	78.9208	78.9208	1.4012	77.5196
Indirect Care	47.0625	47.0625	0.8356	46.2269
Property	13.6500	12.2647	0.2178	12.0469
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.4342
Supplemental Rate Add-on				9.9025
Totals	178.8803	177.4950	3.1514	208.6803

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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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	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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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		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	

Message Code:



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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	10/1/2012-9/30/2013	Number of Beds: 67	Superior: 0
HOLLYWOOD, FL 33020	Days in CR 365	Maximum: 24,455	Standard: 184
County: Broward [6]	First Used : 2014/07	Max Annualized: 24,455	Conditional: 0
Region: South Area: 10	Last Used: 2014/07	Total Patient: 22,049	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,695	Inflation
Current Class South Small	Initial CR? False	Medicaid: 13,118	FY Index: 1.30932625
Class at 1/94: South Small	Medical Utilization	59.49476%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.16152%	Cost: 1.02881379
Open Date: 03/01/1980	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/01/1980	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 03/01/1980	Low Occupancy Adjustment Factor:	114.78072%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 262064			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	650,197	838,114	582,485	244,388		2,315,184
1a	Audit Adjustments						
2	Cost Per Diem	49.5653	63.8904	44.4035	18.6300		176.4892
3	Cost Per Diem Inflated	50.9935	65.4989	45.6829			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.9935	65.4989	45.6829	18.6300		180.8053
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	57.4397		67.7484			
7	Provider Target Rate	58.6365		69.1600			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500		
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810			
10	Target Rate Class Ceiling	68.3236		80.3359			
10a	New Provider Target Limitation	59.1981		69.1600			
10b	Base for line 10a	57.9898		67.7484			
11	Lesser of 5,7,8,10, 10a	50.9935	65.4989	45.6829	13.6500		175.8253
12/13	Medical Adjustment Rate		0.6996	0.4880			
14	Prospective Per Diem 11	50.9935	66.1985	46.1709	13.6500		177.0129
15	Inflated Usual & Customary Charge						0.00

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



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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		
		Amount:	0.00		Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	1,615,139	9.4919
RS to Start Calcs:	1980/01	<60% of Base:	True	20% ROE(2):	403,785	0.3058
Indexed Asset Value	2,018,924	Interest Rate:	0.0000%	Insurance Cost(3):	27,603	1.2519
FRVS Base Asset:	1,178,716	Chase Rate:	13.0000%	Taxes Cost(3):	58,292	2.6437
Occup Adj Factor	0.9000	Amortization Rate:	13.0000%	Home Office(3):	14,514	0.6583
ROE Factor	0.016670	Interest Only:	True	Replacement(3&4):	67,395	0.0000
		Yearly Payment:	208,911	Total FRVS PD:		14.3516

- (1) 80% Capital (\$1,615,139) amortized at 13.0000 % for 20 years Interest of \$208,911 divided by annual available days (24455) divided by Occup. Adj. (0.900) = \$9.4919
- (2) 20% ROE (\$403,785) times the ROE factor (0.016670) divided by annual available days (24455) divided by Occup. Adj. (0.900) = \$0.3058
- (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:	51,883
Comparison Bed	67	Effective PBS Limitation	1,909,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.9935	50.9935	0.9054	50.0881
Direct Care	66.1985	66.1985	1.1754	65.0231
Indirect Care	46.1709	46.1709	0.8198	45.3511
Property	13.6500	14.3516	0.2548	14.0968
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.8231
Supplemental Rate Add-on				9.9025
Totals	177.0129	177.7145	3.1554	204.2847

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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204.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 019287093020131001201204222014141446



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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Coastal 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
820 N CLYDE MORRIS BLVD	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
DAYTONA BEACH, FL 32117	Days in CR 366	Maximum: 43,920	Standard: 184
County: Volusia [64]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 42,294	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,504	Inflation
Current Class North Large	Initial CR? False	Medicaid: 33,326	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	78.79605%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.29781%	Cost: 1.04963363
Open Date: 02/05/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/05/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 02/06/1987	Low Occupancy Adjustment Factor:	122.59257%	DC Sem Index: 1.24200000
Med # Active Date: 01/10/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 283134			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,289,712	2,382,497	1,395,784	766,498		5,834,490
1a	Audit Adjustments						
2	Cost Per Diem	38.6999	71.4906	41.8827	23.0000		175.0732
3	Cost Per Diem Inflated	40.6207	73.8389	43.9615			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	40.6207	73.8389	43.9615	23.0000		181.4211
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	48.5950		68.5724			
7	Provider Target Rate	49.6075		70.0012			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	46.1138		58.2087			
10b	Base for line 10a	45.1726		57.0206			
11	Lesser of 5,7,8,10, 10a	40.6207	73.8389	43.9615	13.6500		172.0711
12/13	Medical Adjustment Rate		2.3921	1.4242			
14	Prospective Per Diem 11	40.6207	76.2310	45.3857	13.6500		175.8874
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	0.00		Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	4,467,222	5.8710
RS to Start Calcs:	1987/01	<60% of Base:	True	20% ROE(2):	1,116,805	0.4131
Indexed Asset Value	5,584,027	Interest Rate:	5.2500%	Insurance Cost(3):	41,037	0.9703
FRVS Base Asset:	2,020,491	Chase Rate:	5.2500%	Taxes Cost(3):	45,246	1.0698
Occup Adj Factor	0.9000	Amortization Rate:	5.2500%	Home Office(3):	61,121	1.4451
ROE Factor	0.014580	Interest Only:	True	Replacement(3&4):	187,754	0.0000
		Yearly Payment:	231,436	Total FRVS PD:		9.7693

- (1) 80% Capital (\$4,467,222) amortized at 5.2500 % for 20 years Interest of \$231,436 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$5.8710
- (2) 20% ROE (\$1,116,805) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4131
- (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:	51,883
Comparison Bed	84	Effective PBS Limitation	2,409,288

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	40.6207	40.6207	0.7212	39.8995
Direct Care	76.2310	76.2310	1.3535	74.8775
Indirect Care	45.3857	45.3857	0.8058	44.5799
Property	13.6500	9.7693	0.1735	9.5958
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.6954
Supplemental Rate Add-on				9.9025
Totals	175.8874	172.0067	3.0540	203.5506

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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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	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 022138-00 - 2014/07

246.24

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	1/1/2013-12/31/2013	Number of Beds: 99	Superior: 0
DAYTONA BEACH, FL 32114	Days in CR 365	Maximum: 36,135	Standard: 184
County: Volusia [64]	First Used : 2014/07	Max Annualized: 36,135	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 33,340	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 11,860	Inflation
Current Class North Small	Initial CR? False	Medicaid: 12,259	FY Index: 1.31456505
Class at 1/94: North Small	Medical Utilization	36.76965%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.26512%	Cost: 1.02471376
Open Date: 02/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 07/01/1987	Low Occupancy Adjustment Factor:	117.45872%	DC Sem Index: 1.24200000
Med # Active Date: 05/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 223905			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	823,671	1,141,789	861,610	331,238	15,395	3,173,703	
1a	Audit Adjustments							
2	Cost Per Diem	67.1891	93.1388	70.2839	27.0200	1.2558	258.8876	
3	Cost Per Diem Inflated	68.8496	95.2086	72.0209				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	68.8496	95.2086	72.0209	27.0200	1.2558	264.3549	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	83.5240		83.9204				
7	Provider Target Rate	85.2643		85.6690				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	57.6361		68.2847				
10b	Base for line 10a	56.4597		66.8910				
11	Lesser of 5,7,8,10, 10a	53.3690	93.7426	66.1441	13.6500	1.2558	228.1615	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	53.3690	93.7426	66.1441	13.6500	1.2558	228.1615	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	3,000,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	3,558,550 8.8480
RS to Start Calcs:	1982/07	<60% of Base:	False	20% ROE(2):	889,638 0.5129
Indexed Asset Value	4,448,188	Interest Rate:	5.2500%	Insurance Cost(3):	102,003 3.0595
FRVS Base Asset:	813,756	Chase Rate:	3.2500%	Taxes Cost(3):	52,759 1.5825
Occup Adj Factor	0.9000	Amortization Rate:	5.2500%	Home Office(3):	34,384 1.0313
ROE Factor	0.018750	Interest Only:	False	Replacement(3&4):	99,135 0.0000
		Yearly Payment:	287,749	Total FRVS PD:	15.0342

- (1) 80% Capital (\$3,558,550) amortized at 5.2500 % for 20 years Principal & Interest of \$287,749 divided by annual available days (36135) divided by Occup. Adj. (0.90) = \$8.8480
- (2) 20% ROE (\$889,638) times the ROE factor (0.018750) divided by annual available days (36135) divided by Occup. Adj. (0.90) = \$0.5129
- (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:	51,883
Comparison Bed	55	Effective PBS Limitation	1,395,075

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3690	53.3690	0.9476	52.4214
Direct Care	93.7426	93.7426	1.6644	92.0782
Indirect Care	66.1441	66.1441	1.1744	64.9697
Property	13.6500	15.0342	0.2669	14.7673
ROE	1.2558	1.2472	0.0221	1.2251
ROE Adjustment	-1.2472	-1.2472	-0.0221	-1.2251
Quality Assess-Medicaid Share				12.1020
Supplemental Rate Add-on				9.9025
Totals	226.9143	228.2899	4.0533	246.2411

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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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	

Message Code:

5 Uncorrected Licensure Deficiency

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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	1/1/2013-12/31/2013	Number of Beds: 96	Superior: 0
BLOUNTSTOWN, FL 32424	Days in CR 365	Maximum: 35,040	Standard: 184
County: Calhoun [7]	First Used : 2014/07	Max Annualized: 35,040	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 32,661	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,683	Inflation
Current Class North Small	Initial CR? False	Medicaid: 24,226	FY Index: 1.31456505
Class at 1/94: North Small	Medical Utilization	74.17409%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.21062%	Cost: 1.02471376
Open Date: 08/01/1996	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1996	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 08/01/1996	Low Occupancy Adjustment Factor:	118.66240%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 264067			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,190,651	1,765,290	1,038,589	577,790		4,572,320
1a	Audit Adjustments						
2	Cost Per Diem	49.1477	72.8676	42.8708	23.8500		188.7361
3	Cost Per Diem Inflated	50.3623	74.4869	43.9303			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.3623	74.4869	43.9303	23.8500		192.6295
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.5291		55.3285			
7	Provider Target Rate	50.5611		56.4813			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation	50.2509		59.3177			
10b	Base for line 10a	49.2252		58.1070			
11	Lesser of 5,7,8,10, 10a	50.2509	74.4869	43.9303	13.6500		182.3181
12/13	Medical Adjustment Rate		2.0257	1.1947			
14	Prospective Per Diem 11	50.2509	76.5126	45.1250	13.6500		185.5385
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	3,018,087 7.7386
Indexed Asset Value	3,772,609	<60% of Base:	False	20% ROE(2):	754,522 0.4486
FRVS Base Asset:	2,919,807	Interest Rate:	6.9500%	Insurance Cost(3):	15,610 0.4779
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	59,440 1.8199
ROE Factor	0.018750	Amortization Rate:	5.2500%	Home Office(3):	12,471 0.3818
		Interest Only:	False	Replacement(3&4):	25,241 0.0000
		Yearly Payment:	244,046	Total FRVS PD:	10.8668

- (1) 80% Capital (\$3,018,087) amortized at 5.2500 % for 20 years Principal & Interest of \$244,046 divided by annual available days (35040) divided by Occup. Adj. (0.900) = \$7.7386
- (2) 20% ROE (\$754,522) times the ROE factor (0.018750) divided by annual available days (35040) divided by Occup. Adj. (0.900) = \$0.4486
- (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:	51,883
Comparison Bed	81	Effective PBS Limitation	2,919,807

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.2509	50.2509	0.8922	49.3587
Direct Care	76.5126	76.5126	1.3585	75.1541
Indirect Care	45.1250	45.1250	0.8012	44.3238
Property	13.6500	10.8668	0.1929	10.6739
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.9091
Supplemental Rate Add-on				9.9025
Totals	185.5385	182.7553	3.2448	213.3221

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	

Message Code:

1 Per Bed Standard Limitation

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The Home Association, Inc.

Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective		CHOW Status based on this Cost Report: No Change	
Type of Ownership: Nonprofit : 501(c)(3) Organization			
Provider Information	Cost Report	Patient Days	Ratings Days
1203 E 22ND AVE	7/1/2012-6/30/2013	Number of Beds: 96	Superior: 0
TAMPA, FL 33605	Days in CR 365	Maximum: 35,040	Standard: 184
County: Hillsborough [29]	First Used : 2014/07	Max Annualized: 35,040	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 31,649	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 2,157	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 23,260	FY Index: 1.29878490
Class at 1/94: North Small	Medical Utilization	73.49363%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.32249%	Cost: 1.03716397
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	114.98565%	DC Sem Index: 1.24200000
Med # Active Date: 03/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 201154			PS Target: 1.02083595

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,035,600	1,731,277	899,085	338,898		4,004,860	
1a	Audit Adjustments							
2	Cost Per Diem	44.5228	74.4315	38.6537	14.5700		172.1780	
3	Cost Per Diem Inflated	46.1774	76.4948	40.0902				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.1774	76.4948	40.0902	14.5700		177.3324	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	64.6808		62.0530				
7	Provider Target Rate	66.0285		63.3459				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	64.1695		68.4490				
10b	Base for line 10a	62.8598		67.0519				
11	Lesser of 5,7,8,10, 10a	46.1774	76.4948	40.0902	13.6500		176.4124	
12/13	Medical Adjustment Rate		2.0218	1.0596				
14	Prospective Per Diem 11	46.1774	78.5166	41.1498	13.6500		179.4938	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

The Home Association, Inc.

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:	0.00	Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	None	80% Capital(1):	1,804,386 7.1136
Indexed Asset Value	2,255,483	<60% of Base:	True	20% ROE(2):	451,097 0.2057
FRVS Base Asset:	1,040,890	Interest Rate:	12.5000%	Insurance Cost(3):	3,129 0.0989
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	1,955 0.0618
ROE Factor	0.014380	Amortization Rate:	12.5000%	Home Office(3):	25,149 0.7946
		Interest Only:	True	Replacement(3&4):	31,449 0.0000
		Yearly Payment:	224,335	Total FRVS PD:	8.2746

- (1) 80% Capital (\$1,804,386) amortized at 12.5000 % for 20 years Interest of \$224,335 divided by annual available days (35040) divided by Occup. Adj. (0.900) = \$7.1136
 (2) 20% ROE (\$451,097) times the ROE factor (0.014380) divided by annual available days (35040) divided by Occup. Adj. (0.900) = \$0.2057
 (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:	51,883
Comparison Bed	96	Effective PBS Limitation	2,736,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.1774	46.1774	0.8199	45.3575
Direct Care	78.5166	78.5166	1.3941	77.1225
Indirect Care	41.1498	41.1498	0.7306	40.4192
Property	13.6500	8.2746	0.1469	8.1277
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				26.1174
Supplemental Rate Add-on				9.9025
Totals	179.4938	174.1184	3.0915	207.0468

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	

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	10/1/2012-9/30/2013	Number of Beds: 180	Superior: 0
OKEECHOBEE, FL 34972	Days in CR 365	Maximum: 65,700	Standard: 184
County: Okeechobee [47]	First Used : 2014/07	Max Annualized: 65,700	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 63,089	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 14,492	Inflation
Current Class South Large	Initial CR? False	Medicaid: 45,040	FY Index: 1.30932625
Class at 1/94: South Large	Medical Utilization	71.39121%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.02588%	Cost: 1.02881379
Open Date: 12/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 12/01/1984	Low Occupancy Adjustment Factor:	122.24638%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 009495			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,243,939	4,677,464	3,009,075	593,627		10,524,105	
1a	Audit Adjustments							
2	Cost Per Diem	49.8210	103.8513	66.8089	13.1800		233.6612	
3	Cost Per Diem Inflated	51.2565	106.4658	68.7339				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.2565	106.4658	68.7339	13.1800		239.6362	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	64.7095		55.4668				
7	Provider Target Rate	66.0578		56.6225				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	51.2565	98.4475	56.6225	13.1800		219.5065	
12/13	Medical Adjustment Rate		2.3692	1.3626				
14	Prospective Per Diem 11	51.2565	100.8167	57.9851	13.1800		223.2383	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	6,086,272	13.1722
Indexed Asset Value	7,607,840	<60% of Base:	False	20% ROE(2):	1,521,568	0.4290
FRVS Base Asset:	2,565,000	Interest Rate:	11.5000%	Insurance Cost(3):	94,890	1.5041
Occup Adj Factor	0.9000	Chase Rate:	10.0000%	Taxes Cost(3):	96,530	1.5301
ROE Factor	0.016670	Amortization Rate:	11.5000%	Home Office(3):	39,045	0.6189
		Interest Only:	False	Replacement(3&4):	236,952	0.0000
		Yearly Payment:	778,870	Total FRVS PD:		17.2543

- (1) 80% Capital (\$6,086,272) amortized at 11.5000 % for 20 years Principal & Interest of \$778,870 divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$13.1722
- (2) 20% ROE (\$1,521,568) times the ROE factor (0.016670) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.4290
- (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:	51,883
Comparison Bed	90	Effective PBS Limitation	2,565,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.2565	51.2565	0.9101	50.3464
Direct Care	100.8167	100.8167	1.7900	99.0267
Indirect Care	57.9851	57.9851	1.0295	56.9556
Property	13.1800	17.2543	0.3064	16.9479
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9194
Supplemental Rate Add-on				9.9025
Totals	223.2383	227.3126	4.0360	254.0985

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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254.10

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		167	76.69	6,351,308	7,103,345	
2003/07		1.00	1.1664	1.1664		167	76.69	6,425,390	7,186,177	
2004/01		1.00	1.1103	1.1103		167	76.69	6,496,731	7,266,003	
2004/07		1.00	0.8378	0.8378		167	75.86	6,551,161	7,326,958	
2005/01		0.95	0.8595	0.8595		167	74.87	6,604,651	7,389,917	
2005/07		0.95	0.7364	0.7364		167	74.87	6,650,857	7,444,359	
2006/01		0.90	0.9068	0.9068		167	75.28	6,705,135	7,511,827	
2006/07		0.90	0.8133	0.8133		167	75.28	6,754,217	7,572,949	
2007/01		0.85	1.0133	1.0133		167	75.28	6,812,391	7,649,602	
2007/07	31,340	0.85	1.1050	1.1050		167	79.69	6,907,720	7,734,104	
2008/01		0.80	0.8556	0.8556		167	78.34	6,955,003	7,800,236	
2008/07		0.80	0.6104	0.6104		167	78.34	6,988,964	7,847,831	
2009/01		0.75	1.3268	1.3268		167	78.34	7,058,511	7,952,039	
2009/07		0.75	0.6841	0.6841		167	75.39	7,094,728	8,006,481	
2010/01	73,491	0.70	0.8643	0.8643		180	72.76	7,211,142	8,704,260	
2010/07		0.70	0.7107	0.7107		180	72.76	7,247,017	8,766,180	
2011/01	90,125	0.65	0.9198	0.9198		180	70.74	7,380,472	8,846,820	
2011/07		0.65	0.9028	0.9028		180	70.74	7,423,781	8,926,740	
2012/01		0.60	0.3865	0.3865		180	70.74	7,440,997	8,961,300	
2012/07		0.60	0.9417	0.9417		180	66.72	7,483,039	9,045,720	
2013/01		0.55	0.4901	0.4901		180	70.23	7,503,213	9,090,000	
2013/07		0.55	0.6196	0.6196		180	70.23	7,528,784	9,146,340	
2014/01		0.50	0.8564	0.8564		180	70.23	7,561,022	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	7,607,840	9,338,940	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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230.13

Astoria 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
701 OVERLOOK DR SE	7/1/2011-6/30/2012	Number of Beds: 120	Superior: 0
WINTER HAVEN, FL 33884	Days in CR 366	Maximum: 43,920	Standard: 184
County: Polk [53]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 33,103	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 12,972	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 12,168	FY Index: 1.26665332
Class at 1/94: South Large	Medical Utilization	36.75800%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	75.37113%	Cost: 1.06347402
Open Date: 11/04/2010	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/04/2010	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.19500000
Entered Medicaid 11/04/2010	Low Occupancy Adjustment Factor:	95.95172%	DC Sem Index: 1.24200000
Med # Active Date: 11/04/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03933054
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	529,334	1,182,687	592,486	1,014,081		3,318,587
1a	Audit Adjustments						
2	Cost Per Diem	43.5021	97.1965	48.6921	83.3400		272.7307
3	Cost Per Diem Inflated	46.2634	101.0193	51.7828			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.2634	101.0193	51.7828	83.3400		282.4055
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	114.2574		120.1112			
7	Provider Target Rate	116.6381		122.6138			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	51.1145		59.4135			
10b	Base for line 10a	50.0712		58.2008			
11	Lesser of 5,7,8,10, 10a	46.2634	96.7737	51.7828	13.6500		208.4699
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	46.2634	96.7737	51.7828	13.6500		208.4699
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

Astoria Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/04/2010	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	14,250,000.00		Total Amount	Per Diem
RS to Start Calcs:	2010/07	Type:	Variable	80% Capital(1):	4,710,702	9.2904
Indexed Asset Value	5,888,377	<60% of Base:	False	20% ROE(2):	1,177,675	0.5321
FRVS Base Asset:	5,802,840	Interest Rate:	4.7800%	Insurance Cost(3):	20,599	0.6223
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	77,948	2.3547
ROE Factor	0.017810	Amortization Rate:	4.7800%	Home Office(3):	24,581	0.7426
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	366,227	Total FRVS PD:		13.5421

- (1) 80% Capital (\$4,710,702) amortized at 4.7800 % for 20 years Principal & Interest of \$366,227 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.2904
- (2) 20% ROE (\$1,177,675) times the ROE factor (0.017810) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5321
- (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:	48,357
Comparison Date:	01/01/2010	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	5,802,840

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.2634	46.2634	0.8214	45.4420
Direct Care	96.7737	96.7737	1.7182	95.0555
Indirect Care	51.7828	51.7828	0.9194	50.8634
Property	13.6500	13.5421	0.2404	13.3017
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.5642
Supplemental Rate Add-on				9.9025
Totals	208.4699	208.3620	3.6994	230.1293

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
2010/07	19,710,595	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	36.76	5,888,377	6,225,960	

Message Code:

1 Per Bed Standard Limitation

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Florida Agency for Health Care Administration
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224.76

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	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
KEY WEST, FL 33040	Days in CR 365	Maximum: 43,800	Standard: 184
County: Monroe [44]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 27,551	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 5,917	Inflation
Current Class South Large	Initial CR? False	Medicaid: 18,084	FY Index: 1.29878490
Class at 1/94: South Large	Medical Utilization	65.63827%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	62.90183%	Cost: 1.03716397
Open Date: 03/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 03/01/1984	Low Occupancy Adjustment Factor:	80.07759%	DC Sem Index: 1.24200000
Med # Active Date: 08/12/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 207756			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	760,318	1,568,726	854,398	476,152		3,659,594	
1a	Audit Adjustments							
2	Cost Per Diem	42.0437	86.7466	47.2461	26.3300		202.3664	
3	Cost Per Diem Inflated	43.6062	89.1512	49.0020				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.6062	89.1512	49.0020	26.3300		208.0894	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	163.8233		135.4961				
7	Provider Target Rate	167.2367		138.3193				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	55.6765		63.9645				
10b	Base for line 10a	54.5401		62.6589				
11	Lesser of 5,7,8,10, 10a	43.6062	89.1512	49.0020	13.6500		195.4094	
12/13	Medical Adjustment Rate		1.5684	0.8621				
14	Prospective Per Diem 11	43.6062	90.7196	49.8641	13.6500		197.8399	
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		
		Amount:	3,591,437.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,980,768	10.0063
RS to Start Calcs:	1984/01	<60% of Base:	False	20% ROE(2):	1,245,192	0.4542
Indexed Asset Value	6,225,960	Interest Rate:	5.0000%	Insurance Cost(3):	36,024	1.3075
FRVS Base Asset:	2,696,041	Chase Rate:	3.2500%	Taxes Cost(3):	259	0.0094
Occup Adj Factor	0.9000	Amortization Rate:	5.0000%	Home Office(3):	25,938	0.9415
ROE Factor	0.014380	Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	394,450	Total FRVS PD:		12.7189

- (1) 80% Capital (\$4,980,768) amortized at 5.0000 % for 20 years Principal & Interest of \$394,450 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.0063
- (2) 20% ROE (\$1,245,192) times the ROE factor (0.014380) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4542
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.6062	43.6062	0.7742	42.8320
Direct Care	90.7196	90.7196	1.6107	89.1089
Indirect Care	49.8641	49.8641	0.8853	48.9788
Property	13.6500	12.7189	0.2258	12.4931
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.4435
Supplemental Rate Add-on				9.9025
Totals	197.8399	196.9088	3.4960	224.7588

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	350,072	0.75	0.9198	0.9198		120	46.13	5,769,410	5,897,880	
2011/07		0.70	0.9028	0.9028		120	46.13	5,799,992	5,951,160	
2012/01		0.70	0.3865	0.3865		120	46.13	5,813,156	5,974,200	
2012/07		0.65	0.9417	0.9417		120	46.13	5,843,000	6,030,480	
2013/01		0.65	0.4901	0.4901		120	46.13	5,858,614	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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0 024167-00 - 2014/07

224.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 024167063020130701201211052013142813



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 026536-00 - 2014/07

252.64

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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
PLANTATION, FL 33324	Days in CR 366	Maximum: 43,920	Standard: 184
County: Broward [6]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 10	Last Used: 2014/07	Total Patient: 38,843	Total: 184
Control: Proprietary : Partnership	Unaudited	Medicare: 6,883	Inflation
Current Class South Large	Initial CR? False	Medicaid: 27,085	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	69.72942%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	88.44035%	Cost: 1.04963363
Open Date: 11/01/1971	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1971	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 11/01/1971	Low Occupancy Adjustment Factor:	112.58958%	DC Sem Index: 1.24200000
Med # Active Date: 06/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 002419			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,452,468	2,414,749	1,452,664	820,676		6,140,558	
1a	Audit Adjustments							
2	Cost Per Diem	53.6263	89.1545	53.6335	30.3000		226.7143	
3	Cost Per Diem Inflated	56.2880	92.0831	56.2955				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	56.2880	92.0831	56.2955	30.3000		234.9666	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	67.7280		68.4622				
7	Provider Target Rate	69.1392		69.8887				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	57.6721		64.5288				
10b	Base for line 10a	56.4950		63.2117				
11	Lesser of 5,7,8,10, 10a	54.4176	92.0831	56.2955	13.6500		216.4462	
12/13	Medical Adjustment Rate		2.0438	1.2495				
14	Prospective Per Diem 11	54.4176	94.1269	57.5450	13.6500		219.7395	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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0 026536-00 - 2014/07

252.64

Rate Semester 07/01/2014 through 12/31/2014

West Broward 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:	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	0.4319
FRVS Base Asset:	2,206,339	Interest Rate:	13.0000%	Insurance Cost(3):	64,754	1.6671
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	73,483	1.8918
ROE Factor	0.014580	Amortization Rate:	11.5000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	209,968	0.0000
		Yearly Payment:	597,690	Total FRVS PD:		19.1529

- (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. (0.900) = \$15.1621
- (2) 20% ROE (\$1,167,623) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4319
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	94.1269	94.1269	1.6712	92.4557
Indirect Care	57.5450	57.5450	1.0217	56.5233
Property	13.6500	19.1529	0.3401	18.8128
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.4969
Supplemental Rate Add-on				9.9025
Totals	219.7395	225.2424	3.9992	252.6426

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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252.64

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	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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252.64

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	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	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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274.78

The Crossings

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
4445 PINE FOREST DRIVE	2/1/2011-1/31/2012	Number of Beds: 60	Superior: 0
LAKE WORTH , FL 33463	Days in CR 365	Maximum: 21,900	Standard: 184
County: Palm Beach [50]	First Used : 2013/01	Max Annualized: 21,900	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 18,754	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,248	Inflation
Current Class South Small	Initial CR? False	Medicaid: 12,405	FY Index: 1.25516245
Class at 1/94: South Small	Medical Utilization	66.14589%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	85.63470%	Cost: 1.07321001
Open Date: 07/01/1988	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1988	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.18999979
Entered Medicaid 11/01/1988	Low Occupancy Adjustment Factor:	109.01782%	DC Sem Index: 1.24200000
Med # Active Date: 06/30/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04369766
Previous Med # 001291			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	751,743	1,078,722	876,017	119,708		2,826,190	
1a	Audit Adjustments							
2	Cost Per Diem	60.6000	86.9587	70.6181	9.6500		227.8268	
3	Cost Per Diem Inflated	65.0365	90.7586	75.7881				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	65.0365	90.7586	75.7881	9.6500		241.2332	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	69.2153		77.9344				
7	Provider Target Rate	70.6575		79.5582				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	68.1459		78.2467				
10b	Base for line 10a	66.7550		76.6496				
11	Lesser of 5,7,8,10, 10a	62.8974	90.7586	75.7881	9.6500		239.0941	
12/13	Medical Adjustment Rate		1.6486	1.3766				
14	Prospective Per Diem 11	62.8974	92.4072	77.1647	9.6500		242.1193	
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

0 028100-00 - 2014/07

274.78

Rate Semester 07/01/2014 through 12/31/2014

The Crossings

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/01/1988	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	2,376,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	1,736,891 7.8842
RS to Start Calcs:	1988/07	<60% of Base:	False	20% ROE(2):	434,223 0.5071
Indexed Asset Value	2,171,114	Interest Rate:	6.5000%	Insurance Cost(3):	44,142 2.3537
FRVS Base Asset:	1,264,851	Chase Rate:	4.0000%	Taxes Cost(3):	85,319 4.5494
Occup Adj Factor	0.9000	Amortization Rate:	6.5000%	Home Office(3):	0 0.0000
ROE Factor	0.023020	Interest Only:	False	Replacement(3&4):	4,769 0.0000
		Yearly Payment:	155,398	Total FRVS PD:	15.2944

- (1) 80% Capital (\$1,736,891) amortized at 6.5000 % for 20 years Principal & Interest of \$155,398 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$7.8842
- (2) 20% ROE (\$434,223) times the ROE factor (0.023020) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.5071
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,779,720

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	62.8974	62.8974	1.1167	61.7807
Direct Care	92.4072	92.4072	1.6407	90.7665
Indirect Care	77.1647	77.1647	1.3701	75.7946
Property	9.6500	15.2944	0.2716	15.0228
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5117
Supplemental Rate Add-on				9.9025
Totals	242.1193	247.7637	4.3991	274.7788

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
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	66.15	2,139,630	3,048,780	
2014/01		0.70	0.8564	0.8564		60	66.15	2,152,457	3,074,880	
2014/07		0.70	1.2383	1.2383		60	66.15	2,171,114	3,112,980	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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Cross Pointe 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
440 PHIPPEN WAITERS ROAD	2/1/2011-1/31/2012	Number of Beds: 88	Superior: 0
DANIA BEACH, FL 33004	Days in CR 365	Maximum: 32,120	Standard: 184
County: Broward [6]	First Used : 2013/01	Max Annualized: 32,120	Conditional: 0
Region: South Area: 10	Last Used: 2014/07	Total Patient: 30,626	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,065	Inflation
Current Class South Small	Initial CR? False	Medicaid: 24,361	FY Index: 1.25516245
Class at 1/94: South Small	Medical Utilization	79.54353%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.34869%	Cost: 1.07321001
Open Date: 02/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.18999979
Entered Medicaid 02/01/1984	Low Occupancy Adjustment Factor:	121.38428%	DC Sem Index: 1.24200000
Med # Active Date: 06/30/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04369766
Previous Med # 001281			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,519,396	2,030,252	1,577,582	61,877		5,189,106	
1a	Audit Adjustments							
2	Cost Per Diem	62.3700	83.3402	64.7585	2.5400		213.0087	
3	Cost Per Diem Inflated	66.9361	86.9820	69.4995				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	66.9361	86.9820	69.4995	2.5400		225.9576	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	63.8973		70.2262				
7	Provider Target Rate	65.2287		71.6894				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	63.6041		72.4479				
10b	Base for line 10a	62.3059		70.9692				
11	Lesser of 5,7,8,10, 10a	62.8974	86.9820	69.4995	2.5400		221.9189	
12/13	Medical Adjustment Rate		2.8910	2.3099				
14	Prospective Per Diem 11	62.8974	89.8730	71.8094	2.5400		227.1198	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	1,932,137 3.1305
RS to Start Calcs:	1984/01	<60% of Base:	True	20% ROE(2):	483,034 0.3846
Indexed Asset Value	2,415,171	Interest Rate:	4.7500%	Insurance Cost(3):	41,080 1.3413
FRVS Base Asset:	1,418,704	Chase Rate:	4.7500%	Taxes Cost(3):	36,586 1.1946
Occup Adj Factor	0.9000	Amortization Rate:	4.7500%	Home Office(3):	0 0.0000
ROE Factor	0.023020	Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	90,496	Total FRVS PD:	6.0510

- (1) 80% Capital (\$1,932,137) amortized at 4.7500 % for 20 years Interest of \$90,496 divided by annual available days (32120) divided by Occup. Adj. (0.900) = \$3.1305
- (2) 20% ROE (\$483,034) times the ROE factor (0.023020) divided by annual available days (32120) divided by Occup. Adj. (0.900) = \$0.3846
- (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:	51,883
Comparison Bed 88	Effective PBS Limitation	2,508,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	62.8974	62.8974	1.1167	61.7807
Direct Care	89.8730	89.8730	1.5957	88.2773
Indirect Care	71.8094	71.8094	1.2750	70.5344
Property	2.5400	6.0510	0.1074	5.9436
ROE				
ROE Adjustment				
Quality Assess- Medicaid Share				24.3313
Supplemental Rate Add-on				9.9025
Totals	227.1198	230.6308	4.0948	260.7698

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	79.54	2,391,547	4,471,544	



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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	79.54	2,401,788	4,509,824	
2014/07		0.45	1.2383	1.2383		88	79.54	2,415,171	4,565,704	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 028133013120120201201110302012180535



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 028148-00 - 2014/07

231.59

Cross Terrace 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
1351 SAN CHRISTOPHER DR	2/1/2011-1/31/2012	Number of Beds: 104	Superior: 184
DUNEDIN, FL 34698	Days in CR 365	Maximum: 37,960	Standard: 0
County: Pinellas [52]	First Used : 2013/01	Max Annualized: 37,960	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 28,151	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,671	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 21,399	FY Index: 1.25516245
Class at 1/94: North Large	Medical Utilization	76.01506%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	74.15964%	Cost: 1.07321001
Open Date: 05/01/1979	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/01/1979	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.18999979
Entered Medicaid 05/01/1979	Low Occupancy Adjustment Factor:	94.40942%	DC Sem Index: 1.24200000
Med # Active Date: 06/30/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04369766
Previous Med # 001300			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,104,921	1,733,447	1,060,503	69,975		3,968,845	
1a	Audit Adjustments							
2	Cost Per Diem	51.6342	81.0060	49.5585	3.2700		185.4687	
3	Cost Per Diem Inflated	55.4143	84.5458	53.1867				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.4143	84.5458	53.1867	3.2700		196.4168	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.6203		55.3673				
7	Provider Target Rate	55.7584		56.5209				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	53.6262		56.9533				
10b	Base for line 10a	52.5317		55.7908				
11	Lesser of 5,7,8,10, 10a	52.0915	84.5458	53.1867	3.2700		193.0940	
12/13	Medical Adjustment Rate		2.4744	1.5566				
14	Prospective Per Diem 11	52.0915	87.0202	54.7433	3.2700		197.1250	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	1,802,222	4.2904
Indexed Asset Value	2,252,777	<60% of Base:	False	20% ROE(2):	450,555	0.3036
FRVS Base Asset:	1,371,112	Interest Rate:	5.3200%	Insurance Cost(3):	54,546	1.9376
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	37,094	1.3177
ROE Factor	0.023020	Amortization Rate:	5.3200%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	11,824	0.0000
		Yearly Payment:	146,577	Total FRVS PD:		7.8493

- (1) 80% Capital (\$1,802,222) amortized at 5.3200 % for 20 years Principal & Interest of \$146,577 divided by annual available days (37960) divided by Occup. Adj. (0.900) = \$4.2904
- (2) 20% ROE (\$450,555) times the ROE factor (0.023020) divided by annual available days (37960) divided by Occup. Adj. (0.900) = \$0.3036
- (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:	51,883
Comparison Bed	104	Effective PBS Limitation	2,964,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.0915	52.0915	0.9249	51.1666
Direct Care	87.0202	87.0202	1.5451	85.4751
Indirect Care	54.7433	54.7433	0.9720	53.7713
Property	3.2700	7.8493	0.1394	7.7099
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.5674
Supplemental Rate Add-on				9.9025
Totals	197.1250	201.7043	3.5814	231.5928

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
1979/01	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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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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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	76.02	2,242,410	5,284,552	
2014/01		0.25	0.8564	0.8564		104	76.02	2,247,211	5,329,792	
2014/07		0.20	1.2383	1.2383		104	76.02	2,252,777	5,395,832	

Message Code:

5 Uncorrected Licensure Deficiency



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Wuesthoff Progressive 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
8050 SPYGLASS HILL RD	10/1/2011-9/30/2012	Number of Beds: 114	Superior: 0
VIERA, FL 32940	Days in CR 366	Maximum: 41,724	Standard: 184
County: Brevard [5]	First Used : 2013/07	Max Annualized: 41,610	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 39,357	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 17,514	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 8,526	FY Index: 1.27684492
Class at 1/94: North Large	Medical Utilization	21.66324%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.32701%	Cost: 1.05498552
Open Date: 05/30/1995	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/30/1995	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20000000
Entered Medicaid 05/30/1995	Low Occupancy Adjustment Factor:	120.08363%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03500000
Previous Med # 253472			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,009,193	923,050	494,830	341,466		2,768,539	
1a	Audit Adjustments							
2	Cost Per Diem	118.3665	108.2630	58.0378	40.0500		324.7173	
3	Cost Per Diem Inflated	124.8749	112.0522	61.2290				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	124.8749	112.0522	61.2290	40.0500		338.2061	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	85.4007		51.4454				
7	Provider Target Rate	87.1801		52.5173				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	56.8462		63.0653				
10b	Base for line 10a	55.6859		61.7781				
11	Lesser of 5,7,8,10, 10a	52.0915	96.7737	52.5173	13.6500		215.0325	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	52.0915	96.7737	52.5173	13.6500		215.0325	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Wuesthoff Progressive Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	05/30/1995	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	3,709,800 3.1666
RS to Start Calcs:	1995/01	<60% of Base:	True	20% ROE(2):	927,450 0.3819
Indexed Asset Value	4,637,250	Interest Rate:	0.0000%	Insurance Cost(3):	0 0.0000
FRVS Base Asset:	3,917,154	Chase Rate:	3.2500%	Taxes Cost(3):	89,193 2.2663
Occup Adj Factor	0.9000	Amortization Rate:	3.2500%	Home Office(3):	1,261,444 32.0513
ROE Factor	0.015420	Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	118,585	Total FRVS PD:	37.8661

- (1) 80% Capital (\$3,709,800) amortized at 3.2500 % for 20 years Interest of \$118,585 divided by annual available days (41610) divided by Occup. Adj. (0.900) = \$3.1666
- (2) 20% ROE (\$927,450) times the ROE factor (0.015420) divided by annual available days (41610) divided by Occup. Adj. (0.900) = \$0.3819
- (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:	34,361
Comparison Date: 07/01/1994	Current RS PBS:	51,883
Comparison Bed 114	Effective PBS Limitation	3,917,154

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.0915	52.0915	0.9249	51.1666
Direct Care	96.7737	96.7737	1.7182	95.0555
Indirect Care	52.5173	52.5173	0.9324	51.5849
Property	13.6500	37.8661	0.6723	37.1938
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.9247
Supplemental Rate Add-on				9.9025
Totals	215.0325	239.2486	4.2478	260.8280

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
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	



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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 9/30/2012

0 028602-00 - 2014/07

260.83

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		1.00	0.8564	0.8564		114	21.66	4,637,250	5,842,272	
2014/07		1.00	1.2383	1.2383		114	21.66	4,637,250	5,914,662	

Message Code:

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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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 07/01/2014 through 12/31/2014

0 030479-00 - 2014/07
228.35

The Health Center Of Windermere
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Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective		CHOW Status based on this Cost Report: No Change	
Type of Ownership: Proprietary : Corporation			
Provider Information	Cost Report	Patient Days	Ratings Days
4875 CASON COVE DRIVE	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
ORLANDO , FL 32811	Days in CR 365	Maximum: 43,800	Standard: 184
County: Orange [48]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 41,410	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 15,083	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 15,660	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	37.81695%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.54338%	Cost: 1.03716397
Open Date: 04/04/1997	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/04/1997	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 05/20/1997	Low Occupancy Adjustment Factor:	120.35908%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 228877			PS Target: 1.02083595

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	864,457	1,271,084	908,686	591,008		3,635,235	
1a	Audit Adjustments							
2	Cost Per Diem	55.2016	81.1676	58.0259	37.7400		232.1351	
3	Cost Per Diem Inflated	57.2531	83.4176	60.1824				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.2531	83.4176	60.1824	37.7400		238.5931	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	62.6806		62.4148				
7	Provider Target Rate	63.9866		63.7153				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	52.9872		59.7778				
10b	Base for line 10a	51.9057		58.5577				
11	Lesser of 5,7,8,10, 10a	52.0915	83.4176	59.7778	13.6500		208.9369	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	52.0915	83.4176	59.7778	13.6500		208.9369	
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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Rate Semester 07/01/2014 through 12/31/2014

The Health Center Of Windermere

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	05/20/1997	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	4,343,346 9.2813
RS to Start Calcs:	1997/01	<60% of Base:	True	20% ROE(2):	1,085,837 0.3961
Indexed Asset Value	5,429,183	Interest Rate:	8.5000%	Insurance Cost(3):	55,592 1.3425
FRVS Base Asset:	4,383,120	Chase Rate:	8.5000%	Taxes Cost(3):	90,335 2.1815
Occup Adj Factor	0.9000	Amortization Rate:	8.5000%	Home Office(3):	0 0.0000
ROE Factor	0.014380	Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	365,868	Total FRVS PD:	13.2014

- (1) 80% Capital (\$4,343,346) amortized at 8.5000 % for 20 years Interest of \$365,868 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.2813
- (2) 20% ROE (\$1,085,837) times the ROE factor (0.014380) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3961
- (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:	36,526
Comparison Date:	07/01/1996	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	4,383,120

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.0915	52.0915	0.9249	51.1666
Direct Care	83.4176	83.4176	1.4811	81.9365
Indirect Care	59.7778	59.7778	1.0614	58.7164
Property	13.6500	13.2014	0.2344	12.9670
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.6627
Supplemental Rate Add-on				9.9025
Totals	208.9369	208.4883	3.7018	228.3517

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	9,886,001	0.00	1.4109	1.4109		120	52.09	4,383,120	4,383,120	1
1997/07	18,051	0.10	1.0917	1.0917		120	52.09	4,405,704	4,493,400	
1998/01	7,568	0.10	1.1663	1.1663		120	52.09	4,418,137	4,545,840	
1998/07		0.20	1.0794	1.0794		120	52.09	4,427,171	4,594,920	
1999/01		0.20	1.4499	1.4499		120	52.09	4,439,331	4,661,520	
1999/07		0.30	1.2299	1.2299		120	52.09	4,454,845	4,718,880	
2000/01		0.30	1.3356	1.3356		120	70.51	4,472,696	4,781,880	
2000/07		0.40	1.1129	1.1129		120	70.96	4,492,608	4,835,040	
2001/01		0.40	1.2976	1.2976		120	70.96	4,515,925	4,897,800	
2001/07		0.50	0.9615	0.9615		120	70.96	4,537,638	4,944,840	
2002/01		0.50	1.0301	1.0301		120	70.96	4,561,011	4,995,720	
2002/07		0.60	0.8337	0.8337		120	70.96	4,583,825	5,037,360	
2003/01		0.60	1.3271	1.3271		120	64.18	4,620,326	5,104,200	
2003/07		0.70	1.1664	1.1664		120	64.18	4,658,051	5,163,720	
2004/01		0.70	1.1103	1.1103		120	64.18	4,694,253	5,221,080	
2004/07		0.80	0.8378	0.8378		120	64.63	4,725,714	5,264,880	
2005/01		0.80	0.8595	0.8595		120	64.63	4,758,208	5,310,120	
2005/07		0.90	0.7364	0.7364		120	65.74	4,789,745	5,349,240	
2006/01		0.90	0.9068	0.9068		120	65.74	4,828,834	5,397,720	
2006/07		1.00	0.8133	0.8133		120	60.65	4,868,107	5,441,640	
2007/01		1.00	1.0133	1.0133		120	60.65	4,917,436	5,496,720	
2007/07		1.00	1.1050	1.1050		120	45.65	4,962,536	5,557,440	
2008/01		1.00	0.8556	0.8556		120	42.60	4,995,423	5,604,960	
2008/07		1.00	0.6104	0.6104		120	42.60	5,019,040	5,639,160	
2009/01		1.00	1.3268	1.3268		120	42.60	5,070,619	5,714,040	
2009/07		1.00	0.6841	0.6841		120	44.82	5,098,887	5,753,160	
2010/01		1.00	0.8643	0.8643		120	44.82	5,134,800	5,802,840	
2010/07		1.00	0.7107	0.7107		120	42.16	5,162,774	5,844,120	
2011/01		1.00	0.9198	0.9198		120	40.20	5,197,483	5,897,880	
2011/07		1.00	0.9028	0.9028		120	40.20	5,231,779	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	40.20	5,246,559	5,974,200	
2012/07		1.00	0.9417	0.9417		120	40.20	5,282,671	6,030,480	
2013/01		1.00	0.4901	0.4901		120	40.20	5,301,595	6,060,000	
2013/07	27,487	1.00	0.6196	0.6196		120	37.93	5,351,736	6,097,560	
2014/01		1.00	0.8564	0.8564		120	37.93	5,383,344	6,149,760	
2014/07		1.00	1.2383	1.2383		120	37.82	5,429,183	6,225,960	

Message Code:

1 Per Bed Standard Limitation

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 Computation of Nursing Home Medicaid Reimbursement Rate
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239.17

The Health Center of Plant City

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 N WILDER RD	7/1/2012-6/30/2013	Number of Beds: 180	Superior: 0
PLANT CITY, FL 33566	Days in CR 365	Maximum: 65,700	Standard: 184
County: Hillsborough [29]	First Used : 2014/01	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 63,039	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,472	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 40,795	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	64.71391%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.94977%	Cost: 1.03716397
Open Date: 09/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 09/27/1985	Low Occupancy Adjustment Factor:	122.14949%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 226343			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,002,251	3,426,273	2,303,592	969,697		8,701,813	
1a	Audit Adjustments							
2	Cost Per Diem	49.0808	83.9876	56.4675	23.7700		213.3059	
3	Cost Per Diem Inflated	50.9048	86.3158	58.5661				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.9048	86.3158	58.5661	23.7700		219.5567	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.3865		64.0262				
7	Provider Target Rate	58.5822		65.3602				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	55.0138		59.7778				
10b	Base for line 10a	53.8909		58.5577				
11	Lesser of 5,7,8,10, 10a	50.9048	86.3158	58.5661	13.6500		209.4367	
12/13	Medical Adjustment Rate		1.4288	0.9695				
14	Prospective Per Diem 11	50.9048	87.7446	59.5356	13.6500		211.8350	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

The Health Center of Plant City

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/2000	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	4,050,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	6,840,970 9.2392
RS to Start Calcs:	1985/10	<60% of Base:	False	20% ROE(2):	1,710,242 0.4159
Indexed Asset Value	8,551,212	Interest Rate:	5.1000%	Insurance Cost(3):	80,529 1.2774
FRVS Base Asset:	3,420,000	Chase Rate:	6.0000%	Taxes Cost(3):	141,286 2.2412
Occup Adj Factor	0.9000	Amortization Rate:	5.1000%	Home Office(3):	0 0.0000
ROE Factor	0.014380	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	546,314	Total FRVS PD:	13.1737

- (1) 80% Capital (\$6,840,970) amortized at 5.1000 % for 20 years Principal & Interest of \$546,314 divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$9.2392
- (2) 20% ROE (\$1,710,242) times the ROE factor (0.014380) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.4159
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.9048	50.9048	0.9038	50.0010
Direct Care	87.7446	87.7446	1.5579	86.1867
Indirect Care	59.5356	59.5356	1.0571	58.4785
Property	13.6500	13.1737	0.2339	12.9398
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.6622
Supplemental Rate Add-on				9.9025
Totals	211.8350	211.3587	3.7527	239.1707

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	4,351,908	0.00	0.8522	0.8522		120	64.53	3,420,000	3,420,000	1
1986/01		0.10	0.8299	0.8299		120	64.53	3,422,839	3,448,440	
1986/07		0.10	0.2974	0.2974		120	64.53	3,423,856	3,441,840	
1987/01		0.20	1.0091	1.0091		120	64.53	3,430,765	3,503,400	
1987/07		0.20	0.9007	0.9007		120	64.53	3,436,944	3,530,760	
1988/01		0.30	0.9007	0.9007		120	69.83	3,446,231	3,559,440	
1988/07		0.30	0.5899	0.5899		120	69.83	3,452,331	3,557,520	
1989/01		0.40	0.5899	0.5899		120	69.87	3,460,479	3,578,520	
1989/07		0.40	0.5899	0.5899		120	73.50	3,468,646	3,602,760	
1990/01		0.50	0.5899	0.5899		120	73.50	3,478,879	3,620,880	
1990/07		0.50	0.5899	0.5899		120	73.50	3,489,142	3,642,240	
1991/01		0.60	0.5899	0.5899		120	75.20	3,501,490	3,663,600	
1991/07		0.60	1.4932	1.4932		120	75.20	3,532,860	3,718,320	
1992/01		0.70	2.0117	2.0117		120	75.20	3,582,610	3,793,080	
1992/07		0.70	1.8152	1.8152		120	75.20	3,628,131	3,861,960	
1993/01		0.80	1.7710	1.7710		120	75.20	3,679,534	3,930,360	
1993/07	19,474	0.80	1.5329	1.5329		120	75.10	3,744,130	3,990,600	
1994/01		0.90	1.6983	1.6983		120	75.10	3,801,359	4,058,400	
1994/07		0.90	1.5991	1.5991		120	75.10	3,856,068	4,123,320	
1995/01	66,798	1.00	1.5812	1.5812		120	72.00	3,983,838	4,188,480	
1995/07		1.00	1.5250	1.5250		120	72.00	4,044,592	4,252,320	
1996/01	39,887	1.00	1.7228	1.7228		120	68.50	4,154,159	4,325,640	
1996/07		1.00	1.3294	1.3294		120	68.50	4,209,384	4,383,120	
1997/01	3,818,688	1.00	1.4109	1.4109		171	63.18	6,334,011	6,334,011	8
1997/07		1.00	1.0917	1.0917		171	63.18	6,403,095	6,403,095	8
1998/01		1.00	1.1663	1.1663		171	62.33	6,477,774	6,477,822	
1998/07		1.00	1.0794	1.0794		171	62.33	6,547,695	6,547,761	
1999/01	38,579	1.00	1.4499	1.4499		171	66.90	6,642,666	6,642,666	8
1999/07		1.00	1.2299	1.2299		171	66.90	6,724,364	6,724,404	
2000/01		1.00	1.3356	1.3356		171	62.80	6,814,175	6,814,179	



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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		180	68.43	6,890,010	7,252,560	
2001/01		1.00	1.2976	1.2976		180	68.43	6,979,415	7,346,700	
2001/07		1.00	0.9615	0.9615		180	68.43	7,046,522	7,417,260	
2002/01		1.00	1.0301	1.0301		180	68.43	7,119,108	7,493,580	
2002/07		1.00	0.8337	0.8337		180	68.43	7,178,460	7,556,040	
2003/01		1.00	1.3271	1.3271		180	77.38	7,273,725	7,656,300	
2003/07		1.00	1.1664	1.1664		180	77.38	7,358,566	7,745,580	
2004/01		1.00	1.1103	1.1103		180	77.38	7,440,268	7,831,620	
2004/07		1.00	0.8378	0.8378		180	74.38	7,502,603	7,897,320	
2005/01		1.00	0.8595	0.8595		180	74.38	7,567,088	7,965,180	
2005/07		1.00	0.7364	0.7364		180	75.39	7,622,812	8,023,860	
2006/01		0.95	0.9068	0.9068		180	75.39	7,688,483	8,096,580	
2006/07		0.95	0.8133	0.8133		180	72.68	7,747,884	8,162,460	
2007/01		0.90	1.0133	1.0133		180	72.68	7,818,545	8,245,080	
2007/07		0.90	1.1050	1.1050		180	69.33	7,896,300	8,336,160	
2008/01		0.85	0.8556	0.8556		180	69.33	7,953,730	8,407,440	
2008/07		0.85	0.6104	0.6104		180	64.66	7,994,994	8,458,740	
2009/01		0.80	1.3268	1.3268		180	64.66	8,079,853	8,571,060	
2009/07		0.80	0.6841	0.6841		180	64.10	8,124,074	8,629,740	
2010/01		0.75	0.8643	0.8643		180	64.10	8,176,734	8,704,260	
2010/07		0.75	0.7107	0.7107		180	61.99	8,220,316	8,766,180	
2011/01		0.70	0.9198	0.9198		180	65.38	8,273,247	8,846,820	
2011/07		0.70	0.9028	0.9028		180	65.38	8,325,534	8,926,740	
2012/01		0.65	0.3865	0.3865		180	65.38	8,346,448	8,961,300	
2012/07		0.65	0.9417	0.9417		180	65.38	8,397,537	9,045,720	
2013/01		0.60	0.4901	0.4901		180	65.38	8,422,234	9,090,000	
2013/07		0.60	0.6196	0.6196		180	66.28	8,453,548	9,146,340	
2014/01		0.55	0.8564	0.8564		180	64.71	8,493,364	9,224,640	
2014/07		0.55	1.2383	1.2383		180	64.71	8,551,212	9,338,940	

Message Code:

- | | |
|---|--|
| 1 | Per Bed Standard Limitation |
| 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 07/01/2014 through 12/31/2014

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The Health Center of Pensacola, 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
8475 UNIVERSITY PARKWAY	7/1/2012-6/30/2013	Number of Beds: 180	Superior: 0
PENSACOLA, FL 32514	Days in CR 365	Maximum: 65,700	Standard: 184
County: Escambia [17]	First Used : 2014/07	Max Annualized: 65,700	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 62,141	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 13,550	Inflation
Current Class North Large	Initial CR? False	Medicaid: 32,973	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	53.06159%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.58295%	Cost: 1.03716397
Open Date: 05/28/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/28/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 05/28/1987	Low Occupancy Adjustment Factor:	120.40945%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 229571			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,417,714	2,810,059	1,699,312	869,168		6,796,253	
1a	Audit Adjustments							
2	Cost Per Diem	42.9962	85.2230	51.5365	26.3600		206.1157	
3	Cost Per Diem Inflated	44.5941	87.5854	53.4518				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.5941	87.5854	53.4518	26.3600		211.9913	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	49.5717		55.2683				
7	Provider Target Rate	50.6046		56.4199				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	48.0597		57.1609				
10b	Base for line 10a	47.0788		55.9942				
11	Lesser of 5,7,8,10, 10a	44.5941	87.5854	53.4518	13.6500		199.2813	
12/13	Medical Adjustment Rate		0.3017	0.1841				
14	Prospective Per Diem 11	44.5941	87.8871	53.6359	13.6500		199.7671	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

The Health Center of Pensacola, Inc.

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	05/28/1987	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	8,086,035.00		Total Amount	Per Diem
RS to Start Calcs:	1987/01	Type:	Fixed	80% Capital(1):	7,269,084	14.9767
Indexed Asset Value	9,086,355	<60% of Base:	False	20% ROE(2):	1,817,271	0.4419
FRVS Base Asset:	3,441,840	Interest Rate:	10.7500%	Insurance Cost(3):	74,301	1.1957
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	55,586	0.8945
ROE Factor	0.014380	Amortization Rate:	10.7500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	885,574	Total FRVS PD:		17.5088

- (1) 80% Capital (\$7,269,084) amortized at 10.7500 % for 20 years Principal & Interest of \$885,574 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$14.9767
- (2) 20% ROE (\$1,817,271) times the ROE factor (0.014380) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.4419
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,441,840

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.5941	44.5941	0.7918	43.8023
Direct Care	87.8871	87.8871	1.5604	86.3267
Indirect Care	53.6359	53.6359	0.9523	52.6836
Property	13.6500	17.5088	0.3109	17.1979
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.6312
Supplemental Rate Add-on				9.9025
Totals	199.7671	203.6259	3.6154	228.5442

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 7/1/2014 through 12/31/2014 Based on Cost Report: 6/30/2013

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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	4,274,199	0.00	1.0091	1.0091		120	67.20	3,441,840	3,441,840	1
1987/07		0.10	0.9007	0.9007		120	67.20	3,444,941	3,530,760	
1988/01		0.10	0.9007	0.9007		120	67.20	3,448,045	3,559,440	
1988/07		0.20	0.5899	0.5899		120	67.20	3,452,114	3,557,520	
1989/01		0.20	0.5899	0.5899		120	67.20	3,456,187	3,578,520	
1989/07		0.30	0.5899	0.5899		120	67.20	3,462,304	3,602,760	
1990/01		0.30	0.5899	0.5899		120	67.20	3,468,432	3,620,880	
1990/07		0.40	0.5899	0.5899		120	67.20	3,476,617	3,642,240	
1991/01		0.40	0.5899	0.5899		120	71.21	3,484,822	3,663,600	
1991/07		0.50	1.4932	1.4932		120	75.23	3,510,840	3,718,320	
1992/01		0.50	2.0117	2.0117		120	75.23	3,546,156	3,793,080	
1992/07		0.60	1.8152	1.8152		120	76.57	3,584,777	3,861,960	
1993/01		0.60	1.7710	1.7710		120	76.57	3,622,869	3,930,360	
1993/07	42,638	0.70	1.5329	1.5329		120	78.54	3,704,380	3,990,600	
1994/01		0.70	1.6983	1.6983		120	78.54	3,748,418	4,058,400	
1994/07	25,240	0.80	1.5991	1.5991		120	74.09	3,821,612	4,123,320	
1995/01		0.80	1.5812	1.5812		120	74.09	3,869,955	4,188,480	
1995/07	39,036	0.90	1.5250	1.5250		120	70.73	3,962,106	4,252,320	
1996/01		0.90	1.7228	1.7228		120	70.73	4,023,538	4,325,640	
1996/07	28,795	1.00	1.3294	1.3294		120	70.94	4,105,822	4,383,120	
1997/01		1.00	1.4109	1.4109		120	70.94	4,163,751	4,444,920	
1997/07	3,257,106	1.00	1.0917	1.0917		180	70.33	7,466,313	6,740,100	6
1998/01		1.00	1.1663	1.1663		180	70.33	7,466,313	6,818,760	3
1998/07		1.00	1.0794	1.0794		180	64.26	7,466,313	6,892,380	3
1999/01		1.00	1.4499	1.4499		180	73.50	7,466,313	6,992,280	3
1999/07		1.00	1.2299	1.2299		180	73.50	7,466,313	7,078,320	3
2000/01		1.00	1.3356	1.3356		180	73.50	7,466,313	7,172,820	3
2000/07		1.00	1.1129	1.1129		180	71.54	7,466,313	7,252,560	3
2001/01		1.00	1.2976	1.2976		180	71.54	7,466,313	7,346,700	3
2001/07		1.00	0.9615	0.9615		180	71.54	7,466,313	7,417,260	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
2002/01		1.00	1.0301	1.0301		180	71.54	7,493,580	7,493,580	8
2002/07		1.00	0.8337	0.8337		180	71.54	7,556,040	7,556,040	8
2003/01		1.00	1.3271	1.3271		180	65.49	7,656,300	7,656,300	8
2003/07		1.00	1.1664	1.1664		180	65.49	7,745,580	7,745,580	8
2004/01		1.00	1.1103	1.1103		180	65.49	7,831,579	7,831,620	
2004/07		1.00	0.8378	0.8378		180	58.58	7,897,192	7,897,320	
2005/01		1.00	0.8595	0.8595		180	58.58	7,965,068	7,965,180	
2005/07		1.00	0.7364	0.7364		180	52.22	8,020,758	8,023,860	
2006/01		1.00	0.9068	0.9068		180	55.04	8,093,490	8,096,580	
2006/07		1.00	0.8133	0.8133		180	55.04	8,159,314	8,162,460	
2007/01		1.00	1.0133	1.0133		180	55.04	8,241,992	8,245,080	
2007/07		0.95	1.1050	1.1050		180	56.19	8,328,516	8,336,160	
2008/01		0.95	0.8556	0.8556		180	56.19	8,396,210	8,407,440	
2008/07		0.90	0.6104	0.6104		180	56.32	8,442,339	8,458,740	
2009/01		0.90	1.3268	1.3268		180	56.32	8,543,149	8,571,060	
2009/07		0.85	0.6841	0.6841		180	54.92	8,592,755	8,629,740	
2010/01		0.85	0.8643	0.8643		180	54.92	8,655,794	8,704,260	
2010/07		0.80	0.7107	0.7107		180	55.61	8,705,011	8,766,180	
2011/01		0.80	0.9198	0.9198		180	55.84	8,769,062	8,846,820	
2011/07		0.75	0.9028	0.9028		180	55.84	8,828,437	8,926,740	
2012/01		0.75	0.3865	0.3865		180	55.84	8,854,031	8,961,300	
2012/07		0.70	0.9417	0.9417		180	55.84	8,912,397	9,045,720	
2013/01		0.70	0.4901	0.4901		180	55.84	8,942,975	9,090,000	
2013/07		0.65	0.6196	0.6196		180	50.35	8,975,944	9,146,340	
2014/01		0.65	0.8564	0.8564		180	50.35	9,021,688	9,224,640	
2014/07		0.60	1.2383	1.2383		180	53.06	9,086,355	9,338,940	

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 07/01/2014 through 12/31/2014

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242.18

Parkway Health & Rehab

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 SE CENTRAL PKWY	7/1/2012-6/30/2013	Number of Beds: 177	Superior: 0
STUART, FL 34994	Days in CR 365	Maximum: 64,605	Standard: 184
County: Martin [43]	First Used : 2014/07	Max Annualized: 64,605	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 61,745	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 15,987	Inflation
Current Class South Large	Initial CR? False	Medicaid: 29,401	FY Index: 1.29878490
Class at 1/94: South Large	Medical Utilization	47.61681%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.57310%	Cost: 1.03716397
Open Date: 10/10/1989	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/10/1989	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 03/22/1990	Low Occupancy Adjustment Factor:	121.66997%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 228885			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,369,471	2,719,775	1,724,114	962,295		6,775,655	
1a	Audit Adjustments							
2	Cost Per Diem	46.5791	92.5062	58.6413	32.7300		230.4566	
3	Cost Per Diem Inflated	48.3102	95.0705	60.8206				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.3102	95.0705	60.8206	32.7300		236.9313	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.0948		68.4407				
7	Provider Target Rate	60.3261		69.8667				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	51.8208		65.6726				
10b	Base for line 10a	50.7631		64.3322				
11	Lesser of 5,7,8,10, 10a	48.3102	95.0705	60.8206	13.6500		217.8513	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	48.3102	95.0705	60.8206	13.6500		217.8513	
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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Rate Semester 07/01/2014 through 12/31/2014

Parkway Health & Rehab

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	03/22/1990	Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:		Amount:	10,937,005.00	Total Amount	Per Diem
RS to Start Calcs:	1989/07	Type:	Variable	80% Capital(1):	5,195,330 8.4941
Indexed Asset Value	6,494,162	<60% of Base:	False	20% ROE(2):	1,298,832 0.3212
FRVS Base Asset:	3,101,384	Interest Rate:	7.2800%	Insurance Cost(3):	97,438 1.5781
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	114,513 1.8546
ROE Factor	0.014380	Amortization Rate:	7.2800%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	493,886	Total FRVS PD:	12.2480

- (1) 80% Capital (\$5,195,330) amortized at 7.2800 % for 20 years Principal & Interest of \$493,886 divided by annual available days (64605) divided by Occup. Adj. (0.900) = \$8.4941
- (2) 20% ROE (\$1,298,832) times the ROE factor (0.014380) divided by annual available days (64605) divided by Occup. Adj. (0.900) = \$0.3212
- (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:	51,883
Comparison Bed	104	Effective PBS Limitation	3,101,384

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.3102	48.3102	0.8578	47.4524
Direct Care	95.0705	95.0705	1.6880	93.3825
Indirect Care	60.8206	60.8206	1.0799	59.7407
Property	13.6500	12.2480	0.2175	12.0305
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.6675
Supplemental Rate Add-on				9.9025
Totals	217.8513	216.4493	3.8432	242.1761

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 6/30/2013

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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	5,018,379	0.00	0.5899	0.5899		104	11.28	3,101,384	3,101,384	1
1990/01		0.10	0.5899	0.5899		104	11.28	3,101,384	3,138,096	
1990/07		0.10	0.5899	0.5899		104	11.28	3,101,384	3,156,608	
1991/01		0.20	0.5899	0.5899		104	11.28	3,101,384	3,175,120	
1991/07		0.20	1.4932	1.4932		104	11.28	3,101,384	3,222,544	
1992/01		0.30	2.0117	2.0117		104	11.28	3,101,384	3,287,336	
1992/07		0.30	1.8152	1.8152		104	24.87	3,101,384	3,347,032	
1993/01		0.40	1.7710	1.7710		104	24.87	3,101,384	3,406,312	
1993/07		0.40	1.5329	1.5329		104	26.88	3,110,678	3,458,520	
1994/01		0.50	1.6983	1.6983		104	26.88	3,123,588	3,517,280	
1994/07	23,064	0.50	1.5991	1.5991		104	24.12	3,146,652	3,573,544	
1995/01		0.60	1.5812	1.5812		104	24.12	3,146,652	3,630,016	
1995/07	106,281	0.60	1.5250	1.5250		118	22.64	3,252,933	4,181,448	
1996/01		0.70	1.7228	1.7228		118	23.84	3,252,933	4,253,546	
1996/07		0.70	1.3294	1.3294		118	23.84	3,252,933	4,310,068	
1997/01		0.80	1.4109	1.4109		118	23.84	3,252,933	4,370,838	
1997/07	19,011	0.80	1.0917	1.0917		118	26.82	3,285,798	4,418,510	
1998/01		0.90	1.1663	1.1663		118	26.82	3,302,617	4,470,076	
1998/07	28,552	0.90	1.0794	1.0794		106	29.93	3,348,629	4,058,846	
1999/01		1.00	1.4499	1.4499		106	29.93	3,375,050	4,117,676	
1999/07		1.00	1.2299	1.2299		106	25.52	3,394,311	4,168,344	
2000/01		1.00	1.3356	1.3356		106	25.52	3,415,346	4,223,994	
2000/07	1,799,677	1.00	1.1129	1.1129		177	41.15	5,243,461	7,131,684	
2001/01		1.00	1.2976	1.2976		177	41.15	5,294,367	7,224,255	
2001/07		1.00	0.9615	0.9615		177	41.15	5,332,453	7,293,639	
2002/01		1.00	1.0301	1.0301		177	41.15	5,373,550	7,368,687	
2002/07		1.00	0.8337	0.8337		177	41.15	5,407,068	7,430,106	
2003/01		1.00	1.3271	1.3271		177	41.15	5,460,755	7,528,695	
2003/07		1.00	1.1664	1.1664		177	51.56	5,520,465	7,616,487	
2004/01		1.00	1.1103	1.1103		177	51.56	5,577,925	7,701,093	



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242.18

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		1.00	0.8378	0.8378		177	53.08	5,623,025	7,765,698	
2005/01		1.00	0.8595	0.8595		177	53.08	5,669,668	7,832,427	
2005/07		1.00	0.7364	0.7364		177	53.08	5,709,962	7,890,129	
2006/01		1.00	0.9068	0.9068		177	49.32	5,756,393	7,961,637	
2006/07		1.00	0.8133	0.8133		177	49.32	5,798,375	8,026,419	
2007/01		1.00	1.0133	1.0133		177	48.26	5,849,930	8,107,662	
2007/07		1.00	1.1050	1.1050		177	48.26	5,906,650	8,197,224	
2008/01		1.00	0.8556	0.8556		177	51.53	5,953,999	8,267,316	
2008/07		1.00	0.6104	0.6104		177	51.53	5,988,049	8,317,761	
2009/01		1.00	1.3268	1.3268		177	53.04	6,064,667	8,428,209	
2009/07		1.00	0.6841	0.6841		177	53.04	6,104,677	8,485,911	
2010/01		0.95	0.8643	0.8643		177	53.00	6,152,980	8,559,189	
2010/07		0.95	0.7107	0.7107		177	57.87	6,194,525	8,620,077	
2011/01		0.90	0.9198	0.9198		177	44.45	6,235,967	8,699,373	
2011/07		0.90	0.9028	0.9028		177	44.45	6,276,915	8,777,961	
2012/01		0.85	0.3865	0.3865		177	44.45	6,293,579	8,811,945	
2012/07		0.85	0.9417	0.9417		177	44.45	6,334,290	8,894,958	
2013/01		0.80	0.4901	0.4901		177	44.45	6,354,363	8,938,500	
2013/07		0.80	0.6196	0.6196		177	47.01	6,381,286	8,993,901	
2014/01		0.75	0.8564	0.8564		177	47.01	6,416,319	9,070,896	
2014/07	26,250	0.75	1.2383	1.2383		177	47.62	6,494,162	9,183,291	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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236.73

The Health Center of Merritt Island

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 CROCKETT BLVD	7/1/2012-6/30/2013	Number of Beds: 180	Superior: 0
MERRITT ISLAND, FL 32953	Days in CR 365	Maximum: 65,700	Standard: 184
County: Brevard [5]	First Used : 2014/07	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 61,868	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 16,428	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,402	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	45.90742%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.16743%	Cost: 1.03716397
Open Date: 06/01/1990	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1990	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 08/01/1990	Low Occupancy Adjustment Factor:	119.88047%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 226700			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,332,824	2,439,326	1,716,086	972,769		6,461,005
1a	Audit Adjustments						
2	Cost Per Diem	46.9271	85.8857	60.4213	34.2500		227.4841
3	Cost Per Diem Inflated	48.6711	88.2665	62.6668			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.6711	88.2665	62.6668	34.2500		233.8544
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	53.5053		66.5200			
7	Provider Target Rate	54.6201		67.9060			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	51.0305		64.9045			
10b	Base for line 10a	49.9889		63.5798			
11	Lesser of 5,7,8,10, 10a	48.6711	88.2665	61.9692	13.6500		212.5568
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	48.6711	88.2665	61.9692	13.6500		212.5568
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

The Health Center of Merritt Island

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	08/01/1990	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,886,699.00		Total Amount	Per Diem
RS to Start Calcs:	1990/01	Type:	Variable	80% Capital(1):	6,487,210	10.5818
Indexed Asset Value	8,109,012	<60% of Base:	False	20% ROE(2):	1,621,802	0.3944
FRVS Base Asset:	3,602,760	Interest Rate:	7.4700%	Insurance Cost(3):	95,896	1.5500
Occup Adj Factor	0.9000	Chase Rate:	8.8800%	Taxes Cost(3):	73,324	1.1852
ROE Factor	0.014380	Amortization Rate:	7.4700%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	625,699	Total FRVS PD:		13.7114

- (1) 80% Capital (\$6,487,210) amortized at 7.4700 % for 20 years Principal & Interest of \$625,699 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$10.5818
- (2) 20% ROE (\$1,621,802) times the ROE factor (0.014380) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.3944
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,602,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.6711	48.6711	0.8642	47.8069
Direct Care	88.2665	88.2665	1.5672	86.6993
Indirect Care	61.9692	61.9692	1.1003	60.8689
Property	13.6500	13.7114	0.2434	13.4680
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.9813
Supplemental Rate Add-on				9.9025
Totals	212.5568	212.6182	3.7751	236.7269

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	4,927,188	0.00	0.5899	0.5899		120		3,602,760	3,602,760	1
1990/07		0.10	0.5899	0.5899		120	59.27	3,604,886	3,642,240	
1991/01		0.10	0.5899	0.5899		120	59.27	3,607,013	3,663,600	
1991/07		0.20	1.4932	1.4932		120	59.27	3,617,784	3,718,320	
1992/01		0.20	2.0117	2.0117		120	59.27	3,632,338	3,793,080	
1992/07		0.30	1.8152	1.8152		120	59.27	3,652,120	3,861,960	
1993/01		0.30	1.7710	1.7710		120	59.27	3,671,524	3,930,360	
1993/07		0.40	1.5329	1.5329		120	61.83	3,694,038	3,990,600	
1994/01	40,954	0.40	1.6983	1.6983		120	57.67	3,760,086	4,058,400	
1994/07		0.50	1.5991	1.5991		120	57.67	3,790,152	4,123,320	
1995/01		0.50	1.5812	1.5812		120	57.67	3,820,117	4,188,480	
1995/07	29,624	0.60	1.5250	1.5250		120	57.86	3,884,695	4,252,320	
1996/01		0.60	1.7228	1.7228		120	55.19	3,924,851	4,325,640	
1996/07		0.70	1.3294	1.3294		120	55.19	3,961,376	4,383,120	
1997/01		0.70	1.4109	1.4109		120	55.19	4,000,499	4,444,920	
1997/07	27,818	0.80	1.0917	1.0917		120	52.10	4,061,415	4,493,400	
1998/01		0.80	1.1663	1.1663		120	52.10	4,097,310	4,545,840	
1998/07	18,429	0.90	1.0794	1.0794		120	50.97	4,152,628	4,594,920	
1999/01		0.90	1.4499	1.4499		120	50.97	4,202,845	4,661,520	
1999/07	2,222,460	1.00	1.2299	1.2299		180	46.04	6,468,575	7,078,320	
2000/01		1.00	1.3356	1.3356		180	46.04	6,540,895	7,172,820	
2000/07		1.00	1.1129	1.1129		180	51.47	6,609,017	7,252,560	
2001/01		1.00	1.2976	1.2976		180	51.47	6,689,271	7,346,700	
2001/07		1.00	0.9615	0.9615		180	51.47	6,749,460	7,417,260	
2002/01		1.00	1.0301	1.0301		180	51.47	6,814,524	7,493,580	
2002/07		1.00	0.8337	0.8337		180	51.47	6,867,690	7,556,040	
2003/01		1.00	1.3271	1.3271		180	51.47	6,952,982	7,656,300	
2003/07		1.00	1.1664	1.1664		180	48.81	7,024,954	7,745,580	
2004/01		1.00	1.1103	1.1103		180	48.81	7,094,174	7,831,620	
2004/07		1.00	0.8378	0.8378		180	50.88	7,149,157	7,897,320	



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236.73

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		180	50.88	7,206,001	7,965,180	
2005/07		1.00	0.7364	0.7364		180	42.29	7,246,803	8,023,860	
2006/01		1.00	0.9068	0.9068		180	42.29	7,297,331	8,096,580	
2006/07		1.00	0.8133	0.8133		180	42.29	7,342,965	8,162,460	
2007/01		1.00	1.0133	1.0133		180	41.44	7,399,027	8,245,080	
2007/07		1.00	1.1050	1.1050		180	43.58	7,463,810	8,336,160	
2008/01		1.00	0.8556	0.8556		180	43.58	7,514,411	8,407,440	
2008/07		1.00	0.6104	0.6104		180	46.40	7,553,107	8,458,740	
2009/01		1.00	1.3268	1.3268		180	46.40	7,637,652	8,571,060	
2009/07		1.00	0.6841	0.6841		180	46.40	7,681,731	8,629,740	
2010/01		1.00	0.8643	0.8643		180	40.49	7,730,608	8,704,260	
2010/07		0.95	0.7107	0.7107		180	40.49	7,769,035	8,766,180	
2011/01		0.95	0.9198	0.9198		180	42.92	7,822,011	8,846,820	
2011/07		0.90	0.9028	0.9028		180	42.92	7,871,606	8,926,740	
2012/01		0.90	0.3865	0.3865		180	42.92	7,892,977	8,961,300	
2012/07		0.85	0.9417	0.9417		180	42.92	7,942,277	9,045,720	
2013/01		0.85	0.4901	0.4901		180	42.92	7,968,097	9,090,000	
2013/07		0.80	0.6196	0.6196		180	45.80	8,000,988	9,146,340	
2014/01		0.80	0.8564	0.8564		180	45.80	8,046,634	9,224,640	
2014/07		0.75	1.2383	1.2383		180	45.91	8,109,012	9,338,940	

Message Code:

1 Per Bed Standard Limitation



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231.52

The Health Center of Lake City

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
560 SW MCFARLANE AVE	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
LAKE CITY, FL 32025	Days in CR 365	Maximum: 43,800	Standard: 184
County: Columbia [12]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 41,506	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 14,589	Inflation
Current Class North Large	Initial CR? False	Medicaid: 22,514	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	54.24276%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.76256%	Cost: 1.03716397
Open Date: 05/26/1992	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/26/1992	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 05/26/1992	Low Occupancy Adjustment Factor:	120.63811%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 226173			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,020,795	1,896,678	1,235,572	957,746		5,110,790	
1a	Audit Adjustments							
2	Cost Per Diem	45.3405	84.2444	54.8802	42.5400		227.0051	
3	Cost Per Diem Inflated	47.0255	86.5797	56.9198				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.0255	86.5797	56.9198	42.5400		233.0650	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.7631		62.2516				
7	Provider Target Rate	57.9458		63.5487				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	49.2341		56.6980				
10b	Base for line 10a	48.2292		55.5408				
11	Lesser of 5,7,8,10, 10a	47.0255	86.5797	56.6980	13.6500		203.9532	
12/13	Medical Adjustment Rate		0.4133	0.2706				
14	Prospective Per Diem 11	47.0255	86.9930	56.9686	13.6500		204.6371	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

The Health Center of Lake City

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	05/01/1999	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	5,815,265.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,454,792	13.7675
RS to Start Calcs:	1992/01	<60% of Base:	False	20% ROE(2):	1,113,698	0.4063
Indexed Asset Value	5,568,490	Interest Rate:	10.7500%	Insurance Cost(3):	52,719	1.2702
FRVS Base Asset:	1,859,160	Chase Rate:	7.7500%	Taxes Cost(3):	84,495	2.0357
Occup Adj Factor	0.9000	Amortization Rate:	10.7500%	Home Office(3):	0	0.0000
ROE Factor	0.014380	Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	542,716	Total FRVS PD:		17.4797

- (1) 80% Capital (\$4,454,792) amortized at 10.7500 % for 20 years Principal & Interest of \$542,716 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$13.7675
- (2) 20% ROE (\$1,113,698) times the ROE factor (0.014380) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4063
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,859,160

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.0255	47.0255	0.8349	46.1906
Direct Care	86.9930	86.9930	1.5446	85.4484
Indirect Care	56.9686	56.9686	1.0115	55.9571
Property	13.6500	17.4797	0.3104	17.1693
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.8538
Supplemental Rate Add-on				9.9025
Totals	204.6371	208.4668	3.7014	231.5217

Medicaid Trend Adjustment



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231.52

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1992/01	2,622,574	0.00	2.0117	2.0117		60	74.33	1,859,160	1,859,160	1
1992/07		0.10	1.8152	1.8152		60	74.33	1,862,534	1,930,980	
1993/01		0.10	1.7710	1.7710		60	74.33	1,865,833	1,965,180	
1993/07		0.20	1.5329	1.5329		60	74.33	1,871,554	1,995,300	
1994/01		0.20	1.6983	1.6983		60	74.33	1,877,912	2,029,200	
1994/07		0.30	1.5991	1.5991		60	74.33	1,886,920	2,061,660	
1995/01		0.30	1.5812	1.5812		60	74.33	1,895,872	2,094,240	
1995/07	2,066,436	0.40	1.5250	1.5250		120	79.45	3,973,873	4,252,320	
1996/01		0.40	1.7228	1.7228		120	72.93	4,001,257	4,325,640	
1996/07		0.50	1.3294	1.3294		120	72.93	4,027,853	4,383,120	
1997/01		0.50	1.4109	1.4109		120	72.93	4,056,270	4,444,920	
1997/07		0.60	1.0917	1.0917		120	70.52	4,082,839	4,493,400	
1998/01		0.60	1.1663	1.1663		120	70.52	4,111,411	4,545,840	
1998/07		0.70	1.0794	1.0794		120	71.82	4,142,477	4,594,920	
1999/01		0.70	1.4499	1.4499		120	71.65	4,184,519	4,661,520	
1999/07		0.80	1.2299	1.2299		120	71.65	4,225,690	4,718,880	
2000/01		0.80	1.3356	1.3356		120	71.65	4,270,841	4,781,880	
2000/07		0.90	1.1129	1.1129		120	65.40	4,313,618	4,835,040	
2001/01		0.90	1.2976	1.2976		120	65.40	4,363,992	4,897,800	
2001/07		1.00	0.9615	0.9615		120	65.40	4,405,952	4,944,840	
2002/01		1.00	1.0301	1.0301		120	65.40	4,451,338	4,995,720	
2002/07		1.00	0.8337	0.8337		120	65.40	4,488,449	5,037,360	
2003/01	26,421	1.00	1.3271	1.3271		120	59.01	4,574,436	5,104,200	
2003/07		1.00	1.1664	1.1664		120	59.01	4,627,792	5,163,720	
2004/01		1.00	1.1103	1.1103		120	57.05	4,679,174	5,221,080	
2004/07		1.00	0.8378	0.8378		120	57.05	4,718,376	5,264,880	
2005/01		1.00	0.8595	0.8595		120	57.05	4,758,930	5,310,120	
2005/07		1.00	0.7364	0.7364		120	62.85	4,793,975	5,349,240	
2006/01		1.00	0.9068	0.9068		120	62.85	4,837,447	5,397,720	
2006/07		1.00	0.8133	0.8133		120	66.87	4,876,790	5,441,640	



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231.52

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/01		1.00	1.0133	1.0133		120	66.87	4,926,207	5,496,720	
2007/07		1.00	1.1050	1.1050		120	65.38	4,980,642	5,557,440	
2008/01		1.00	0.8556	0.8556		120	65.38	5,023,256	5,604,960	
2008/07		1.00	0.6104	0.6104		120	66.92	5,053,918	5,639,160	
2009/01		1.00	1.3268	1.3268		120	63.93	5,120,973	5,714,040	
2009/07		1.00	0.6841	0.6841		120	63.93	5,156,006	5,753,160	
2010/01		1.00	0.8643	0.8643		120	63.93	5,200,569	5,802,840	
2010/07		1.00	0.7107	0.7107		120	67.41	5,237,529	5,844,120	
2011/01		1.00	0.9198	0.9198		120	52.75	5,283,733	5,897,880	
2011/07		1.00	0.9028	0.9028		120	52.75	5,329,483	5,951,160	
2012/01		1.00	0.3865	0.3865		120	52.75	5,349,239	5,974,200	
2012/07		0.95	0.9417	0.9417		120	52.75	5,395,136	6,030,480	
2013/01		0.95	0.4901	0.4901		120	52.75	5,419,228	6,060,000	
2013/07	22,108	0.90	0.6196	0.6196		120	51.63	5,469,702	6,097,560	
2014/01		0.90	0.8564	0.8564		120	54.24	5,511,280	6,149,760	
2014/07		0.85	1.2383	1.2383		120	54.24	5,568,490	6,225,960	

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 07/01/2014 through 12/31/2014

0 030530-00 - 2014/07

244.30

Imperial 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
900 IMPERIAL GOLF COURSE BLVD	7/1/2012-6/30/2013	Number of Beds: 113	Superior: 0
NAPLES, FL 34110	Days in CR 365	Maximum: 41,245	Standard: 184
County: Collier [11]	First Used : 2014/07	Max Annualized: 41,245	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 37,254	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 14,901	Inflation
Current Class South Large	Initial CR? False	Medicaid: 16,658	FY Index: 1.29878490
Class at 1/94: South Large	Medical Utilization	44.71466%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.32368%	Cost: 1.03716397
Open Date: 06/01/1991	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 06/01/1991	Low Occupancy Adjustment Factor:	114.98716%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 226378			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	911,358	1,504,257	1,057,286	679,980		4,152,881	
1a	Audit Adjustments							
2	Cost Per Diem	54.7099	90.3024	63.4702	40.8200		249.3025	
3	Cost Per Diem Inflated	56.7431	92.8056	65.8290				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	56.7431	92.8056	65.8290	40.8200		256.1977	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	64.5523		65.8845				
7	Provider Target Rate	65.8973		67.2573				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	58.0788		67.1806				
10b	Base for line 10a	56.8934		65.8094				
11	Lesser of 5,7,8,10, 10a	54.4176	92.8056	63.9416	13.6500		224.8148	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	54.4176	92.8056	63.9416	13.6500		224.8148	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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244.30

Rate Semester 07/01/2014 through 12/31/2014

Imperial Health Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	06/01/1991	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,464,928.00		Total Amount	Per Diem
RS to Start Calcs:	1991/01	Type:	Variable	80% Capital(1):	3,546,481	9.7450
Indexed Asset Value	4,433,101	<60% of Base:	False	20% ROE(2):	886,620	0.3435
FRVS Base Asset:	1,821,120	Interest Rate:	8.2640%	Insurance Cost(3):	51,827	1.3912
Occup Adj Factor	0.9000	Chase Rate:	6.2170%	Taxes Cost(3):	42,231	1.1336
ROE Factor	0.014380	Amortization Rate:	8.2170%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	361,739	Total FRVS PD:		12.6133

- (1) 80% Capital (\$3,546,481) amortized at 8.2170 % for 20 years Principal & Interest of \$361,739 divided by annual available days (41245) divided by Occup. Adj. (0.90) = \$9.7450
- (2) 20% ROE (\$886,620) times the ROE factor (0.014380) divided by annual available days (41245) divided by Occup. Adj. (0.90) = \$0.3435
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,821,120

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	92.8056	92.8056	1.6478	91.1578
Indirect Care	63.9416	63.9416	1.1353	62.8063
Property	13.6500	12.6133	0.2240	12.3893
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				14.5921
Supplemental Rate Add-on				9.9025
Totals	224.8148	223.7781	3.9733	244.2994

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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244.30

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1991/01	3,798,960	0.00	0.5899	0.5899		60	36.78	1,821,120	1,821,120	1
1991/07		0.10	1.4932	1.4932		60	36.78	1,822,938	1,859,160	
1992/01		0.10	2.0117	2.0117		60	36.78	1,825,391	1,896,540	
1992/07		0.20	1.8152	1.8152		60	36.78	1,829,822	1,930,980	
1993/01		0.20	1.7710	1.7710		60	36.78	1,834,156	1,965,180	
1993/07		0.30	1.5329	1.5329		60	36.78	1,839,797	1,995,300	
1994/01		0.30	1.6983	1.6983		60	49.10	1,848,165	2,029,200	
1994/07	63,639	0.40	1.5991	1.5991		60	49.10	1,922,357	2,061,660	
1995/01		0.40	1.5812	1.5812		60	49.10	1,933,212	2,094,240	
1995/07		0.50	1.5250	1.5250		60	49.10	1,946,371	2,126,160	
1996/01		0.50	1.7228	1.7228		60	49.10	1,961,339	2,162,820	
1996/07		0.60	1.3294	1.3294		60	49.10	1,975,305	2,191,560	
1997/01	38,502	0.60	1.4109	1.4109		60	48.37	2,028,512	2,222,460	
1997/07		0.70	1.0917	1.0917		60	48.37	2,042,145	2,246,700	
1998/01	18,995	0.70	1.1663	1.1663		60	41.77	2,073,802	2,272,920	
1998/07		0.80	1.0794	1.0794		60	41.77	2,087,402	2,297,460	
1999/01		0.80	1.4499	1.4499		60	42.45	2,106,089	2,330,760	
1999/07		0.90	1.2299	1.2299		60	42.45	2,124,082	2,359,440	
2000/01	908,525	0.90	1.3356	1.3356		90	38.38	3,050,423	3,586,410	
2000/07		1.00	1.1129	1.1129		113	59.12	3,084,371	4,552,996	
2001/01	419,492	1.00	1.2976	1.2976		113	59.12	3,543,886	4,612,095	
2001/07		1.00	0.9615	0.9615		113	59.12	3,577,960	4,656,391	
2002/01		1.00	1.0301	1.0301		113	59.12	3,614,817	4,704,303	
2002/07		1.00	0.8337	0.8337		113	59.12	3,614,817	4,743,514	5
2003/01		1.00	1.3271	1.3271		113	59.12	3,693,326	4,806,455	
2003/07	25,942	1.00	1.1664	1.1664		113	57.45	3,762,347	4,862,503	
2004/01		1.00	1.1103	1.1103		113	57.45	3,804,120	4,916,517	
2004/07		1.00	0.8378	0.8378		113	57.45	3,835,991	4,957,762	
2005/01		1.00	0.8595	0.8595		113	59.01	3,868,961	5,000,363	
2005/07		1.00	0.7364	0.7364		113	59.01	3,897,452	5,037,201	



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244.30

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2006/01		1.00	0.9068	0.9068		113	58.61	3,932,794	5,082,853	
2006/07		1.00	0.8133	0.8133		113	58.61	3,964,779	5,124,211	
2007/01		1.00	1.0133	1.0133		113	52.48	4,003,113	5,176,078	
2007/07		1.00	1.1050	1.1050		113	52.48	4,045,321	5,233,256	
2008/01		1.00	0.8556	0.8556		113	49.10	4,076,220	5,278,004	
2008/07		1.00	0.6104	0.6104		113	49.10	4,098,432	5,310,209	
2009/01		1.00	1.3268	1.3268		113	43.34	4,141,282	5,380,721	
2009/07		1.00	0.6841	0.6841		113	43.34	4,163,606	5,417,559	
2010/01		1.00	0.8643	0.8643		113	47.45	4,194,652	5,464,341	
2010/07		1.00	0.7107	0.7107		113	51.05	4,222,322	5,503,213	
2011/01		1.00	0.9198	0.9198		113	41.37	4,251,534	5,553,837	
2011/07		0.95	0.9028	0.9028		113	41.37	4,278,963	5,604,009	
2012/01		0.95	0.3865	0.3865		113	41.37	4,290,782	5,625,705	
2012/07		0.90	0.9417	0.9417		113	41.37	4,318,135	5,678,702	
2013/01		0.90	0.4901	0.4901		113	41.37	4,332,462	5,706,500	
2013/07	22,154	0.85	0.6196	0.6196		113	43.35	4,372,602	5,741,869	
2014/01		0.85	0.8564	0.8564		113	43.35	4,397,688	5,791,024	
2014/07		0.80	1.2383	1.2383		113	44.71	4,433,101	5,862,779	

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 07/01/2014 through 12/31/2014

0 030535-00 - 2014/07

231.91

The Health Center of Daytona 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
550 NATIONAL HEALTHCARE DRIVE	7/1/2012-6/30/2013	Number of Beds: 73	Superior: 0
DAYTONA BEACH , FL	Days in CR 365	Maximum: 26,645	Standard: 184
County: Volusia [64]	First Used : 2014/01	Max Annualized: 26,645	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 23,983	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 11,965	Inflation
Current Class North Small	Initial CR? False	Medicaid: 6,767	FY Index: 1.29878490
Class at 1/94: North Small	Medical Utilization	28.21582%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.00938%	Cost: 1.03716397
Open Date: 07/11/1996	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/11/1996	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 07/11/1996	Low Occupancy Adjustment Factor:	114.58704%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 229091			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	355,102	533,692	473,497	261,815		1,624,106	
1a	Audit Adjustments							
2	Cost Per Diem	52.4755	78.8669	69.9715	38.6900		240.0039	
3	Cost Per Diem Inflated	54.4257	81.0531	72.5719				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.4257	81.0531	72.5719	38.6900		246.7407	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	73.3037		82.7308				
7	Provider Target Rate	74.8311		84.4546				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	57.1213		69.0383				
10b	Base for line 10a	55.9554		67.6292				
11	Lesser of 5,7,8,10, 10a	53.3690	81.0531	66.1441	13.6500		214.2162	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	53.3690	81.0531	66.1441	13.6500		214.2162	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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231.91

Rate Semester 07/01/2014 through 12/31/2014

The Health Center of Daytona Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	07/11/1996	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	2,043,539 6.9653
RS to Start Calcs:	1996/07	<60% of Base:	True	20% ROE(2):	510,885 0.3064
Indexed Asset Value	2,554,424	Interest Rate:	8.2500%	Insurance Cost(3):	37,956 1.5826
FRVS Base Asset:	2,162,820	Chase Rate:	8.2500%	Taxes Cost(3):	58,163 2.4252
Occup Adj Factor	0.9000	Amortization Rate:	8.2500%	Home Office(3):	0 0.0000
ROE Factor	0.014380	Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	167,031	Total FRVS PD:	11.2795

- (1) 80% Capital (\$2,043,539) amortized at 8.2500 % for 20 years Interest of \$167,031 divided by annual available days (26645) divided by Occup. Adj. (0.900) = \$6.9653
- (2) 20% ROE (\$510,885) times the ROE factor (0.014380) divided by annual available days (26645) divided by Occup. Adj. (0.900) = \$0.3064
- (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:	51,883
Comparison Bed 60	Effective PBS Limitation	2,162,820

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3690	53.3690	0.9476	52.4214
Direct Care	81.0531	81.0531	1.4391	79.6140
Indirect Care	66.1441	66.1441	1.1744	64.9697
Property	13.6500	11.2795	0.2003	11.0792
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.9203
Supplemental Rate Add-on				9.9025
Totals	214.2162	211.8457	3.7614	231.9071

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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231.91

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1996/07	7,380,823	0.00	1.3294	1.3294		60	46.99	2,162,820	2,162,820	1
1997/01		0.10	1.4109	1.4109		60	46.99	2,165,427	2,222,460	
1997/07		0.10	1.0917	1.0917		60	46.99	2,167,447	2,246,700	
1998/01		0.20	1.1663	1.1663		60	46.99	2,171,767	2,272,920	
1998/07		0.20	1.0794	1.0794		60	46.99	2,175,773	2,297,460	
1999/01		0.30	1.4499	1.4499		60	46.99	2,183,859	2,330,760	
1999/07		0.30	1.2299	1.2299		60	59.05	2,191,917	2,359,440	
2000/01		0.40	1.3356	1.3356		60	54.63	2,203,547	2,390,940	
2000/07		0.40	1.1129	1.1129		60	36.21	2,210,006	2,417,520	
2001/01		0.50	1.2976	1.2976		60	36.21	2,219,446	2,448,900	
2001/07		0.50	0.9615	0.9615		60	36.21	2,226,471	2,472,420	
2002/01		0.60	1.0301	1.0301		60	36.21	2,235,531	2,497,860	
2002/07		0.60	0.8337	0.8337		60	36.21	2,242,893	2,518,680	
2003/01		0.70	1.3271	1.3271		60	37.69	2,257,172	2,552,100	
2003/07		0.70	1.1664	1.1664		60	37.69	2,269,801	2,581,860	
2004/01	93,812	0.80	1.1103	1.1103		73	32.59	2,375,559	3,176,157	
2004/07		0.80	0.8378	0.8378		73	32.59	2,384,993	3,202,802	
2005/01		0.90	0.8595	0.8595		73	32.47	2,395,885	3,230,323	
2005/07		0.90	0.7364	0.7364		73	32.47	2,405,260	3,254,121	
2006/01		1.00	0.9068	0.9068		73	28.64	2,416,618	3,283,613	
2006/07		1.00	0.8133	0.8133		73	28.64	2,426,853	3,310,331	
2007/01		1.00	1.0133	1.0133		73	28.64	2,439,658	3,343,838	
2007/07		1.00	1.1050	1.1050		73	27.82	2,453,294	3,380,776	
2008/01		1.00	0.8556	0.8556		73	23.53	2,453,294	3,409,684	
2008/07		1.00	0.6104	0.6104		73	23.53	2,453,294	3,430,489	
2009/01		1.00	1.3268	1.3268		73	22.43	2,453,294	3,476,041	
2009/07		1.00	0.6841	0.6841		73	22.43	2,453,294	3,499,839	
2010/01		1.00	0.8643	0.8643		73	22.43	2,453,294	3,530,061	
2010/07		1.00	0.7107	0.7107		73	20.18	2,453,294	3,555,173	
2011/01		1.00	0.9198	0.9198		73	25.12	2,463,600	3,587,877	



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231.91

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/07		1.00	0.9028	0.9028		73	25.12	2,473,758	3,620,289	
2012/01		1.00	0.3865	0.3865		73	25.12	2,478,125	3,634,305	
2012/07		1.00	0.9417	0.9417		73	25.12	2,488,783	3,668,542	
2013/01		1.00	0.4901	0.4901		73	25.12	2,494,354	3,686,500	
2013/07	25,223	1.00	0.6196	0.6196		73	27.10	2,527,192	3,709,349	
2014/01		1.00	0.8564	0.8564		73	28.22	2,538,297	3,741,104	
2014/07		1.00	1.2383	1.2383		73	28.22	2,554,424	3,787,459	

Message Code:

1 Per Bed Standard Limitation

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Florida Agency for Health Care Administration
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251.14

Health Center of Coconut Creek

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
4125 WEST SAMPLE RD	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
COCONUT CREEK , FL	Days in CR 365	Maximum: 43,800	Standard: 184
33073	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
County: Broward [6]	Last Used: 2014/07	Total Patient: 42,330	Total: 184
Region: South Area: 10	Unaudited	Medicare: 13,446	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 18,452	FY Index: 1.29878490
Current Class South Large	Medical Utilization	43.59083%	Semester Index: 1.34705290
Class at 1/94: South Large	Occupancy:	96.64384%	Cost: 1.03716397
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Open Date: 12/09/1997	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Acquired Date: 12/09/1997	Low Occupancy Adjustment Factor:	123.03308%	DC Sem Index: 1.24200000
Entered Medicaid 12/09/1997	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Med # Active Date: 01/01/2011			PS Target: 1.02083595
Previous Med # 226581			

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	931,820	1,746,698	1,183,567	756,347		4,618,432	
1a	Audit Adjustments							
2	Cost Per Diem	50.4997	94.6617	64.1430	40.9900		250.2944	
3	Cost Per Diem Inflated	52.3765	97.2858	66.5268				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.3765	97.2858	66.5268	40.9900		257.1791	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	67.2634		70.9327				
7	Provider Target Rate	68.6649		72.4107				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	57.5377		67.0602				
10b	Base for line 10a	56.3633		65.6915				
11	Lesser of 5,7,8,10, 10a	52.3765	97.2858	63.9416	13.6500		227.2539	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	52.3765	97.2858	63.9416	13.6500		227.2539	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Health Center of Coconut Creek

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/09/1997	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	4,269,431 9.1233
RS to Start Calcs:	1997/07	<60% of Base:	True	20% ROE(2):	1,067,358 0.3894
Indexed Asset Value	5,336,789	Interest Rate:	8.5000%	Insurance Cost(3):	55,820 1.3187
FRVS Base Asset:	4,444,920	Chase Rate:	8.5000%	Taxes Cost(3):	189,375 4.4738
Occup Adj Factor	0.9000	Amortization Rate:	8.5000%	Home Office(3):	0 0.0000
ROE Factor	0.014380	Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	359,642	Total FRVS PD:	15.3052

- (1) 80% Capital (\$4,269,431) amortized at 8.5000 % for 20 years Interest of \$359,642 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.1233
- (2) 20% ROE (\$1,067,358) times the ROE factor (0.014380) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3894
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,444,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.3765	52.3765	0.9299	51.4466
Direct Care	97.2858	97.2858	1.7273	95.5585
Indirect Care	63.9416	63.9416	1.1353	62.8063
Property	13.6500	15.3052	0.2717	15.0335
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.3919
Supplemental Rate Add-on				9.9025
Totals	227.2539	228.9091	4.0642	251.1393

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	12,588,956	0.00	1.0917	1.0917		120	14.24	4,444,920	4,444,920	1
1998/01		0.10	1.1663	1.1663		120	14.24	4,444,920	4,545,840	
1998/07		0.10	1.0794	1.0794		120	14.24	4,444,920	4,594,920	
1999/01		0.20	1.4499	1.4499		120	14.24	4,444,920	4,661,520	
1999/07		0.20	1.2299	1.2299		120	14.24	4,444,920	4,718,880	
2000/01		0.30	1.3356	1.3356		120	14.24	4,444,920	4,781,880	
2000/07		0.30	1.1129	1.1129		120	48.32	4,457,959	4,835,040	
2001/01		0.40	1.2976	1.2976		120	48.32	4,478,286	4,897,800	
2001/07		0.40	0.9615	0.9615		120	48.32	4,493,418	4,944,840	
2002/01		0.50	1.0301	1.0301		120	48.32	4,513,752	4,995,720	
2002/07		0.50	0.8337	0.8337		120	48.32	4,530,284	5,037,360	
2003/01		0.60	1.3271	1.3271		120	48.32	4,561,977	5,104,200	
2003/07		0.60	1.1664	1.1664		120	44.21	4,587,639	5,163,720	
2004/01		0.70	1.1103	1.1103		120	44.21	4,616,299	5,221,080	
2004/07		0.70	0.8378	0.8378		120	43.16	4,637,545	5,264,880	
2005/01		0.80	0.8595	0.8595		120	43.16	4,662,568	5,310,120	
2005/07		0.80	0.7364	0.7364		120	43.16	4,684,122	5,349,240	
2006/01		0.90	0.9068	0.9068		120	47.58	4,717,192	5,397,720	
2006/07		0.90	0.8133	0.8133		120	47.58	4,747,063	5,441,640	
2007/01	20,253	1.00	1.0133	1.0133		120	44.02	4,805,815	5,496,720	
2007/07		1.00	1.1050	1.1050		120	39.28	4,843,741	5,557,440	
2008/01		1.00	0.8556	0.8556		120	39.28	4,873,339	5,604,960	
2008/07		1.00	0.6104	0.6104		120	39.98	4,894,962	5,639,160	
2009/01		1.00	1.3268	1.3268		120	39.98	4,942,172	5,714,040	
2009/07		1.00	0.6841	0.6841		120	39.98	4,966,748	5,753,160	
2010/01		1.00	0.8643	0.8643		120	34.23	4,993,465	5,802,840	
2010/07		1.00	0.7107	0.7107		120	34.23	5,015,552	5,844,120	
2011/01		1.00	0.9198	0.9198		120	41.55	5,050,403	5,897,880	
2011/07		1.00	0.9028	0.9028		120	41.55	5,084,848	5,951,160	
2012/01		1.00	0.3865	0.3865		120	41.55	5,099,695	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	41.55	5,135,975	6,030,480	
2013/01		1.00	0.4901	0.4901		120	41.55	5,154,991	6,060,000	
2013/07	33,665	1.00	0.6196	0.6196		120	46.14	5,215,451	6,097,560	
2014/01		1.00	0.8564	0.8564		120	46.14	5,252,921	6,149,760	
2014/07	32,315	1.00	1.2383	1.2383		120	43.59	5,336,789	6,225,960	

Message Code:

1 Per Bed Standard Limitation

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243.37

Charlotte Harbor 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
4000 KINGS HWY	7/1/2012-6/30/2013	Number of Beds: 180	Superior: 0
PORT CHARLOTTE, FL 33980	Days in CR 365	Maximum: 65,700	Standard: 184
County: Charlotte [8]	First Used : 2014/07	Max Annualized: 65,700	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 61,993	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 17,531	Inflation
Current Class South Large	Initial CR? False	Medicaid: 31,012	FY Index: 1.29878490
Class at 1/94: South Large	Medical Utilization	50.02500%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.35769%	Cost: 1.03716397
Open Date: 04/25/1994	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/25/1994	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 06/02/1994	Low Occupancy Adjustment Factor:	120.12268%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 226327			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,587,515	2,753,509	1,731,960	932,531		7,005,515	
1a	Audit Adjustments							
2	Cost Per Diem	51.1903	88.7885	55.8481	30.0700		225.8969	
3	Cost Per Diem Inflated	53.0927	91.2497	57.9236				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.0927	91.2497	57.9236	30.0700		232.3360	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	60.6662		62.9161				
7	Provider Target Rate	61.9302		64.2270				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	59.4339		61.9015				
10b	Base for line 10a	58.2208		60.6380				
11	Lesser of 5,7,8,10, 10a	53.0927	91.2497	57.9236	13.6500		215.9160	
12/13	Medical Adjustment Rate		0.0026	0.0016				
14	Prospective Per Diem 11	53.0927	91.2523	57.9252	13.6500		215.9202	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Charlotte Harbor Healthcare

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	06/02/1994	Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:		Amount:	11,057,639.00	Total Amount	Per Diem
RS to Start Calcs:	1994/01	Type:	Variable	80% Capital(1):	6,502,285 11.0376
Indexed Asset Value	8,127,856	<60% of Base:	False	20% ROE(2):	1,625,571 0.3953
FRVS Base Asset:	5,985,900	Interest Rate:	8.0000%	Insurance Cost(3):	66,458 1.0720
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	203,475 3.2822
ROE Factor	0.014380	Amortization Rate:	8.0000%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	652,653	Total FRVS PD:	15.7871

- (1) 80% Capital (\$6,502,285) amortized at 8.0000 % for 20 years Principal & Interest of \$652,653 divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$11.0376
- (2) 20% ROE (\$1,625,571) times the ROE factor (0.014380) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.3953
- (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:	33,255
Comparison Date:	07/01/1993	Current RS PBS:	51,883
Comparison Bed	180	Effective PBS Limitation	5,985,900

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.0927	53.0927	0.9427	52.1500
Direct Care	91.2523	91.2523	1.6202	89.6321
Indirect Care	57.9252	57.9252	1.0285	56.8967
Property	13.6500	15.7871	0.2803	15.5068
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.2814
Supplemental Rate Add-on				9.9025
Totals	215.9202	218.0573	3.8717	243.3695

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	11,402,537	0.00	1.6983	1.6983		180	44.00	5,985,900	5,985,900	1
1994/07		0.10	1.5991	1.5991		180	44.00	5,993,557	6,184,980	
1995/01		0.10	1.5812	1.5812		180	44.00	6,001,138	6,282,720	
1995/07		0.20	1.5250	1.5250		180	44.00	6,015,781	6,378,480	
1996/01		0.20	1.7228	1.7228		180	44.00	6,032,365	6,488,460	
1996/07		0.30	1.3294	1.3294		180	44.00	6,051,611	6,574,680	
1997/01		0.30	1.4109	1.4109		180	44.00	6,072,104	6,667,380	
1997/07	31,936	0.40	1.0917	1.0917		180	60.81	6,130,557	6,740,100	
1998/01		0.40	1.1663	1.1663		180	60.81	6,159,156	6,818,760	
1998/07	49,949	0.50	1.0794	1.0794		180	65.61	6,242,346	6,892,380	
1999/01		0.50	1.4499	1.4499		180	65.61	6,287,603	6,992,280	
1999/07		0.60	1.2299	1.2299		180	73.41	6,333,999	7,078,320	
2000/01		0.60	1.3356	1.3356		180	73.41	6,384,760	7,172,820	
2000/07		0.70	1.1129	1.1129		180	68.22	6,434,497	7,252,560	
2001/01		0.70	1.2976	1.2976		180	68.22	6,492,942	7,346,700	
2001/07		0.80	0.9615	0.9615		180	68.22	6,542,886	7,417,260	
2002/01		0.80	1.0301	1.0301		180	68.22	6,596,806	7,493,580	
2002/07		0.90	0.8337	0.8337		180	68.22	6,646,302	7,556,040	
2003/01		0.90	1.3271	1.3271		180	68.22	6,725,685	7,656,300	
2003/07	30,092	1.00	1.1664	1.1664		180	65.72	6,834,225	7,745,580	
2004/01		1.00	1.1103	1.1103		180	64.62	6,910,105	7,831,620	
2004/07		1.00	0.8378	0.8378		180	64.62	6,967,998	7,897,320	
2005/01		1.00	0.8595	0.8595		180	64.62	7,027,888	7,965,180	
2005/07		1.00	0.7364	0.7364		180	60.08	7,079,641	8,023,860	
2006/01		1.00	0.9068	0.9068		180	60.08	7,143,839	8,096,580	
2006/07		1.00	0.8133	0.8133		180	56.00	7,201,940	8,162,460	
2007/01		1.00	1.0133	1.0133		180	56.00	7,274,917	8,245,080	
2007/07		1.00	1.1050	1.1050		180	52.94	7,352,294	8,336,160	
2008/01		1.00	0.8556	0.8556		180	50.45	7,409,996	8,407,440	
2008/07		1.00	0.6104	0.6104		180	50.45	7,451,485	8,458,740	



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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		180	44.02	7,530,614	8,571,060	
2009/07		1.00	0.6841	0.6841		180	44.02	7,571,846	8,629,740	
2010/01		1.00	0.8643	0.8643		180	44.02	7,571,846	8,704,260	5
2010/07		1.00	0.7107	0.7107		180	47.20	7,670,726	8,766,180	
2011/01		1.00	0.9198	0.9198		180	46.24	7,730,044	8,846,820	
2011/07		1.00	0.9028	0.9028		180	46.24	7,788,716	8,926,740	
2012/01		1.00	0.3865	0.3865		180	46.24	7,814,025	8,961,300	
2012/07		1.00	0.9417	0.9417		180	46.24	7,875,890	9,045,720	
2013/01		1.00	0.4901	0.4901		180	46.24	7,908,342	9,090,000	
2013/07	31,079	1.00	0.6196	0.6196		180	47.98	7,982,167	9,146,340	
2014/01		1.00	0.8564	0.8564		180	47.98	8,041,801	9,224,640	
2014/07		0.95	1.2383	1.2383		180	50.03	8,127,856	9,338,940	

Message Code:

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 030540063020130701201204222014102548



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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Bayonet Point 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
7210 BEACON WOODS DR	7/1/2012-6/30/2013	Number of Beds: 180	Superior: 0
HUDSON, FL 34667	Days in CR 365	Maximum: 65,700	Standard: 184
County: Pasco [51]	First Used : 2014/07	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 56,771	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 12,447	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 31,444	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	55.38743%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	86.40944%	Cost: 1.03716397
Open Date: 07/01/1986	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1986	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 07/17/1986	Low Occupancy Adjustment Factor:	110.00411%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 226076			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,411,354	2,673,459	1,744,562	1,255,244		7,084,619	
1a	Audit Adjustments							
2	Cost Per Diem	44.8847	85.0229	55.4816	39.9200		225.3092	
3	Cost Per Diem Inflated	46.5528	87.3798	57.5435				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.5528	87.3798	57.5435	39.9200		231.3961	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.6364		62.9976				
7	Provider Target Rate	58.8373		64.3102				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	50.7345		61.5185				
10b	Base for line 10a	49.6990		60.2629				
11	Lesser of 5,7,8,10, 10a	46.5528	87.3798	57.5435	13.6500		205.1261	
12/13	Medical Adjustment Rate		0.5296	0.3488				
14	Prospective Per Diem 11	46.5528	87.9094	57.8923	13.6500		206.0045	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Bayonet Point Health & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/2000	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,437,087.00		Total Amount	Per Diem
RS to Start Calcs:	1986/07	Type:	Fixed	80% Capital(1):	7,292,582	12.8155
Indexed Asset Value	9,115,727	<60% of Base:	False	20% ROE(2):	1,823,145	0.4434
FRVS Base Asset:	3,242,820	Interest Rate:	8.4700%	Insurance Cost(3):	93,481	1.6466
Occup Adj Factor	0.9000	Chase Rate:	8.7500%	Taxes Cost(3):	89,934	1.5842
ROE Factor	0.014380	Amortization Rate:	8.4700%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	15,380	0.0000
		Yearly Payment:	757,780	Total FRVS PD:		16.4897

- (1) 80% Capital (\$7,292,582) amortized at 8.4700 % for 20 years Principal & Interest of \$757,780 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$12.8155
- (2) 20% ROE (\$1,823,145) times the ROE factor (0.014380) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.4434
- (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:	51,883
Comparison Bed	180	Effective PBS Limitation	5,172,660

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.5528	46.5528	0.8265	45.7263
Direct Care	87.9094	87.9094	1.5608	86.3486
Indirect Care	57.8923	57.8923	1.0279	56.8644
Property	13.6500	16.4897	0.2928	16.1969
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.4458
Supplemental Rate Add-on				9.9025
Totals	206.0045	208.8442	3.7080	233.4845

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	3,242,820	0.00	0.2974	0.2974		120	42.23	3,242,820	3,441,840	
1987/01		0.10	1.0091	1.0091		120	42.23	3,245,332	3,503,400	
1987/07		0.10	0.9007	0.9007		120	42.23	3,247,577	3,530,760	
1988/01		0.20	0.9007	0.9007		120	42.23	3,252,068	3,559,440	
1988/07		0.20	0.5899	0.5899		120	42.23	3,255,014	3,557,520	
1989/01	53,049	0.30	0.5899	0.5899		120	42.23	3,312,487	3,578,520	
1989/07		0.30	0.5899	0.5899		120	61.65	3,318,350	3,602,760	
1990/01		0.40	0.5899	0.5899		120	59.68	3,326,181	3,620,880	
1990/07		0.40	0.5899	0.5899		120	59.68	3,334,031	3,642,240	
1991/01		0.50	0.5899	0.5899		120	59.68	3,343,866	3,663,600	
1991/07		0.50	1.4932	1.4932		120	59.68	3,368,831	3,718,320	
1992/01		0.60	2.0117	2.0117		120	59.68	3,409,493	3,793,080	
1992/07		0.60	1.8152	1.8152		120	59.68	3,446,626	3,861,960	
1993/01	93,221	0.70	1.7710	1.7710		120	57.51	3,582,575	3,930,360	
1993/07		0.70	1.5329	1.5329		120	57.51	3,621,016	3,990,600	
1994/01		0.80	1.6983	1.6983		120	51.38	3,666,973	4,058,400	
1994/07		0.80	1.5991	1.5991		120	51.38	3,710,797	4,123,320	
1995/01	48,973	0.90	1.5812	1.5812		120	46.86	3,804,763	4,188,480	
1995/07		0.90	1.5250	1.5250		120	46.86	3,849,255	4,252,320	
1996/01	4,376,201	1.00	1.7228	1.7228		180	44.91	8,279,605	6,488,460	
1996/07		1.00	1.3294	1.3294		180	44.91	8,279,605	6,574,680	3
1997/01	41,004	1.00	1.4109	1.4109		180	43.59	8,279,605	6,667,380	3
1997/07		1.00	1.0917	1.0917		180	43.59	8,279,605	6,740,100	3
1998/01	66,009	1.00	1.1663	1.1663		180	44.02	8,279,605	6,818,760	3
1998/07		1.00	1.0794	1.0794		180	44.02	8,279,605	6,892,380	3
1999/01	73,870	1.00	1.4499	1.4499		180	44.45	8,279,605	6,992,280	3
1999/07		1.00	1.2299	1.2299		180	44.45	8,279,605	7,078,320	3
2000/01		1.00	1.3356	1.3356		180	44.94	8,279,605	7,172,820	3
2000/07		1.00	1.1129	1.1129		180	44.55	8,279,605	7,252,560	3
2001/01		1.00	1.2976	1.2976		180	44.55	8,279,605	7,346,700	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
2001/07		1.00	0.9615	0.9615		180	44.55	8,279,605	7,417,260	3
2002/01		1.00	1.0301	1.0301		180	44.55	8,279,605	7,493,580	3
2002/07		1.00	0.8337	0.8337		180	44.55	8,279,605	7,556,040	3
2003/01		1.00	1.3271	1.3271		180	44.55	8,279,605	7,656,300	3
2003/07		1.00	1.1664	1.1664		180	52.88	8,279,605	7,745,580	3
2004/01		1.00	1.1103	1.1103		180	52.88	8,279,605	7,831,620	3
2004/07		1.00	0.8378	0.8378		180	51.56	8,279,605	7,897,320	3
2005/01		1.00	0.8595	0.8595		180	51.56	8,279,605	7,965,180	3
2005/07		1.00	0.7364	0.7364		180	53.16	8,279,605	8,023,860	3
2006/01		1.00	0.9068	0.9068		180	53.16	8,279,605	8,096,580	3
2006/07		1.00	0.8133	0.8133		180	50.96	8,279,605	8,162,460	3
2007/01		0.95	1.0133	1.0133		180	50.96	8,279,605	8,245,080	3
2007/07		0.95	1.1050	1.1050		180	53.17	8,336,160	8,336,160	8
2008/01		0.90	0.8556	0.8556		180	53.17	8,398,213	8,407,440	
2008/07		0.90	0.6104	0.6104		180	52.85	8,442,549	8,458,740	
2009/01		0.85	1.3268	1.3268		180	52.85	8,534,042	8,571,060	
2009/07	30,008	0.85	0.6841	0.6841		180	48.85	8,608,126	8,629,740	
2010/01		0.80	0.8643	0.8643		180	48.85	8,660,988	8,704,260	
2010/07		0.80	0.7107	0.7107		180	49.19	8,705,032	8,766,180	
2011/01		0.75	0.9198	0.9198		180	56.20	8,765,088	8,846,820	
2011/07		0.75	0.9028	0.9028		180	56.20	8,824,436	8,926,740	
2012/01		0.70	0.3865	0.3865		180	56.20	8,848,315	8,961,300	
2012/07		0.70	0.9417	0.9417		180	56.20	8,906,643	9,045,720	
2013/01		0.65	0.4901	0.4901		180	56.20	8,935,020	9,090,000	
2013/07	31,242	0.65	0.6196	0.6196		180	60.71	9,002,243	9,146,340	
2014/01		0.60	0.8564	0.8564		180	60.71	9,048,497	9,224,640	
2014/07		0.60	1.2383	1.2383		180	55.39	9,115,727	9,338,940	

Message Code:

- | | |
|---|--|
| 3 | Index Cost Limitation - January 1996 |
| 8 | Limited to Current RS Per Bed Standard |



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The Aristocrat

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
10949 PARNU STREET	7/1/2012-6/30/2013	Number of Beds: 60	Superior: 0
NAPLES, FL 34109	Days in CR 365	Maximum: 21,900	Standard: 184
County: Collier [11]	First Used : 2014/07	Max Annualized: 21,900	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 20,393	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,585	Inflation
Current Class South Small	Initial CR? False	Medicaid: 8,307	FY Index: 1.29878490
Class at 1/94: South Small	Medical Utilization		Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	40.73457%	Cost: 1.03716397
Open Date: 02/01/1993	Statewide Low Occupancy Threshold:	93.11872%	Target: 1.01458517
Acquired Date: 06/09/1994	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20850000
Entered Medicaid 06/09/1994	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2011	Weighted Low Occ Adjustment Factor:	118.54541%	DC Inflation: 1.02772031
Previous Med # 225291		100.00000%	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	481,545	771,220	613,585	167,220		2,033,570
1a	Audit Adjustments						
2	Cost Per Diem	57.9686	92.8398	73.8636	20.1300		244.8020
3	Cost Per Diem Inflated	60.1229	95.4133	76.6087			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	60.1229	95.4133	76.6087	20.1300		252.2749
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	78.9253		82.3945			
7	Provider Target Rate	80.5698		84.1113			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500		
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810			
10	Target Rate Class Ceiling	68.3236		80.3359			
10a	New Provider Target Limitation	70.2786		82.9919			
10b	Base for line 10a	68.8442		81.2980			
11	Lesser of 5,7,8,10, 10a	60.1229	95.4133	76.6087	13.6500		245.7949
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	60.1229	95.4133	76.6087	13.6500		245.7949
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

The Aristocrat

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	06/09/1994	Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:		Amount:	4,375,800.00	Total Amount	Per Diem
RS to Start Calcs:	1994/01	Type:	Variable	80% Capital(1):	2,214,304 9.8146
Indexed Asset Value	2,767,880	<60% of Base:	False	20% ROE(2):	553,576 0.4039
FRVS Base Asset:	1,930,980	Interest Rate:	6.2000%	Insurance Cost(3):	31,398 1.5396
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	31,452 1.5423
ROE Factor	0.014380	Amortization Rate:	6.2000%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	193,446	Total FRVS PD:	13.3004

- (1) 80% Capital (\$2,214,304) amortized at 6.2000 % for 20 years Principal & Interest of \$193,446 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$9.8146
 (2) 20% ROE (\$553,576) times the ROE factor (0.014380) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.4039
 (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,930,980

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	60.1229	60.1229	1.0675	59.0554
Direct Care	95.4133	95.4133	1.6941	93.7192
Indirect Care	76.6087	76.6087	1.3602	75.2485
Property	13.6500	13.3004	0.2361	13.0643
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				14.9392
Supplemental Rate Add-on				9.9025
Totals	245.7949	245.4453	4.3579	265.9291

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	4,974,593	0.00	1.6983	1.6983		60	10.05	1,930,980	1,930,980	1
1994/07		0.10	1.5991	1.5991		60	10.05	1,930,980	2,061,660	
1995/01		0.10	1.5812	1.5812		60	10.05	1,930,980	2,094,240	
1995/07		0.20	1.5250	1.5250		60	10.05	1,930,980	2,126,160	
1996/01		0.20	1.7228	1.7228		60	10.05	1,930,980	2,162,820	
1996/07	209,222	0.30	1.3294	1.3294		60	33.72	2,144,923	2,191,560	
1997/01		0.30	1.4109	1.4109		60	33.72	2,150,490	2,222,460	
1997/07		0.40	1.0917	1.0917		60	33.72	2,156,248	2,246,700	
1998/01		0.40	1.1663	1.1663		60	33.72	2,162,415	2,272,920	
1998/07		0.50	1.0794	1.0794		60	33.72	2,169,570	2,297,460	
1999/01		0.50	1.4499	1.4499		60	33.72	2,179,214	2,330,760	
1999/07		0.60	1.2299	1.2299		60	37.73	2,179,214	2,359,440	5
2000/01		0.60	1.3356	1.3356		60	37.73	2,202,286	2,390,940	
2000/07		0.70	1.1129	1.1129		60	52.45	2,218,646	2,417,520	
2001/01		0.70	1.2976	1.2976		60	52.45	2,237,864	2,448,900	
2001/07		0.80	0.9615	0.9615		60	52.45	2,254,280	2,472,420	
2002/01		0.80	1.0301	1.0301		60	52.45	2,271,996	2,497,860	
2002/07		0.90	0.8337	0.8337		60	52.45	2,288,252	2,518,680	
2003/01		0.90	1.3271	1.3271		60	52.45	2,314,316	2,552,100	
2003/07		1.00	1.1664	1.1664		60	52.45	2,340,059	2,581,860	
2004/01	13,780	1.00	1.1103	1.1103		60	51.38	2,378,111	2,610,540	
2004/07		1.00	0.8378	0.8378		60	51.38	2,396,723	2,632,440	
2005/01		1.00	0.8595	0.8595		60	55.90	2,417,323	2,655,060	
2005/07		1.00	0.7364	0.7364		60	55.90	2,435,124	2,674,620	
2006/01		1.00	0.9068	0.9068		60	55.07	2,457,206	2,698,860	
2006/07		1.00	0.8133	0.8133		60	55.07	2,477,190	2,720,820	
2007/01		1.00	1.0133	1.0133		60	45.67	2,498,033	2,748,360	
2007/07		1.00	1.1050	1.1050		60	45.67	2,520,954	2,778,720	
2008/01		1.00	0.8556	0.8556		60	45.67	2,538,864	2,802,480	
2008/07		1.00	0.6104	0.6104		60	37.58	2,549,453	2,819,580	



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0 030552-00 - 2014/07

265.93

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		60	41.40	2,574,915	2,857,020	
2009/07		1.00	0.6841	0.6841		60	41.40	2,588,174	2,876,580	
2010/01		1.00	0.8643	0.8643		60	45.71	2,606,765	2,901,420	
2010/07		1.00	0.7107	0.7107		60	41.99	2,620,909	2,922,060	
2011/01		1.00	0.9198	0.9198		60	41.95	2,639,296	2,948,940	
2011/07		1.00	0.9028	0.9028		60	41.95	2,657,470	2,975,580	
2012/01		1.00	0.3865	0.3865		60	41.95	2,665,304	2,987,100	
2012/07		1.00	0.9417	0.9417		60	41.95	2,684,448	3,015,240	
2013/01		1.00	0.4901	0.4901		60	41.95	2,694,483	3,030,000	
2013/07	21,345	1.00	0.6196	0.6196		60	38.65	2,727,560	3,048,780	
2014/01		1.00	0.8564	0.8564		60	38.65	2,743,975	3,074,880	
2014/07		0.95	1.2383	1.2383		60	40.73	2,767,880	3,112,980	

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 07/01/2014 through 12/31/2014

0 031880-00 - 2014/07

245.82

North Campus Rehabilitation and Health 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	3/1/2013-2/28/2014	Number of Beds: 90	Superior: 0
LEESBURG, FL 34748	Days in CR 365	Maximum: 32,850	Standard: 184
County: Lake [35]	First Used : 2014/07	Max Annualized: 32,850	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 28,833	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 11,950	Inflation
Current Class North Small	Initial CR? False	Medicaid: 13,640	FY Index: 1.31433985
Class at 1/94: North Small	Medical Utilization	47.30691%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	87.77169%	Cost: 1.02488934
Open Date: 10/11/1988	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/11/1988	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21766521
Entered Medicaid 10/11/1988	Low Occupancy Adjustment Factor:	111.73833%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.01998480
Previous Med # 005524			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	753,178	1,272,369	1,093,908	808,579		3,928,034
1a	Audit Adjustments						
2	Cost Per Diem	55.2183	93.2822	80.1985	59.2800		287.9790
3	Cost Per Diem Inflated	56.5926	95.1464	82.1946			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	56.5926	95.1464	82.1946	59.2800		293.2136
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	56.6697		75.9861			
7	Provider Target Rate	57.8505		77.5693			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation	53.4223		61.1276			
10b	Base for line 10a	52.3319		59.8799			
11	Lesser of 5,7,8,10, 10a	53.3690	93.7426	61.1276	13.6500		221.8892
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	53.3690	93.7426	61.1276	13.6500		221.8892
15	Inflated Usual & Customary Charge						0.00



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

0 031880-00 - 2014/07

245.82

Rate Semester 07/01/2014 through 12/31/2014

North Campus Rehabilitation and Health 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):	3,717,368 12.9292
Indexed Asset Value	4,646,710	<60% of Base:	False	20% ROE(2):	929,342 0.6318
FRVS Base Asset:	2,402,622	Interest Rate:	8.3270%	Insurance Cost(3):	112,966 3.9179
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	2,156 0.0748
ROE Factor	0.020100	Amortization Rate:	8.3270%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	8,705 0.0000
		Yearly Payment:	382,252	Total FRVS PD:	17.5537

- (1) 80% Capital (\$3,717,368) amortized at 8.3270 % for 20 years Principal & Interest of \$382,252 divided by annual available days (32850) divided by Occup. Adj. (0.900) = \$12.9292
- (2) 20% ROE (\$929,342) times the ROE factor (0.020100) divided by annual available days (32850) divided by Occup. Adj. (0.900) = \$0.6318
- (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:	51,883
Comparison Bed	81	Effective PBS Limitation	2,402,622

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3690	53.3690	0.9476	52.4214
Direct Care	93.7426	93.7426	1.6644	92.0782
Indirect Care	61.1276	61.1276	1.0853	60.0423
Property	13.6500	17.5537	0.3117	17.2420
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				14.1378
Supplemental Rate Add-on				9.9025
Totals	221.8892	225.7929	4.0090	245.8242

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 7/1/2014 through 12/31/2014 Based on Cost Report: 2/28/2014

0 031880-00 - 2014/07

245.82

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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 7/1/2014 through 12/31/2014 Based on Cost Report: 2/28/2014

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245.82

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

- | |
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| 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
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 032049-00 - 2014/07

231.64

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	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
SAINT AUGUSTINE, FL 32092	Days in CR 365	Maximum: 43,800	Standard: 184
County: St Johns [55]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 43,417	Total: 184
Control: Government	Unaudited	Medicare: 2,111	Inflation
Current Class North Large	Initial CR? False	Medicaid: 15,987	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	36.82198%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	99.12557%	Cost: 1.03716397
Open Date: 09/13/2010	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/13/2010	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 11/16/2010	Low Occupancy Adjustment Factor:	126.19247%	DC Sem Index: 1.24200000
Med # Active Date: 11/16/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	699,885	1,856,169	817,497	310,947		3,684,498	
1a	Audit Adjustments							
2	Cost Per Diem	43.7784	116.1049	51.1351	19.4500		230.4684	
3	Cost Per Diem Inflated	45.4054	119.3234	53.0355				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.4054	119.3234	53.0355	19.4500		237.2143	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	145.7316		143.9226				
7	Provider Target Rate	148.7681		146.9214				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	50.1275		58.0987				
10b	Base for line 10a	49.1044		56.9129				
11	Lesser of 5,7,8,10, 10a	45.4054	95.0998	53.0355	13.6500		207.1907	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	45.4054	95.0998	53.0355	13.6500		207.1907	
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

0 032049-00 - 2014/07

231.64

Rate Semester 07/01/2014 through 12/31/2014

Clyde E. Lassen State Veterans' Nursing Home

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/16/2010	Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:		Amount:	0.00	Total Amount	Per Diem
RS to Start Calcs:	2010/07	Type:	None	80% Capital(1):	4,713,043 3.8218
Indexed Asset Value	5,891,304	<60% of Base:	True	20% ROE(2):	1,178,261 0.4298
FRVS Base Asset:	5,802,840	Interest Rate:	0.0000%	Insurance Cost(3):	2,702 0.0622
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	0 0.0000
ROE Factor	0.014380	Amortization Rate:	3.2500%	Home Office(3):	45,755 1.0538
		Interest Only:	True	Replacement(3&4):	6,694 0.0000
		Yearly Payment:	150,655	Total FRVS PD:	5.3676

- (1) 80% Capital (\$4,713,043) amortized at 3.2500 % for 20 years Interest of \$150,655 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$3.8218
- (2) 20% ROE (\$1,178,261) times the ROE factor (0.014380) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4298
- (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:	48,357
Comparison Date:	01/01/2010	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	5,802,840

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.4054	45.4054	0.8062	44.5992
Direct Care	95.0998	95.0998	1.6885	93.4113
Indirect Care	53.0355	53.0355	0.9417	52.0938
Property	13.6500	5.3676	0.0953	5.2723
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				26.3569
Supplemental Rate Add-on				9.9025
Totals	207.1907	198.9083	3.5317	231.6360

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 7/1/2014 through 12/31/2014 Based on Cost Report: 6/30/2013

0 032049-00 - 2014/07

231.64

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	4,358	0.10	0.9198	0.9198		120	5.99	5,807,198	5,897,880	
2011/07		0.10	0.9028	0.9028		120	5.99	5,807,198	5,951,160	
2012/01		0.20	0.3865	0.3865		120	5.99	5,807,198	5,974,200	
2012/07		0.20	0.9417	0.9417		120	5.99	5,807,198	6,030,480	
2013/01		0.30	0.4901	0.4901		120	5.99	5,807,198	6,060,000	
2013/07	22,635	0.30	0.6196	0.6196		120	32.10	5,836,134	6,097,560	
2014/01		0.40	0.8564	0.8564		120	32.10	5,847,804	6,149,760	
2014/07	24,110	0.40	1.2383	1.2383		120	36.82	5,891,304	6,225,960	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 07/01/2014 through 12/31/2014

0 032482-00 - 2014/07

233.71

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	1/1/2012-12/31/2012	Number of Beds: 294	Superior: 0
MIAMI, FL 33142	Days in CR 366	Maximum: 107,604	Standard: 184
County: Dade [13]	First Used : 2014/01	Max Annualized: 107,310	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 93,383	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,507	Inflation
Current Class South Large	Initial CR? False	Medicaid: 84,037	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	89.99175%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	86.78395%	Cost: 1.04963363
Open Date: 01/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 01/01/1984	Low Occupancy Adjustment Factor:	110.48088%	DC Sem Index: 1.24200000
Med # Active Date: 05/13/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 227544			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	4,702,192	7,795,253	4,315,118	930,290	4,221	17,747,076	
1a	Audit Adjustments							
2	Cost Per Diem	55.9538	92.7598	51.3478	11.0700	0.0502	211.1816	
3	Cost Per Diem Inflated	58.7310	95.8068	53.8964				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	58.7310	95.8068	53.8964	11.0700	0.0502	219.5544	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.4055		57.1913				
7	Provider Target Rate	54.5183		58.3829				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	54.4176	95.8068	53.8964	11.0700	0.0502	215.2410	
12/13	Medical Adjustment Rate		4.3104	2.4248				
14	Prospective Per Diem 11	54.4176	100.1172	56.3212	11.0700	0.0502	221.9762	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Unity Health and Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/01/1988	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	5,562,567.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Variable	80% Capital(1):	8,555,821	11.0598
Indexed Asset Value	10,694,776	<60% of Base:	False	20% ROE(2):	2,138,955	0.3229
FRVS Base Asset:	5,044,343	Interest Rate:	11.1200%	Insurance Cost(3):	115,552	1.2374
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	68,220	0.7305
ROE Factor	0.014580	Amortization Rate:	11.1200%	Home Office(3):	63,234	0.6771
		Interest Only:	False	Replacement(3&4):	179,763	0.0000
		Yearly Payment:	1,068,144	Total FRVS PD:		14.0277

- (1) 80% Capital (\$8,555,821) amortized at 11.1200 % for 20 years Principal & Interest of \$1,068,144 divided by annual available days (107310) divided by Occup. Adj. (0.900) = \$11.0598
- (2) 20% ROE (\$2,138,955) times the ROE factor (0.014580) divided by annual available days (107310) divided by Occup. Adj. (0.900) = \$0.3229
- (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:	51,883
Comparison Bed	298	Effective PBS Limitation	8,493,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	100.1172	100.1172	1.7776	98.3396
Indirect Care	56.3212	56.3212	1.0000	55.3212
Property	11.0700	14.0277	0.2491	13.7786
ROE	0.0502	0.0500	0.0009	0.0491
ROE Adjustment	-0.0500	-0.0500	-0.0009	-0.0491
Quality Assess-Medicaid Share				2.9173
Supplemental Rate Add-on				9.9025
Totals	221.9262	224.8837	3.9929	233.7106

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	

Message Code:

5 Uncorrected Licensure Deficiency

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242.02

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	1/1/2013-12/31/2013	Number of Beds: 145	Superior: 0
LADY LAKE, FL 32159	Days in CR 365	Maximum: 52,925	Standard: 184
County: Lake [35]	First Used : 2014/07	Max Annualized: 52,925	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 47,294	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 15,766	Inflation
Current Class North Large	Initial CR? False	Medicaid: 16,884	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	35.70009%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	89.36042%	Cost: 1.02471376
Open Date: 01/29/1999	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/30/1999	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 03/30/1999	Low Occupancy Adjustment Factor:	113.76088%	DC Sem Index: 1.24200000
Med # Active Date: 05/13/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 227561			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	872,981	1,498,964	1,024,122	460,933	2,801	3,859,801	
1a	Audit Adjustments							
2	Cost Per Diem	51.7046	88.7801	60.6564	27.3000	0.1659	228.6070	
3	Cost Per Diem Inflated	52.9824	90.7530	62.1554				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.9824	90.7530	62.1554	27.3000	0.1659	233.3567	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.4509		63.9505				
7	Provider Target Rate	54.5646		65.2830				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	49.7653	90.7530	60.1169	13.6500	0.1659	214.4511	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	49.7653	90.7530	60.1169	13.6500	0.1659	214.4511	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	5,828,947	15.2776
Indexed Asset Value	7,286,184	<60% of Base:	False	20% ROE(2):	1,457,237	0.5736
FRVS Base Asset:	4,594,920	Interest Rate:	11.1200%	Insurance Cost(3):	98,890	2.0910
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	85,044	1.7982
ROE Factor	0.018750	Amortization Rate:	11.1200%	Home Office(3):	47,311	1.0004
		Interest Only:	False	Replacement(3&4):	190,425	0.0000
		Yearly Payment:	727,710	Total FRVS PD:		20.7408

- (1) 80% Capital (\$5,828,947) amortized at 11.1200 % for 20 years Principal & Interest of \$727,710 divided by annual available days (52925) divided by Occup. Adj. (0.900) = \$15.2776
- (2) 20% ROE (\$1,457,237) times the ROE factor (0.018750) divided by annual available days (52925) divided by Occup. Adj. (0.900) = \$0.5736
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,594,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.7653	49.7653	0.8836	48.8817
Direct Care	90.7530	90.7530	1.6113	89.1417
Indirect Care	60.1169	60.1169	1.0674	59.0495
Property	13.6500	20.7408	0.3683	20.3725
ROE	0.1659	0.0299	0.0005	0.0294
ROE Adjustment	-0.0299	-0.0299	-0.0005	-0.0294
Quality Assess-Medicaid Share				14.6671
Supplemental Rate Add-on				9.9025
Totals	214.4212	221.3760	3.9306	242.0150

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	6,465,779	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	



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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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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252.49

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 BOULEVARD	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 0
VENICE, FL 34292	Days in CR 365	Maximum: 43,800	Standard: 184
County: Sarasota [58]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 41,531	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 14,311	Inflation
Current Class South Large	Initial CR? False	Medicaid: 16,053	FY Index: 1.31456505
Class at 1/94: South Large	Medical Utilization	38.65305%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.81963%	Cost: 1.02471376
Open Date: 02/10/1992	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/10/1992	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 03/17/1992	Low Occupancy Adjustment Factor:	120.71076%	DC Sem Index: 1.24200000
Med # Active Date: 05/13/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 308501			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	852,063	1,509,014	1,053,482	406,462	18,972	3,839,993	
1a	Audit Adjustments							
2	Cost Per Diem	53.0781	94.0020	65.6252	25.3200	1.1818	239.2071	
3	Cost Per Diem Inflated	54.3899	96.0909	67.2470				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.3899	96.0909	67.2470	25.3200	1.1818	244.2296	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	63.9014		66.9427				
7	Provider Target Rate	65.2328		68.3375				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	54.3899	96.0909	63.9416	13.6500	1.1818	229.2542	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	54.3899	96.0909	63.9416	13.6500	1.1818	229.2542	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,366,317	11.6782
Indexed Asset Value	5,457,896	<60% of Base:	False	20% ROE(2):	1,091,579	0.5192
FRVS Base Asset:	3,718,320	Interest Rate:	8.6700%	Insurance Cost(3):	84,151	2.0262
Occup Adj Factor	0.9000	Chase Rate:	6.0000%	Taxes Cost(3):	54,668	1.3163
ROE Factor	0.018750	Amortization Rate:	8.6700%	Home Office(3):	40,179	0.9674
		Interest Only:	False	Replacement(3&4):	192,157	0.0000
		Yearly Payment:	460,356	Total FRVS PD:		16.5073

- (1) 80% Capital (\$4,366,317) amortized at 8.6700 % for 20 years Principal & Interest of \$460,356 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.6782
- (2) 20% ROE (\$1,091,579) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5192
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,718,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.3899	54.3899	0.9657	53.4242
Direct Care	96.0909	96.0909	1.7061	94.3848
Indirect Care	63.9416	63.9416	1.1353	62.8063
Property	13.6500	16.5073	0.2931	16.2142
ROE	1.1818	1.1813	0.0210	1.1603
ROE Adjustment	-1.1813	-1.1813	-0.0210	-1.1603
Quality Assess-Medicaid Share				15.7559
Supplemental Rate Add-on				9.9025
Totals	228.0729	230.9297	4.1002	252.4879

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
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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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	

Message Code:

1	Per Bed Standard Limitation
5	Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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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	1/1/2012-12/31/2012	Number of Beds: 159	Superior: 0
SAINT PETERSBURG, FL 33709	Days in CR 366	Maximum: 58,194	Standard: 184
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 58,035	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 52,486	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 12,697	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,816	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	52.99699%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.19143%	Cost: 1.04963363
Open Date: 06/01/1982	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1982	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 06/01/1982	Low Occupancy Adjustment Factor:	114.81880%	DC Sem Index: 1.24200000
Med # Active Date: 05/13/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 227650			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,305,851	2,241,760	1,452,143	554,373	3,591	5,557,719	
1a	Audit Adjustments							
2	Cost Per Diem	46.9460	80.5925	52.2053	19.9300	0.1291	199.8029	
3	Cost Per Diem Inflated	49.2761	83.2398	54.7964				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.2761	83.2398	54.7964	19.9300	0.1291	207.3714	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.9163		63.4887				
7	Provider Target Rate	58.1022		64.8115				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	49.2761	83.2398	54.7964	13.6500	0.1291	201.0914	
12/13	Medical Adjustment Rate		0.2807	0.1848				
14	Prospective Per Diem 11	49.2761	83.5205	54.9812	13.6500	0.1291	201.5569	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Lexington Health & Rehabilitation Center

FRVS

FRVS Status as of this Semester

On Payback FRV

Began FRVS: Year of Phase-In/Full: RS to Start Calcs: Indexed Asset Value FRVS Base Asset: Occup Adj Factor ROE Factor	Mortgage Information		Calculation of FRVS Per Diem		
	Amount:		Total Amount	Per Diem	
	3,623,017.00	Variable	80% Capital(1):	4,526,969	9.1911
	Type:	False	20% ROE(2):	1,131,742	0.3159
	<60% of Base:	10.4900%	Insurance Cost(3):	92,912	1.7702
	Interest Rate:	6.7500%	Taxes Cost(3):	63,328	1.2066
	Chase Rate:	8.7500%	Home Office(3):	43,524	0.8292
	Amortization Rate:	False	Replacement(3&4):	15,559	0.0000
	Interest Only:	480,064	Total FRVS PD:		13.3130
	Yearly Payment:				

- (1) 80% Capital (\$4,526,969) amortized at 8.7500 % for 20 years Principal & Interest of \$480,064 divided by annual available days (58035) divided by Occup. Adj. (0.900) = \$9.1911
- (2) 20% ROE (\$1,131,742) times the ROE factor (0.014580) divided by annual available days (58035) divided by Occup. Adj. (0.900) = \$0.3159
- (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:	51,883
Comparison Bed	102	Effective PBS Limitation	2,907,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.2761	49.2761	0.8749	48.4012
Direct Care	83.5205	83.5205	1.4829	82.0376
Indirect Care	54.9812	54.9812	0.9762	54.0050
Property	13.6500	13.3130	0.2424	13.4076
ROE	0.1291	0.0347	0.0023	0.1268
ROE Adjustment	-0.0347	-0.0347	-0.0006	-0.0341
Quality Assess-Medicaid Share				17.6189
Supplemental Rate Add-on				9.9025
Totals	201.5222	201.0908	3.5781	225.4655

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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 032553123120120101201209042013163438



Florida Agency for Health Care Administration
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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	2/1/2012-1/31/2013	Number of Beds: 156	Superior: 0
TALLAHASSEE, FL 32308	Days in CR 366	Maximum: 57,096	Standard: 184
County: Leon [37]	First Used : 2014/01	Max Annualized: 56,940	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 51,111	Total: 184
Control: Proprietary : Partnership	Unaudited	Medicare: 7,174	Inflation
Current Class North Large	Initial CR? False	Medicaid: 33,450	FY Index: 1.28546739
Class at 1/94: North Large	Medical Utilization	65.44579%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	89.51765%	Cost: 1.04790904
Open Date: 11/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20349917
Entered Medicaid 11/01/1984	Low Occupancy Adjustment Factor:	113.96104%	DC Sem Index: 1.24200000
Med # Active Date: 12/01/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03199074
Previous Med # 252093			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,464,092	2,904,289	2,055,504	887,429		7,311,315
1a	Audit Adjustments						
2	Cost Per Diem	43.7696	86.8248	61.4500	26.5300		218.5744
3	Cost Per Diem Inflated	45.8666	89.6024	64.3940			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.8666	89.6024	64.3940	26.5300		226.3930
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	50.6173		68.7785			
7	Provider Target Rate	51.6720		70.2116			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	48.2577		57.9513			
10b	Base for line 10a	47.2727		56.7685			
11	Lesser of 5,7,8,10, 10a	45.8666	89.6024	57.9513	13.6500		207.0703
12/13	Medical Adjustment Rate		1.5570	1.0070			
14	Prospective Per Diem 11	45.8666	91.1594	58.9583	13.6500		209.6343
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,964,834	9.5443
Indexed Asset Value	6,206,042	<60% of Base:	False	20% ROE(2):	1,241,208	0.3531
FRVS Base Asset:	2,265,264	Interest Rate:	10.6343%	Insurance Cost(3):	46,087	0.9017
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	70,693	1.3831
ROE Factor	0.014580	Amortization Rate:	7.7500%	Home Office(3):	11,772	0.2303
		Interest Only:	False	Replacement(3&4):	38,992	0.0000
		Yearly Payment:	489,105	Total FRVS PD:		12.4125

- (1) 80% Capital (\$4,964,834) amortized at 7.7500 % for 20 years Principal & Interest of \$489,105 divided by annual available days (56940) divided by Occup. Adj. (0.900) = \$9.5443
- (2) 20% ROE (\$1,241,208) times the ROE factor (0.014580) divided by annual available days (56940) divided by Occup. Adj. (0.900) = \$0.3531
- (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:	51,883
Comparison Bed	156	Effective PBS Limitation	4,446,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.8666	45.8666	0.8144	45.0522
Direct Care	91.1594	91.1594	1.6185	89.5409
Indirect Care	58.9583	58.9583	1.0468	57.9115
Property	13.6500	12.4125	0.2204	12.1921
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.8689
Supplemental Rate Add-on				9.9025
Totals	209.6343	208.3968	3.7001	236.4681

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
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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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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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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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Florida Agency for Health Care Administration
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0 033717-00 - 2014/07
243.29

Benderson Family Skilled Nursing & Rehab Center

Type of Cost Report: Cost Settled Interim New Facility Type of Cost: Actual Type of Rate: Prospective

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

CHOW Status based on this Cost Report: New Provider

Provider Information	Cost Report	Patient Days	Ratings Days
1959 N HONORE AVE	7/1/2011-12/31/2012	Number of Beds: 50	Superior: 0
SARASOTA, FL 34235	Days in CR 550	Maximum: 27,500	Standard: 184
County: Sarasota [58]	First Used : 2011/01	Max Annualized: 18,250	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 20,340	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 5,741	Inflation
Current Class South Small	Initial CR? True	Medicaid: 4,817	FY Index: 1.27684492
Class at 1/94: South Small	Medical Utilization	23.68240%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	73.96364%	Cost: 1.05498552
Open Date: 03/04/2011	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/04/2011	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20000000
Entered Medicaid 03/22/2011	Low Occupancy Adjustment Factor:	94.15990%	DC Sem Index: 1.24200000
Med # Active Date: 03/22/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03500000
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	309,878	442,677	240,164	103,517		1,096,236	
1a	Audit Adjustments							
2	Cost Per Diem	64.3301	91.8989	49.8576	21.4899		227.5765	
3	Cost Per Diem Inflated	67.8673	95.1154	52.5990				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	67.8673	95.1154	52.5990	21.4899		237.0716	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	69.2039		65.0953				
7	Provider Target Rate	70.6458		66.4516				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	65.2047		77.5952				
10b	Base for line 10a	63.8738		76.0114				
11	Lesser of 5,7,8,10, 10a	62.8974	95.1154	52.5990	13.6500		224.2618	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	62.8974	95.1154	52.5990	13.6500		224.2618	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Benderson Family Skilled Nursing & Rehab Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	03/22/2011	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	1,948,040 3.7912
RS to Start Calcs:	2011/01	<60% of Base:	True	20% ROE(2):	487,010 0.4839
Indexed Asset Value	2,435,050	Interest Rate:	0.0000%	Insurance Cost(3):	72,567 3.5677
FRVS Base Asset:	2,435,050	Chase Rate:	3.2500%	Taxes Cost(3):	0 0.0000
Occup Adj Factor	0.9000	Amortization Rate:	3.2500%	Home Office(3):	0 0.0000
ROE Factor	0.016320	Interest Only:	True	Replacement(3&4):	34,168 0.0000
		Yearly Payment:	62,270	Total FRVS PD:	7.8428

- (1) 80% Capital (\$1,948,040) amortized at 3.2500 % for 20 years Interest of \$62,270 divided by annual available days (18250) divided by Occup. Adj. (0.900) = \$3.7912
- (2) 20% ROE (\$487,010) times the ROE factor (0.016320) divided by annual available days (18250) divided by Occup. Adj. (0.900) = \$0.4839
- (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:	48,701
Comparison Date:	07/01/2010	Current RS PBS:	51,883
Comparison Bed	50	Effective PBS Limitation	2,435,050

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	62.8974	62.8974	1.1167	61.7807
Direct Care	95.1154	95.1154	1.6888	93.4266
Indirect Care	52.5990	52.5990	0.9339	51.6651
Property	13.6500	7.8428	0.1392	7.7036
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.8160
Supplemental Rate Add-on				9.9025
Totals	224.2618	218.4546	3.8786	243.2945

Medicaid Trend Adjustment



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243.29

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	

Message Code:

1 Per Bed Standard Limitation

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Florida Agency for Health Care Administration
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202.37

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	1/1/2013-12/31/2013	Number of Beds: 100	Superior: 0
LAKE WALES, FL 33853	Days in CR 365	Maximum: 36,500	Standard: 184
County: Polk [53]	First Used : 2014/07	Max Annualized: 36,500	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 30,171	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,026	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 17,965	FY Index: 1.31456505
Class at 1/94: South Small	Medical Utilization	59.54393%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	82.66027%	Cost: 1.02471376
Open Date: 08/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 08/01/1983	Low Occupancy Adjustment Factor:	105.23121%	DC Sem Index: 1.24200000
Med # Active Date: 03/09/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 319341			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	665,070	1,334,670	843,399	324,807		3,167,946	
1a	Audit Adjustments							
2	Cost Per Diem	37.0203	74.2928	46.9468	18.0800		176.3399	
3	Cost Per Diem Inflated	37.9352	75.9438	48.1070				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	37.9352	75.9438	48.1070	18.0800		180.0660	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.6952		60.5710				
7	Provider Target Rate	47.6681		61.8331				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	57.9993		68.8090				
10b	Base for line 10a	56.8155		67.4046				
11	Lesser of 5,7,8,10, 10a	37.9352	75.9438	48.1070	13.6500		175.6360	
12/13	Medical Adjustment Rate		0.8154	0.5165				
14	Prospective Per Diem 11	37.9352	76.7592	48.6235	13.6500		176.9679	
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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 Computation of Nursing Home Medicaid Reimbursement Rate

0 034504-00 - 2014/07

202.37

Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	5,000,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	3,485,396 8.5794
RS to Start Calcs:	1983/07	<60% of Base:	False	20% ROE(2):	871,349 0.4973
Indexed Asset Value	4,356,745	Interest Rate:	7.0000%	Insurance Cost(3):	11,099 0.3679
FRVS Base Asset:	1,301,586	Chase Rate:	3.2500%	Taxes Cost(3):	28,174 0.9338
Occup Adj Factor	0.9000	Amortization Rate:	5.2500%	Home Office(3):	10,548 0.3496
ROE Factor	0.018750	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	281,834	Total FRVS PD:	10.7280

- (1) 80% Capital (\$3,485,396) amortized at 5.2500 % for 20 years Principal & Interest of \$281,834 divided by annual available days (36500) divided by Occup. Adj. (0.900) = \$8.5794
- (2) 20% ROE (\$871,349) times the ROE factor (0.018750) divided by annual available days (36500) divided by Occup. Adj. (0.900) = \$0.4973
- (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:	51,883
Comparison Bed	100	Effective PBS Limitation	2,850,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	37.9352	37.9352	0.6735	37.2617
Direct Care	76.7592	76.7592	1.3629	75.3963
Indirect Care	48.6235	48.6235	0.8633	47.7602
Property	13.6500	10.7280	0.1905	10.5375
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5115
Supplemental Rate Add-on				9.9025
Totals	176.9679	174.0459	3.0902	202.3697

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2013

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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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202.37

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	8,683	0.60	0.9028	0.9028		100	57.75	4,260,947	4,959,300	
2012/01		0.55	0.3865	0.3865		100	57.75	4,270,006	4,978,500	
2012/07		0.55	0.9417	0.9417		100	57.75	4,292,120	5,025,400	
2013/01		0.50	0.4901	0.4901		100	57.75	4,302,640	5,050,000	



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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		100	57.75	4,315,970	5,081,300	
2014/01		0.45	0.8564	0.8564		100	59.67	4,332,604	5,124,800	
2014/07		0.45	1.2383	1.2383		100	59.54	4,356,745	5,188,300	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 034504123120130101201304282014162346



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 038640-00 - 2014/07

241.56

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: 184
County: Palm Beach [50]	First Used : 2011/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 29,785	Total: 184
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	Medical Utilization	25.00588%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	67.81648%	Cost: 1.00000000
Open Date: 10/04/2011	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/04/2011	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.19500000
Entered Medicaid 07/12/2011	Low Occupancy Adjustment Factor:	86.33422%	DC Sem Index: 1.24200000
Med # Active Date: 10/04/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.02083595

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 Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	55.8016		62.0448			
10b	Base for line 10a	54.6627		60.7784			
11	Lesser of 5,7,8,10, 10a	50.7605	98.4475	62.0448	13.6500		224.9028
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	50.7605	98.4475	62.0448	13.6500		224.9028
15	Inflated Usual & Customary Charge						0.00

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



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241.56

Rate Semester 07/01/2014 through 12/31/2014

NuVista Living at Wellington Green

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/04/2011	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	22,227,907.00		Total Amount	Per Diem
RS to Start Calcs:	2011/07	Type:	Fixed	80% Capital(1):	4,739,434	9.2840
Indexed Asset Value	5,924,293	<60% of Base:	False	20% ROE(2):	1,184,859	0.5636
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:	365,977	Total FRVS PD:		24.5924

- (1) 80% Capital (\$4,739,434) amortized at 4.7000 % for 20 years Principal & Interest of \$365,977 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.2840
- (2) 20% ROE (\$1,184,859) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5636
- (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:	51,883
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	0.9013	49.8592
Direct Care	98.4475	98.4475	1.7479	96.6996
Indirect Care	62.0448	62.0448	1.1016	60.9432
Property	13.6500	24.5924	0.4366	24.1558
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Totals	224.9028	235.8452	4.1874	241.5603

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
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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 041324-00 - 2014/07

237.34

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: 184
County: Hillsborough [29]	First Used : 2011/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 26,024	Total: 184
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	Medical Utilization	59.99846%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	59.25319%	Cost: 1.00000000
Open Date: 09/28/2011	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/28/2011	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.19500000
Entered Medicaid 09/28/2011	Low Occupancy Adjustment Factor:	75.43267%	DC Sem Index: 1.24200000
Med # Active Date: 09/28/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.02083595

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 Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	51.3943		59.7575				
10b	Base for line 10a	50.3453		58.5378				
11	Lesser of 5,7,8,10, 10a	49.4885	96.7737	54.1103	13.6500		214.0225	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	49.4885	96.7737	54.1103	13.6500		214.0225	
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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237.34

Rate Semester 07/01/2014 through 12/31/2014

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):	4,764,866 9.8797
Indexed Asset Value	5,956,082	<60% of Base:	False	20% ROE(2):	1,191,216 0.5666
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:	389,458	Total FRVS PD:	31.1769

- (1) 80% Capital (\$4,764,866) amortized at 5.3800 % for 20 years Principal & Interest of \$389,458 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.8797
 (2) 20% ROE (\$1,191,216) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5666
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	5,897,880

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.4885	49.4885	0.8787	48.6098
Direct Care	96.7737	96.7737	1.7182	95.0555
Indirect Care	54.1103	54.1103	0.9607	53.1496
Property	13.6500	31.1769	0.5535	30.6234
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Totals	214.0225	231.5494	4.1111	237.3408

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 7/1/2014 through 12/31/2014 Based on Cost Report: 6/30/2012

0 041324-00 - 2014/07

237.34

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 041685-00 - 2014/07

218.20

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	9/1/2012-8/31/2013	Number of Beds: 60	Superior: 0
DELAND, FL 32720	Days in CR 365	Maximum: 21,900	Standard: 184
County: Volusia [64]	First Used : 2014/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 17,894	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 591	Inflation
Current Class North Small	Initial CR? False	Medicaid: 16,198	FY Index: 1.30580299
Class at 1/94: North Small	Medical Utilization	90.52196%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	81.70776%	Cost: 1.03158969
Open Date: 07/01/1972	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1972	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21049917
Entered Medicaid 07/01/1972	Low Occupancy Adjustment Factor:	104.01861%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02602301
Previous Med # 212831			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	730,300	1,119,275	825,527	293,670		2,968,772
1a	Audit Adjustments						
2	Cost Per Diem	45.0858	69.0996	50.9647	18.1300		183.2801
3	Cost Per Diem Inflated	46.5100	70.8978	52.5747			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.5100	70.8978	52.5747	18.1300		188.1125
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	47.8288		56.3577			
7	Provider Target Rate	48.8254		57.5320			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	46.5100	70.8978	52.5747	13.6500		183.6325
12/13	Medical Adjustment Rate		3.1904	2.3659			
14	Prospective Per Diem 11	46.5100	74.0882	54.9406	13.6500		189.1888
15	Inflated Usual & Customary Charge						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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218.20

Rate Semester 07/01/2014 through 12/31/2014

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 0.2130
FRVS Base Asset:	688,794	Interest Rate:	11.5000%	Insurance Cost(3):	39,374 2.2004
Occup Adj Factor	0.9000	Chase Rate:	9.5000%	Taxes Cost(3):	10,852 0.6065
ROE Factor	0.015730	Amortization Rate:	11.5000%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	4,307 0.0000
		Yearly Payment:	136,604	Total FRVS PD:	9.9506

- (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. (0.900) = \$6.9307
- (2) 20% ROE (\$266,863) times the ROE factor (0.015730) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.2130
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.5100	46.5100	0.8258	45.6842
Direct Care	74.0882	74.0882	1.3154	72.7728
Indirect Care	54.9406	54.9406	0.9755	53.9651
Property	13.6500	9.9506	0.1767	9.7739
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				26.0992
Supplemental Rate Add-on				9.9025
Totals	189.1888	185.4894	3.2934	218.1977

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 8/31/2013

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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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218.20

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	

Message Code:



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 041686-00 - 2014/07

209.59

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	8/1/2012-7/31/2013	Number of Beds: 60	Superior: 184
DELAND, FL 32724	Days in CR 365	Maximum: 21,900	Standard: 0
County: Volusia [64]	First Used : 2014/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 17,937	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 2,043	Inflation
Current Class North Small	Initial CR? False	Medicaid: 14,689	FY Index: 1.30228922
Class at 1/94: North Small	Medical Utilization	81.89218%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	81.90411%	Cost: 1.03437307
Open Date: 08/01/1972	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1972	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20949917
Entered Medicaid 08/01/1972	Low Occupancy Adjustment Factor:	104.26857%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02687131
Previous Med # 212873			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	704,493	959,913	700,697	268,662		2,633,765	
1a	Audit Adjustments							
2	Cost Per Diem	47.9606	65.3491	47.7022	18.2900		179.3019	
3	Cost Per Diem Inflated	49.6092	67.1051	49.3419				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.6092	67.1051	49.3419	18.2900		184.3462	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	47.4388		56.3577				
7	Provider Target Rate	48.4272		57.5320				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	48.4272	67.1051	49.3419	13.6500		178.5242	
12/13	Medical Adjustment Rate		2.4076	1.7703				
14	Prospective Per Diem 11	48.4272	69.5127	51.1122	13.6500		182.7021	
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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209.59

Rate Semester 07/01/2014 through 12/31/2014

University Center East

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	1,500,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	895,346 5.8132
RS to Start Calcs:	1972/07	<60% of Base:	False	20% ROE(2):	223,836 0.1703
Indexed Asset Value	1,119,182	Interest Rate:	11.5000%	Insurance Cost(3):	38,764 2.1611
FRVS Base Asset:	605,676	Chase Rate:	9.5000%	Taxes Cost(3):	11,734 0.6542
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	0 0.0000
ROE Factor	0.015000	Interest Only:	False	Replacement(3&4):	13,187 0.0000
		Yearly Payment:	114,579	Total FRVS PD:	8.7988

- (1) 80% Capital (\$895,346) amortized at 11.5000 % for 20 years Principal & Interest of \$114,579 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$5.8132
- (2) 20% ROE (\$223,836) times the ROE factor (0.015000) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.1703
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.4272	48.4272	0.8598	47.5674
Direct Care	69.5127	69.5127	1.2342	68.2785
Indirect Care	51.1122	51.1122	0.9075	50.2047
Property	13.6500	8.7988	0.1562	8.6426
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.9965
Supplemental Rate Add-on				9.9025
Totals	182.7021	177.8509	3.1577	209.5922

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 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2013

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209.59

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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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	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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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	

Message Code:



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Cross Landings Health and Rehab

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1780 N JEFFERSON ST	6/28/2011-1/31/2012	Number of Beds: 60	Superior: 0
MONTICELLO, FL 32344	Days in CR 218	Maximum: 13,080	Standard: 184
County: Jefferson [33]	First Used : 2011/01	Max Annualized: 21,900	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 10,880	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 1,829	Inflation
Current Class North Small	Initial CR? False	Medicaid: 7,492	FY Index: 1.26104493
Class at 1/94: North Small	Medical Utilization	68.86029%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	83.18043%	Cost: 1.06820373
Open Date: 05/01/1980	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/01/1980	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.19233184
Entered Medicaid 05/01/1980	Low Occupancy Adjustment Factor:	105.89340%	DC Sem Index: 1.24200000
Med # Active Date: 06/28/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04165632
Previous Med # 007014			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	384,939	713,435	453,960	210,151		1,762,484	
1a	Audit Adjustments							
2	Cost Per Diem	51.3800	95.2262	60.5926	28.0501		235.2489	
3	Cost Per Diem Inflated	54.8843	99.1930	64.7252				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.8843	99.1930	64.7252	28.0501		246.8526	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.3344		67.6146				
7	Provider Target Rate	58.5290		69.0234				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	55.2225		66.3203				
10b	Base for line 10a	54.0954		64.9667				
11	Lesser of 5,7,8,10, 10a	53.3690	93.7426	64.7252	13.6500		225.4868	
12/13	Medical Adjustment Rate		1.9890	1.3733				
14	Prospective Per Diem 11	53.3690	95.7316	66.0985	13.6500		228.8491	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Cross Landings Health and Rehab

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/2009	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	3,000,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	2,287,014	10.1774
RS to Start Calcs:	1980/01	<60% of Base:	False	20% ROE(2):	571,754	0.5543
Indexed Asset Value	2,858,768	Interest Rate:	6.5000%	Insurance Cost(3):	11,333	1.0416
FRVS Base Asset:	752,956	Chase Rate:	3.2500%	Taxes Cost(3):	9,874	0.9075
Occup Adj Factor	0.9000	Amortization Rate:	6.2500%	Home Office(3):	0	0.0000
ROE Factor	0.019110	Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	200,597	Total FRVS PD:		12.6808

- (1) 80% Capital (\$2,287,014) amortized at 6.2500 % for 20 years Principal & Interest of \$200,597 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$10.1774
- (2) 20% ROE (\$571,754) times the ROE factor (0.019110) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.5543
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3690	53.3690	0.9476	52.4214
Direct Care	95.7316	95.7316	1.6997	94.0319
Indirect Care	66.0985	66.0985	1.1736	64.9249
Property	13.6500	12.6808	0.2251	12.4557
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4388
Supplemental Rate Add-on				9.9025
Totals	228.8491	227.8799	4.0460	256.1752

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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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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256.18

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		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	68.86	2,842,642	3,048,780	
2014/01		0.30	0.8564	0.8564		60	68.86	2,849,945	3,074,880	
2014/07		0.25	1.2383	1.2383		60	68.86	2,858,768	3,112,980	

Message Code:

5 Uncorrected Licensure Deficiency 8 Limited to Current RS Per Bed Standard
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NC68L Report Calculated: 6/27/2014 4:14:19 PM

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Florida Agency for Health Care Administration
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253.29

Crosswinds Health and Rehab

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
13455 W US HWY 90	6/28/2011-1/31/2012	Number of Beds: 58	Superior: 0
GREENVILLE, FL 32331	Days in CR 218	Maximum: 12,644	Standard: 184
County: Madison [40]	First Used : 2011/01	Max Annualized: 21,170	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 11,332	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 1,349	Inflation
Current Class North Small	Initial CR? False	Medicaid: 9,764	FY Index: 1.26104493
Class at 1/94: North Small	Medical Utilization	86.16308%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	89.62354%	Cost: 1.06820373
Open Date: 06/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.19233184
Entered Medicaid 06/01/1983	Low Occupancy Adjustment Factor:	114.09584%	DC Sem Index: 1.24200000
Med # Active Date: 06/28/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04165632
Previous Med # 007012			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	488,258	944,523	579,919	202,701		2,215,401
1a	Audit Adjustments						
2	Cost Per Diem	50.0059	96.7353	59.3936	20.7600		226.8948
3	Cost Per Diem Inflated	53.4165	100.7649	63.4445			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	53.4165	100.7649	63.4445	20.7600		238.3859
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	55.8010		66.2767			
7	Provider Target Rate	56.9637		67.6576			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation	55.2225		66.8355			
10b	Base for line 10a	54.0954		65.4713			
11	Lesser of 5,7,8,10, 10a	53.3690	93.7426	63.4445	13.6500		224.2061
12/13	Medical Adjustment Rate		3.8138	2.5811			
14	Prospective Per Diem 11	53.3690	97.5564	66.0256	13.6500		230.6010
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Crosswinds Health and Rehab

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	3,000,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	1,358,810 6.2553
RS to Start Calcs:	1983/04	<60% of Base:	False	20% ROE(2):	339,702 0.3407
Indexed Asset Value	1,698,512	Interest Rate:	6.5000%	Insurance Cost(3):	10,902 0.9621
FRVS Base Asset:	721,404	Chase Rate:	3.2500%	Taxes Cost(3):	11,339 1.0006
Occup Adj Factor	0.9000	Amortization Rate:	6.2500%	Home Office(3):	0 0.0000
ROE Factor	0.019110	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	119,183	Total FRVS PD:	8.5587

- (1) 80% Capital (\$1,358,810) amortized at 6.2500 % for 20 years Principal & Interest of \$119,183 divided by annual available days (21170) divided by Occup. Adj. (0.900) = \$6.2553
- (2) 20% ROE (\$339,702) times the ROE factor (0.019110) divided by annual available days (21170) divided by Occup. Adj. (0.900) = \$0.3407
- (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:	51,883
Comparison Bed	58	Effective PBS Limitation	1,653,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3690	53.3690	0.9476	52.4214
Direct Care	97.5564	97.5564	1.7321	95.8243
Indirect Care	66.0256	66.0256	1.1723	64.8533
Property	13.6500	8.5587	0.1520	8.4067
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Quality Assess-Medicaid Share				21.8824
Totals	230.6010	225.5097	4.0040	253.2906

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	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	94.84	1,622,812	2,761,786	
2009/07		0.65	0.6841	0.6841		58	94.84	1,630,029	2,780,694	
2010/01		0.65	0.8643	0.8643		58	94.84	1,639,187	2,804,706	
2010/07		0.60	0.7107	0.7107		58	94.84	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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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	86.16	1,683,652	2,947,154	
2014/01		0.45	0.8564	0.8564		58	86.16	1,690,141	2,972,384	
2014/07		0.40	1.2383	1.2383		58	86.16	1,698,512	3,009,214	

Message Code:

5 Uncorrected Licensure Deficiency

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Florida Agency for Health Care Administration
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0 043832-00 - 2014/07

208.20

Heron Pointe Health and Rehabilitation

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1445 HOWELL AVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
BROOKSVILLE, FL 34601	Days in CR 182	Maximum: 21,840	Standard: 184
County: Hernando [27]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 20,665	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,929	Inflation
Current Class North Large	Initial CR? False	Medicaid: 14,266	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	69.03460%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.61996%	Cost: 1.05319853
Open Date: 11/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 11/01/1984	Low Occupancy Adjustment Factor:	120.45657%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252174			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	625,765	948,318	700,318	264,777		2,539,177	
1a	Audit Adjustments							
2	Cost Per Diem	43.8641	66.4740	49.0900	18.5600		177.9881	
3	Cost Per Diem Inflated	46.1976	68.7529	51.7015				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.1976	68.7529	51.7015	18.5600		185.2120	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	47.8314		53.5299				
7	Provider Target Rate	48.8280		54.6452				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	46.5593		58.7039				
10b	Base for line 10a	45.6090		57.5057				
11	Lesser of 5,7,8,10, 10a	46.1976	68.7529	51.7015	13.6500		180.3020	
12/13	Medical Adjustment Rate		1.4723	1.1071				
14	Prospective Per Diem 11	46.1976	70.2252	52.8086	13.6500		182.8814	
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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208.20

Rate Semester 07/01/2014 through 12/31/2014

Heron Pointe Health and Rehabilitation

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:	1,980,521.00		Total Amount	Per Diem
RS to Start Calcs:	1984/07	Type:	Fixed	80% Capital(1):	2,862,164	7.1528
Indexed Asset Value	3,577,705	<60% of Base:	False	20% ROE(2):	715,541	0.2837
FRVS Base Asset:	2,054,536	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7668
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	28,309	1.3699
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	6,918	0.3348
		Interest Only:	False	Replacement(3&4):	36,764	0.0000
		Yearly Payment:	281,963	Total FRVS PD:		9.9080

- (1) 80% Capital (\$2,862,164) amortized at 7.7500 % for 20 years Principal & Interest of \$281,963 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.1528
- (2) 20% ROE (\$715,541) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2837
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.1976	46.1976	0.8202	45.3774
Direct Care	70.2252	70.2252	1.2469	68.9783
Indirect Care	52.8086	52.8086	0.9376	51.8710
Property	13.6500	9.9080	0.1759	9.7321
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.3405
Supplemental Rate Add-on				9.9025
Totals	182.8814	179.1394	3.1806	208.2018

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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208.20

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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043832073120120201201207302013133438



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Heritage Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
3101 GINGER DRIVE	2/1/2012-7/31/2012	Number of Beds: 180	Superior: 0
TALLAHASSEE, FL 32308	Days in CR 182	Maximum: 32,760	Standard: 184
County: Leon [37]	First Used : 2012/01	Max Annualized: 65,700	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 28,804	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,583	Inflation
Current Class North Large	Initial CR? False	Medicaid: 19,614	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	68.09471%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	87.92430%	Cost: 1.05319853
Open Date: 10/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 10/01/1983	Low Occupancy Adjustment Factor:	111.93261%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252298			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	837,178	1,384,732	900,050	558,803		3,680,763
1a	Audit Adjustments						
2	Cost Per Diem	42.6827	70.5992	45.8881	28.4900		187.6600
3	Cost Per Diem Inflated	44.9534	73.0195	48.3293			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	44.9534	73.0195	48.3293	28.4900		194.7922
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	46.5432		50.0385			
7	Provider Target Rate	47.5130		51.0811			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	47.6975		53.3971			
10b	Base for line 10a	46.7240		52.3072			
11	Lesser of 5,7,8,10, 10a	44.9534	73.0195	48.3293	13.6500		179.9522
12/13	Medical Adjustment Rate		1.4864	0.9838			
14	Prospective Per Diem 11	44.9534	74.5059	49.3131	13.6500		182.4224
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Heritage Healthcare Center

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):	6,748,774 11.2438
Indexed Asset Value	8,435,967	<60% of Base:	False	20% ROE(2):	1,687,193 0.4460
FRVS Base Asset:	3,249,000	Interest Rate:	10.6343%	Insurance Cost(3):	24,559 0.8526
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	45,346 1.5743
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	9,877 0.3429
		Interest Only:	False	Replacement(3&4):	441,537 0.0000
		Yearly Payment:	664,848	Total FRVS PD:	14.4596

- (1) 80% Capital (\$6,748,774) amortized at 7.7500 % for 20 years Principal & Interest of \$664,848 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$11.2438
 (2) 20% ROE (\$1,687,193) times the ROE factor (0.015630) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.4460
 (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:	51,883
Comparison Bed	114	Effective PBS Limitation	3,249,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.9534	44.9534	0.7982	44.1552
Direct Care	74.5059	74.5059	1.3229	73.1830
Indirect Care	49.3131	49.3131	0.8756	48.4375
Property	13.6500	14.4596	0.2567	14.2029
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4971
Supplemental Rate Add-on				9.9025
Totals	182.4224	183.2320	3.2534	212.3782

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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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233.20

Heritage Health 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1026 ALBEE FARM RD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
VENICE, FL 34285	Days in CR 182	Maximum: 21,840	Standard: 184
County: Sarasota [58]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 19,892	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,558	Inflation
Current Class South Large	Initial CR? False	Medicaid: 14,767	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	74.23587%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.08059%	Cost: 1.05319853
Open Date: 12/29/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/29/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 12/29/1983	Low Occupancy Adjustment Factor:	115.95075%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252271			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	697,782	1,119,992	784,227	373,310		2,975,311	
1a	Audit Adjustments							
2	Cost Per Diem	47.2528	75.8443	53.1067	25.2800		201.4838	
3	Cost Per Diem Inflated	49.7666	78.4444	55.9319				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.7666	78.4444	55.9319	25.2800		209.4229	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.5265		57.9099				
7	Provider Target Rate	52.6001		59.1165				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	52.4375		61.4499				
10b	Base for line 10a	51.3672		60.1957				
11	Lesser of 5,7,8,10, 10a	49.7666	78.4444	55.9319	13.6500		197.7929	
12/13	Medical Adjustment Rate		2.1388	1.5250				
14	Prospective Per Diem 11	49.7666	80.5832	57.4569	13.6500		201.4567	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Heritage Health Care 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):	4,479,414 11.1944
Indexed Asset Value	5,599,268	<60% of Base:	False	20% ROE(2):	1,119,854 0.4440
FRVS Base Asset:	3,249,000	Interest Rate:	10.6343%	Insurance Cost(3):	16,689 0.8390
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	35,937 1.8066
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,432 0.3736
		Interest Only:	False	Replacement(3&4):	19,969 0.0000
		Yearly Payment:	441,284	Total FRVS PD:	14.6576

- (1) 80% Capital (\$4,479,414) amortized at 7.7500 % for 20 years Principal & Interest of \$441,284 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.1944
- (2) 20% ROE (\$1,119,854) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4440
- (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:	51,883
Comparison Bed	114	Effective PBS Limitation	3,249,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.7666	49.7666	0.8836	48.8830
Direct Care	80.5832	80.5832	1.4308	79.1524
Indirect Care	57.4569	57.4569	1.0202	56.4367
Property	13.6500	14.6576	0.2602	14.3974
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.4248
Supplemental Rate Add-on				9.9025
Totals	201.4567	202.4643	3.5948	233.1968

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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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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043835073120120201201207312013163157



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Heritage Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
777 9TH ST N	2/1/2012-7/31/2012	Number of Beds: 97	Superior: 0
NAPLES, FL 34102	Days in CR 182	Maximum: 17,654	Standard: 184
County: Collier [11]	First Used : 2012/01	Max Annualized: 35,405	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 16,281	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,610	Inflation
Current Class South Small	Initial CR? False	Medicaid: 10,442	FY Index: 1.27901138
Class at 1/94: South Small	Medical Utilization	64.13611%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.22273%	Cost: 1.05319853
Open Date: 11/01/1981	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1981	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 10/01/1982	Low Occupancy Adjustment Factor:	117.40476%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252280			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	548,537	876,997	618,681	302,191		2,346,405	
1a	Audit Adjustments							
2	Cost Per Diem	52.5318	83.9874	59.2493	28.9400		224.7085	
3	Cost Per Diem Inflated	55.3264	86.8667	62.4013				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.3264	86.8667	62.4013	28.9400		233.5344	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.2830		66.9470				
7	Provider Target Rate	58.4765		68.3419				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	57.6040		69.3103				
10b	Base for line 10a	56.4283		67.8956				
11	Lesser of 5,7,8,10, 10a	55.3264	86.8667	62.4013	13.6500		218.2444	
12/13	Medical Adjustment Rate		1.3815	0.9924				
14	Prospective Per Diem 11	55.3264	88.2482	63.3937	13.6500		220.6183	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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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):	3,729,215	11.5294
Indexed Asset Value	4,661,519	<60% of Base:	False	20% ROE(2):	932,304	0.4573
FRVS Base Asset:	3,220,500	Interest Rate:	10.6343%	Insurance Cost(3):	17,535	1.0770
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	14,539	0.8930
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	6,890	0.4232
		Interest Only:	False	Replacement(3&4):	39,622	0.0000
		Yearly Payment:	367,379	Total FRVS PD:		14.3799

- (1) 80% Capital (\$3,729,215) amortized at 7.7500 % for 20 years Principal & Interest of \$367,379 divided by annual available days (35405) divided by Occup. Adj. (0.900) = \$11.5294
- (2) 20% ROE (\$932,304) times the ROE factor (0.015630) divided by annual available days (35405) divided by Occup. Adj. (0.900) = \$0.4573
- (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:	51,883
Comparison Bed	113	Effective PBS Limitation	3,220,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.3264	55.3264	0.9823	54.3441
Direct Care	88.2482	88.2482	1.5669	86.6813
Indirect Care	63.3937	63.3937	1.1256	62.2681
Property	13.6500	14.3799	0.2553	14.1246
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4269
Supplemental Rate Add-on				9.9025
Totals	220.6183	221.3482	3.9301	249.7475

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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249.75

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043838073120120201201207312013164443



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 043839-00 - 2014/07

214.09

Keystone Rehabilitation and Health 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1120 WEST DONEGAN AVENUE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
KISSIMMEE, FL 34741	Days in CR 182	Maximum: 21,840	Standard: 184
County: Osceola [49]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 21,090	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,181	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 13,522	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	64.11569%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.56593%	Cost: 1.05319853
Open Date: 10/19/2006	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/19/2006	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 10/19/2006	Low Occupancy Adjustment Factor:	122.93390%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 317560			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	600,874	944,393	682,523	371,855		2,599,644	
1a	Audit Adjustments							
2	Cost Per Diem	44.4368	69.8412	50.4750	27.5000		192.2530	
3	Cost Per Diem Inflated	46.8008	72.2355	53.1602				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.8008	72.2355	53.1602	27.5000		199.6965	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.4558		55.0403				
7	Provider Target Rate	49.4654		56.1871				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	49.9715		59.5387				
10b	Base for line 10a	48.9515		58.3235				
11	Lesser of 5,7,8,10, 10a	46.8008	72.2355	53.1602	13.6500		185.8465	
12/13	Medical Adjustment Rate		1.1471	0.8442				
14	Prospective Per Diem 11	46.8008	73.3826	54.0044	13.6500		187.8378	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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 Computation of Nursing Home Medicaid Reimbursement Rate

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214.09

Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	0.00		Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	4,579,878	9.4962
RS to Start Calcs:	2006/07	<60% of Base:	True	20% ROE(2):	1,144,969	0.4540
Indexed Asset Value	5,724,847	Interest Rate:	8.2500%	Insurance Cost(3):	16,505	0.7826
FRVS Base Asset:	5,397,720	Chase Rate:	8.2500%	Taxes Cost(3):	34,021	1.6131
Occup Adj Factor	0.9000	Amortization Rate:	8.2500%	Home Office(3):	7,900	0.3746
ROE Factor	0.015630	Interest Only:	True	Replacement(3&4):	23,373	0.0000
		Yearly Payment:	374,341	Total FRVS PD:		12.7205

- (1) 80% Capital (\$4,579,878) amortized at 8.2500 % for 20 years Interest of \$374,341 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.4962
 (2) 20% ROE (\$1,144,969) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4540
 (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:	44,981
Comparison Date:	01/01/2006	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	5,397,720

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.8008	46.8008	0.8310	45.9698
Direct Care	73.3826	73.3826	1.3029	72.0797
Indirect Care	54.0044	54.0044	0.9589	53.0455
Property	13.6500	12.7205	0.2259	12.4946
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.6020
Supplemental Rate Add-on				9.9025
Totals	187.8378	186.9083	3.3187	214.0941

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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214.09

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

0 043841-00 - 2014/07

222.47

Oakbridge Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
3110 OAKBRIDGE BLVD E	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
LAKELAND, FL 33803	Days in CR 182	Maximum: 21,840	Standard: 184
County: Polk [53]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 20,298	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,757	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 6,651	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	32.76678%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.93956%	Cost: 1.05319853
Open Date: 07/11/1991	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/11/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 08/02/1991	Low Occupancy Adjustment Factor:	118.31732%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 259926			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	344,622	497,075	392,417	145,524		1,379,638
1a	Audit Adjustments						
2	Cost Per Diem	51.8151	74.7369	59.0012	21.8800		207.4332
3	Cost Per Diem Inflated	54.5716	77.2990	62.1400			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	54.5716	77.2990	62.1400	21.8800		215.8906
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	56.5015		64.3376			
7	Provider Target Rate	57.6788		65.6781			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	51.0475		64.2331			
10b	Base for line 10a	50.0056		62.9221			
11	Lesser of 5,7,8,10, 10a	51.0475	77.2990	61.9692	13.6500		203.9657
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	51.0475	77.2990	61.9692	13.6500		203.9657
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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222.47

Rate Semester 07/01/2014 through 12/31/2014

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):	4,703,714	8.9739
Indexed Asset Value	5,879,642	<60% of Base:	False	20% ROE(2):	1,175,928	0.4663
FRVS Base Asset:	3,663,600	Interest Rate:	4.3900%	Insurance Cost(3):	15,845	0.7806
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	27,158	1.3380
ROE Factor	0.015630	Amortization Rate:	4.3900%	Home Office(3):	10,489	0.5168
		Interest Only:	False	Replacement(3&4):	34,516	0.0000
		Yearly Payment:	353,753	Total FRVS PD:		12.0756

- (1) 80% Capital (\$4,703,714) amortized at 4.3900 % for 20 years Principal & Interest of \$353,753 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$8.9739
 (2) 20% ROE (\$1,175,928) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4663
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,663,600

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.0475	51.0475	0.9064	50.1411
Direct Care	77.2990	77.2990	1.3725	75.9265
Indirect Care	61.9692	61.9692	1.1003	60.8689
Property	13.6500	12.0756	0.2144	11.8612
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.7736
Supplemental Rate Add-on				9.9025
Totals	203.9657	202.3913	3.5936	222.4738

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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222.47

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 043843-00 - 2014/07

227.67

Oaktree Healthcare

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
650 REED CANAL ROAD	2/1/2012-7/31/2012	Number of Beds: 65	Superior: 0
SOUTH DAYTONA , FL	Days in CR 182	Maximum: 11,830	Standard: 184
32119	First Used : 2012/01	Max Annualized: 23,725	Conditional: 0
County: Volusia [64]	Last Used: 2014/07	Total Patient: 10,063	Total: 184
Region: North Area: 4	Unaudited	Medicare: 305	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 7,936	FY Index: 1.27901138
Current Class North Small	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: North Small	Occupancy:	78.86316%	Cost: 1.05319853
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	85.06340%	Target: 1.01458517
Open Date: 09/01/1981	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20083276
Acquired Date: 09/01/1981	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 09/01/1981	Weighted Low Occ Adjustment Factor:	108.29053%	DC Inflation: 1.03428224
Med # Active Date: 02/01/2012		100.00000%	PS Target: 1.02083595
Previous Med # 252476			

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	395,128	572,394	420,546	92,851		1,480,919	
1a	Audit Adjustments							
2	Cost Per Diem	49.7893	72.1263	52.9922	11.7000		186.6078	
3	Cost Per Diem Inflated	52.4380	74.5990	55.8113				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.4380	74.5990	55.8113	11.7000		194.5483	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.2924		57.7849				
7	Provider Target Rate	55.4236		58.9889				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	54.1827		62.0307				
10b	Base for line 10a	53.0768		60.7646				
11	Lesser of 5,7,8,10, 10a	52.4380	74.5990	55.8113	11.7000		194.5483	
12/13	Medical Adjustment Rate		2.4223	1.8123				
14	Prospective Per Diem 11	52.4380	77.0213	57.6236	11.7000		198.7829	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	1,420,224 6.5525
Indexed Asset Value	1,775,280	<60% of Base:	False	20% ROE(2):	355,056 0.2599
FRVS Base Asset:	915,382	Interest Rate:	10.6343%	Insurance Cost(3):	8,583 0.8529
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	4,796 0.4766
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	3,506 0.3484
		Interest Only:	False	Replacement(3&4):	23,646 0.0000
		Yearly Payment:	139,912	Total FRVS PD:	8.4903

- (1) 80% Capital (\$1,420,224) amortized at 7.7500 % for 20 years Principal & Interest of \$139,912 divided by annual available days (23725) divided by Occup. Adj. (0.900) = \$6.5525
 (2) 20% ROE (\$355,056) times the ROE factor (0.015630) divided by annual available days (23725) divided by Occup. Adj. (0.900) = \$0.2599
 (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:	51,883
Comparison Bed	65	Effective PBS Limitation	1,852,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.4380	52.4380	0.9310	51.5070
Direct Care	77.0213	77.0213	1.3675	75.6538
Indirect Care	57.6236	57.6236	1.0231	56.6005
Property	11.7000	8.4903	0.1507	8.3396
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				25.6663
Supplemental Rate Add-on				9.9025
Totals	198.7829	195.5732	3.4723	227.6697

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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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	

Message Code:



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Rio Pinar Health Care

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
7950 LAKE UNDERHILL ROAD	2/1/2012-7/31/2012	Number of Beds: 180	Superior: 0
ORLANDO, FL 32822	Days in CR 182	Maximum: 32,760	Standard: 184
County: Orange [48]	First Used : 2012/01	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 31,386	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,971	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 22,100	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	70.41356%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.80586%	Cost: 1.05319853
Open Date: 02/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 02/01/1987	Low Occupancy Adjustment Factor:	121.96629%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252450			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	941,741	1,748,933	1,087,455	507,858		4,285,987	
1a	Audit Adjustments							
2	Cost Per Diem	42.6127	79.1373	49.2061	22.9800		193.9361	
3	Cost Per Diem Inflated	44.8796	81.8503	51.8238				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.8796	81.8503	51.8238	22.9800		201.5337	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.4668		53.6566				
7	Provider Target Rate	47.4350		54.7746				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	47.4290		57.0913				
10b	Base for line 10a	46.4609		55.9260				
11	Lesser of 5,7,8,10, 10a	44.8796	81.8503	51.8238	13.6500		192.2037	
12/13	Medical Adjustment Rate		1.8797	1.1901				
14	Prospective Per Diem 11	44.8796	83.7300	53.0139	13.6500		195.2735	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	6,751,997 11.3339
RS to Start Calcs:	1987/01	<60% of Base:	True	20% ROE(2):	1,687,999 0.4462
Indexed Asset Value	8,439,996	Interest Rate:	10.0000%	Insurance Cost(3):	23,768 0.7573
FRVS Base Asset:	5,162,760	Chase Rate:	10.0000%	Taxes Cost(3):	58,453 1.8624
Occup Adj Factor	0.9000	Amortization Rate:	10.0000%	Home Office(3):	11,823 0.3767
ROE Factor	0.015630	Interest Only:	True	Replacement(3&4):	26,434 0.0000
		Yearly Payment:	670,171	Total FRVS PD:	14.7765

- (1) 80% Capital (\$6,751,997) amortized at 10.0000 % for 20 years Interest of \$670,171 divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$11.3339
- (2) 20% ROE (\$1,687,999) times the ROE factor (0.015630) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.4462
- (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:	51,883
Comparison Bed	180	Effective PBS Limitation	5,162,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.8796	44.8796	0.7968	44.0828
Direct Care	83.7300	83.7300	1.4866	82.2434
Indirect Care	53.0139	53.0139	0.9413	52.0726
Property	13.6500	14.7765	0.2624	14.5141
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.3699
Supplemental Rate Add-on				9.9025
Totals	195.2735	196.4000	3.4871	224.1853

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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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	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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Florida Agency for Health Care Administration
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The Palms Rehabilitation and Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
5405 BABCOCK ST NE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
PALM BAY, FL 32905	Days in CR 182	Maximum: 21,840	Standard: 184
County: Brevard [5]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 20,850	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,886	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 12,569	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	60.28297%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.46703%	Cost: 1.05319853
Open Date: 03/11/1998	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/11/1998	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 03/11/1998	Low Occupancy Adjustment Factor:	121.53494%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252395			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	562,385	1,001,591	631,775	325,663		2,521,413	
1a	Audit Adjustments							
2	Cost Per Diem	44.7438	79.6874	50.2645	25.9100		200.6057	
3	Cost Per Diem Inflated	47.1241	82.4193	52.9385				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.1241	82.4193	52.9385	25.9100		208.3919	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.7907		54.8107				
7	Provider Target Rate	49.8073		55.9527				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	49.7219		58.5518				
10b	Base for line 10a	48.7070		57.3567				
11	Lesser of 5,7,8,10, 10a	47.1241	82.4193	52.9385	13.6500		196.1319	
12/13	Medical Adjustment Rate		0.9535	0.6124				
14	Prospective Per Diem 11	47.1241	83.3728	53.5509	13.6500		197.6978	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,468,566	11.1673
Indexed Asset Value	5,585,708	<60% of Base:	False	20% ROE(2):	1,117,142	0.4429
FRVS Base Asset:	4,493,400	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7600
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	35,937	1.7236
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	8,431	0.4044
		Interest Only:	False	Replacement(3&4):	29,844	0.0000
		Yearly Payment:	440,216	Total FRVS PD:		14.4982

- (1) 80% Capital (\$4,468,566) amortized at 7.7500 % for 20 years Principal & Interest of \$440,216 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.1673
 (2) 20% ROE (\$1,117,142) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4429
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,493,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.1241	47.1241	0.8367	46.2874
Direct Care	83.3728	83.3728	1.4803	81.8925
Indirect Care	53.5509	53.5509	0.9508	52.6001
Property	13.6500	14.4982	0.2574	14.2408
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.3856
Supplemental Rate Add-on				9.9025
Totals	197.6978	198.5460	3.5252	225.3089

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
1998/01	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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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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043847073120120201201207312013105632



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Coral Trace Health Care

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
216 SANTA BARBARA BLVD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
CAPE CORAL, FL 33991	Days in CR 182	Maximum: 21,840	Standard: 184
County: Lee [36]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 20,556	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,669	Inflation
Current Class South Large	Initial CR? False	Medicaid: 10,760	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	52.34481%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.12088%	Cost: 1.05319853
Open Date: 11/03/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/03/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 11/03/1987	Low Occupancy Adjustment Factor:	119.82121%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252107			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	503,884	795,766	544,377	338,725		2,182,752	
1a	Audit Adjustments							
2	Cost Per Diem	46.8294	73.9560	50.5927	31.4800		202.8581	
3	Cost Per Diem Inflated	49.3207	76.4914	53.2842				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.3207	76.4914	53.2842	31.4800		210.5763	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.0649		55.1685				
7	Provider Target Rate	52.1289		56.3180				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	52.4375		61.5661				
10b	Base for line 10a	51.3672		60.3095				
11	Lesser of 5,7,8,10, 10a	49.3207	76.4914	53.2842	13.6500		192.7463	
12/13	Medical Adjustment Rate		0.2018	0.1406				
14	Prospective Per Diem 11	49.3207	76.6932	53.4248	13.6500		193.0887	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Coral Trace Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/01/2001	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	3,232,534.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,827,222	12.0636
RS to Start Calcs:	1987/07	<60% of Base:	False	20% ROE(2):	1,206,806	0.4785
Indexed Asset Value	6,034,028	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7708
FRVS Base Asset:	3,503,400	Chase Rate:	4.7500%	Taxes Cost(3):	43,538	2.1180
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	8,649	0.4208
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	30,613	0.0000
		Yearly Payment:	475,548	Total FRVS PD:		15.8517

- (1) 80% Capital (\$4,827,222) amortized at 7.7500 % for 20 years Principal & Interest of \$475,548 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$12.0636
- (2) 20% ROE (\$1,206,806) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4785
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,503,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.3207	49.3207	0.8757	48.4450
Direct Care	76.6932	76.6932	1.3617	75.3315
Indirect Care	53.4248	53.4248	0.9486	52.4762
Property	13.6500	15.8517	0.2814	15.5703
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.5884
Supplemental Rate Add-on				9.9025
Totals	193.0887	195.2904	3.4674	220.3139

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	

Message Code:

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



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The Parks Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
9311 S ORANGE BLOSSOM TRAIL	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
ORLANDO, FL 32837	Days in CR 182	Maximum: 21,840	Standard: 184
County: Orange [48]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 19,982	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 1,940	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 15,177	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	75.95336%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.49267%	Cost: 1.05319853
Open Date: 09/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 09/01/1984	Low Occupancy Adjustment Factor:	116.47535%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 259934			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	774,647	1,102,700	775,574	331,617		2,984,537
1a	Audit Adjustments						
2	Cost Per Diem	51.0409	72.6560	51.1019	21.8500		196.6488
3	Cost Per Diem Inflated	53.7562	75.1468	53.8204			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	53.7562	75.1468	53.8204	21.8500		204.5734
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	55.6572		55.7238			
7	Provider Target Rate	56.8169		56.8849			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	50.2417		59.3403			
10b	Base for line 10a	49.2162		58.1291			
11	Lesser of 5,7,8,10, 10a	50.2417	75.1468	53.8204	13.6500		192.8589
12/13	Medical Adjustment Rate		2.1941	1.5714			
14	Prospective Per Diem 11	50.2417	77.3409	55.3918	13.6500		196.6244
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,760,529	9.0823
Indexed Asset Value	5,950,661	<60% of Base:	False	20% ROE(2):	1,190,132	0.4719
FRVS Base Asset:	2,893,663	Interest Rate:	4.3900%	Insurance Cost(3):	15,845	0.7930
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	41,720	2.0879
ROE Factor	0.015630	Amortization Rate:	4.3900%	Home Office(3):	7,894	0.3951
		Interest Only:	False	Replacement(3&4):	22,074	0.0000
		Yearly Payment:	358,026	Total FRVS PD:		12.8302

- (1) 80% Capital (\$4,760,529) amortized at 4.3900 % for 20 years Principal & Interest of \$358,026 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.0823
 (2) 20% ROE (\$1,190,132) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4719
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.2417	50.2417	0.8920	49.3497
Direct Care	77.3409	77.3409	1.3732	75.9677
Indirect Care	55.3918	55.3918	0.9835	54.4083
Property	13.6500	12.8302	0.2278	12.6024
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.7932
Supplemental Rate Add-on				9.9025
Totals	196.6244	195.8046	3.4765	225.0238

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	2,888,568	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	

Message Code:

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043850073120120201201207312013154841



Florida Agency for Health Care Administration
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Coral Bay Healthcare and Rehabilitation

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: Non-Related Party (NRP) CHOW	
Provider Information	Cost Report	Patient Days	Ratings Days
2939 SOUTH HAVERHILL ROAD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
WEST PALM BEACH , FL 33415	Days in CR 182	Maximum: 21,840	Standard: 184
County: Palm Beach [50]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 20,732	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,205	Inflation
Current Class South Large	Initial CR? False	Medicaid: 10,577	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	51.01775%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.92674%	Cost: 1.05319853
Open Date: 05/04/1993	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/04/1993	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 05/04/1993	Low Occupancy Adjustment Factor:	120.84712%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 259918			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	549,444	808,583	595,315	221,800		2,175,141	
1a	Audit Adjustments							
2	Cost Per Diem	51.9471	76.4473	56.2839	20.9700		205.6483	
3	Cost Per Diem Inflated	54.7106	79.0681	59.2781				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.7106	79.0681	59.2781	20.9700		214.0268	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.6454		61.3745				
7	Provider Target Rate	57.8257		62.6533				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	53.1553		63.8959				
10b	Base for line 10a	52.0704		62.5917				
11	Lesser of 5,7,8,10, 10a	53.1553	79.0681	59.2781	13.6500		205.1515	
12/13	Medical Adjustment Rate		0.0905	0.0679				
14	Prospective Per Diem 11	53.1553	79.1586	59.3460	13.6500		205.3099	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,779,735 9.1190
Indexed Asset Value	5,974,669	<60% of Base:	False	20% ROE(2):	1,194,934 0.4738
FRVS Base Asset:	3,861,960	Interest Rate:	4.3900%	Insurance Cost(3):	15,845 0.7643
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	33,656 1.6234
ROE Factor	0.015630	Amortization Rate:	4.3900%	Home Office(3):	9,304 0.4488
		Interest Only:	False	Replacement(3&4):	16,696 0.0000
		Yearly Payment:	359,471	Total FRVS PD:	12.4293

- (1) 80% Capital (\$4,779,735) amortized at 4.3900 % for 20 years Principal & Interest of \$359,471 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.1190
- (2) 20% ROE (\$1,194,934) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4738
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,861,960

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.1553	53.1553	0.9438	52.2115
Direct Care	79.1586	79.1586	1.4055	77.7531
Indirect Care	59.3460	59.3460	1.0537	58.2923
Property	13.6500	12.4293	0.2207	12.2086
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.5767
Supplemental Rate Add-on				9.9025
Totals	205.3099	204.0892	3.6237	230.9447

Medicaid Trend Adjustment



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230.94

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	4,383,120	4,383,120	5
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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0 043851-00 - 2014/07

230.94

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

- 1 Per Bed Standard Limitation
- 3 Index Cost Limitation - January 1996
- 5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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0 043853-00 - 2014/07

227.16

Plantation Bay 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
4641 OLD CANOE CREEK ROAD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
SAINT CLOUD, FL 34769	Days in CR 182	Maximum: 21,840	Standard: 184
County: Osceola [49]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 20,837	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,711	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 13,646	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	65.48927%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.40751%	Cost: 1.05319853
Open Date: 07/20/1995	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/20/1995	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 07/20/1995	Low Occupancy Adjustment Factor:	121.45916%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252441			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	621,865	1,084,954	699,446	291,342		2,697,607	
1a	Audit Adjustments							
2	Cost Per Diem	45.5712	79.5071	51.2565	21.3500		197.6848	
3	Cost Per Diem Inflated	47.9955	82.2328	53.9833				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.9955	82.2328	53.9833	21.3500		205.5616	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	49.6928		55.8924				
7	Provider Target Rate	50.7282		57.0570				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	50.2417		59.3403				
10b	Base for line 10a	49.2162		58.1291				
11	Lesser of 5,7,8,10, 10a	47.9955	82.2328	53.9833	13.6500		197.8616	
12/13	Medical Adjustment Rate		1.4329	0.9407				
14	Prospective Per Diem 11	47.9955	83.6657	54.9240	13.6500		200.2352	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	4,216,969.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,031,666	10.0755
RS to Start Calcs:	1995/07	<60% of Base:	False	20% ROE(2):	1,007,916	0.3996
Indexed Asset Value	5,039,582	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7604
FRVS Base Asset:	3,595,112	Chase Rate:	4.7500%	Taxes Cost(3):	33,620	1.6135
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	8,552	0.4104
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	24,244	0.0000
		Yearly Payment:	397,175	Total FRVS PD:		13.2594

- (1) 80% Capital (\$4,031,666) amortized at 7.7500 % for 20 years Principal & Interest of \$397,175 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.0755
- (2) 20% ROE (\$1,007,916) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3996
- (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:	34,904
Comparison Date: 01/01/1995	Current RS PBS:	51,883
Comparison Bed 103	Effective PBS Limitation	3,595,112

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.9955	47.9955	0.8522	47.1433
Direct Care	83.6657	83.6657	1.4855	82.1802
Indirect Care	54.9240	54.9240	0.9752	53.9488
Property	13.6500	13.2594	0.2354	13.0240
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9643
Supplemental Rate Add-on				9.9025
Totals	200.2352	199.8446	3.5483	227.1631

Medicaid Trend Adjustment



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227.16

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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227.16

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

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



Florida Agency for Health Care Administration
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225.66

Colonial Lakes Health Care

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: Non-Related Party (NRP) CHOW	
Provider Information	Cost Report	Patient Days	Ratings Days
15204 W COLONIAL DR	2/1/2012-7/31/2012	Number of Beds: 180	Superior: 0
WINTER GARDEN, FL 34787	Days in CR 182	Maximum: 32,760	Standard: 184
County: Orange [48]	First Used : 2012/01	Max Annualized: 65,700	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 31,109	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,255	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 24,564	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	78.96107%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.96032%	Cost: 1.05319853
Open Date: 06/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 06/01/1984	Low Occupancy Adjustment Factor:	120.88987%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252557			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,098,046	1,841,980	1,231,605	597,151		4,768,782	
1a	Audit Adjustments							
2	Cost Per Diem	44.7014	74.9870	50.1386	24.3100		194.1370	
3	Cost Per Diem Inflated	47.0794	77.5577	52.8059				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.0794	77.5577	52.8059	24.3100		201.7530	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.7444		54.6733				
7	Provider Target Rate	49.7600		55.8125				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	47.5931		57.9869				
10b	Base for line 10a	46.6217		56.8033				
11	Lesser of 5,7,8,10, 10a	47.0794	77.5577	52.8059	13.6500		191.0930	
12/13	Medical Adjustment Rate		2.5269	1.7205				
14	Prospective Per Diem 11	47.0794	80.0846	54.5264	13.6500		195.3404	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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225.66

Rate Semester 07/01/2014 through 12/31/2014

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):	6,884,506	11.4700
Indexed Asset Value	8,605,633	<60% of Base:	False	20% ROE(2):	1,721,127	0.4550
FRVS Base Asset:	3,287,398	Interest Rate:	10.6343%	Insurance Cost(3):	23,768	0.7640
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	32,452	1.0432
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	10,246	0.3294
		Interest Only:	False	Replacement(3&4):	81,251	0.0000
		Yearly Payment:	678,219	Total FRVS PD:		14.0616

- (1) 80% Capital (\$6,884,506) amortized at 7.7500 % for 20 years Principal & Interest of \$678,219 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$11.4700
- (2) 20% ROE (\$1,721,127) times the ROE factor (0.015630) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.4550
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.0794	47.0794	0.8359	46.2435
Direct Care	80.0846	80.0846	1.4219	78.6627
Indirect Care	54.5264	54.5264	0.9681	53.5583
Property	13.6500	14.0616	0.2497	13.8119
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.4808
Supplemental Rate Add-on				9.9025
Totals	195.3404	195.7520	3.4756	225.6597

Medicaid Trend Adjustment



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225.66

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
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225.66

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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225.66

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043854073120120201201207312013145920



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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216.88

Central Park Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
702 S KINGS AVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
BRANDON, FL 33511	Days in CR 182	Maximum: 21,840	Standard: 118
County: Hillsborough [29]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 66
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 21,162	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,466	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 11,893	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	56.19979%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.89560%	Cost: 1.05319853
Open Date: 02/25/1991	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/25/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 02/25/1991	Low Occupancy Adjustment Factor:	123.35359%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 259900			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	613,150	845,972	639,632	230,248		2,329,002	
1a	Audit Adjustments							
2	Cost Per Diem	51.5555	71.1319	53.7822	19.3600		195.8296	
3	Cost Per Diem Inflated	54.2982	73.5705	56.6433				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.2982	73.5705	56.6433	19.3600		203.8720	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.2184		58.6465				
7	Provider Target Rate	57.3898		59.8685				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	50.1117		59.3403				
10b	Base for line 10a	49.0889		58.1291				
11	Lesser of 5,7,8,10, 10a	50.1117	73.5705	56.6433	13.6500		193.9755	
12/13	Medical Adjustment Rate		0.3291	0.2534				
14	Prospective Per Diem 11	50.1117	73.8996	56.8967	13.6500		194.5580	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,259,678 8.1268
Indexed Asset Value	5,324,597	<60% of Base:	False	20% ROE(2):	1,064,919 0.4222
FRVS Base Asset:	3,642,240	Interest Rate:	4.3900%	Insurance Cost(3):	15,845 0.7487
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	27,973 1.3219
ROE Factor	0.015630	Amortization Rate:	4.3900%	Home Office(3):	9,215 0.4355
		Interest Only:	False	Replacement(3&4):	36,466 0.0000
		Yearly Payment:	320,359	Total FRVS PD:	11.0551

- (1) 80% Capital (\$4,259,678) amortized at 4.3900 % for 20 years Principal & Interest of \$320,359 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$8.1268
- (2) 20% ROE (\$1,064,919) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4222
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.1117	50.1117	0.8897	49.2220
Direct Care	73.8996	73.8996	1.3121	72.5875
Indirect Care	56.8967	56.8967	1.0102	55.8865
Property	13.6500	11.0551	0.1963	10.8588
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.4245
Supplemental Rate Add-on				9.9025
Totals	194.5580	191.9631	3.4083	216.8818

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	

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 07/01/2014 through 12/31/2014

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226.02

Beneva Lakes Healthcare and Rehabilitation Center
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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: Non-Related Party (NRP) CHOW	
Provider Information	Cost Report	Patient Days	Ratings Days
741 SOUTH BENEVA ROAD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
SARASOTA, FL 34232	Days in CR 182	Maximum: 21,840	Standard: 184
County: Sarasota [58]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 20,563	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,061	Inflation
Current Class South Large	Initial CR? False	Medicaid: 14,740	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	71.68215%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.15293%	Cost: 1.05319853
Open Date: 09/01/1982	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1982	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 09/01/1982	Low Occupancy Adjustment Factor:	119.86201%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 259896			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	752,759	1,087,515	796,389	333,714		2,970,377	
1a	Audit Adjustments							
2	Cost Per Diem	51.0691	73.7799	54.0291	22.6400		201.5181	
3	Cost Per Diem Inflated	53.7859	76.3092	56.9034				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.7859	76.3092	56.9034	22.6400		209.6385	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.6880		58.9156				
7	Provider Target Rate	56.8483		60.1432				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	49.3007		60.9719				
10b	Base for line 10a	48.2944		59.7274				
11	Lesser of 5,7,8,10, 10a	49.3007	76.3092	56.9034	13.6500		196.1633	
12/13	Medical Adjustment Rate		1.8614	1.3880				
14	Prospective Per Diem 11	49.3007	78.1706	58.2914	13.6500		199.4127	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,000,782	7.6329
Indexed Asset Value	5,000,978	<60% of Base:	False	20% ROE(2):	1,000,196	0.3966
FRVS Base Asset:	3,420,000	Interest Rate:	4.3900%	Insurance Cost(3):	15,845	0.7706
Occup Adj Factor	0.9000	Chase Rate:	4.2500%	Taxes Cost(3):	29,351	1.4274
ROE Factor	0.015630	Amortization Rate:	4.3900%	Home Office(3):	8,377	0.4074
		Interest Only:	False	Replacement(3&4):	35,648	0.0000
		Yearly Payment:	300,888	Total FRVS PD:		10.6349

- (1) 80% Capital (\$4,000,782) amortized at 4.3900 % for 20 years Principal & Interest of \$300,888 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.6329
 (2) 20% ROE (\$1,000,196) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3966
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.3007	49.3007	0.8753	48.4254
Direct Care	78.1706	78.1706	1.3879	76.7827
Indirect Care	58.2914	58.2914	1.0350	57.2564
Property	13.6500	10.6349	0.1888	10.4461
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.2028
Supplemental Rate Add-on				9.9025
Totals	199.4127	196.3976	3.4870	226.0159

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
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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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
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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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
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	

Message Code:

1 Per Bed Standard Limitation

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Florida Agency for Health Care Administration
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228.15

Bradenton Health Care

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
6305 CORTEZ RD W	2/1/2012-7/31/2012	Number of Beds: 105	Superior: 0
BRADENTON, FL 34210	Days in CR 182	Maximum: 19,110	Standard: 184
County: Manatee [41]	First Used : 2012/01	Max Annualized: 38,325	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 17,888	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,766	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 9,098	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	50.86091%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.60544%	Cost: 1.05319853
Open Date: 11/29/1999	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/29/1999	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 12/09/1999	Low Occupancy Adjustment Factor:	119.16503%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252069			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	414,975	734,218	492,863	279,036		1,921,092	
1a	Audit Adjustments							
2	Cost Per Diem	45.6117	80.7010	54.1727	30.6700		211.1554	
3	Cost Per Diem Inflated	48.0382	83.4676	57.0546				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.0382	83.4676	57.0546	30.6700		219.2304	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	49.7370		59.0724				
7	Provider Target Rate	50.7733		60.3032				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	50.2417		59.3403				
10b	Base for line 10a	49.2162		58.1291				
11	Lesser of 5,7,8,10, 10a	48.0382	83.4676	57.0546	13.6500		202.2104	
12/13	Medical Adjustment Rate		0.0808	0.0553				
14	Prospective Per Diem 11	48.0382	83.5484	57.1099	13.6500		202.3465	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Bradenton Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/09/1999	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	4,325,786.00		Total Amount	Per Diem
RS to Start Calcs:	1999/07	Type:	Fixed	80% Capital(1):	3,962,761	11.3180
Indexed Asset Value	4,953,451	<60% of Base:	False	20% ROE(2):	990,690	0.4489
FRVS Base Asset:	4,078,830	Interest Rate:	10.6343%	Insurance Cost(3):	13,864	0.7750
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	35,805	2.0016
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,754	0.4335
		Interest Only:	False	Replacement(3&4):	40,749	0.0000
		Yearly Payment:	390,387	Total FRVS PD:		14.9770

- (1) 80% Capital (\$3,962,761) amortized at 7.7500 % for 20 years Principal & Interest of \$390,387 divided by annual available days (38325) divided by Occup. Adj. (0.900) = \$11.3180
 (2) 20% ROE (\$990,690) times the ROE factor (0.015630) divided by annual available days (38325) divided by Occup. Adj. (0.900) = \$0.4489
 (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:	51,883
Comparison Bed	105	Effective PBS Limitation	4,078,830

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.0382	48.0382	0.8529	47.1853
Direct Care	83.5484	83.5484	1.4834	82.0650
Indirect Care	57.1099	57.1099	1.0140	56.0959
Property	13.6500	14.9770	0.2659	14.7111
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.1882
Supplemental Rate Add-on				9.9025
Totals	202.3465	203.6735	3.6162	228.1480

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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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	

Message Code:

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

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212.98

Brandon 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1465 OAKFIELD DR	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
BRANDON, FL 33511	Days in CR 182	Maximum: 21,840	Standard: 153
County: Hillsborough [29]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 31
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 20,764	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,801	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 7,781	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	37.47351%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.07326%	Cost: 1.05319853
Open Date: 05/07/1997	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/07/1997	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 05/07/1997	Low Occupancy Adjustment Factor:	121.03365%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252077			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	351,753	565,301	443,201	262,842		1,623,097
1a	Audit Adjustments						
2	Cost Per Diem	45.2067	72.6515	56.9594	33.7800		208.5976
3	Cost Per Diem Inflated	47.6116	75.1422	59.9896			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	47.6116	75.1422	59.9896	33.7800		216.5234
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.2955		62.1110			
7	Provider Target Rate	50.3226		63.4051			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	48.7056		59.3403			
10b	Base for line 10a	47.7115		58.1291			
11	Lesser of 5,7,8,10, 10a	47.6116	75.1422	59.3403	13.6500		195.7441
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	47.6116	75.1422	59.3403	13.6500		195.7441
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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Rate Semester 07/01/2014 through 12/31/2014

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):	4,195,965	10.4861
Indexed Asset Value	5,244,956	<60% of Base:	False	20% ROE(2):	1,048,991	0.4159
FRVS Base Asset:	4,237,016	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7631
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	38,327	1.8458
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	10,973	0.5285
		Interest Only:	False	Replacement(3&4):	27,209	0.0000
		Yearly Payment:	413,361	Total FRVS PD:		14.0394

- (1) 80% Capital (\$4,195,965) amortized at 7.7500 % for 20 years Principal & Interest of \$413,361 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.4861
- (2) 20% ROE (\$1,048,991) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4159
- (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:	36,526
Comparison Date: 07/01/1996	Current RS PBS:	51,883
Comparison Bed 116	Effective PBS Limitation	4,237,016

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.6116	47.6116	0.8453	46.7663
Direct Care	75.1422	75.1422	1.3342	73.8080
Indirect Care	59.3403	59.3403	1.0536	58.2867
Property	13.6500	14.0394	0.2493	13.7901
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				10.4235
Supplemental Rate Add-on				9.9025
Totals	195.7441	196.1335	3.4824	212.9771

Medicaid Trend Adjustment



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212.98

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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212.98

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	

Message Code:

1 Per Bed Standard Limitation

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242.11

Fort Pierce Health Care

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
611 S 13TH STREET	2/1/2012-7/31/2012	Number of Beds: 171	Superior: 0
FORT PIERCE, FL 34950-4054	Days in CR 182	Maximum: 31,122	Standard: 184
County: St Lucie [56]	First Used : 2012/01	Max Annualized: 62,415	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 26,073	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,566	Inflation
Current Class South Large	Initial CR? False	Medicaid: 22,187	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	85.09569%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	83.77675%	Cost: 1.05319853
Open Date: 06/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 06/01/1984	Low Occupancy Adjustment Factor:	106.65255%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252239			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,080,165	1,835,580	1,197,835	287,765		4,401,345	
1a	Audit Adjustments							
2	Cost Per Diem	48.6846	82.7322	53.9881	12.9700		198.3749	
3	Cost Per Diem Inflated	51.2745	85.5684	56.8602				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.2745	85.5684	56.8602	12.9700		206.6731	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	53.0879		58.8710				
7	Provider Target Rate	54.1940		60.0976				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	52.4375		61.7377				
10b	Base for line 10a	51.3672		60.4776				
11	Lesser of 5,7,8,10, 10a	51.2745	85.5684	56.8602	12.9700		206.6731	
12/13	Medical Adjustment Rate		3.3785	2.2450				
14	Prospective Per Diem 11	51.2745	88.9469	59.1052	12.9700		212.2966	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Fort Pierce Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	967,160.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,379,621 9.6933
RS to Start Calcs:	1984/01	<60% of Base:	True	20% ROE(2):	1,094,905 0.3047
Indexed Asset Value	5,474,526	Interest Rate:	12.5000%	Insurance Cost(3):	22,579 0.8660
FRVS Base Asset:	3,267,919	Chase Rate:	12.5000%	Taxes Cost(3):	31,275 1.1995
Occup Adj Factor	0.9000	Amortization Rate:	12.5000%	Home Office(3):	9,982 0.3828
ROE Factor	0.015630	Interest Only:	True	Replacement(3&4):	58,297 0.0000
		Yearly Payment:	544,507	Total FRVS PD:	12.4463

- (1) 80% Capital (\$4,379,621) amortized at 12.5000 % for 20 years Interest of \$544,507 divided by annual available days (62415) divided by Occup. Adj. (0.900) = \$9.6933
- (2) 20% ROE (\$1,094,905) times the ROE factor (0.015630) divided by annual available days (62415) divided by Occup. Adj. (0.900) = \$0.3047
- (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:	51,883
Comparison Bed 171	Effective PBS Limitation	4,873,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.2745	51.2745	0.9104	50.3641
Direct Care	88.9469	88.9469	1.5793	87.3676
Indirect Care	59.1052	59.1052	1.0494	58.0558
Property	12.9700	12.4463	0.2210	12.2253
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.1926
Supplemental Rate Add-on				9.9025
Totals	212.2966	211.7729	3.7601	242.1079

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	

Message Code:

5 Uncorrected Licensure Deficiency

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229.77

Habana Health Care Center

Type of Cost Report: Cost Settled 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
2916 HABANA WAY	2/1/2012-7/31/2012	Number of Beds: 150	Superior: 0
TAMPA, FL 33614	Days in CR 182	Maximum: 27,300	Standard: 184
County: Hillsborough [29]	First Used : 2012/01	Max Annualized: 54,750	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 26,284	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 923	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 22,188	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	84.41637%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.27839%	Cost: 1.05319853
Open Date: 06/01/1970	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1970	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 10/01/1980	Low Occupancy Adjustment Factor:	122.56784%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252506	Interim Component Effective Date:	07/01/2013	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	982,008	1,794,808	1,107,734	519,865		4,404,415	
1a	Audit Adjustments							
2	Cost Per Diem	44.2585	80.8909	49.9249	23.4300		198.5043	
3	Cost Per Diem Inflated	46.6130	83.6640	52.5808				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.6130	83.6640	52.5808	23.4300		206.2878	
5a	Interim Adjustment	0.0345	1.3288	0.7155				
5b	Interim Adjusted Per Diem	46.6475	84.9928	53.2963				
6	Prior Semester: Provider Target Base	48.2614		54.4403				
7	Provider Target Rate	49.2670		55.5746				
7a	Interim Adjustment	0.0345		0.7155				
7b	Interim Adjustment Provider Target Rate	49.3015		56.2901				
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	48.6753		58.8706				
10b	Base for line 10a	47.6480		56.9681				
11	Lesser of 5,7,8,10, 10a	46.6475	84.9928	53.2963	13.6500		198.5866	
12/13	Medical Adjustment Rate		3.2908	2.0635				
14	Prospective Per Diem 11	46.6475	88.2836	55.3598	13.6500		203.9409	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	3,000,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	3,576,527 7.1504
RS to Start Calcs:	1971/07	<60% of Base:	False	20% ROE(2):	894,132 0.2836
Indexed Asset Value	4,470,659	Interest Rate:	10.6343%	Insurance Cost(3):	19,806 0.7535
FRVS Base Asset:	2,111,676	Chase Rate:	4.7500%	Taxes Cost(3):	23,000 0.8751
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	9,946 0.3784
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	29,866 0.0000
		Yearly Payment:	352,337	Total FRVS PD:	9.4410

- (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. (0.900) = \$7.1504
- (2) 20% ROE (\$894,132) times the ROE factor (0.015630) divided by annual available days (54750) divided by Occup. Adj. (0.900) = \$0.2836
- (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:	51,883
Comparison Bed 150	Effective PBS Limitation	4,275,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.6475	46.6475	0.8282	45.8193
Direct Care	88.2836	88.2836	1.5675	86.7161
Indirect Care	55.3598	55.3598	0.9829	54.3769
Property	13.6500	9.4410	0.1676	9.2734
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.6863
Supplemental Rate Add-on				9.9025
Totals	203.9409	199.7319	3.5462	229.7745

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	

Message Code:

5 Uncorrected Licensure Deficiency



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The Health and Rehabilitation Centre at Dolphins View

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1820 SHORE DR S	2/1/2012-7/31/2012	Number of Beds: 58	Superior: 0
SOUTH PASADENA, FL 33707	Days in CR 182	Maximum: 10,556	Standard: 184
County: Pinellas [52]	First Used : 2012/01	Max Annualized: 21,170	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 8,930	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,003	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 3,708	FY Index: 1.27901138
Class at 1/94: North Small	Medical Utilization	41.52296%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	84.59644%	Cost: 1.05319853
Open Date: 11/30/1989	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/01/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 04/01/1991	Low Occupancy Adjustment Factor:	107.69606%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 320528			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	218,221	302,673	228,201	90,698		839,793	
1a	Audit Adjustments							
2	Cost Per Diem	58.8514	81.6270	61.5429	24.4601		226.4814	
3	Cost Per Diem Inflated	61.9822	84.4254	64.8169				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	61.9822	84.4254	64.8169	24.4601		235.6846	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	64.1742		67.1092				
7	Provider Target Rate	65.5113		68.5075				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	59.5994		70.9496				
10b	Base for line 10a	58.3829		69.5015				
11	Lesser of 5,7,8,10, 10a	58.1332	84.4254	64.8169	13.6500		221.0255	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	58.1332	84.4254	64.8169	13.6500		221.0255	
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):	1,403,009	8.9710
Indexed Asset Value	1,753,761	<60% of Base:	False	20% ROE(2):	350,752	0.2877
FRVS Base Asset:	1,250,000	Interest Rate:	10.7500%	Insurance Cost(3):	11,328	1.2685
Occup Adj Factor	0.9000	Chase Rate:	10.5000%	Taxes Cost(3):	10,135	1.1349
ROE Factor	0.015630	Amortization Rate:	10.7500%	Home Office(3):	4,445	0.4978
		Interest Only:	False	Replacement(3&4):	25,655	0.0000
		Yearly Payment:	170,925	Total FRVS PD:		12.1599

- (1) 80% Capital (\$1,403,009) amortized at 10.7500 % for 20 years Principal & Interest of \$170,925 divided by annual available days (21170) divided by Occup. Adj. (0.900) = \$8.9710
- (2) 20% ROE (\$350,752) times the ROE factor (0.015630) divided by annual available days (21170) divided by Occup. Adj. (0.900) = \$0.2877
- (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:	51,883
Comparison Bed	58	Effective PBS Limitation	1,729,618

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	58.1332	58.1332	1.0322	57.1010
Direct Care	84.4254	84.4254	1.4990	82.9264
Indirect Care	64.8169	64.8169	1.1508	63.6661
Property	13.6500	12.1599	0.2159	11.9440
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7570
Supplemental Rate Add-on				9.9025
Totals	221.0255	219.5354	3.8979	245.2970

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	

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 07/01/2014 through 12/31/2014

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211.54

Grand Oaks 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
3001 PALM COAST PARKWAY SE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
PALM COAST, FL 32137	Days in CR 182	Maximum: 21,840	Standard: 184
County: Flagler [18]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 21,082	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,773	Inflation
Current Class North Large	Initial CR? False	Medicaid: 7,734	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	36.68532%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.52930%	Cost: 1.05319853
Open Date: 05/16/1997	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/16/1997	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 05/16/1997	Low Occupancy Adjustment Factor:	122.88727%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252409			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	362,904	564,742	386,625	260,790		1,575,060	
1a	Audit Adjustments							
2	Cost Per Diem	46.9232	73.0206	49.9903	33.7199		203.6540	
3	Cost Per Diem Inflated	49.4194	75.5239	52.6497				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.4194	75.5239	52.6497	33.7199		211.3129	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	51.1672		54.5118				
7	Provider Target Rate	52.2333		55.6476				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	48.4519		57.2928				
10b	Base for line 10a	47.4630		56.1234				
11	Lesser of 5,7,8,10, 10a	48.4519	75.5239	52.6497	13.6500		190.2755	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	48.4519	75.5239	52.6497	13.6500		190.2755	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,407,348	11.0143
Indexed Asset Value	5,509,185	<60% of Base:	False	20% ROE(2):	1,101,837	0.4369
FRVS Base Asset:	4,383,120	Interest Rate:	10.6343%	Insurance Cost(3):	17,115	0.8118
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	39,224	1.8605
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	9,985	0.4736
		Interest Only:	False	Replacement(3&4):	156,559	0.0000
		Yearly Payment:	434,185	Total FRVS PD:		14.5971

- (1) 80% Capital (\$4,407,348) amortized at 7.7500 % for 20 years Principal & Interest of \$434,185 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.0143
 (2) 20% ROE (\$1,101,837) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4369
 (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:	36,526
Comparison Date:	07/01/1996	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	4,383,120

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.4519	48.4519	0.8603	47.5916
Direct Care	75.5239	75.5239	1.3409	74.1830
Indirect Care	52.6497	52.6497	0.9348	51.7149
Property	13.6500	14.5971	0.2592	14.3379
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.8056
Supplemental Rate Add-on				9.9025
Totals	190.2755	191.2226	3.3952	211.5355

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 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2012

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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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043864073120120201201207312013110839



Florida Agency for Health Care Administration
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Harts Harbor Health 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
11565 HARTS ROAD	2/1/2012-7/31/2012	Number of Beds: 180	Superior: 0
JACKSONVILLE , FL 32218	Days in CR 182	Maximum: 32,760	Standard: 184
County: Duval [16]	First Used : 2012/01	Max Annualized: 65,700	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 31,793	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,572	Inflation
Current Class North Large	Initial CR? False	Medicaid: 26,384	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	82.98682%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	97.04823%	Cost: 1.05319853
Open Date: 07/01/1977	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1977	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 06/01/1982	Low Occupancy Adjustment Factor:	123.54789%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252417			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,089,756	1,810,014	1,204,104	288,377		4,392,251	
1a	Audit Adjustments							
2	Cost Per Diem	41.3037	68.6027	45.6377	10.9300		166.4741	
3	Cost Per Diem Inflated	43.5010	70.9546	48.0656				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.5010	70.9546	48.0656	10.9300		173.4512	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	45.0394		49.7653				
7	Provider Target Rate	45.9778		50.8022				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.3360		56.2088				
10b	Base for line 10a	46.3698		55.0615				
11	Lesser of 5,7,8,10, 10a	43.5010	70.9546	48.0656	10.9300		173.4512	
12/13	Medical Adjustment Rate		2.6331	1.7837				
14	Prospective Per Diem 11	43.5010	73.5877	49.8493	10.9300		177.8680	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Harts Harbor Health Care 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:	1,901,700.00	Total Amount	Per Diem
RS to Start Calcs:	1977/07	Type:	Fixed	80% Capital(1):	3,827,090 6.2569
Indexed Asset Value	4,783,863	<60% of Base:	False	20% ROE(2):	956,773 0.2529
FRVS Base Asset:	2,722,556	Interest Rate:	7.5000%	Insurance Cost(3):	23,768 0.7476
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	23,371 0.7351
ROE Factor	0.015630	Amortization Rate:	7.5000%	Home Office(3):	9,573 0.3011
		Interest Only:	False	Replacement(3&4):	83,839 0.0000
		Yearly Payment:	369,969	Total FRVS PD:	8.2936

- (1) 80% Capital (\$3,827,090) amortized at 7.5000 % for 20 years Principal & Interest of \$369,969 divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$6.2569
- (2) 20% ROE (\$956,773) times the ROE factor (0.015630) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.2529
- (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:	51,883
Comparison Bed	180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.5010	43.5010	0.7724	42.7286
Direct Care	73.5877	73.5877	1.3066	72.2811
Indirect Care	49.8493	49.8493	0.8851	48.9642
Property	10.9300	8.2936	0.1473	8.1463
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.0930
Supplemental Rate Add-on				9.9025
Totals	177.8680	175.2316	3.1114	206.1157

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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206.12

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	

Message Code:

5 Uncorrected Licensure Deficiency



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211.21

Fletcher 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
518 W FLETCHER AVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
TAMPA, FL 33612	Days in CR 182	Maximum: 21,840	Standard: 184
County: Hillsborough [29]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 20,777	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,421	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 9,623	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	46.31564%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.13278%	Cost: 1.05319853
Open Date: 05/19/1998	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/19/1998	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 05/19/1998	Low Occupancy Adjustment Factor:	121.10942%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252221			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	413,621	693,322	476,152	250,487		1,833,581
1a	Audit Adjustments						
2	Cost Per Diem	42.9825	72.0484	49.4806	26.0300		190.5415
3	Cost Per Diem Inflated	45.2691	74.5184	52.1129			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.2691	74.5184	52.1129	26.0300		197.9304
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	46.8700		53.9558			
7	Provider Target Rate	47.8466		55.0800			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	48.5217		59.3403			
10b	Base for line 10a	47.5313		58.1291			
11	Lesser of 5,7,8,10, 10a	45.2691	74.5184	52.1129	13.6500		185.5504
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	45.2691	74.5184	52.1129	13.6500		185.5504
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,506,830	11.2629
Indexed Asset Value	5,633,537	<60% of Base:	False	20% ROE(2):	1,126,707	0.4467
FRVS Base Asset:	4,493,400	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7626
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	26,857	1.2926
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	9,576	0.4609
		Interest Only:	False	Replacement(3&4):	14,762	0.0000
		Yearly Payment:	443,985	Total FRVS PD:		14.2257

- (1) 80% Capital (\$4,506,830) amortized at 7.7500 % for 20 years Principal & Interest of \$443,985 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$11.2629
- (2) 20% ROE (\$1,126,707) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4467
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,493,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.2691	45.2691	0.8038	44.4653
Direct Care	74.5184	74.5184	1.3231	73.1953
Indirect Care	52.1129	52.1129	0.9253	51.1876
Property	13.6500	14.2257	0.2526	13.9731
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.4823
Supplemental Rate Add-on				9.9025
Totals	185.5504	186.1261	3.3048	211.2061

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
1998/01	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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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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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233.76

Wedgewood Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1010 CARPENTERS WAY	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
LAKELAND, FL 33809	Days in CR 182	Maximum: 21,840	Standard: 172
County: Polk [53]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 12
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 20,753	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,895	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 8,322	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	40.10023%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.02289%	Cost: 1.05319853
Open Date: 01/01/1999	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1999	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 03/26/1999	Low Occupancy Adjustment Factor:	120.96952%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252328			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	384,177	710,773	469,882	237,676		1,802,508
1a	Audit Adjustments						
2	Cost Per Diem	46.1640	85.4089	56.4626	28.5600		216.5955
3	Cost Per Diem Inflated	48.6199	88.3369	59.4663			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.6199	88.3369	59.4663	28.5600		224.9831
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	50.3393		61.5694			
7	Provider Target Rate	51.3882		62.8523			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	50.2417		59.8764			
10b	Base for line 10a	49.2162		58.6543			
11	Lesser of 5,7,8,10, 10a	48.6199	88.3369	59.4663	13.6500		210.0731
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	48.6199	88.3369	59.4663	13.6500		210.0731
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

Wedgewood Healthcare Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	03/26/1999	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	4,128,040.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,361,843	10.9006
RS to Start Calcs:	1999/01	<60% of Base:	False	20% ROE(2):	1,090,461	0.4324
Indexed Asset Value	5,452,304	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7635
FRVS Base Asset:	4,594,920	Chase Rate:	4.7500%	Taxes Cost(3):	46,977	2.2636
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	9,960	0.4799
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	33,868	0.0000
		Yearly Payment:	429,702	Total FRVS PD:		14.8400

- (1) 80% Capital (\$4,361,843) amortized at 7.7500 % for 20 years Principal & Interest of \$429,702 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.9006
- (2) 20% ROE (\$1,090,461) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4324
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,594,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.6199	48.6199	0.8633	47.7566
Direct Care	88.3369	88.3369	1.5684	86.7685
Indirect Care	59.4663	59.4663	1.0558	58.4105
Property	13.6500	14.8400	0.2635	14.5765
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.3466
Supplemental Rate Add-on				9.9025
Totals	210.0731	211.2631	3.7510	233.7612

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	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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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	

Message Code:

- 1 Per Bed Standard Limitation
- 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 07/01/2014 through 12/31/2014

0 043868-00 - 2014/07

221.19

Deltona Health Care

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1851 ELKCAM BLVD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
DELTONA, FL 32725	Days in CR 182	Maximum: 21,840	Standard: 184
County: Volusia [64]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 20,470	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,692	Inflation
Current Class North Large	Initial CR? False	Medicaid: 12,271	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	59.94626%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.72711%	Cost: 1.05319853
Open Date: 09/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 09/01/1983	Low Occupancy Adjustment Factor:	119.31992%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252158			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	525,755	939,767	622,780	317,205		2,405,507	
1a	Audit Adjustments							
2	Cost Per Diem	42.8453	76.5844	50.7522	25.8500		196.0319	
3	Cost Per Diem Inflated	45.1246	79.2099	53.4521				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.1246	79.2099	53.4521	25.8500		203.6366	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.7205		55.3424				
7	Provider Target Rate	47.6940		56.4955				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.7008		56.2808				
10b	Base for line 10a	46.7272		55.1321				
11	Lesser of 5,7,8,10, 10a	45.1246	79.2099	53.4521	13.6500		191.4366	
12/13	Medical Adjustment Rate		0.8863	0.5981				
14	Prospective Per Diem 11	45.1246	80.0962	54.0502	13.6500		192.9210	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Deltona Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	05/01/1998	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	4,702,508.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,620,758	11.5477
RS to Start Calcs:	1983/07	<60% of Base:	False	20% ROE(2):	1,155,190	0.4580
Indexed Asset Value	5,775,948	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7741
FRVS Base Asset:	3,100,660	Chase Rate:	4.7500%	Taxes Cost(3):	34,002	1.6611
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	8,451	0.4128
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	23,912	0.0000
		Yearly Payment:	455,209	Total FRVS PD:		14.8537

- (1) 80% Capital (\$4,620,758) amortized at 7.7500 % for 20 years Principal & Interest of \$455,209 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.5477
- (2) 20% ROE (\$1,155,190) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4580
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.1246	45.1246	0.8012	44.3234
Direct Care	80.0962	80.0962	1.4221	78.6741
Indirect Care	54.0502	54.0502	0.9597	53.0905
Property	13.6500	14.8537	0.2637	14.5900
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Quality Assess-Medicaid Share				20.6093
Totals	192.9210	194.1247	3.4467	221.1898

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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043868073120120201201207302013130614



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Lake Mary 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
710 NORTH SUN DRIVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
LAKE MARY, FL 32746	Days in CR 182	Maximum: 21,840	Standard: 184
County: Seminole [59]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 20,899	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,084	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 8,437	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	40.37035%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.69139%	Cost: 1.05319853
Open Date: 10/16/2000	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/16/2000	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 11/08/2000	Low Occupancy Adjustment Factor:	121.82056%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252310			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	364,264	668,302	427,933	234,464		1,694,963	
1a	Audit Adjustments							
2	Cost Per Diem	43.1746	79.2109	50.7210	27.7900		200.8965	
3	Cost Per Diem Inflated	45.4714	81.9264	53.4193				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.4714	81.9264	53.4193	27.7900		208.6071	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	47.0795		55.3085				
7	Provider Target Rate	48.0604		56.4609				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	49.4452		59.3403				
10b	Base for line 10a	48.4360		58.1291				
11	Lesser of 5,7,8,10, 10a	45.4714	81.9264	53.4193	13.6500		194.4671	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	45.4714	81.9264	53.4193	13.6500		194.4671	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Lake Mary Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/08/2000	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	3,064,996.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,432,998	11.0784
RS to Start Calcs:	2000/07	<60% of Base:	False	20% ROE(2):	1,108,249	0.4394
Indexed Asset Value	5,541,247	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7582
FRVS Base Asset:	4,781,880	Chase Rate:	4.7500%	Taxes Cost(3):	43,051	2.0600
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	9,988	0.4779
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	26,950	0.0000
		Yearly Payment:	436,712	Total FRVS PD:		14.8139

- (1) 80% Capital (\$4,432,998) amortized at 7.7500 % for 20 years Principal & Interest of \$436,712 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.0784
- (2) 20% ROE (\$1,108,249) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4394
- (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:	39,849
Comparison Date:	01/01/2000	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	4,781,880

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.4714	45.4714	0.8073	44.6641
Direct Care	81.9264	81.9264	1.4546	80.4718
Indirect Care	53.4193	53.4193	0.9485	52.4708
Property	13.6500	14.8139	0.2630	14.5509
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				12.5377
Supplemental Rate Add-on				9.9025
Totals	194.4671	195.6310	3.4734	214.5978

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	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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Countryside Rehab and Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
3825 COUNTRYSIDE BLVD N	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
PALM HARBOR, FL 34684	Days in CR 182	Maximum: 21,840	Standard: 184
County: Pinellas [52]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 20,776	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,193	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 15,250	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	73.40200%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.12821%	Cost: 1.05319853
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 10/19/1987	Low Occupancy Adjustment Factor:	121.10360%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252115			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	699,388	983,910	771,884	398,025		2,853,207
1a	Audit Adjustments						
2	Cost Per Diem	45.8615	64.5187	50.6153	26.1000		187.0955
3	Cost Per Diem Inflated	48.3013	66.7305	53.3080			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.3013	66.7305	53.3080	26.1000		194.4398
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	50.0094		55.1931			
7	Provider Target Rate	51.0514		56.3431			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	50.1290		59.3403			
10b	Base for line 10a	49.1058		58.1291			
11	Lesser of 5,7,8,10, 10a	48.3013	66.7305	53.3080	13.6500		181.9898
12/13	Medical Adjustment Rate		1.7568	1.4035			
14	Prospective Per Diem 11	48.3013	68.4873	54.7115	13.6500		185.1501
15	Inflated Usual & Customary Charge						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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213.66

Rate Semester 07/01/2014 through 12/31/2014

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):	4,514,169	11.2813
Indexed Asset Value	5,642,711	<60% of Base:	False	20% ROE(2):	1,128,542	0.4475
FRVS Base Asset:	3,503,400	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7627
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	31,054	1.4947
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,835	0.3771
		Interest Only:	False	Replacement(3&4):	39,040	0.0000
		Yearly Payment:	444,708	Total FRVS PD:		14.3633

- (1) 80% Capital (\$4,514,169) amortized at 7.7500 % for 20 years Principal & Interest of \$444,708 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.2813
- (2) 20% ROE (\$1,128,542) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4475
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,503,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.3013	48.3013	0.8576	47.4437
Direct Care	68.4873	68.4873	1.2160	67.2713
Indirect Care	54.7115	54.7115	0.9714	53.7401
Property	13.6500	14.3633	0.2550	14.1083
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.1943
Supplemental Rate Add-on				9.9025
Totals	185.1501	185.8634	3.3000	213.6602

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
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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213.66

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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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0 043873-00 - 2014/07

248.85

Harbor Beach 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1615 MIAMI ROAD	2/1/2012-7/31/2012	Number of Beds: 59	Superior: 0
FORT LAUDERDALE, FL 33316	Days in CR 182	Maximum: 10,738	Standard: 184
County: Broward [6]	First Used : 2012/01	Max Annualized: 21,535	Conditional: 0
Region: South Area: 10	Last Used: 2014/07	Total Patient: 9,802	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 1,552	Inflation
Current Class South Small	Initial CR? False	Medicaid: 7,174	FY Index: 1.27901138
Class at 1/94: South Small	Medical Utilization	73.18915%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.28329%	Cost: 1.05319853
Open Date: 12/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 05/01/1986	Low Occupancy Adjustment Factor:	116.20880%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252255			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	414,539	511,941	451,796	197,285		1,575,561
1a	Audit Adjustments						
2	Cost Per Diem	57.7835	71.3606	62.9769	27.5000		219.6210
3	Cost Per Diem Inflated	60.8575	73.8070	66.3272			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	60.8575	73.8070	66.3272	27.5000		228.4917
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	63.0098		68.6729			
7	Provider Target Rate	64.3227		70.1038			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500		
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810			
10	Target Rate Class Ceiling	68.3236		80.3359			
10a	New Provider Target Limitation	62.3734		72.7459			
10b	Base for line 10a	61.1003		71.2611			
11	Lesser of 5,7,8,10, 10a	60.8575	73.8070	66.3272	13.6500		214.6417
12/13	Medical Adjustment Rate		1.9255	1.7303			
14	Prospective Per Diem 11	60.8575	75.7325	68.0575	13.6500		218.2975
15	Inflated Usual & Customary Charge						0.00



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248.85

Rate Semester 07/01/2014 through 12/31/2014

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):	2,253,861	11.4561
Indexed Asset Value	2,817,326	<60% of Base:	False	20% ROE(2):	563,465	0.4544
FRVS Base Asset:	1,938,500	Interest Rate:	10.6343%	Insurance Cost(3):	7,791	0.7948
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	25,943	2.6467
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	3,897	0.3976
		Interest Only:	False	Replacement(3&4):	45,124	0.0000
		Yearly Payment:	222,037	Total FRVS PD:		15.7496

- (1) 80% Capital (\$2,253,861) amortized at 7.7500 % for 20 years Principal & Interest of \$222,037 divided by annual available days (21535) divided by Occup. Adj. (0.900) = \$11.4561
- (2) 20% ROE (\$563,465) times the ROE factor (0.015630) divided by annual available days (21535) divided by Occup. Adj. (0.900) = \$0.4544
- (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:	51,883
Comparison Bed	59	Effective PBS Limitation	1,617,367

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	60.8575	60.8575	1.0805	59.7770
Direct Care	75.7325	75.7325	1.3446	74.3879
Indirect Care	68.0575	68.0575	1.2084	66.8491
Property	13.6500	15.7496	0.2796	15.4700
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4597
Supplemental Rate Add-on				9.9025
Totals	218.2975	220.3971	3.9131	248.8462

Medicaid Trend Adjustment



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248.85

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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248.85

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		59	73.19	2,817,326	3,061,097	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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Florida Agency for Health Care Administration
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0 043874-00 - 2014/07

208.42

Health Center at Brentwood

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
2333 N BRENTWOOD CIR	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
LECANTO, FL 34461	Days in CR 182	Maximum: 21,840	Standard: 123
County: Citrus [9]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 61
Region: North Area: 3	Last Used: 2014/07	Total Patient: 21,012	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,861	Inflation
Current Class North Large	Initial CR? False	Medicaid: 9,146	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	43.52751%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.20879%	Cost: 1.05319853
Open Date: 04/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 04/01/1984	Low Occupancy Adjustment Factor:	122.47924%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252263			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	418,218	638,938	413,989	238,070		1,709,215	
1a	Audit Adjustments							
2	Cost Per Diem	45.7269	69.8598	45.2645	26.0300		186.8812	
3	Cost Per Diem Inflated	48.1595	72.2548	47.6725				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.1595	72.2548	47.6725	26.0300		194.1168	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	49.8627		49.3584				
7	Provider Target Rate	50.9016		50.3868				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	48.6099		58.8443				
10b	Base for line 10a	47.6177		57.6432				
11	Lesser of 5,7,8,10, 10a	48.1595	72.2548	47.6725	13.6500		181.7368	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	48.1595	72.2548	47.6725	13.6500		181.7368	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Health Center at Brentwood

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:	4,919,568.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Fixed	80% Capital(1):	4,379,509	10.9447
Indexed Asset Value	5,474,386	<60% of Base:	False	20% ROE(2):	1,094,877	0.4341
FRVS Base Asset:	1,710,000	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7541
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	30,963	1.4736
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	8,213	0.3909
		Interest Only:	False	Replacement(3&4):	17,216	0.0000
		Yearly Payment:	431,442	Total FRVS PD:		13.9974

- (1) 80% Capital (\$4,379,509) amortized at 7.7500 % for 20 years Principal & Interest of \$431,442 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$10.9447
- (2) 20% ROE (\$1,094,877) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.4341
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.1595	48.1595	0.8551	47.3044
Direct Care	72.2548	72.2548	1.2829	70.9719
Indirect Care	47.6725	47.6725	0.8464	46.8261
Property	13.6500	13.9974	0.2485	13.7489
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.6711
Supplemental Rate Add-on				9.9025
Totals	181.7368	182.0842	3.2329	208.4249

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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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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208.42

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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Florida Agency for Health Care Administration
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209.65

Governor's Creek Health and Rehabilitation

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
803 OAK ST	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
GREEN COVE SPRINGS, FL	Days in CR 182	Maximum: 21,840	Standard: 184
32043	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
County: Clay [10]	Last Used: 2014/07	Total Patient: 20,598	Total: 184
Region: North Area: 4	Unaudited	Medicare: 2,009	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 16,419	FY Index: 1.27901138
Current Class North Large	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: North Large	Occupancy:	79.71162%	Cost: 1.05319853
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	94.31319%	Target: 1.01458517
Open Date: 01/01/1983	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20083276
Acquired Date: 01/01/1983	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 01/01/1983	Weighted Low Occ Adjustment Factor:	120.06603%	DC Inflation: 1.03428224
Med # Active Date: 02/01/2012		100.00000%	PS Target: 1.02083595
Previous Med # 252387			

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	699,585	1,072,719	803,366	378,458		2,954,128	
1a	Audit Adjustments							
2	Cost Per Diem	42.6083	65.3340	48.9290	23.0500		179.9213	
3	Cost Per Diem Inflated	44.8750	67.5738	51.5320				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.8750	67.5738	51.5320	23.0500		187.0308	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.4620		53.3545				
7	Provider Target Rate	47.4301		54.4662				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.7008		57.2928				
10b	Base for line 10a	46.7272		56.1234				
11	Lesser of 5,7,8,10, 10a	44.8750	67.5738	51.5320	13.6500		177.6308	
12/13	Medical Adjustment Rate		2.2587	1.7225				
14	Prospective Per Diem 11	44.8750	69.8325	53.2545	13.6500		181.6120	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Governor's Creek Health and Rehabilitation

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/01/1997	Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:		Amount:	2,253,128.00	Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	3,270,538 8.1733
Indexed Asset Value	4,088,173	<60% of Base:	False	20% ROE(2):	817,635 0.3242
FRVS Base Asset:	2,253,887	Interest Rate:	10.6343%	Insurance Cost(3):	22,031 1.0696
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	12,816 0.6222
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,331 0.3559
		Interest Only:	False	Replacement(3&4):	53,076 0.0000
		Yearly Payment:	322,193	Total FRVS PD:	10.5452

- (1) 80% Capital (\$3,270,538) amortized at 7.7500 % for 20 years Principal & Interest of \$322,193 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$8.1733
- (2) 20% ROE (\$817,635) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3242
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.8750	44.8750	0.7968	44.0782
Direct Care	69.8325	69.8325	1.2399	68.5926
Indirect Care	53.2545	53.2545	0.9455	52.3090
Property	13.6500	10.5452	0.1872	10.3580
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.4130
Supplemental Rate Add-on				9.9025
Totals	181.6120	178.5072	3.1694	209.6533

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	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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209.65

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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209.65

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043875073120120201201207312013104259



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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224.86

Largo Rehab & Spa

Type of Cost Report: Cost Settled 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
9035 BRYAN DAIRY RD	2/1/2012-7/31/2012	Number of Beds: 158	Superior: 0
LARGO, FL 33777	Days in CR 182	Maximum: 28,756	Standard: 156
County: Pinellas [52]	First Used : 2012/01	Max Annualized: 57,670	Conditional: 28
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 27,766	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,276	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 18,149	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	65.36411%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.55724%	Cost: 1.05319853
Open Date: 06/02/1999	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/02/1999	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 06/02/1999	Low Occupancy Adjustment Factor:	122.92284%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252336	Interim Component Effective Date:	07/01/2013	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	794,181	1,389,138	914,314	524,506		3,622,139
1a	Audit Adjustments						
2	Cost Per Diem	43.7589	76.5407	50.3782	28.9000		199.5778
3	Cost Per Diem Inflated	46.0868	79.1647	53.0582			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.0868	79.1647	53.0582	28.9000		207.2097
5a	Interim Adjustment	0.0193	0.6289	0.3388			
5b	Interim Adjusted Per Diem	46.1061	79.7936	53.3970			
6	Prior Semester: Provider Target Base	47.7166		54.9347			
7	Provider Target Rate	48.7108		56.0793			
7a	Interim Adjustment	0.0193		0.3388			
7b	Interim Adjustment Provider Target Rate	48.7301		56.4181			
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	49.0868		59.6791			
10b	Base for line 10a	48.0660		58.1291			
11	Lesser of 5,7,8,10, 10a	46.1061	79.7936	53.3970	13.6500		192.9467
12/13	Medical Adjustment Rate		1.1693	0.7825			
14	Prospective Per Diem 11	46.1061	80.9629	54.1795	13.6500		194.8985
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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Rate Semester 07/01/2014 through 12/31/2014

Largo Rehab & Spa

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):	5,888,282	11.1762
Indexed Asset Value	7,360,352	<60% of Base:	False	20% ROE(2):	1,472,070	0.4433
FRVS Base Asset:	6,049,978	Interest Rate:	10.6343%	Insurance Cost(3):	21,540	0.7758
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	60,122	2.1653
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	10,842	0.3905
		Interest Only:	False	Replacement(3&4):	42,316	0.0000
		Yearly Payment:	580,077	Total FRVS PD:		14.9511

- (1) 80% Capital (\$5,888,282) amortized at 7.7500 % for 20 years Principal & Interest of \$580,077 divided by annual available days (57670) divided by Occup. Adj. (0.900) = \$11.1762
- (2) 20% ROE (\$1,472,070) times the ROE factor (0.015630) divided by annual available days (57670) divided by Occup. Adj. (0.900) = \$0.4433
- (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:	51,883
Comparison Bed	158	Effective PBS Limitation	6,049,978

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.1061	46.1061	0.8186	45.2875
Direct Care	80.9629	80.9629	1.4375	79.5254
Indirect Care	54.1795	54.1795	0.9620	53.2175
Property	13.6500	14.9511	0.2655	14.6856
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.2385
Supplemental Rate Add-on				9.9025
Totals	194.8985	196.1996	3.4836	224.8570

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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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	

Message Code:

1 Per Bed Standard Limitation

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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222.33

Magnolia Health and Rehabilitation Center
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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: Non-Related Party (NRP) CHOW	
Provider Information	Cost Report	Patient Days	Ratings Days
1507 SOUTH TUTTLE AVENUE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
SARASOTA, FL 34239	Days in CR 182	Maximum: 21,840	Standard: 184
County: Sarasota [58]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 20,440	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,181	Inflation
Current Class South Large	Initial CR? False	Medicaid: 13,236	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	64.75538%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.58974%	Cost: 1.05319853
Open Date: 09/14/1994	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/14/1994	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 09/14/1994	Low Occupancy Adjustment Factor:	119.14504%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252182			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	610,258	935,974	683,619	373,652		2,603,503	
1a	Audit Adjustments							
2	Cost Per Diem	46.1059	70.7143	51.6485	28.2300		196.6987	
3	Cost Per Diem Inflated	48.5587	73.1385	54.3961				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.5587	73.1385	54.3961	28.2300		204.3233	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.2759		56.3198				
7	Provider Target Rate	51.3234		57.4933				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	50.8496		61.4499				
10b	Base for line 10a	49.8117		60.1957				
11	Lesser of 5,7,8,10, 10a	48.5587	73.1385	54.3961	13.6500		189.7433	
12/13	Medical Adjustment Rate		1.2141	0.9030				
14	Prospective Per Diem 11	48.5587	74.3526	55.2991	13.6500		191.8604	
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 07/01/2014 through 12/31/2014

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):	4,500,525	11.2472
Indexed Asset Value	5,625,656	<60% of Base:	False	20% ROE(2):	1,125,131	0.4461
FRVS Base Asset:	4,058,400	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7752
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	56,502	2.7643
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,924	0.3877
		Interest Only:	False	Replacement(3&4):	74,200	0.0000
		Yearly Payment:	443,364	Total FRVS PD:		15.6205

- (1) 80% Capital (\$4,500,525) amortized at 7.7500 % for 20 years Principal & Interest of \$443,364 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.2472
 (2) 20% ROE (\$1,125,131) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4461
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,058,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.5587	48.5587	0.8622	47.6965
Direct Care	74.3526	74.3526	1.3201	73.0325
Indirect Care	55.2991	55.2991	0.9818	54.3173
Property	13.6500	15.6205	0.2773	15.3432
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.0407
Supplemental Rate Add-on				9.9025
Totals	191.8604	193.8309	3.4414	222.3327

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
1994/07	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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222.33

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	

Message Code:

- | |
|---|
| 1 Per Bed Standard Limitation
5 Uncorrected Licensure Deficiency |
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Florida Agency for Health Care Administration
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209.28

Marshall 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
207 MARSHALL DRIVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
PERRY, FL 32347	Days in CR 182	Maximum: 21,840	Standard: 184
County: Taylor [62]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 19,088	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,792	Inflation
Current Class North Large	Initial CR? False	Medicaid: 14,374	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	75.30386%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	87.39927%	Cost: 1.05319853
Open Date: 09/01/1979	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1979	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 03/01/1984	Low Occupancy Adjustment Factor:	111.26422%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252425			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	663,480	957,193	671,807	292,942		2,585,422	
1a	Audit Adjustments							
2	Cost Per Diem	46.1583	66.5920	46.7377	20.3800		179.8680	
3	Cost Per Diem Inflated	48.6139	68.8749	49.2241				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.6139	68.8749	49.2241	20.3800		187.0929	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.3331		50.9649				
7	Provider Target Rate	51.3818		52.0268				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.7008		55.5115				
10b	Base for line 10a	46.7272		54.3785				
11	Lesser of 5,7,8,10, 10a	47.7008	68.8749	49.2241	13.6500		179.4498	
12/13	Medical Adjustment Rate		1.9607	1.4013				
14	Prospective Per Diem 11	47.7008	70.8356	50.6254	13.6500		182.8118	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	1,901,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	2,851,142	7.1252
RS to Start Calcs:	1979/07	<60% of Base:	False	20% ROE(2):	712,785	0.2826
Indexed Asset Value	3,563,927	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.8301
FRVS Base Asset:	2,027,076	Chase Rate:	4.7500%	Taxes Cost(3):	15,821	0.8288
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	6,495	0.3403
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	30,569	0.0000
		Yearly Payment:	280,877	Total FRVS PD:		9.4070

- (1) 80% Capital (\$2,851,142) amortized at 7.7500 % for 20 years Principal & Interest of \$280,877 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.1252
- (2) 20% ROE (\$712,785) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$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:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	51,883
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.7008	47.7008	0.8469	46.8539
Direct Care	70.8356	70.8356	1.2577	69.5779
Indirect Care	50.6254	50.6254	0.8989	49.7265
Property	13.6500	9.4070	0.1670	9.2400
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.9752
Supplemental Rate Add-on				9.9025
Totals	182.8118	178.5688	3.1705	209.2760

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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209.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1994/07		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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209.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/07		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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043878073120120201201207312013113009



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215.75

North Florida Rehabilitation and Specialty Care

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
6700 NW 10TH PLACE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
GAINESVILLE, FL 32605	Days in CR 182	Maximum: 21,840	Standard: 184
County: Alachua [1]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 20,896	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,273	Inflation
Current Class North Large	Initial CR? False	Medicaid: 8,746	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	41.85490%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.67766%	Cost: 1.05319853
Open Date: 03/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 03/01/1984	Low Occupancy Adjustment Factor:	121.80308%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252361			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	369,041	667,908	444,549	280,134		1,761,632	
1a	Audit Adjustments							
2	Cost Per Diem	42.1954	76.3673	50.8288	32.0300		201.4215	
3	Cost Per Diem Inflated	44.4401	78.9853	53.5328				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.4401	78.9853	53.5328	32.0300		208.9882	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.0118		55.4260				
7	Provider Target Rate	46.9705		56.5809				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.7008		58.8897				
10b	Base for line 10a	46.7272		57.6877				
11	Lesser of 5,7,8,10, 10a	44.4401	78.9853	53.5328	13.6500		190.6082	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	44.4401	78.9853	53.5328	13.6500		190.6082	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate

0 043880-00 - 2014/07

215.75

Rate Semester 07/01/2014 through 12/31/2014

North Florida Rehabilitation and Specialty 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:	4,231,418.00		Total Amount	Per Diem
RS to Start Calcs:	1984/01	Type:	Fixed	80% Capital(1):	4,308,229	10.7666
Indexed Asset Value	5,385,286	<60% of Base:	False	20% ROE(2):	1,077,057	0.4271
FRVS Base Asset:	3,420,000	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7583
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	41,008	1.9625
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	8,638	0.4134
		Interest Only:	False	Replacement(3&4):	18,394	0.0000
		Yearly Payment:	424,420	Total FRVS PD:		14.3279

- (1) 80% Capital (\$4,308,229) amortized at 7.7500 % for 20 years Principal & Interest of \$424,420 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.7666
- (2) 20% ROE (\$1,077,057) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4271
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.4401	44.4401	0.7890	43.6511
Direct Care	78.9853	78.9853	1.4024	77.5829
Indirect Care	53.5328	53.5328	0.9505	52.5823
Property	13.6500	14.3279	0.2544	14.0735
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.9548
Supplemental Rate Add-on				9.9025
Totals	190.6082	191.2861	3.3963	215.7471

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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 043880073120120201201207312013101343



Florida Agency for Health Care Administration
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Crestview Rehabilitation Center

Type of Cost Report: Cost Settled 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1849 FIRST AVENUE EAST	2/1/2012-7/31/2012	Number of Beds: 180	Superior: 0
CRESTVIEW , FL 32539	Days in CR 182	Maximum: 32,760	Standard: 184
County: Okaloosa [46]	First Used : 2012/01	Max Annualized: 65,700	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 21,428	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,516	Inflation
Current Class North Large	Initial CR? False	Medicaid: 14,843	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	69.26918%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	65.40904%	Cost: 1.05319853
Open Date: 10/01/1970	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1970	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 05/01/1979	Low Occupancy Adjustment Factor:	83.26941%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 251101	Interim Component Effective Date:	07/01/2013	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	731,750	1,438,235	766,728	508,521		3,445,234	
1a	Audit Adjustments							
2	Cost Per Diem	49.2993	96.8965	51.6559	34.2600		232.1117	
3	Cost Per Diem Inflated	51.9220	100.2183	54.4039				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.9220	100.2183	54.4039	34.2600		240.8042	
5a	Interim Adjustment	0.0499	0.0324	0.1296				
5b	Interim Adjusted Per Diem	51.9719	100.2507	54.5335				
6	Prior Semester: Provider Target Base	53.7582		56.3279				
7	Provider Target Rate	54.8783		57.5015				
7a	Interim Adjustment	0.0499		0.1296				
7b	Interim Adjustment Provider Target Rate	54.9282		57.6311				
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.7507		53.5915				
10b	Base for line 10a	46.7272		52.3707				
11	Lesser of 5,7,8,10, 10a	47.7507	95.0998	53.5915	13.6500		210.0920	
12/13	Medical Adjustment Rate		2.0616	1.1617				
14	Prospective Per Diem 11	47.7507	97.1614	54.7532	13.6500		213.3153	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Crestview Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/30/1987	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		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	0.2699
FRVS Base Asset:	2,097,280	Interest Rate:	11.5000%	Insurance Cost(3):	17,711	0.8265
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	11,889	0.5548
ROE Factor	0.015630	Amortization Rate:	10.0000%	Home Office(3):	5,779	0.2697
		Interest Only:	False	Replacement(3&4):	6,117	0.0000
		Yearly Payment:	472,901	Total FRVS PD:		9.9185

- (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 (0.015630) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.2699
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.7507	47.7507	0.8478	46.9029
Direct Care	97.1614	97.1614	1.7251	95.4363
Indirect Care	54.7532	54.7532	0.9721	53.7811
Property	13.6500	9.9185	0.1761	9.7424
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.3210
Supplemental Rate Add-on				9.9025
Totals	213.3153	209.5838	3.7211	238.0862

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	

Message Code:

5 Uncorrected Licensure Deficiency



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Fort Walton 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1 LBJ SR DRIVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
FORT WALTON BEACH, FL 32548	Days in CR 182	Maximum: 21,840	Standard: 184
County: Okaloosa [46]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 16,829	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,435	Inflation
Current Class North Large	Initial CR? False	Medicaid: 10,273	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	61.04344%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	77.05586%	Cost: 1.05319853
Open Date: 08/01/1960	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1960	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 03/01/1982	Low Occupancy Adjustment Factor:	98.09647%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 229237			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	523,258	1,008,074	540,357	323,497		2,395,186	
1a	Audit Adjustments							
2	Cost Per Diem	50.9353	98.1285	52.5997	31.4900		233.1535	
3	Cost Per Diem Inflated	53.6450	101.4926	55.3979				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	53.6450	101.4926	55.3979	31.4900		242.0255	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.5422		57.3571				
7	Provider Target Rate	56.6995		58.5522				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	48.3558		55.8606				
10b	Base for line 10a	47.3688		54.7204				
11	Lesser of 5,7,8,10, 10a	48.3558	95.0998	55.3979	13.6500		212.5035	
12/13	Medical Adjustment Rate		1.1815	0.6883				
14	Prospective Per Diem 11	48.3558	96.2813	56.0862	13.6500		214.3733	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Fort Walton Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/08/1987	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	2,880,000.00		Total Amount	Per Diem
RS to Start Calcs:	1971/07	Type:	Variable	80% Capital(1):	3,986,362	12.1154
Indexed Asset Value	4,982,952	<60% of Base:	False	20% ROE(2):	996,590	0.3951
FRVS Base Asset:	2,711,737	Interest Rate:	11.5000%	Insurance Cost(3):	14,149	0.8408
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	11,431	0.6792
ROE Factor	0.015630	Amortization Rate:	10.5000%	Home Office(3):	4,539	0.2697
		Interest Only:	False	Replacement(3&4):	26,190	0.0000
		Yearly Payment:	477,588	Total FRVS PD:		14.3002

- (1) 80% Capital (\$3,986,362) amortized at 10.5000 % for 20 years Principal & Interest of \$477,588 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$12.1154
- (2) 20% ROE (\$996,590) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3951
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.3558	48.3558	0.8586	47.4972
Direct Care	96.2813	96.2813	1.7095	94.5718
Indirect Care	56.0862	56.0862	0.9958	55.0904
Property	13.6500	14.3002	0.2539	14.0463
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.6315
Supplemental Rate Add-on				9.9025
Totals	214.3733	215.0235	3.8178	239.7397

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	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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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	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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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	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	

Message Code:

3 Index Cost Limitation - January 1996



Florida Agency for Health Care Administration
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River Valley 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: Non-Related Party (NRP) CHOW	
Provider Information	Cost Report	Patient Days	Ratings Days
17884 NE CROZIER ST	2/1/2012-7/31/2012	Number of Beds: 150	Superior: 0
BLOUNTSTOWN, FL 32424	Days in CR 182	Maximum: 27,300	Standard: 184
County: Calhoun [7]	First Used : 2012/01	Max Annualized: 54,750	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 23,016	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,078	Inflation
Current Class North Large	Initial CR? False	Medicaid: 18,771	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	81.55631%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	84.30769%	Cost: 1.05319853
Open Date: 05/01/1974	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/01/1974	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 12/01/1980	Low Occupancy Adjustment Factor:	107.32847%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 251097			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	827,453	1,857,376	869,571	409,020		3,963,420	
1a	Audit Adjustments							
2	Cost Per Diem	44.0815	98.9492	46.3252	21.7900		211.1459	
3	Cost Per Diem Inflated	46.4266	102.3414	48.7896				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.4266	102.3414	48.7896	21.7900		219.3476	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.0685		50.5151				
7	Provider Target Rate	49.0701		51.5676				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.4839		52.7211				
10b	Base for line 10a	46.5147		51.6450				
11	Lesser of 5,7,8,10, 10a	46.4266	95.0998	48.7896	13.6500		203.9660	
12/13	Medical Adjustment Rate		3.3761	1.7321				
14	Prospective Per Diem 11	46.4266	98.4759	50.5217	13.6500		209.0742	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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	0.3004
FRVS Base Asset:	2,082,681	Interest Rate:	12.5000%	Insurance Cost(3):	17,696	0.7689
Occup Adj Factor	0.9000	Chase Rate:	12.5000%	Taxes Cost(3):	16,323	0.7092
ROE Factor	0.015630	Amortization Rate:	12.5000%	Home Office(3):	6,208	0.2697
		Interest Only:	True	Replacement(3&4):	3,206	0.0000
		Yearly Payment:	470,948	Total FRVS PD:		11.6057

(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 (0.015630) divided by annual available days (54750) divided by Occup. Adj. (0.90) = \$0.3004

(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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.4266	46.4266	0.8243	45.6023
Direct Care	98.4759	98.4759	1.7484	96.7275
Indirect Care	50.5217	50.5217	0.8970	49.6247
Property	13.6500	11.6057	0.2061	11.3996
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				25.2587
Supplemental Rate Add-on				9.9025
Totals	209.0742	207.0299	3.6758	238.5153

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	

Message Code:

5 Uncorrected Licensure Deficiency



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Plantation Key Nursing 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
48 HIGH POINT ROAD	8/1/2011-7/31/2012	Number of Beds: 120	Superior: 0
TAVERNIER, FL 33070	Days in CR 366	Maximum: 43,920	Standard: 184
County: Monroe [44]	First Used : 2011/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 10,033	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,364	Inflation
Current Class South Large	Initial CR? False	Medicaid: 7,092	FY Index: 1.27004145
Class at 1/94: South Large	Medical Utilization	70.68673%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	22.84381%	Cost: 1.00000000
Open Date: 10/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.19666435
Entered Medicaid 10/01/1984	Low Occupancy Adjustment Factor:	29.08146%	DC Sem Index: 1.24200000
Med # Active Date: 12/19/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 208906			PS Target: 1.02083595

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	521,471	854,906	433,771	270,205		2,080,353	
1a	Audit Adjustments							
2	Cost Per Diem	73.5295	120.5451	61.1634	38.1000		293.3380	
3	Cost Per Diem Inflated	73.5295	120.5451	61.1634				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	73.5295	120.5451	61.1634	38.1000		293.3380	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	55.3667		63.5936				
10b	Base for line 10a	54.2366		62.2956				
11	Lesser of 5,7,8,10, 10a	54.4176	98.4475	61.1634	13.6500		227.6785	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	54.4176	98.4475	61.1634	13.6500		227.6785	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	4,418,174 14.4970
RS to Start Calcs:	1984/07	<60% of Base:	True	20% ROE(2):	1,104,544 0.6918
Indexed Asset Value	5,522,718	Interest Rate:	0.0000%	Insurance Cost(3):	38,550 3.8423
FRVS Base Asset:	0	Chase Rate:	13.0000%	Taxes Cost(3):	40,230 4.0098
Occup Adj Factor	0.9000	Amortization Rate:	13.0000%	Home Office(3):	0 0.0000
ROE Factor	0.024690	Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	571,472	Total FRVS PD:	23.0409

- (1) 80% Capital (\$4,418,174) amortized at 13.0000 % for 20 years Interest of \$571,472 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.4970
- (2) 20% ROE (\$1,104,544) times the ROE factor (0.024690) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$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:	28,500
Comparison Date: 07/01/1985	Current RS PBS:	51,883
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	98.4475	98.4475	1.7479	96.6996
Indirect Care	61.1634	61.1634	1.0860	60.0774
Property	13.6500	23.0409	0.4091	22.6318
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.9273
Supplemental Rate Add-on				9.9025
Totals	227.6785	237.0694	4.2092	264.6900

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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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2012

0 044975-00 - 2014/07

264.69

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	70.69	5,352,780	5,951,160	12
2012/01		0.75	0.3865	0.3865		120	70.69	5,368,298	5,974,200	
2012/07		0.75	0.9417	0.9417		120	70.69	5,406,214	6,030,480	
2013/01		0.70	0.4901	0.4901		120	70.69	5,424,763	6,060,000	
2013/07		0.70	0.6196	0.6196		120	70.69	5,448,290	6,097,560	
2014/01		0.65	0.8564	0.8564		120	70.69	5,478,621	6,149,760	
2014/07		0.65	1.2383	1.2383		120	70.69	5,522,718	6,225,960	

Message Code:

- | | |
|----|----------------------------------|
| 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 07/01/2014 through 12/31/2014

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The Crossroads

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
206 W ORANGE ST	2/1/2011-1/31/2012	Number of Beds: 60	Superior: 0
DAVENPORT, FL 33837	Days in CR 365	Maximum: 21,900	Standard: 184
County: Polk [53]	First Used : 2013/01	Max Annualized: 21,900	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 18,754	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,248	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 12,405	FY Index: 1.25516245
Class at 1/94: South Small	Medical Utilization	66.14589%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	85.63470%	Cost: 1.07321001
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.18999979
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	109.01782%	DC Sem Index: 1.24200000
Med # Active Date: 06/30/2010	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.04369766
Previous Med # 001306			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	660,566	1,000,268	820,524	52,473		2,533,831	
1a	Audit Adjustments							
2	Cost Per Diem	53.2500	80.6343	66.1446	4.2300		204.2589	
3	Cost Per Diem Inflated	57.1484	84.1578	70.9870				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.1484	84.1578	70.9870	4.2300		216.5232	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	64.3531		87.1967				
7	Provider Target Rate	65.6940		89.0135				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	62.6912		74.0612				
10b	Base for line 10a	61.4116		72.5496				
11	Lesser of 5,7,8,10, 10a	57.1484	84.1578	70.9870	4.2300		216.5232	
12/13	Medical Adjustment Rate		1.5287	1.2894				
14	Prospective Per Diem 11	57.1484	85.6865	72.2764	4.2300		219.3413	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

The Crossroads

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	07/01/1988	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	2,024,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	1,466,786 6.6581
RS to Start Calcs:	1971/07	<60% of Base:	False	20% ROE(2):	366,696 0.4283
Indexed Asset Value	1,833,482	Interest Rate:	6.5000%	Insurance Cost(3):	24,750 1.3197
FRVS Base Asset:	971,248	Chase Rate:	4.0000%	Taxes Cost(3):	9,525 0.5079
Occup Adj Factor	0.9000	Amortization Rate:	6.5000%	Home Office(3):	0 0.0000
ROE Factor	0.023020	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	131,232	Total FRVS PD:	8.9140

- (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. (0.900) = \$6.6581
- (2) 20% ROE (\$366,696) times the ROE factor (0.023020) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.4283
- (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:	51,883
Comparison Bed 60	Effective PBS Limitation	1,710,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.1484	57.1484	1.0147	56.1337
Direct Care	85.6865	85.6865	1.5214	84.1651
Indirect Care	72.2764	72.2764	1.2833	70.9931
Property	4.2300	8.9140	0.1583	8.7557
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.8132
Supplemental Rate Add-on				9.9025
Totals	219.3413	224.0253	3.9777	249.7633

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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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	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	66.15	1,833,482	3,048,780	
2014/01		0.00	0.8564	0.8564		60	66.15	1,833,482	3,074,880	
2014/07		0.00	1.2383	1.2383		60	66.15	1,833,482	3,112,980	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 046017-00 - 2014/07
243.08

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	7/1/2012-6/30/2013	Number of Beds: 64	Superior: 0
HOMESTEAD, FL 33030	Days in CR 365	Maximum: 23,360	Standard: 184
County: Dade [13]	First Used : 2014/07	Max Annualized: 23,360	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 22,149	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,004	Inflation
Current Class South Small	Initial CR? False	Medicaid: 14,192	FY Index: 1.29878490
Class at 1/94: South Small	Medical Utilization	64.07513%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.81592%	Cost: 1.03716397
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	120.70604%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02772031
Previous Med # 212121			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	813,911	1,095,900	792,776	291,078		2,993,665	
1a	Audit Adjustments							
2	Cost Per Diem	57.3500	77.2196	55.8608	20.5100		210.9404	
3	Cost Per Diem Inflated	59.4814	79.3602	57.9368				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	59.4814	79.3602	57.9368	20.5100		217.2884	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	80.2030		67.4030				
7	Provider Target Rate	81.8741		68.8074				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	57.9863		69.4600				
10b	Base for line 10a	56.8028		68.0423				
11	Lesser of 5,7,8,10, 10a	57.9863	79.3602	57.9368	13.6500		208.9333	
12/13	Medical Adjustment Rate		1.2566	0.9174				
14	Prospective Per Diem 11	57.9863	80.6168	58.8542	13.6500		211.1073	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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0 046017-00 - 2014/07

243.08

Rate Semester 07/01/2014 through 12/31/2014

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):	2,298,800 9.1373
Indexed Asset Value	2,873,500	<60% of Base:	False	20% ROE(2):	574,700 0.3931
FRVS Base Asset:	1,361,312	Interest Rate:	5.6500%	Insurance Cost(3):	43,889 1.9815
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	34,030 1.5364
ROE Factor	0.014380	Amortization Rate:	5.6500%	Home Office(3):	34,703 1.5668
		Interest Only:	False	Replacement(3&4):	20,140 0.0000
		Yearly Payment:	192,103	Total FRVS PD:	14.6151

- (1) 80% Capital (\$2,298,800) amortized at 5.6500 % for 20 years Principal & Interest of \$192,103 divided by annual available days (23360) divided by Occup. Adj. (0.900) = \$9.1373
- (2) 20% ROE (\$574,700) times the ROE factor (0.014380) divided by annual available days (23360) divided by Occup. Adj. (0.900) = \$0.3931
- (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:	51,883
Comparison Bed	54	Effective PBS Limitation	1,539,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.9863	57.9863	1.0296	56.9567
Direct Care	80.6168	80.6168	1.4314	79.1854
Indirect Care	58.8542	58.8542	1.0450	57.8092
Property	13.6500	14.6151	0.2595	14.3556
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.8740
Supplemental Rate Add-on				9.9025
Totals	211.1073	212.0724	3.7655	243.0834

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 7/1/2014 through 12/31/2014 Based on Cost Report: 6/30/2013

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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	



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
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	



Florida Agency for Health Care Administration
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243.08

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		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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 046017063020130701201203062014075017



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 046128-00 - 2014/07

245.44

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	3/1/2013-2/28/2014	Number of Beds: 264	Superior: 0
MIAMI, FL 33128	Days in CR 365	Maximum: 96,360	Standard: 184
County: Dade [13]	First Used : 2014/07	Max Annualized: 96,360	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 94,389	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 18,203	Inflation
Current Class South Large	Initial CR? False	Medicaid: 61,276	FY Index: 1.31433985
Class at 1/94: South Large	Medical Utilization	64.91858%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	97.95455%	Cost: 1.02488934
Open Date: 11/13/2000	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/13/2000	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21766521
Entered Medicaid 11/13/2000	Low Occupancy Adjustment Factor:	124.70169%	DC Sem Index: 1.24200000
Med # Active Date: 08/19/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.01998480
Previous Med # 225177			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	3,316,811	5,955,194	3,888,781	2,944,312		16,105,098	
1a	Audit Adjustments							
2	Cost Per Diem	54.1290	97.1864	63.4634	48.0500		262.8288	
3	Cost Per Diem Inflated	55.4762	99.1287	65.0430				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.4762	99.1287	65.0430	48.0500		267.6979	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	56.0556		83.2978				
7	Provider Target Rate	57.2236		85.0334				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	54.4176	98.4475	63.9416	13.6500		230.4567	
12/13	Medical Adjustment Rate		1.6523	1.0732				
14	Prospective Per Diem 11	54.4176	100.0998	65.0148	13.6500		233.1822	
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

0 046128-00 - 2014/07

245.44

Rate Semester 07/01/2014 through 12/31/2014

Victoria Nursing and Rehabilitation Center, Inc.

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/13/2000	Mortgage Information		Calculation of FRVS Per Diem	
Year of Phase-In/Full:		Amount:	15,121,948.00	Total Amount	Per Diem
RS to Start Calcs:	2000/07	Type:	Variable	80% Capital(1):	10,210,678 14.0495
Indexed Asset Value	12,763,347	<60% of Base:	False	20% ROE(2):	2,552,669 0.5916
FRVS Base Asset:	5,618,709	Interest Rate:	10.5000%	Insurance Cost(3):	161,570 1.7117
Occup Adj Factor	0.9000	Chase Rate:	8.4408%	Taxes Cost(3):	163,609 1.7333
ROE Factor	0.020100	Amortization Rate:	10.4408%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	327,535 0.0000
		Yearly Payment:	1,218,428	Total FRVS PD:	18.0861

- (1) 80% Capital (\$10,210,678) amortized at 10.4408 % for 20 years Principal & Interest of \$1,218,428 divided by annual available days (96360) divided by Occup. Adj. (0.90) = \$14.0495
- (2) 20% ROE (\$2,552,669) times the ROE factor (0.020100) divided by annual available days (96360) divided by Occup. Adj. (0.90) = \$0.5916
- (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:	39,849
Comparison Date:	01/01/2000	Current RS PBS:	51,883
Comparison Bed	141	Effective PBS Limitation	5,618,709

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	100.0998	100.0998	1.7773	98.3225
Indirect Care	65.0148	65.0148	1.1543	63.8605
Property	13.6500	18.0861	0.3211	17.7650
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				2.1345
Supplemental Rate Add-on				9.9025
Totals	233.1822	237.6183	4.2189	245.4364

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 7/1/2014 through 12/31/2014 Based on Cost Report: 2/28/2014

0 046128-00 - 2014/07

245.44

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

0 046233-00 - 2014/07

257.84

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	4/1/2013-1/31/2014	Number of Beds: 101	Superior: 0
SARASOTA, FL 34234	Days in CR 306	Maximum: 30,906	Standard: 184
County: Sarasota [58]	First Used : 2014/07	Max Annualized: 36,865	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 20,835	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,029	Inflation
Current Class South Large	Initial CR? False	Medicaid: 17,449	FY Index: 1.31433985
Class at 1/94: South Large	Medical Utilization	83.74850%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	67.41409%	Cost: 1.02488934
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21766521
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	85.82196%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2011	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.01998480
Previous Med # 202681			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,004,580	1,713,291	1,078,548	227,884		4,024,303
1a	Audit Adjustments						
2	Cost Per Diem	57.5724	98.1885	61.8115	13.0600		230.6324
3	Cost Per Diem Inflated	59.0053	100.1508	63.3499			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	59.0053	100.1508	63.3499	13.0600		235.5660
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	62.6089		62.9787			
7	Provider Target Rate	63.9134		64.2909			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	57.9967		61.6735			
10b	Base for line 10a	56.8129		60.4147			
11	Lesser of 5,7,8,10, 10a	54.4176	98.4475	61.6735	13.0600		227.5986
12/13	Medical Adjustment Rate		3.7378	2.3416			
14	Prospective Per Diem 11	54.4176	102.1853	64.0151	13.0600		233.6780
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

0 046233-00 - 2014/07

257.84

Rate Semester 07/01/2014 through 12/31/2014

Crossbreeze Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	3,304,787 3.1840
RS to Start Calcs:	1971/07	<60% of Base:	True	20% ROE(2):	826,197 0.5075
Indexed Asset Value	4,130,984	Interest Rate:	0.0000%	Insurance Cost(3):	41,575 1.9954
FRVS Base Asset:	1,364,843	Chase Rate:	3.2500%	Taxes Cost(3):	41,913 2.0117
Occup Adj Factor	0.9000	Amortization Rate:	3.2500%	Home Office(3):	0 0.0000
ROE Factor	0.020380	Interest Only:	True	Replacement(3&4):	0 0.0000
		Yearly Payment:	105,639	Total FRVS PD:	7.6986

- (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. (0.900) = \$3.1840
- (2) 20% ROE (\$826,197) times the ROE factor (0.020380) divided by annual available days (36865) divided by Occup. Adj. (0.900) = \$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:	51,883
Comparison Bed	68	Effective PBS Limitation	1,938,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	102.1853	102.1853	1.8143	100.3710
Indirect Care	64.0151	64.0151	1.1366	62.8785
Property	13.0600	7.6986	0.1367	7.5619
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.6784
Supplemental Rate Add-on				9.9025
Totals	233.6780	228.3166	4.0538	257.8437

Medicaid Trend Adjustment



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257.84

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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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	

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	3/1/2013-2/28/2014	Number of Beds: 120	Superior: 184
MIAMI, FL 33128	Days in CR 365	Maximum: 43,800	Standard: 0
County: Dade [13]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 43,103	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,953	Inflation
Current Class South Large	Initial CR? False	Medicaid: 36,066	FY Index: 1.31433985
Class at 1/94: South Large	Medical Utilization	83.67399%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	98.40868%	Cost: 1.02488934
Open Date: 07/01/1975	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1975	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21766521
Entered Medicaid 04/01/1983	Low Occupancy Adjustment Factor:	125.27982%	DC Sem Index: 1.24200000
Med # Active Date: 03/29/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.01998480
Previous Med # 207276			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,954,417	3,448,963	2,230,668	543,154		8,177,202
1a	Audit Adjustments						
2	Cost Per Diem	54.1900	95.6292	61.8496	15.0600		226.7288
3	Cost Per Diem Inflated	55.5388	97.5403	63.3890			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	55.5388	97.5403	63.3890	15.0600		231.5281
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	47.1170		69.7690			
7	Provider Target Rate	48.0987		71.2227			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	48.0987	97.5403	63.3890	13.6500		222.6780
12/13	Medical Adjustment Rate		3.6951	2.4014			
14	Prospective Per Diem 11	48.0987	101.2354	65.7904	13.6500		228.7745
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Riverside Care Center
FRVS

FRVS Status as of this Semester

Not on FRVS

Began FRVS: Year of Phase-In/Full: RS to Start Calcs: Indexed Asset Value FRVS Base Asset: Occup Adj Factor ROE Factor	Mortgage Information Amount: Type: <60% of Base: Interest Rate: Chase Rate: Amortization Rate: Interest Only: Yearly Payment:	Calculation of FRVS Per Diem	
		Total Amount	Per Diem
1975/07	2,500,000.00	80% Capital(1): 2,444,851	6.6962
3,056,064	Fixed	20% ROE(2): 611,213	0.3117
782,402	False	Insurance Cost(3): 109,178	2.5330
0.9000	9.0000%	Taxes Cost(3): 72,053	1.6716
0.020100	8.5000%	Home Office(3): 0	0.0000
	9.0000%	Replacement(3&4): 40,009	0.0000
	False	Total FRVS PD:	11.2125
	263,964		

- (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 (0.020100) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.3117
- (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:	51,883
Comparison Bed 80	Effective PBS Limitation	2,280,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.0987	48.0987	0.8540	47.2447
Direct Care	101.2354	101.2354	1.7974	99.4380
Indirect Care	65.7904	65.7904	1.1681	64.6223
Property	13.6500	11.2125	0.2424	13.4076
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				25.3407
Supplemental Rate Add-on				9.9025
Totals	228.7745	226.3370	4.0619	259.9558

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	



Florida Agency for Health Care Administration
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259.96

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014

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Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 07/01/2014 through 12/31/2014

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238.60

Renaissance Health and Rehabilitation

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
5065 WALLIS ROAD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
WEST PALM BEACH , FL	Days in CR 182	Maximum: 21,840	Standard: 184
33415	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
County: Palm Beach [50]	Last Used: 2014/07	Total Patient: 18,319	Total: 184
Region: South Area: 9	Unaudited	Medicare: 1,256	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 15,182	FY Index: 1.27901138
Current Class South Large	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: South Large	Occupancy:	82.87570%	Cost: 1.05319853
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	83.87821%	Target: 1.01458517
Open Date: 10/01/1984	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20083276
Acquired Date: 10/01/1984	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 07/09/1986	Weighted Low Occ Adjustment Factor:	106.78171%	DC Inflation: 1.03428224
Med # Active Date: 02/01/2012		100.00000%	PS Target: 1.02083595
Previous Med # 252549			

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	758,413	1,146,227	829,482	304,703		3,038,825	
1a	Audit Adjustments							
2	Cost Per Diem	49.9547	75.4991	54.6359	20.0700		200.1597	
3	Cost Per Diem Inflated	52.6122	78.0874	57.5424				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.6122	78.0874	57.5424	20.0700		208.3120	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.4728		59.5775				
7	Provider Target Rate	55.6078		60.8189				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	54.3017		61.8549				
10b	Base for line 10a	53.1934		60.5924				
11	Lesser of 5,7,8,10, 10a	52.6122	78.0874	57.5424	13.6500		201.8920	
12/13	Medical Adjustment Rate		2.8881	2.1282				
14	Prospective Per Diem 11	52.6122	80.9755	59.6706	13.6500		206.9083	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,354,028	10.8811
Indexed Asset Value	5,442,535	<60% of Base:	False	20% ROE(2):	1,088,507	0.4316
FRVS Base Asset:	3,590,000	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.8649
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	32,548	1.7767
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,324	0.3998
		Interest Only:	False	Replacement(3&4):	42,132	0.0000
		Yearly Payment:	428,932	Total FRVS PD:		14.3541

- (1) 80% Capital (\$4,354,028) amortized at 7.7500 % for 20 years Principal & Interest of \$428,932 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.8811
 (2) 20% ROE (\$1,088,507) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4316
 (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,289,560

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.6122	52.6122	0.9341	51.6781
Direct Care	80.9755	80.9755	1.4377	79.5378
Indirect Care	59.6706	59.6706	1.0595	58.6111
Property	13.6500	14.3541	0.2549	14.0992
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.7694
Supplemental Rate Add-on				9.9025
Totals	206.9083	207.6124	3.6862	238.5981

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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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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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0 047788-00 - 2014/07
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Wood Lake Nursing and Rehabilitation Center
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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: Non-Related Party (NRP) CHOW	
Provider Information	Cost Report	Patient Days	Ratings Days
6414 13TH ROAD SOUTH	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
WEST PALM BEACH , FL	Days in CR 182	Maximum: 21,840	Standard: 184
33415	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
County: Palm Beach [50]	Last Used: 2014/07	Total Patient: 19,354	Total: 184
Region: South Area: 9	Unaudited	Medicare: 2,231	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 14,146	FY Index: 1.27901138
Current Class South Large	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: South Large	Occupancy:	73.09083%	Cost: 1.05319853
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	88.61722%	Target: 1.01458517
Open Date: 01/01/1988	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20083276
Acquired Date: 01/01/1988	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 07/11/1988	Weighted Low Occ Adjustment Factor:	112.81474%	DC Inflation: 1.03428224
Med # Active Date: 02/01/2012		100.00000%	PS Target: 1.02083595
Previous Med # 261599			

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	787,185	982,920	744,850	338,231		2,853,186	
1a	Audit Adjustments							
2	Cost Per Diem	55.6472	69.4840	52.6545	23.9100		201.6957	
3	Cost Per Diem Inflated	58.6075	71.8661	55.4556				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	58.6075	71.8661	55.4556	23.9100		209.8392	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	60.6802		57.4168				
7	Provider Target Rate	61.9445		58.6131				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	57.4910		65.3796				
10b	Base for line 10a	56.3176		64.0452				
11	Lesser of 5,7,8,10, 10a	54.4176	71.8661	55.4556	13.6500		195.3893	
12/13	Medical Adjustment Rate		1.8669	1.4406				
14	Prospective Per Diem 11	54.4176	73.7330	56.8962	13.6500		198.6968	
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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Rate Semester 07/01/2014 through 12/31/2014

Wood Lake Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS: 07/11/1988		Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,825,000.00		Total Amount	Per Diem
RS to Start Calcs:	1988/01	Type:	Fixed	80% Capital(1):	4,882,870	14.8401
Indexed Asset Value	6,103,588	<60% of Base:	False	20% ROE(2):	1,220,718	0.4840
FRVS Base Asset:	3,530,760	Interest Rate:	10.9360%	Insurance Cost(3):	15,845	0.8187
Occup Adj Factor	0.9000	Chase Rate:	7.5000%	Taxes Cost(3):	41,955	2.1678
ROE Factor	0.015630	Amortization Rate:	10.5000%	Home Office(3):	7,936	0.4100
		Interest Only:	False	Replacement(3&4):	24,885	0.0000
		Yearly Payment:	584,995	Total FRVS PD:		18.7206

- (1) 80% Capital (\$4,882,870) amortized at 10.5000 % for 20 years Principal & Interest of \$584,995 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.8401
- (2) 20% ROE (\$1,220,718) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4840
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,530,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	73.7330	73.7330	1.3091	72.4239
Indirect Care	56.8962	56.8962	1.0102	55.8860
Property	13.6500	18.7206	0.3324	18.3882
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.2197
Supplemental Rate Add-on				9.9025
Totals	198.6968	203.7674	3.6179	234.2717

Medicaid Trend Adjustment



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234.27

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	4,558,772	4,383,120	3
1997/01		0.90	1.4109	1.4109		120	53.59	4,558,772	4,444,920	3
1997/07	44,475	0.90	1.0917	1.0917		120	53.24	4,558,772	4,493,400	3
1998/01		1.00	1.1663	1.1663		120	53.24	4,558,772	4,545,840	3
1998/07		1.00	1.0794	1.0794		120	45.26	4,594,920	4,594,920	8
1999/01		1.00	1.4499	1.4499		120	45.26	4,649,744	4,661,520	
1999/07		1.00	1.2299	1.2299		120	45.26	4,696,804	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	

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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Hillcrest 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
4200 WASHINGTON STREET	2/1/2012-7/31/2012	Number of Beds: 240	Superior: 0
HOLLYWOOD, FL 33021	Days in CR 182	Maximum: 43,680	Standard: 184
County: Broward [6]	First Used : 2012/01	Max Annualized: 87,600	Conditional: 0
Region: South Area: 10	Last Used: 2014/07	Total Patient: 38,572	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,206	Inflation
Current Class South Large	Initial CR? False	Medicaid: 25,377	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	65.79125%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	88.30586%	Cost: 1.05319853
Open Date: 01/01/1986	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1986	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 06/27/1989	Low Occupancy Adjustment Factor:	112.41836%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252531			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,158,239	1,912,556	1,324,993	691,523		5,087,311
1a	Audit Adjustments						
2	Cost Per Diem	45.6413	75.3657	52.2124	27.2500		200.4694
3	Cost Per Diem Inflated	48.0694	77.9494	54.9900			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.0694	77.9494	54.9900	27.2500		208.2588
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.7693		56.9347			
7	Provider Target Rate	50.8063		58.1210			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	52.4375		61.4499			
10b	Base for line 10a	51.3672		60.1957			
11	Lesser of 5,7,8,10, 10a	48.0694	77.9494	54.9900	13.6500		194.6588
12/13	Medical Adjustment Rate		1.3848	0.9769			
14	Prospective Per Diem 11	48.0694	79.3342	55.9669	13.6500		197.0205
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Hillcrest Nursing 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):	8,841,870 11.0483
Indexed Asset Value	11,052,337	<60% of Base:	False	20% ROE(2):	2,210,467 0.4382
FRVS Base Asset:	6,840,000	Interest Rate:	10.6343%	Insurance Cost(3):	31,690 0.8216
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	102,090 2.6467
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	15,774 0.4089
		Interest Only:	False	Replacement(3&4):	64,032 0.0000
		Yearly Payment:	871,047	Total FRVS PD:	15.3637

- (1) 80% Capital (\$8,841,870) amortized at 7.7500 % for 20 years Principal & Interest of \$871,047 divided by annual available days (87600) divided by Occup. Adj. (0.900) = \$11.0483
- (2) 20% ROE (\$2,210,467) times the ROE factor (0.015630) divided by annual available days (87600) divided by Occup. Adj. (0.900) = \$0.4382
- (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:	51,883
Comparison Bed	240	Effective PBS Limitation	6,840,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.0694	48.0694	0.8535	47.2159
Direct Care	79.3342	79.3342	1.4086	77.9256
Indirect Care	55.9669	55.9669	0.9937	54.9732
Property	13.6500	15.3637	0.2728	15.0909
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				2.3770
Supplemental Rate Add-on				9.9025
Totals	197.0205	198.7342	3.5286	207.4851

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	

Message Code:

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



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237.44

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	10/1/2012-9/30/2013	Number of Beds: 228	Superior: 0
WINTER GARDEN, FL 34787	Days in CR 365	Maximum: 83,220	Standard: 184
County: Orange [48]	First Used : 2014/07	Max Annualized: 83,220	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 76,013	Total: 184
Control: Nonprofit : Other	Unaudited	Medicare: 11,261	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 50,929	FY Index: 1.30932625
Class at 1/94: North Large	Medical Utilization	67.00038%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.33982%	Cost: 1.02881379
Open Date: 10/01/1977	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1977	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 11/01/1977	Low Occupancy Adjustment Factor:	116.28077%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 204811			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,374,988	4,653,546	2,393,228	292,332		9,714,094	
1a	Audit Adjustments							
2	Cost Per Diem	46.6333	91.3732	46.9915	5.7400		190.7380	
3	Cost Per Diem Inflated	47.9770	93.6736	48.3455				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.9770	93.6736	48.3455	5.7400		195.7361	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.6425		53.9170				
7	Provider Target Rate	49.6560		55.0404				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	47.9770	93.6736	48.3455	5.7400		195.7361	
12/13	Medical Adjustment Rate		1.7915	0.9246				
14	Prospective Per Diem 11	47.9770	95.4651	49.2701	5.7400		198.4522	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Health Central Park

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	5,000,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	8,836,610 13.6090
RS to Start Calcs:	1977/07	<60% of Base:	False	20% ROE(2):	2,209,153 0.4917
Indexed Asset Value	11,045,763	Interest Rate:	9.9428%	Insurance Cost(3):	54,491 0.7169
FRVS Base Asset:	1,411,740	Chase Rate:	8.5000%	Taxes Cost(3):	0 0.0000
Occup Adj Factor	0.9000	Amortization Rate:	9.9428%	Home Office(3):	27,876 0.3667
ROE Factor	0.016670	Interest Only:	False	Replacement(3&4):	128,129 0.0000
		Yearly Payment:	1,019,287	Total FRVS PD:	15.1843

- (1) 80% Capital (\$8,836,610) amortized at 9.9428 % for 20 years Principal & Interest of \$1,019,287 divided by annual available days (83220) divided by Occup. Adj. (0.90) = \$13.6090
- (2) 20% ROE (\$2,209,153) times the ROE factor (0.016670) divided by annual available days (83220) divided by Occup. Adj. (0.90) = \$0.4917
- (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:	51,883
Comparison Bed	118	Effective PBS Limitation	3,363,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.9770	47.9770	0.8518	47.1252
Direct Care	95.4651	95.4651	1.6950	93.7701
Indirect Care	49.2701	49.2701	0.8748	48.3953
Property	5.7400	15.1843	0.2696	14.9147
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.3361
Supplemental Rate Add-on				9.9025
Totals	198.4522	207.8965	3.6912	237.4439

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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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	



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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	

Message Code:

- | |
|--|
| 3 Index Cost Limitation - January 1996
5 Uncorrected Licensure Deficiency
8 Limited to Current RS Per Bed Standard |
|--|



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Ocala Oaks 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
3930 E SILVER SPRINGS BLVD	6/1/2012-11/30/2012	Number of Beds: 120	Superior: 184
OCALA, FL 34470-5006	Days in CR 183	Maximum: 21,960	Standard: 0
County: Marion [42]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 19,879	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,624	Inflation
Current Class North Large	Initial CR? False	Medicaid: 13,689	FY Index: 1.28758294
Class at 1/94: North Large	Medical Utilization	68.86161%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.52368%	Cost: 1.04618728
Open Date: 04/04/1991	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/04/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20449917
Entered Medicaid 04/18/1991	Low Occupancy Adjustment Factor:	115.24177%	DC Sem Index: 1.24200000
Med # Active Date: 06/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03113396
Previous Med # 214043			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	623,214	1,291,579	699,419	354,545		2,968,757	
1a	Audit Adjustments							
2	Cost Per Diem	45.5266	94.3516	51.0935	25.9000		216.8717	
3	Cost Per Diem Inflated	47.6293	97.2891	53.4534				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.6293	97.2891	53.4534	25.9000		224.2718	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	49.2617		55.2852				
7	Provider Target Rate	50.2881		56.4371				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	50.5578		62.3133				
10b	Base for line 10a	49.5259		61.0414				
11	Lesser of 5,7,8,10, 10a	47.6293	95.0998	53.4534	13.6500		209.8325	
12/13	Medical Adjustment Rate		2.0180	1.1342				
14	Prospective Per Diem 11	47.6293	97.1178	54.5876	13.6500		212.9847	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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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):	4,282,262	13.2343
Indexed Asset Value	5,352,828	<60% of Base:	False	20% ROE(2):	1,070,566	0.3620
FRVS Base Asset:	3,642,240	Interest Rate:	10.7500%	Insurance Cost(3):	20,504	1.0314
Occup Adj Factor	0.9000	Chase Rate:	10.0000%	Taxes Cost(3):	36,200	1.8210
ROE Factor	0.013330	Amortization Rate:	10.7500%	Home Office(3):	5,362	0.2697
		Interest Only:	False	Replacement(3&4):	10,669	0.0000
		Yearly Payment:	521,697	Total FRVS PD:		16.7184

- (1) 80% Capital (\$4,282,262) amortized at 10.7500 % for 20 years Principal & Interest of \$521,697 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$13.2343
- (2) 20% ROE (\$1,070,566) times the ROE factor (0.013330) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3620
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.6293	47.6293	0.8457	46.7836
Direct Care	97.1178	97.1178	1.7243	95.3935
Indirect Care	54.5876	54.5876	0.9692	53.6184
Property	13.6500	16.7184	0.2968	16.4216
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.9586
Supplemental Rate Add-on				9.9025
Totals	212.9847	216.0531	3.8360	245.0782

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	5,853,321	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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245.08

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

0 048807-00 - 2014/07

259.47

New Riviera Nursing and Rehabilitation Center

Type of Cost Report: Cost Settled Interim New Facility 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	6/14/2012-11/30/2013	Number of Beds: 223	Superior: 0
CORAL GABLES, FL 33146	Days in CR 535	Maximum: 119,305	Standard: 184
County: Dade [13]	First Used : 2012/01	Max Annualized: 81,395	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 83,325	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 35,683	Inflation
Current Class South Large	Initial CR? True	Medicaid: 29,942	FY Index: 1.30580299
Class at 1/94: South Large	Medical Utilization		Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	35.93399%	Cost: 1.03158969
Open Date: 04/24/2012	Statewide Low Occupancy Threshold:	69.84200%	Target: 1.01458517
Acquired Date: 04/24/2012	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.21049917
Entered Medicaid 06/14/2012	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Med # Active Date: 06/14/2012	Weighted Low Occ Adjustment Factor:	88.91282%	DC Inflation: 1.02602301
Previous Med #		100.00000%	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,793,825	3,266,209	2,316,113	2,796,882		10,173,029
1a	Audit Adjustments						
2	Cost Per Diem	59.9100	109.0845	77.3533	93.4100		339.7578
3	Cost Per Diem Inflated	61.8025	111.9232	79.7969			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	61.8025	111.9232	79.7969	93.4100		346.9326
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	62.3928		80.5590			
7	Provider Target Rate	63.6928		82.2375			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	54.1391		63.0210			
10b	Base for line 10a	53.0341		61.7347			
11	Lesser of 5,7,8,10, 10a	54.1391	98.4475	63.0210	13.6500		229.2576
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	54.1391	98.4475	63.0210	13.6500		229.2576
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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259.47

Rate Semester 07/01/2014 through 12/31/2014

New Riviera Nursing and Rehabilitation Center

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):	9,080,371	10.8722
Indexed Asset Value	11,350,464	<60% of Base:	False	20% ROE(2):	2,270,093	0.5101
FRVS Base Asset:	11,102,055	Interest Rate:	6.9000%	Insurance Cost(3):	544,736	6.5375
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	573,463	6.8822
ROE Factor	0.016460	Amortization Rate:	6.2500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	3,000	0.0000
		Yearly Payment:	796,452	Total FRVS PD:		24.8020

- (1) 80% Capital (\$9,080,371) amortized at 6.2500 % for 20 years Principal & Interest of \$796,452 divided by annual available days (81395) divided by Occup. Adj. (0.900) = \$10.8722
- (2) 20% ROE (\$2,270,093) times the ROE factor (0.016460) divided by annual available days (81395) divided by Occup. Adj. (0.900) = \$0.5101
- (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:	49,593
Comparison Date:	07/01/2011	Current RS PBS:	51,883
Comparison Bed	223	Effective PBS Limitation	11,059,239

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.1391	54.1391	0.9612	53.1779
Direct Care	98.4475	98.4475	1.7479	96.6996
Indirect Care	63.0210	63.0210	1.1189	61.9021
Property	13.6500	24.8020	0.4404	24.3616
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				13.4223
Supplemental Rate Add-on				9.9025
Totals	229.2576	240.4096	4.2684	259.4660

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 7/1/2014 through 12/31/2014 Based on Cost Report: 11/30/2013

0 048807-00 - 2014/07

259.47

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

8 Limited to Current RS Per Bed Standard

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014

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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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0 054789-00 - 2014/07

209.46

South Dade Nursing and Rehabilitation 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
17475 S DIXIE HWY	6/1/2012-5/31/2013	Number of Beds: 180	Superior: 0
MIAMI, FL 33157	Days in CR 365	Maximum: 65,700	Standard: 184
County: Dade [13]	First Used : 2012/01	Max Annualized: 65,700	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 62,528	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,253	Inflation
Current Class South Large	Initial CR? False	Medicaid: 52,266	FY Index: 1.29575017
Class at 1/94: South Large	Medical Utilization	83.58815%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.17199%	Cost: 1.00000000
Open Date: 01/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20749917
Entered Medicaid 01/01/1985	Low Occupancy Adjustment Factor:	121.15933%	DC Sem Index: 1.24200000
Med # Active Date: 06/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 214027			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	2,036,001	4,292,206	2,207,401	1,047,933		9,583,541
1a	Audit Adjustments						
2	Cost Per Diem	38.9546	82.1223	42.2340	20.0500		183.3609
3	Cost Per Diem Inflated	38.9546	82.1223	42.2340			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	38.9546	82.1223	42.2340	20.0500		183.3609
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	48.5309		58.5664			
10b	Base for line 10a	47.5404		57.3710			
11	Lesser of 5,7,8,10, 10a	38.9546	82.1223	42.2340	13.6500		176.9609
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	38.9546	82.1223	42.2340	13.6500		176.9609
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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209.46

Rate Semester 07/01/2014 through 12/31/2014

South Dade Nursing and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/2004	Mortgage Information		Calculation of FRVS Per Diem		
Year of Phase-In/Full:		Amount:	6,105,900.00		Total Amount	Per Diem
RS to Start Calcs:	1985/01	Type:	Fixed	80% Capital(1):	6,734,111	14.1063
Indexed Asset Value	8,417,639	<60% of Base:	False	20% ROE(2):	1,683,528	0.3915
FRVS Base Asset:	5,130,000	Interest Rate:	11.0000%	Insurance Cost(3):	52,262	0.8358
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	201,594	3.2241
ROE Factor	0.013750	Amortization Rate:	11.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	834,105	Total FRVS PD:		18.5577

- (1) 80% Capital (\$6,734,111) amortized at 11.0000 % for 20 years Principal & Interest of \$834,105 divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$14.1063
- (2) 20% ROE (\$1,683,528) times the ROE factor (0.013750) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.3915
- (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:	51,883
Comparison Bed	180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	38.9546	38.9546	0.6916	38.2630
Direct Care	82.1223	82.1223	1.4581	80.6642
Indirect Care	42.2340	42.2340	0.7499	41.4841
Property	13.6500	18.5577	0.3295	18.2282
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.9182
Supplemental Rate Add-on				9.9025
Totals	176.9609	181.8686	3.2291	209.4602

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 7/1/2014 through 12/31/2014 Based on Cost Report: 5/31/2013

0 054789-00 - 2014/07

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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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209.46

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	83.59	8,227,520	8,961,300	
2012/07		0.60	0.9417	0.9417		180	83.59	8,274,005	9,045,720	
2013/01		0.60	0.4901	0.4901		180	83.59	8,298,339	9,090,000	
2013/07		0.55	0.6196	0.6196		180	83.59	8,326,620	9,146,340	
2014/01		0.55	0.8564	0.8564		180	83.59	8,365,838	9,224,640	
2014/07		0.50	1.2383	1.2383		180	83.59	8,417,639	9,338,940	

1 Per Bed Standard Limitation

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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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 07/01/2014 through 12/31/2014

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239.40

Golden Glades Nursing and Rehabilitation 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
220 SIERRA DRIVE	6/1/2012-5/31/2013	Number of Beds: 180	Superior: 0
MIAMI , FL 33179	Days in CR 365	Maximum: 65,700	Standard: 184
County: Dade [13]	First Used : 2012/01	Max Annualized: 65,700	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 50,614	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,060	Inflation
Current Class South Large	Initial CR? False	Medicaid: 44,631	FY Index: 1.29575017
Class at 1/94: South Large	Medical Utilization	88.17916%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	77.03805%	Cost: 1.00000000
Open Date: 09/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20749917
Entered Medicaid 09/01/1984	Low Occupancy Adjustment Factor:	98.07380%	DC Sem Index: 1.24200000
Med # Active Date: 06/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 207993			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,892,817	4,337,219	2,307,053	941,714		9,478,803	
1a	Audit Adjustments							
2	Cost Per Diem	42.4104	97.1795	51.6917	21.1000		212.3816	
3	Cost Per Diem Inflated	42.4104	97.1795	51.6917				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.4104	97.1795	51.6917	21.1000		212.3816	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	49.3732		63.9934				
10b	Base for line 10a	48.3655		62.6873				
11	Lesser of 5,7,8,10, 10a	42.4104	97.1795	51.6917	13.6500		204.9316	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	42.4104	97.1795	51.6917	13.6500		204.9316	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	7,225,837	15.7903
Indexed Asset Value	9,032,296	<60% of Base:	False	20% ROE(2):	1,806,459	0.4201
FRVS Base Asset:	5,130,000	Interest Rate:	11.6500%	Insurance Cost(3):	51,177	1.0111
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	178,989	3.5364
ROE Factor	0.013750	Amortization Rate:	11.6500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	933,680	Total FRVS PD:		20.7579

- (1) 80% Capital (\$7,225,837) amortized at 11.6500 % for 20 years Principal & Interest of \$933,680 divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$15.7903
- (2) 20% ROE (\$1,806,459) times the ROE factor (0.013750) divided by annual available days (65700) divided by Occup. Adj. (0.900) = \$0.4201
- (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:	51,883
Comparison Bed	180	Effective PBS Limitation	5,130,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.4104	42.4104	0.7530	41.6574
Direct Care	97.1795	97.1795	1.7254	95.4541
Indirect Care	51.6917	51.6917	0.9178	50.7739
Property	13.6500	20.7579	0.3686	20.3893
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.2258
Supplemental Rate Add-on				9.9025
Totals	204.9316	212.0395	3.7648	239.4030

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	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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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	53,459	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	93.50	8,096,580	8,096,580	8
2006/07		0.90	0.8133	0.8133		180	93.50	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	88.18	8,834,214	8,961,300	
2012/07		0.60	0.9417	0.9417		180	88.18	8,884,127	9,045,720	
2013/01		0.55	0.4901	0.4901		180	88.18	8,908,079	9,090,000	
2013/07		0.55	0.6196	0.6196		180	88.18	8,938,438	9,146,340	
2014/01		0.50	0.8564	0.8564		180	88.18	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	88.18	9,032,296	9,338,940	

Message Code:

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



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Calusa Harbour

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
2525 FIRST ST	10/1/2012-6/30/2013	Number of Beds: 60	Superior: 0
FORT MYERS, FL 33901	Days in CR 273	Maximum: 16,380	Standard: 184
County: Lee [36]	First Used : 2012/07	Max Annualized: 21,900	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 15,035	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,010	Inflation
Current Class South Small	Initial CR? False	Medicaid: 4,716	FY Index: 1.30580299
Class at 1/94: South Small	Medical Utilization	31.36681%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.78877%	Cost: 1.03158969
Open Date: 06/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21049917
Entered Medicaid 06/01/1984	Low Occupancy Adjustment Factor:	116.85230%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02602301
Previous Med # 221473			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	192,840	461,049	384,750	23,627		1,062,266	
1a	Audit Adjustments							
2	Cost Per Diem	40.8906	97.7627	81.5840	5.0100		225.2473	
3	Cost Per Diem Inflated	42.1823	100.3068	84.1612				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.1823	100.3068	84.1612	5.0100		231.6603	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	47.4985		84.9650				
7	Provider Target Rate	48.4882		86.7353				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	68.5517		76.6836				
10b	Base for line 10a	67.1525		75.1184				
11	Lesser of 5,7,8,10, 10a	42.1823	100.3068	76.6836	5.0100		224.1827	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	42.1823	100.3068	76.6836	5.0100		224.1827	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Calusa Harbour

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/2012	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	2,120,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	1,577,471 8.1918
RS to Start Calcs:	1984/01	<60% of Base:	False	20% ROE(2):	394,368 0.2973
Indexed Asset Value	1,971,839	Interest Rate:	8.2640%	Insurance Cost(3):	12,968 0.8625
FRVS Base Asset:	1,177,008	Chase Rate:	8.0000%	Taxes Cost(3):	15,091 1.0037
Occup Adj Factor	0.9000	Amortization Rate:	8.2640%	Home Office(3):	853 0.0567
ROE Factor	0.014860	Interest Only:	False	Replacement(3&4):	824,813 0.0000
		Yearly Payment:	161,460	Total FRVS PD:	10.4120

- (1) 80% Capital (\$1,577,471) amortized at 8.2640 % for 20 years Principal & Interest of \$161,460 divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$8.1918
- (2) 20% ROE (\$394,368) times the ROE factor (0.014860) divided by annual available days (21900) divided by Occup. Adj. (0.90) = \$0.2973
- (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:	51,883
Comparison Bed 100	Effective PBS Limitation	2,850,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.1823	42.1823	0.7490	41.4333
Direct Care	100.3068	100.3068	1.7810	98.5258
Indirect Care	76.6836	76.6836	1.3615	75.3221
Property	5.0100	10.4120	0.1849	10.2271
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				11.9354
Supplemental Rate Add-on				9.9025
Totals	224.1827	229.5847	4.0764	247.3462

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	



Florida Agency for Health Care Administration
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0 059369-00 - 2014/07

247.35

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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 059369063020131001201210102013115148



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 059400-00 - 2014/07

252.28

Stratford Court of Palm Harbor

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
45 KATHERINE BLVD	10/1/2012-6/30/2013	Number of Beds: 60	Superior: 0
PALM HARBOR, FL 34684	Days in CR 273	Maximum: 16,380	Standard: 184
County: Pinellas [52]	First Used : 2012/07	Max Annualized: 21,900	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 13,287	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,400	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 5,887	FY Index: 1.30580299
Class at 1/94: North Small	Medical Utilization	44.30646%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	81.11722%	Cost: 1.03158969
Open Date: 01/15/1992	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/15/1992	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21049917
Entered Medicaid 02/12/1992	Low Occupancy Adjustment Factor:	103.26682%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02602301
Previous Med # 210943			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	308,445	500,270	557,244	56,574		1,422,532	
1a	Audit Adjustments							
2	Cost Per Diem	52.3943	84.9787	94.6567	9.6100		241.6397	
3	Cost Per Diem Inflated	54.0494	87.1901	97.6469				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.0494	87.1901	97.6469	9.6100		248.4964	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.5657		98.5794				
7	Provider Target Rate	55.7026		100.6334				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	60.0551		71.7636				
10b	Base for line 10a	58.8293		70.2989				
11	Lesser of 5,7,8,10, 10a	54.0494	87.1901	71.7636	9.6100		222.6131	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	54.0494	87.1901	71.7636	9.6100		222.6131	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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252.28

Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	4,493,048.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	1,966,274	11.1588
RS to Start Calcs:	1992/01	<60% of Base:	False	20% ROE(2):	491,569	0.3706
Indexed Asset Value	2,457,843	Interest Rate:	10.2000%	Insurance Cost(3):	17,885	1.3461
FRVS Base Asset:	1,859,160	Chase Rate:	6.5000%	Taxes Cost(3):	22,830	1.7182
Occup Adj Factor	0.9000	Amortization Rate:	9.5000%	Home Office(3):	811	0.0610
ROE Factor	0.014860	Interest Only:	False	Replacement(3&4):	552,271	0.0000
		Yearly Payment:	219,939	Total FRVS PD:		14.6547

- (1) 80% Capital (\$1,966,274) amortized at 9.5000 % for 20 years Principal & Interest of \$219,939 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$11.1588
- (2) 20% ROE (\$491,569) times the ROE factor (0.014860) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.3706
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,859,160

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.0494	54.0494	0.9597	53.0897
Direct Care	87.1901	87.1901	1.5481	85.6420
Indirect Care	71.7636	71.7636	1.2742	70.4894
Property	9.6100	14.6547	0.2602	14.3945
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.7589
Supplemental Rate Add-on				9.9025
Totals	222.6131	227.6578	4.0422	252.2770

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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252.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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252.28

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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254.78

Gardens of Port St. Lucie

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1699 SE LYNATE DRIVE	10/1/2012-6/30/2013	Number of Beds: 30	Superior: 0
PORT SAINT LUCIE, FL 34952	Days in CR 273	Maximum: 8,190	Standard: 184
County: St Lucie [56]	First Used : 2012/07	Max Annualized: 10,950	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 7,653	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,330	Inflation
Current Class South Small	Initial CR? False	Medicaid: 2,149	FY Index: 1.30580299
Class at 1/94: South Small	Medical Utilization	28.08049%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.44322%	Cost: 1.03158969
Open Date: 10/13/1993	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/13/1993	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21049917
Entered Medicaid 10/18/1993	Low Occupancy Adjustment Factor:	118.95851%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02602301
Previous Med # 210781			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	98,532	210,075	167,379	48,825		524,811	
1a	Audit Adjustments							
2	Cost Per Diem	45.8502	97.7548	77.8869	22.7199		244.2118	
3	Cost Per Diem Inflated	47.2986	100.2987	80.3473				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.2986	100.2987	80.3473	22.7199		250.6645	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	47.7504		81.1142				
7	Provider Target Rate	48.7453		82.8043				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation	62.5484		78.2061				
10b	Base for line 10a	61.2717		76.6099				
11	Lesser of 5,7,8,10, 10a	47.2986	100.2987	78.2061	13.6500		239.4534	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	47.2986	100.2987	78.2061	13.6500		239.4534	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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254.78

Rate Semester 07/01/2014 through 12/31/2014

Gardens of Port St. Lucie

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/18/1993	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	1,968,820.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	1,134,261	12.8741
RS to Start Calcs:	1993/07	<60% of Base:	False	20% ROE(2):	283,565	0.4276
Indexed Asset Value	1,417,826	Interest Rate:	10.0000%	Insurance Cost(3):	52,576	6.8700
FRVS Base Asset:	982,590	Chase Rate:	6.5000%	Taxes Cost(3):	23,993	3.1351
Occup Adj Factor	0.9000	Amortization Rate:	9.5000%	Home Office(3):	1,459	0.1906
ROE Factor	0.014860	Interest Only:	False	Replacement(3&4):	172,380	0.0000
		Yearly Payment:	126,874	Total FRVS PD:		23.4974

- (1) 80% Capital (\$1,134,261) amortized at 9.5000 % for 20 years Principal & Interest of \$126,874 divided by annual available days (10950) divided by Occup. Adj. (0.900) = \$12.8741
- (2) 20% ROE (\$283,565) times the ROE factor (0.014860) divided by annual available days (10950) divided by Occup. Adj. (0.900) = \$0.4276
- (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:	32,753
Comparison Date:	01/01/1993	Current RS PBS:	51,883
Comparison Bed	30	Effective PBS Limitation	982,590

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.2986	47.2986	0.8398	46.4588
Direct Care	100.2987	100.2987	1.7808	98.5179
Indirect Care	78.2061	78.2061	1.3886	76.8175
Property	13.6500	23.4974	0.4172	23.0802
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Totals	239.4534	249.3008	4.4264	254.7769

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 6/30/2013

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254.78

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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0 059404-00 - 2014/07

254.78

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

0 059783-00 - 2014/07

204.60

Summer Brook Health Care Center

Type of Cost Report: **Interim Change of Ownership - Budget** Type of Cost: **Estimated** Type of Rate: **Interim**
 Type of Ownership: **Nonprofit : 501(c)(3) Organization** CHOW Status based on this Cost Report: **Non-Related Party (NRP) CHOW**

Provider Information	Cost Report	Patient Days	Ratings Days
5377 MONCRIEF ROAD	7/1/2012-6/30/2013	Number of Beds: 120	Superior: 0
JACKSONVILLE , FL 32209	Days in CR 365	Maximum: 43,800	Standard: 184
County: Duval [16]	First Used : 2012/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 42,340	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 4,229	Inflation
Current Class North Large	Initial CR? False	Medicaid: 35,556	FY Index: 1.29878490
Class at 1/94: North Large	Medical Utilization	83.97733%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.66667%	Cost: 1.00000000
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	123.06215%	DC Sem Index: 1.24200000
Med # Active Date: 07/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 265721			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,277,215	2,808,956	1,274,629	950,767		7,311,567	
1a	Audit Adjustments							
2	Cost Per Diem	64.0459	79.0009	35.8485	26.7400		205.6353	
3	Cost Per Diem Inflated	64.0459	79.0009	35.8485				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	64.0459	79.0009	35.8485	26.7400		205.6353	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	51.0930		49.0802				
10b	Base for line 10a	50.0502		48.0784				
11	Lesser of 5,7,8,10, 10a	49.7653	79.0009	35.8485	13.6500		178.2647	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	49.7653	79.0009	35.8485	13.6500		178.2647	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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0 059783-00 - 2014/07

204.60

Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	1,232,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	2,701,146 5.8910
RS to Start Calcs:	1971/07	<60% of Base:	False	20% ROE(2):	675,286 0.2445
Indexed Asset Value	3,376,432	Interest Rate:	6.0000%	Insurance Cost(3):	21,500 0.5078
FRVS Base Asset:	1,522,570	Chase Rate:	4.0000%	Taxes Cost(3):	30,700 0.7251
Occup Adj Factor	0.9000	Amortization Rate:	6.0000%	Home Office(3):	0 0.0000
ROE Factor	0.014270	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	232,222	Total FRVS PD:	7.3684

- (1) 80% Capital (\$2,701,146) amortized at 6.0000 % for 20 years Principal & Interest of \$232,222 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$5.8910
- (2) 20% ROE (\$675,286) times the ROE factor (0.014270) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2445
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.7653	49.7653	0.8836	48.8817
Direct Care	79.0009	79.0009	1.4027	77.5982
Indirect Care	35.8485	35.8485	0.6365	35.2120
Property	13.6500	7.3684	0.1308	7.2376
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				25.7664
Supplemental Rate Add-on				9.9025
Totals	178.2647	171.9831	3.0536	204.5984

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	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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204.60

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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204.60

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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		0.00	0.9417	0.9417		120	83.98	3,376,432	6,030,480	
2013/01		0.00	0.4901	0.4901		120	83.98	3,376,432	6,060,000	
2013/07		0.00	0.6196	0.6196		120	83.98	3,376,432	6,097,560	
2014/01		0.00	0.8564	0.8564		120	83.98	3,376,432	6,149,760	
2014/07		0.00	1.2383	1.2383		120	83.98	3,376,432	6,225,960	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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207.01

Shoal Creek 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
500 HOSPITAL DRIVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
CRESTVIEW, FL 32539	Days in CR 182	Maximum: 21,840	Standard: 184
County: Okaloosa [46]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 21,179	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,851	Inflation
Current Class North Large	Initial CR? False	Medicaid: 13,569	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	64.06818%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.97344%	Cost: 1.05319853
Open Date: 04/05/2000	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/05/2000	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 04/27/2000	Low Occupancy Adjustment Factor:	123.45268%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252379			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	579,296	894,534	652,563	399,336		2,525,729	
1a	Audit Adjustments							
2	Cost Per Diem	42.6926	65.9248	48.0922	29.4300		186.1396	
3	Cost Per Diem Inflated	44.9638	68.1848	50.6506				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.9638	68.1848	50.6506	29.4300		193.2292	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.5540		52.4419				
7	Provider Target Rate	47.5240		53.5346				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.0806		55.1578				
10b	Base for line 10a	46.1197		54.0320				
11	Lesser of 5,7,8,10, 10a	44.9638	68.1848	50.6506	13.6500		177.4492	
12/13	Medical Adjustment Rate		1.0791	0.8016				
14	Prospective Per Diem 11	44.9638	69.2639	51.4522	13.6500		179.3299	
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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207.01

Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	4,919,915.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,482,470	11.2021
RS to Start Calcs:	2000/01	<60% of Base:	False	20% ROE(2):	1,120,618	0.4443
Indexed Asset Value	5,603,088	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7481
FRVS Base Asset:	4,718,880	Chase Rate:	4.7500%	Taxes Cost(3):	27,624	1.3043
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	7,171	0.3386
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	38,758	0.0000
		Yearly Payment:	441,585	Total FRVS PD:		14.0374

- (1) 80% Capital (\$4,482,470) amortized at 7.7500 % for 20 years Principal & Interest of \$441,585 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.2021
- (2) 20% ROE (\$1,120,618) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4443
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,718,880

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.9638	44.9638	0.7983	44.1655
Direct Care	69.2639	69.2639	1.2298	68.0341
Indirect Care	51.4522	51.4522	0.9135	50.5387
Property	13.6500	14.0374	0.2492	13.7882
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.5790
Supplemental Rate Add-on				9.9025
Totals	179.3299	179.7173	3.1908	207.0080

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 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2012

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207.01

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 059852073120120201201207312013103241



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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213.57

Englewood Healthcare & 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1111 DRURY LANE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
ENGLEWOOD, FL 34224	Days in CR 182	Maximum: 21,840	Standard: 184
County: Charlotte [8]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 18,813	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,892	Inflation
Current Class South Large	Initial CR? False	Medicaid: 9,654	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	51.31558%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	86.14011%	Cost: 1.05319853
Open Date: 09/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 09/01/1983	Low Occupancy Adjustment Factor:	109.66124%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252204			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	446,485	670,807	496,688	311,052		1,925,032	
1a	Audit Adjustments							
2	Cost Per Diem	46.2487	69.4849	51.4489	32.2200		199.4025	
3	Cost Per Diem Inflated	48.7091	71.8670	54.1859				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.7091	71.8670	54.1859	32.2200		206.9820	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.4317		56.1022				
7	Provider Target Rate	51.4825		57.2711				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	49.6559		59.2696				
10b	Base for line 10a	48.6424		58.0599				
11	Lesser of 5,7,8,10, 10a	48.7091	71.8670	54.1859	13.6500		188.4120	
12/13	Medical Adjustment Rate		0.1064	0.0802				
14	Prospective Per Diem 11	48.7091	71.9734	54.2661	13.6500		188.5986	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,289,449	10.7197
Indexed Asset Value	5,361,811	<60% of Base:	False	20% ROE(2):	1,072,362	0.4252
FRVS Base Asset:	3,190,349	Interest Rate:	10.6343%	Insurance Cost(3):	17,184	0.9134
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	26,267	1.3962
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,584	0.4031
		Interest Only:	False	Replacement(3&4):	17,405	0.0000
		Yearly Payment:	422,570	Total FRVS PD:		13.8576

- (1) 80% Capital (\$4,289,449) amortized at 7.7500 % for 20 years Principal & Interest of \$422,570 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.7197
- (2) 20% ROE (\$1,072,362) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4252
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.7091	48.7091	0.8648	47.8443
Direct Care	71.9734	71.9734	1.2779	70.6955
Indirect Care	54.2661	54.2661	0.9635	53.3026
Property	13.6500	13.8576	0.2460	13.6116
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.2132
Supplemental Rate Add-on				9.9025
Totals	188.5986	188.8062	3.3522	213.5697

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
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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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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213.57

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency

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Florida Agency for Health Care Administration
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211.06

Island 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
125 ALMA BLVD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
MERRITT ISLAND, FL 32953	Days in CR 182	Maximum: 21,840	Standard: 184
County: Brevard [5]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 18,511	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,979	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 11,462	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	61.91994%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	84.75733%	Cost: 1.05319853
Open Date: 01/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 01/01/1983	Low Occupancy Adjustment Factor:	107.90088%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252352			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	532,063	767,547	579,388	349,133		2,228,131	
1a	Audit Adjustments							
2	Cost Per Diem	46.4197	66.9645	50.5486	30.4600		194.3928	
3	Cost Per Diem Inflated	48.8892	69.2602	53.2377				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.8892	69.2602	53.2377	30.4600		201.8471	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.6181		55.1204				
7	Provider Target Rate	51.6728		56.2689				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	49.7129		58.3205				
10b	Base for line 10a	48.6982		57.1301				
11	Lesser of 5,7,8,10, 10a	48.8892	69.2602	53.2377	13.6500		185.0371	
12/13	Medical Adjustment Rate		0.9288	0.7139				
14	Prospective Per Diem 11	48.8892	70.1890	53.9516	13.6500		186.6798	
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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211.06

Rate Semester 07/01/2014 through 12/31/2014

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):	2,995,524	7.4861
Indexed Asset Value	3,744,405	<60% of Base:	False	20% ROE(2):	748,881	0.2969
FRVS Base Asset:	2,166,208	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.8560
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	16,809	0.9081
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	8,819	0.4764
		Interest Only:	False	Replacement(3&4):	39,612	0.0000
		Yearly Payment:	295,101	Total FRVS PD:		10.0235

- (1) 80% Capital (\$2,995,524) amortized at 7.7500 % for 20 years Principal & Interest of \$295,101 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.4861
- (2) 20% ROE (\$748,881) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2969
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.8892	48.8892	0.8680	48.0212
Direct Care	70.1890	70.1890	1.2462	68.9428
Indirect Care	53.9516	53.9516	0.9579	52.9937
Property	13.6500	10.0235	0.1780	9.8455
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.3533
Supplemental Rate Add-on				9.9025
Totals	186.6798	183.0533	3.2501	211.0590

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	2,125,573	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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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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 059866073120120201201207312013095731



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Rosewood Health and Rehabilitation Center

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

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
3920 ROSEWOOD WAY	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
ORLANDO, FL 32808	Days in CR 182	Maximum: 21,840	Standard: 184
County: Orange [48]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 20,885	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,778	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 14,727	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	70.51472%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.62729%	Cost: 1.05319853
Open Date: 11/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 11/01/1984	Low Occupancy Adjustment Factor:	121.73896%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252468	Interim Component Effective Date:	07/01/2013	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	663,506	1,142,761	733,799	404,109		2,944,175	
1a	Audit Adjustments							
2	Cost Per Diem	45.0537	77.5963	49.8268	27.4400		199.9168	
3	Cost Per Diem Inflated	47.4505	80.2565	52.4775				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.4505	80.2565	52.4775	27.4400		207.6245	
5a	Interim Adjustment		0.1562	0.0841				
5b	Interim Adjusted Per Diem		80.4127	52.5616				
6	Prior Semester: Provider Target Base	49.1285		54.3333				
7	Provider Target Rate	50.1521		55.4654				
7a	Interim Adjustment			0.0841				
7b	Interim Adjustment Provider Target Rate			55.5495				
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	50.2417		57.7419				
10b	Base for line 10a	49.2162		56.4810				
11	Lesser of 5,7,8,10, 10a	47.4505	80.4127	52.5616	13.6500		194.0748	
12/13	Medical Adjustment Rate		1.8558	1.2131				
14	Prospective Per Diem 11	47.4505	82.2685	53.7747	13.6500		197.1437	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,727,836	11.8152
Indexed Asset Value	5,909,795	<60% of Base:	False	20% ROE(2):	1,181,959	0.4686
FRVS Base Asset:	3,420,000	Interest Rate:	10.6343%	Insurance Cost(3):	16,278	0.7794
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	28,323	1.3561
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	8,221	0.3936
		Interest Only:	False	Replacement(3&4):	28,715	0.0000
		Yearly Payment:	465,757	Total FRVS PD:		14.8129

- (1) 80% Capital (\$4,727,836) amortized at 7.7500 % for 20 years Principal & Interest of \$465,757 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.8152
 (2) 20% ROE (\$1,181,959) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4686
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.4505	47.4505	0.8425	46.6080
Direct Care	82.2685	82.2685	1.4607	80.8078
Indirect Care	53.7747	53.7747	0.9548	52.8199
Property	13.6500	14.8129	0.2630	14.5499
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.1293
Supplemental Rate Add-on				9.9025
Totals	197.1437	198.3066	3.5210	226.8174

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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 059869073120120201201207312013132513



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 Rate Semester 07/01/2014 through 12/31/2014

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225.83

Evans Health Care

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
3735 EVANS AVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
FORT MYERS, FL 33901	Days in CR 182	Maximum: 21,840	Standard: 184
County: Lee [36]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 20,694	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,654	Inflation
Current Class South Large	Initial CR? False	Medicaid: 8,952	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	43.25892%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.75275%	Cost: 1.05319853
Open Date: 12/03/1998	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/03/1998	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 12/14/1998	Low Occupancy Adjustment Factor:	120.62562%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252212			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	439,051	685,300	463,262	238,660		1,826,273
1a	Audit Adjustments						
2	Cost Per Diem	49.0450	76.5527	51.7496	26.6600		204.0073
3	Cost Per Diem Inflated	51.6541	79.1771	54.5026			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	51.6541	79.1771	54.5026	26.6600		211.9938
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	53.4808		56.4301			
7	Provider Target Rate	54.5951		57.6059			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	52.4002		60.9105			
10b	Base for line 10a	51.3307		59.6673			
11	Lesser of 5,7,8,10, 10a	51.6541	79.1771	54.5026	13.6500		198.9838
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	51.6541	79.1771	54.5026	13.6500		198.9838
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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Rate Semester 07/01/2014 through 12/31/2014

Evans Health Care

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	12/14/1998	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	3,725,244.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	3,865,048 9.6591
RS to Start Calcs:	1998/07	<60% of Base:	False	20% ROE(2):	966,262 0.3831
Indexed Asset Value	4,831,310	Interest Rate:	10.6343%	Insurance Cost(3):	15,845 0.7657
FRVS Base Asset:	3,977,610	Chase Rate:	4.7500%	Taxes Cost(3):	45,158 2.1822
Occup Adj Factor	0.9000	Amortization Rate:	7.7500%	Home Office(3):	8,652 0.4181
ROE Factor	0.015630	Interest Only:	False	Replacement(3&4):	19,841 0.0000
		Yearly Payment:	380,761	Total FRVS PD:	13.4082

- (1) 80% Capital (\$3,865,048) amortized at 7.7500 % for 20 years Principal & Interest of \$380,761 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.6591
 (2) 20% ROE (\$966,262) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3831
 (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:	51,883
Comparison Bed 105	Effective PBS Limitation	3,977,610

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.6541	51.6541	0.9171	50.7370
Direct Care	79.1771	79.1771	1.4058	77.7713
Indirect Care	54.5026	54.5026	0.9677	53.5349
Property	13.6500	13.4082	0.2381	13.1701
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.7098
Supplemental Rate Add-on				9.9025
Totals	198.9838	198.7420	3.5287	225.8256

Medicaid Trend Adjustment



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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2012

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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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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200.87

Sea Breeze Health Care

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1937 JENKS AVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
PANAMA CITY, FL 32405	Days in CR 182	Maximum: 21,840	Standard: 184
County: Bay [3]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 20,206	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,506	Inflation
Current Class North Large	Initial CR? False	Medicaid: 14,732	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	72.90904%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.51832%	Cost: 1.05319853
Open Date: 12/01/1979	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/01/1979	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 06/01/1980	Low Occupancy Adjustment Factor:	117.78106%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252247			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	590,338	966,131	674,224	267,975		2,498,668	
1a	Audit Adjustments							
2	Cost Per Diem	40.0718	65.5804	45.7660	18.1900		169.6082	
3	Cost Per Diem Inflated	42.2036	67.8286	48.2007				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.2036	67.8286	48.2007	18.1900		176.4229	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	43.6961		49.9051				
7	Provider Target Rate	44.6065		50.9449				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	46.0263		53.2699				
10b	Base for line 10a	45.0869		52.1826				
11	Lesser of 5,7,8,10, 10a	42.2036	67.8286	48.2007	13.6500		171.8829	
12/13	Medical Adjustment Rate		1.7481	1.2423				
14	Prospective Per Diem 11	42.2036	69.5767	49.4430	13.6500		174.8733	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	2,474,184 7.2683
Indexed Asset Value	3,092,730	<60% of Base:	False	20% ROE(2):	618,546 0.2453
FRVS Base Asset:	1,814,520	Interest Rate:	10.0000%	Insurance Cost(3):	17,317 0.8570
Occup Adj Factor	0.9000	Chase Rate:	13.0000%	Taxes Cost(3):	11,736 0.5808
ROE Factor	0.015630	Amortization Rate:	10.0000%	Home Office(3):	6,810 0.3370
		Interest Only:	False	Replacement(3&4):	33,875 0.0000
		Yearly Payment:	286,517	Total FRVS PD:	9.2884

- (1) 80% Capital (\$2,474,184) amortized at 10.0000 % for 20 years Principal & Interest of \$286,517 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.2683
- (2) 20% ROE (\$618,546) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2453
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.2036	42.2036	0.7493	41.4543
Direct Care	69.5767	69.5767	1.2353	68.3414
Indirect Care	49.4430	49.4430	0.8779	48.5651
Property	13.6500	9.2884	0.1649	9.1235
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.4793
Supplemental Rate Add-on				9.9025
Totals	174.8733	170.5117	3.0274	200.8661

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	



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 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2012

0 059874-00 - 2014/07

200.87

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 059874073120120201201207302013160058



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 059877-00 - 2014/07

215.49

Spring Hill 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
12170 CORTEZ BLVD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
BROOKSVILLE, FL 34613	Days in CR 182	Maximum: 21,840	Standard: 184
County: Hernando [27]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 20,984	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,328	Inflation
Current Class North Large	Initial CR? False	Medicaid: 10,378	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	49.45673%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.08059%	Cost: 1.05319853
Open Date: 07/11/1997	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/11/1997	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 08/01/1997	Low Occupancy Adjustment Factor:	122.31603%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252492			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	436,731	767,114	570,764	295,877		2,070,486
1a	Audit Adjustments						
2	Cost Per Diem	42.0824	73.9174	54.9975	28.5100		199.5073
3	Cost Per Diem Inflated	44.3211	76.4515	57.9233			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	44.3211	76.4515	57.9233	28.5100		207.2059
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	45.8885		59.9718			
7	Provider Target Rate	46.8446		61.2214			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	47.3817		57.2928			
10b	Base for line 10a	46.4146		56.1234			
11	Lesser of 5,7,8,10, 10a	44.3211	76.4515	57.2928	13.6500		191.7154
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	44.3211	76.4515	57.2928	13.6500		191.7154
15	Inflated Usual & Customary Charge						0.00



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

0 059877-00 - 2014/07

215.49

Rate Semester 07/01/2014 through 12/31/2014

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):	4,384,666	10.9576
Indexed Asset Value	5,480,832	<60% of Base:	False	20% ROE(2):	1,096,166	0.4346
FRVS Base Asset:	4,444,920	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7551
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	57,799	2.7544
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	9,636	0.4592
		Interest Only:	False	Replacement(3&4):	48,366	0.0000
		Yearly Payment:	431,950	Total FRVS PD:		15.3609

- (1) 80% Capital (\$4,384,666) amortized at 7.7500 % for 20 years Principal & Interest of \$431,950 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.9576
- (2) 20% ROE (\$1,096,166) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4346
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,444,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.3211	44.3211	0.7869	43.5342
Direct Care	76.4515	76.4515	1.3574	75.0941
Indirect Care	57.2928	57.2928	1.0172	56.2756
Property	13.6500	15.3609	0.2727	15.0882
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.5963
Supplemental Rate Add-on				9.9025
Totals	191.7154	193.4263	3.4342	215.4909

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 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2012

0 059877-00 - 2014/07

215.49

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	



Florida Agency for Health Care Administration
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215.49

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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 059877073120120201201207312013141125



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 060972-00 - 2014/07

219.87

Emerald Shores Health and Rehabilitation

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
626 NORTH TYNDALL PARKWAY	2/1/2012-7/31/2012	Number of Beds: 77	Superior: 0
CALLAWAY, FL 32404	Days in CR 182	Maximum: 14,014	Standard: 184
County: Bay [3]	First Used : 2012/01	Max Annualized: 28,105	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 13,393	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,897	Inflation
Current Class North Small	Initial CR? False	Medicaid: 5,930	FY Index: 1.27901138
Class at 1/94: North Small	Medical Utilization	44.27686%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.56872%	Cost: 1.05319853
Open Date: 08/30/2000	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/30/2000	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 08/30/2000	Low Occupancy Adjustment Factor:	121.66439%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252191			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	283,720	431,118	320,226	140,956		1,176,020
1a	Audit Adjustments						
2	Cost Per Diem	47.8449	72.7012	54.0010	23.7700		198.3171
3	Cost Per Diem Inflated	50.3902	75.1936	56.8738			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	50.3902	75.1936	56.8738	23.7700		206.2276
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	52.1723		58.8851			
7	Provider Target Rate	53.2594		60.1120			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation	53.0201		63.0462			
10b	Base for line 10a	51.9379		61.7594			
11	Lesser of 5,7,8,10, 10a	50.3902	75.1936	56.8738	13.6500		196.1076
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	50.3902	75.1936	56.8738	13.6500		196.1076
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

0 060972-00 - 2014/07

219.87

Rate Semester 07/01/2014 through 12/31/2014

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):	2,846,426	11.0859
Indexed Asset Value	3,558,033	<60% of Base:	False	20% ROE(2):	711,607	0.4397
FRVS Base Asset:	3,068,373	Interest Rate:	10.6343%	Insurance Cost(3):	10,167	0.7591
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	16,528	1.2341
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	5,603	0.4184
		Interest Only:	False	Replacement(3&4):	12,290	0.0000
		Yearly Payment:	280,412	Total FRVS PD:		13.9372

- (1) 80% Capital (\$2,846,426) amortized at 7.7500 % for 20 years Principal & Interest of \$280,412 divided by annual available days (28105) divided by Occup. Adj. (0.900) = \$11.0859
- (2) 20% ROE (\$711,607) times the ROE factor (0.015630) divided by annual available days (28105) divided by Occup. Adj. (0.900) = \$0.4397
- (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:	39,849
Comparison Date:	01/01/2000	Current RS PBS:	51,883
Comparison Bed	77	Effective PBS Limitation	3,068,373

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.3902	50.3902	0.8947	49.4955
Direct Care	75.1936	75.1936	1.3351	73.8585
Indirect Care	56.8738	56.8738	1.0098	55.8640
Property	13.6500	13.9372	0.2475	13.6897
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.0565
Supplemental Rate Add-on				9.9025
Totals	196.1076	196.3948	3.4871	219.8667

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
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0 060972-00 - 2014/07

219.87

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

0 060993-00 - 2014/07

210.26

University Hills Health and Rehabilitation

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
10040 HILL VIEW ROAD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
PENSACOLA, FL 32514	Days in CR 182	Maximum: 21,840	Standard: 184
County: Escambia [17]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 19,351	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 1,537	Inflation
Current Class North Large	Initial CR? False	Medicaid: 14,245	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	73.61377%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	88.60348%	Cost: 1.05319853
Open Date: 08/01/1982	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1982	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 08/01/1982	Low Occupancy Adjustment Factor:	112.79725%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252123			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	614,558	958,956	663,735	359,829		2,597,078	
1a	Audit Adjustments							
2	Cost Per Diem	43.1420	67.3188	46.5942	25.2600		182.3150	
3	Cost Per Diem Inflated	45.4371	69.6266	49.0729				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.4371	69.6266	49.0729	25.2600		189.3966	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	47.0441		50.8084				
7	Provider Target Rate	48.0243		51.8670				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	48.2049		57.2928				
10b	Base for line 10a	47.2210		56.1234				
11	Lesser of 5,7,8,10, 10a	45.4371	69.6266	49.0729	13.6500		177.7866	
12/13	Medical Adjustment Rate		1.8497	1.3036				
14	Prospective Per Diem 11	45.4371	71.4763	50.3765	13.6500		180.9399	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

University Hills Health and Rehabilitation

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:	3,105,912.00		Total Amount	Per Diem
RS to Start Calcs:	1982/07	Type:	Fixed	80% Capital(1):	4,441,328	11.0992
Indexed Asset Value	5,551,660	<60% of Base:	False	20% ROE(2):	1,110,332	0.4402
FRVS Base Asset:	3,249,000	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.8188
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	20,141	1.0408
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	6,656	0.3440
		Interest Only:	False	Replacement(3&4):	22,985	0.0000
		Yearly Payment:	437,532	Total FRVS PD:		13.7430

- (1) 80% Capital (\$4,441,328) amortized at 7.7500 % for 20 years Principal & Interest of \$437,532 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.0992
- (2) 20% ROE (\$1,110,332) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4402
- (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:	51,883
Comparison Bed	114	Effective PBS Limitation	3,249,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.4371	45.4371	0.8067	44.6304
Direct Care	71.4763	71.4763	1.2691	70.2072
Indirect Care	50.3765	50.3765	0.8944	49.4821
Property	13.6500	13.7430	0.2440	13.4990
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.5370
Supplemental Rate Add-on				9.9025
Totals	180.9399	181.0329	3.2142	210.2582

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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 060993073120120201201207302013120319



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Heritage Park Rehabilitation and Healthcare

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: Non-Related Party (NRP) CHOW	
Provider Information	Cost Report	Patient Days	Ratings Days
2826 CLEVELAND AVE	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
FORT MYERS, FL 33901	Days in CR 182	Maximum: 21,840	Standard: 184
County: Lee [36]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 20,591	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,434	Inflation
Current Class South Large	Initial CR? False	Medicaid: 14,366	FY Index: 1.27901138
Class at 1/94: South Large	Medical Utilization	69.76835%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.28114%	Cost: 1.05319853
Open Date: 11/01/1981	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1981	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 10/01/1982	Low Occupancy Adjustment Factor:	120.02523%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252344			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	696,702	1,092,044	725,112	348,519		2,862,377	
1a	Audit Adjustments							
2	Cost Per Diem	48.4966	76.0159	50.4742	24.2600		199.2467	
3	Cost Per Diem Inflated	51.0765	78.6219	53.1594				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.0765	78.6219	53.1594	24.2600		207.1178	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.8829		55.0392				
7	Provider Target Rate	53.9848		56.1860				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	55.3156		60.3994				
10b	Base for line 10a	54.1866		59.1666				
11	Lesser of 5,7,8,10, 10a	51.0765	78.6219	53.1594	13.6500		196.5078	
12/13	Medical Adjustment Rate		1.7485	1.1822				
14	Prospective Per Diem 11	51.0765	80.3704	54.3416	13.6500		199.4385	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,117,381	10.2897
Indexed Asset Value	5,146,726	<60% of Base:	False	20% ROE(2):	1,029,345	0.4081
FRVS Base Asset:	3,026,907	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7695
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	38,140	1.8523
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,694	0.3737
		Interest Only:	False	Replacement(3&4):	21,141	0.0000
		Yearly Payment:	405,619	Total FRVS PD:		13.6933

- (1) 80% Capital (\$4,117,381) amortized at 7.7500 % for 20 years Principal & Interest of \$405,619 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.2897
- (2) 20% ROE (\$1,029,345) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4081
- (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:	51,883
Comparison Bed	146	Effective PBS Limitation	4,161,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.0765	51.0765	0.9069	50.1696
Direct Care	80.3704	80.3704	1.4270	78.9434
Indirect Care	54.3416	54.3416	0.9648	53.3768
Property	13.6500	13.6933	0.2431	13.4502
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.1483
Supplemental Rate Add-on				9.9025
Totals	199.4385	199.4818	3.5418	228.9908

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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228.99

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014

ID: 061095073120120201201208012013102039



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 07/01/2014 through 12/31/2014

0 061101-00 - 2014/07

211.33

Destin Healthcare 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
195 MATTIE M KELLY BLVD	2/1/2012-7/31/2012	Number of Beds: 119	Superior: 0
DESTIN, FL 32541	Days in CR 182	Maximum: 21,658	Standard: 184
County: Okaloosa [46]	First Used : 2012/01	Max Annualized: 43,435	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 20,043	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,771	Inflation
Current Class North Large	Initial CR? False	Medicaid: 12,033	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	60.03592%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.54317%	Cost: 1.05319853
Open Date: 07/14/1994	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/11/1994	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 08/11/1994	Low Occupancy Adjustment Factor:	117.81270%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252166			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	516,657	826,388	579,903	295,530		2,218,478
1a	Audit Adjustments						
2	Cost Per Diem	42.9367	68.6768	48.1927	24.5600		184.3662
3	Cost Per Diem Inflated	45.2209	71.0312	50.7565			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.2209	71.0312	50.7565	24.5600		191.5686
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	46.8201		52.5514			
7	Provider Target Rate	47.7956		53.6464			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	47.7008		57.2928			
10b	Base for line 10a	46.7272		56.1234			
11	Lesser of 5,7,8,10, 10a	45.2209	71.0312	50.7565	13.6500		180.6586
12/13	Medical Adjustment Rate		0.8020	0.5731			
14	Prospective Per Diem 11	45.2209	71.8332	51.3296	13.6500		182.0337
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,497,160	11.3332
Indexed Asset Value	5,621,450	<60% of Base:	False	20% ROE(2):	1,124,290	0.4495
FRVS Base Asset:	2,976,160	Interest Rate:	10.6343%	Insurance Cost(3):	15,713	0.7840
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	23,681	1.1815
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,269	0.3627
		Interest Only:	False	Replacement(3&4):	35,091	0.0000
		Yearly Payment:	443,033	Total FRVS PD:		14.1109

- (1) 80% Capital (\$4,497,160) amortized at 7.7500 % for 20 years Principal & Interest of \$443,033 divided by annual available days (43435) divided by Occup. Adj. (0.900) = \$11.3332
 (2) 20% ROE (\$1,124,290) times the ROE factor (0.015630) divided by annual available days (43435) divided by Occup. Adj. (0.900) = \$0.4495
 (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:	51,883
Comparison Bed	88	Effective PBS Limitation	2,976,160

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.2209	45.2209	0.8029	44.4180
Direct Care	71.8332	71.8332	1.2754	70.5578
Indirect Care	51.3296	51.3296	0.9114	50.4182
Property	13.6500	14.1109	0.2505	13.8604
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.1726
Supplemental Rate Add-on				9.9025
Totals	182.0337	182.4946	3.2402	211.3295

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
1994/07	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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211.33

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	

Message Code:

1 Per Bed Standard Limitation



Florida Agency for Health Care Administration
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220.61

San Jose 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
9355 SAN JOSE BLVD	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
JACKSONVILLE, FL 32257	Days in CR 182	Maximum: 21,840	Standard: 184
County: Duval [16]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 21,097	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,214	Inflation
Current Class North Large	Initial CR? False	Medicaid: 15,708	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	74.45608%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.59799%	Cost: 1.05319853
Open Date: 12/20/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/20/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 12/20/1985	Low Occupancy Adjustment Factor:	122.97471%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252051			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	680,524	1,150,153	790,151	387,831		3,008,659
1a	Audit Adjustments						
2	Cost Per Diem	43.3234	73.2208	50.3025	24.6900		191.5367
3	Cost Per Diem Inflated	45.6281	75.7310	52.9785			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.6281	75.7310	52.9785	24.6900		199.0276
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	47.2418		54.8521			
7	Provider Target Rate	48.2261		55.9950			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	47.7008		57.2928			
10b	Base for line 10a	46.7272		56.1234			
11	Lesser of 5,7,8,10, 10a	45.6281	75.7310	52.9785	13.6500		187.9876
12/13	Medical Adjustment Rate		2.0836	1.4576			
14	Prospective Per Diem 11	45.6281	77.8146	54.4361	13.6500		191.5288
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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Rate Semester 07/01/2014 through 12/31/2014

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):	4,047,534	10.1151
Indexed Asset Value	5,059,418	<60% of Base:	False	20% ROE(2):	1,011,884	0.4012
FRVS Base Asset:	3,051,972	Interest Rate:	10.6343%	Insurance Cost(3):	15,845	0.7511
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	31,702	1.5027
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	7,699	0.3649
		Interest Only:	False	Replacement(3&4):	93,671	0.0000
		Yearly Payment:	398,738	Total FRVS PD:		13.1350

- (1) 80% Capital (\$4,047,534) amortized at 7.7500 % for 20 years Principal & Interest of \$398,738 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.1151
 (2) 20% ROE (\$1,011,884) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4012
 (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:	01/01/1985	Current RS PBS:	28,259
Comparison Bed	108	Effective PBS Limitation	51,883
			3,051,972

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.6281	45.6281	0.8101	44.8180
Direct Care	77.8146	77.8146	1.3816	76.4330
Indirect Care	54.4361	54.4361	0.9665	53.4696
Property	13.6500	13.1350	0.2332	12.9018
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.0820
Supplemental Rate Add-on				9.9025
Totals	191.5288	191.0138	3.3914	220.6069

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	3,892,768	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	



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 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2012

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220.61

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

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 07/01/2014 through 12/31/2014

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SeaView Nursing and Rehabilitation Center
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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: Non-Related Party (NRP) CHOW	
Provider Information	Cost Report	Patient Days	Ratings Days
2401 NE 2ND STREET	2/1/2012-7/31/2012	Number of Beds: 83	Superior: 0
POMPANO BEACH, FL 33062	Days in CR 182	Maximum: 15,106	Standard: 184
County: Broward [6]	First Used : 2012/01	Max Annualized: 30,295	Conditional: 0
Region: South Area: 10	Last Used: 2014/07	Total Patient: 14,168	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 984	Inflation
Current Class South Small	Initial CR? False	Medicaid: 11,637	FY Index: 1.27901138
Class at 1/94: South Small	Medical Utilization	82.13580%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.79055%	Cost: 1.05319853
Open Date: 08/01/1983	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1983	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 08/01/1983	Low Occupancy Adjustment Factor:	119.40068%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252433			PS Target: 1.02083595

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	617,082	790,128	690,109	196,782		2,294,101
1a	Audit Adjustments						
2	Cost Per Diem	53.0276	67.8979	59.3030	16.9100		197.1385
3	Cost Per Diem Inflated	55.8486	70.2256	62.4578			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	55.8486	70.2256	62.4578	16.9100		205.4420
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	57.8237		66.9470			
7	Provider Target Rate	59.0285		68.3419			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500		
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810			
10	Target Rate Class Ceiling	68.3236		80.3359			
10a	New Provider Target Limitation	60.5435		70.6647			
10b	Base for line 10a	59.3078		69.2224			
11	Lesser of 5,7,8,10, 10a	55.8486	70.2256	62.4578	13.6500		202.1820
12/13	Medical Adjustment Rate		2.5389	2.2580			
14	Prospective Per Diem 11	55.8486	72.7645	64.7158	13.6500		206.9789
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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Rate Semester 07/01/2014 through 12/31/2014

SeaView Nursing 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:	1,234,273.00	Total Amount	Per Diem
RS to Start Calcs:	1983/07	Type:	Fixed	80% Capital(1):	1,783,715 6.4448
Indexed Asset Value	2,229,644	<60% of Base:	False	20% ROE(2):	445,929 0.2556
FRVS Base Asset:	1,201,038	Interest Rate:	10.6343%	Insurance Cost(3):	16,151 1.1400
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	25,781 1.8197
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	5,232 0.3693
		Interest Only:	False	Replacement(3&4):	38,949 0.0000
		Yearly Payment:	175,721	Total FRVS PD:	10.0294

- (1) 80% Capital (\$1,783,715) amortized at 7.7500 % for 20 years Principal & Interest of \$175,721 divided by annual available days (30295) divided by Occup. Adj. (0.900) = \$6.4448
- (2) 20% ROE (\$445,929) times the ROE factor (0.015630) divided by annual available days (30295) divided by Occup. Adj. (0.900) = \$0.2556
- (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:	51,883
Comparison Bed	83	Effective PBS Limitation	2,365,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	55.8486	55.8486	0.9916	54.8570
Direct Care	72.7645	72.7645	1.2919	71.4726
Indirect Care	64.7158	64.7158	1.1490	63.5668
Property	13.6500	10.0294	0.1781	9.8513
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.8068
Supplemental Rate Add-on				9.9025
Totals	206.9789	203.3583	3.6106	234.4570

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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234.46

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 061107073120120201201207312013113644



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
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218.57

Vista Manor

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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1550 JESS PARRISH CT	2/1/2012-7/31/2012	Number of Beds: 120	Superior: 0
TITUSVILLE, FL 32796	Days in CR 182	Maximum: 21,840	Standard: 184
County: Brevard [5]	First Used : 2012/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 20,640	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,658	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 11,927	FY Index: 1.27901138
Class at 1/94: North Large	Medical Utilization	57.78585%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.50549%	Cost: 1.05319853
Open Date: 09/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 09/16/1985	Low Occupancy Adjustment Factor:	120.31084%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252522			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	514,065	871,168	611,152	316,781		2,313,166
1a	Audit Adjustments						
2	Cost Per Diem	43.1009	73.0417	51.2410	26.5600		193.9436
3	Cost Per Diem Inflated	45.3938	75.5457	53.9669			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.3938	75.5457	53.9669	26.5600		201.4664
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	46.9992		55.8755			
7	Provider Target Rate	47.9785		57.0397			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	49.1550		59.3403			
10b	Base for line 10a	48.1517		58.1291			
11	Lesser of 5,7,8,10, 10a	45.3938	75.5457	53.9669	13.6500		188.5564
12/13	Medical Adjustment Rate		0.6617	0.4727			
14	Prospective Per Diem 11	45.3938	76.2074	54.4396	13.6500		189.6908
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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218.57

Rate Semester 07/01/2014 through 12/31/2014

Vista Manor

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:	4,919,889.00		Total Amount	Per Diem
RS to Start Calcs:	1985/10	Type:	Fixed	80% Capital(1):	4,559,567	11.3947
Indexed Asset Value	5,699,459	<60% of Base:	False	20% ROE(2):	1,139,892	0.4520
FRVS Base Asset:	3,420,000	Interest Rate:	10.6343%	Insurance Cost(3):	16,689	0.8086
Occup Adj Factor	0.9000	Chase Rate:	4.7500%	Taxes Cost(3):	34,974	1.6945
ROE Factor	0.015630	Amortization Rate:	7.7500%	Home Office(3):	8,174	0.3960
		Interest Only:	False	Replacement(3&4):	31,323	0.0000
		Yearly Payment:	449,180	Total FRVS PD:		14.7458

- (1) 80% Capital (\$4,559,567) amortized at 7.7500 % for 20 years Principal & Interest of \$449,180 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.3947
 (2) 20% ROE (\$1,139,892) times the ROE factor (0.015630) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4520
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.3938	45.3938	0.8060	44.5878
Direct Care	76.2074	76.2074	1.3531	74.8543
Indirect Care	54.4396	54.4396	0.9666	53.4730
Property	13.6500	14.7458	0.2618	14.4840
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.2685
Supplemental Rate Add-on				9.9025
Totals	189.6908	190.7866	3.3875	218.5701

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 7/1/2014 through 12/31/2014 Based on Cost Report: 7/31/2012

0 061109-00 - 2014/07

218.57

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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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	

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 07/01/2014 through 12/31/2014

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229.11

Lakeside Oaks 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: Non-Related Party (NRP) CHOW

Provider Information	Cost Report	Patient Days	Ratings Days
1061 VIRGINIA ST	2/1/2012-7/31/2012	Number of Beds: 93	Superior: 0
DUNEDIN, FL 34698	Days in CR 182	Maximum: 16,926	Standard: 184
County: Pinellas [52]	First Used : 2012/01	Max Annualized: 33,945	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 15,102	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,180	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 8,941	FY Index: 1.27901138
Class at 1/94: North Small	Medical Utilization	59.20408%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	89.22368%	Cost: 1.05319853
Open Date: 11/01/1981	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/01/1981	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20083276
Entered Medicaid 10/01/1982	Low Occupancy Adjustment Factor:	113.58680%	DC Sem Index: 1.24200000
Med # Active Date: 02/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03428224
Previous Med # 252484			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	445,803	634,977	514,055	239,529		1,834,364	
1a	Audit Adjustments							
2	Cost Per Diem	49.8605	71.0186	57.4941	26.7900		205.1632	
3	Cost Per Diem Inflated	52.5130	73.4533	60.5527				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.5130	73.4533	60.5527	26.7900		213.3090	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.3701		62.6942				
7	Provider Target Rate	55.5030		64.0005				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	53.4938		68.3996				
10b	Base for line 10a	52.4020		67.0035				
11	Lesser of 5,7,8,10, 10a	52.5130	73.4533	60.5527	13.6500		200.1690	
12/13	Medical Adjustment Rate		0.7606	0.6270				
14	Prospective Per Diem 11	52.5130	74.2139	61.1797	13.6500		201.5566	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	0.00		Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	2,255,889	9.1805
RS to Start Calcs:	1981/07	<60% of Base:	True	20% ROE(2):	563,972	0.2885
Indexed Asset Value	2,819,861	Interest Rate:	12.5000%	Insurance Cost(3):	13,124	0.8690
FRVS Base Asset:	1,628,357	Chase Rate:	12.5000%	Taxes Cost(3):	16,783	1.1113
Occup Adj Factor	0.9000	Amortization Rate:	12.5000%	Home Office(3):	5,783	0.3829
ROE Factor	0.015630	Interest Only:	True	Replacement(3&4):	17,064	0.0000
		Yearly Payment:	280,469	Total FRVS PD:		11.8322

- (1) 80% Capital (\$2,255,889) amortized at 12.5000 % for 20 years Interest of \$280,469 divided by annual available days (33945) divided by Occup. Adj. (0.900) = \$9.1805
- (2) 20% ROE (\$563,972) times the ROE factor (0.015630) divided by annual available days (33945) divided by Occup. Adj. (0.900) = \$0.2885
- (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:	51,883
Comparison Bed	93	Effective PBS Limitation	2,650,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.5130	52.5130	0.9324	51.5806
Direct Care	74.2139	74.2139	1.3177	72.8962
Indirect Care	61.1797	61.1797	1.0863	60.0934
Property	13.6500	11.8322	0.2101	11.6221
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.0169
Supplemental Rate Add-on				9.9025
Totals	201.5566	199.7388	3.5465	229.1117

Medicaid Trend Adjustment



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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	



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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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID: 061140073120120201201207312013140333



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 071884-00 - 2014/07

245.42

Whitehall Boca Raton

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
7300 DEL PRADO CIRCLE SOUTH	1/1/2013-12/31/2013	Number of Beds: 154	Superior: 0
BOCA RATON, FL 33433	Days in CR 365	Maximum: 56,210	Standard: 184
County: Palm Beach [50]	First Used : 2013/01	Max Annualized: 56,210	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 51,940	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 37,960	Inflation
Current Class South Large	Initial CR? False	Medicaid: 3,400	FY Index: 1.31456505
Class at 1/94: South Large	Medical Utilization	6.54601%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.40349%	Cost: 1.00000000
Open Date: 12/16/1982	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/16/1982	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 12/01/2009	Low Occupancy Adjustment Factor:	117.63488%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 016016			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	189,324	354,418	252,111	154,462		950,315	
1a	Audit Adjustments							
2	Cost Per Diem	55.6835	104.2406	74.1503	45.4300		279.5044	
3	Cost Per Diem Inflated	55.6835	104.2406	74.1503				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	55.6835	104.2406	74.1503	45.4300		279.5044	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	56.2842		63.7319				
10b	Base for line 10a	55.1354		62.4311				
11	Lesser of 5,7,8,10, 10a	54.4176	98.4475	63.7319	13.6500		230.2470	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	54.4176	98.4475	63.7319	13.6500		230.2470	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	3,054,867	4.8829
Indexed Asset Value	3,818,584	<60% of Base:	False	20% ROE(2):	763,717	0.2154
FRVS Base Asset:	0	Interest Rate:	5.5000%	Insurance Cost(3):	70,200	1.3516
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	185,810	3.5774
ROE Factor	0.014270	Amortization Rate:	5.2500%	Home Office(3):	185,520	3.5718
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	247,021	Total FRVS PD:		13.5991

- (1) 80% Capital (\$3,054,867) amortized at 5.2500 % for 20 years Principal & Interest of \$247,021 divided by annual available days (56210) divided by Occup. Adj. (0.900) = \$4.8829
- (2) 20% ROE (\$763,717) times the ROE factor (0.014270) divided by annual available days (56210) divided by Occup. Adj. (0.900) = \$0.2154
- (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:	51,883
Comparison Bed	154	Effective PBS Limitation	3,818,584

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	98.4475	98.4475	1.7479	96.6996
Indirect Care	63.7319	63.7319	1.1316	62.6003
Property	13.6500	13.5991	0.2415	13.3576
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				9.4120
Supplemental Rate Add-on				9.9025
Totals	230.2470	230.1961	4.0872	245.4234

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
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		0.40	0.4901	0.4901		154	6.55	3,818,584	7,777,000	
2013/07		0.40	0.6196	0.6196		154	6.55	3,818,584	7,825,202	
2014/01		0.50	0.8564	0.8564		154	6.55	3,818,584	7,892,192	
2014/07		0.50	1.2383	1.2383		154	6.55	3,818,584	7,989,982	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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South Campus Rehabilitation & Nursing 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
715 E DIXIE AVE	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 0
LEESBURG, FL 34748	Days in CR 365	Maximum: 43,800	Standard: 184
County: Lake [35]	First Used : 2012/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 40,576	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,950	Inflation
Current Class North Large	Initial CR? False	Medicaid: 26,645	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	65.66690%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.63927%	Cost: 1.00000000
Open Date: 01/01/1980	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1980	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 04/01/1982	Low Occupancy Adjustment Factor:	117.93504%	DC Sem Index: 1.24200000
Med # Active Date: 12/28/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 252956			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,308,536	2,707,052	1,655,201	930,443		6,601,232	
1a	Audit Adjustments							
2	Cost Per Diem	49.1100	101.5970	62.1205	34.9200		247.7475	
3	Cost Per Diem Inflated	49.1100	101.5970	62.1205				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.1100	101.5970	62.1205	34.9200		247.7475	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	51.8477		61.8866				
10b	Base for line 10a	50.7895		60.6235				
11	Lesser of 5,7,8,10, 10a	49.1100	95.0998	60.1169	13.6500		217.9767	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	49.1100	95.0998	60.1169	13.6500		217.9767	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	9,200,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	2,941,626 5.6459
RS to Start Calcs:	1980/01	<60% of Base:	False	20% ROE(2):	735,406 0.2721
Indexed Asset Value	3,677,032	Interest Rate:	4.4600%	Insurance Cost(3):	42,800 1.0548
FRVS Base Asset:	2,210,061	Chase Rate:	3.2500%	Taxes Cost(3):	54,300 1.3382
Occup Adj Factor	0.9000	Amortization Rate:	4.4600%	Home Office(3):	0 0.0000
ROE Factor	0.014583	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	222,561	Total FRVS PD:	8.3110

- (1) 80% Capital (\$2,941,626) amortized at 4.4600 % for 20 years Principal & Interest of \$222,561 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$5.6459
- (2) 20% ROE (\$735,406) times the ROE factor (0.014583) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2721
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.1100	49.1100	0.8720	48.2380
Direct Care	95.0998	95.0998	1.6885	93.4113
Indirect Care	60.1169	60.1169	1.0674	59.0495
Property	13.6500	8.3110	0.1476	8.1634
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.4811
Supplemental Rate Add-on				9.9025
Totals	217.9767	212.6377	3.7755	240.2458

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	40.79	3,576,029	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	40.79	3,587,491	5,802,840	
2010/07		0.45	0.7107	0.7107		120	53.59	3,598,670	5,844,120	
2011/01		0.45	0.9198	0.9198		120	53.59	3,613,183	5,897,880	
2011/07		0.40	0.9028	0.9028		120	53.59	3,625,896	5,951,160	
2012/01		0.40	0.3865	0.3865		120	52.91	3,631,289	5,974,200	
2012/07		0.35	0.9417	0.9417		120	65.67	3,643,258	6,030,480	
2013/01		0.35	0.4901	0.4901		120	65.67	3,649,506	6,060,000	
2013/07		0.30	0.6196	0.6196		120	65.67	3,656,290	6,097,560	
2014/01		0.30	0.8564	0.8564		120	65.67	3,665,683	6,149,760	
2014/07		0.25	1.2383	1.2383		120	65.67	3,677,032	6,225,960	

Message Code:

5 Uncorrected Licensure Deficiency

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251.58

Rehabilitation Center of St. Pete

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
435 42ND AVE S	1/1/2013-12/31/2013	Number of Beds: 159	Superior: 0
SAINT PETERSBURG, FL 33705	Days in CR 365	Maximum: 58,035	Standard: 184
County: Pinellas [52]	First Used : 2013/01	Max Annualized: 58,035	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 53,856	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,372	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 39,076	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	72.55645%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.79917%	Cost: 1.00000000
Open Date: 09/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 09/01/1984	Low Occupancy Adjustment Factor:	118.13860%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 006408			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,011,242	3,983,857	2,335,955	1,182,049	429	9,513,532	
1a	Audit Adjustments							
2	Cost Per Diem	51.4700	101.9515	59.7798	30.2500	0.0110	243.4623	
3	Cost Per Diem Inflated	51.4700	101.9515	59.7798				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.4700	101.9515	59.7798	30.2500	0.0110	243.4623	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	53.7969		61.7096				
10b	Base for line 10a	52.6989		60.4501				
11	Lesser of 5,7,8,10, 10a	51.4700	96.7737	59.7798	13.6500	0.0110	221.6845	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	51.4700	96.7737	59.7798	13.6500	0.0110	221.6845	
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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Rate Semester 07/01/2014 through 12/31/2014

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):	2,568,713	3.4226
Indexed Asset Value	3,210,891	<60% of Base:	False	20% ROE(2):	642,178	0.2216
FRVS Base Asset:	1,587,729	Interest Rate:	3.5000%	Insurance Cost(3):	67,100	1.2459
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	62,300	1.1568
ROE Factor	0.018020	Amortization Rate:	3.5000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	178,770	Total FRVS PD:		6.0469

- (1) 80% Capital (\$2,568,713) amortized at 3.5000 % for 20 years Principal & Interest of \$178,770 divided by annual available days (58035) divided by Occup. Adj. (0.900) = \$3.4226
- (2) 20% ROE (\$642,178) times the ROE factor (0.018020) divided by annual available days (58035) divided by Occup. Adj. (0.900) = \$0.2216
- (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:	51,883
Comparison Bed	159	Effective PBS Limitation	4,531,500

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.4700	51.4700	0.9139	50.5561
Direct Care	96.7737	96.7737	1.7182	95.0555
Indirect Care	59.7798	59.7798	1.0614	58.7184
Property	13.6500	6.0469	0.2424	13.4076
ROE	0.0110	0.0110	0.0002	0.0108
ROE Adjustment	-0.0110	-0.0110	-0.0002	-0.0108
Quality Assess-Medicaid Share				23.9383
Supplemental Rate Add-on				9.9025
Totals	221.6735	214.0704	3.9359	251.5784

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	1,584,560	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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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	72.56	3,166,734	8,029,500	
2013/07		0.55	0.6196	0.6196		159	72.56	3,177,526	8,079,267	
2014/01		0.50	0.8564	0.8564		159	72.56	3,191,132	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	72.56	3,210,891	8,249,397	

Message Code:

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217.64

The Club Health and Rehab Center at the Villages

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
16529 SE 86TH BELLE MEADE CIRCLE	7/1/2012-6/30/2013	Number of Beds: 60	Superior: 0
THE VILLAGES, FL 32162-5885	Days in CR 365	Maximum: 21,900	Standard: 184
County: Marion [42]	First Used : 2012/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 14,941	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 13,653	Inflation
Current Class North Small	Initial CR? True	Medicaid: 100	FY Index: 1.29878490
Class at 1/94: North Small	Medical Utilization	0.66930%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	68.22374%	Cost: 1.00000000
Open Date: 07/13/2012	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/04/2012	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20850000
Entered Medicaid 07/13/2012	Low Occupancy Adjustment Factor:	86.85269%	DC Sem Index: 1.24200000
Med # Active Date: 07/13/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	9,254	8,868	10,121	7,545		35,788	
1a	Audit Adjustments							
2	Cost Per Diem	92.5400	88.6800	101.2100	75.4500		357.8800	
3	Cost Per Diem Inflated	92.5400	88.6800	101.2100				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	92.5400	88.6800	101.2100	75.4500		357.8800	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	52.2948		60.2740				
10b	Base for line 10a	51.2274		59.0438				
11	Lesser of 5,7,8,10, 10a	52.2948	88.6800	60.2740	13.6500		214.8988	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	52.2948	88.6800	60.2740	13.6500		214.8988	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	2,389,680 9.8038
Indexed Asset Value	2,987,100	<60% of Base:	False	20% ROE(2):	597,420 0.4420
FRVS Base Asset:	0	Interest Rate:	5.7500%	Insurance Cost(3):	0 0.0000
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	0 0.0000
ROE Factor	0.014583	Amortization Rate:	5.2500%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	193,233	Total FRVS PD:	10.2458

- (1) 80% Capital (\$2,389,680) amortized at 5.2500 % for 20 years Principal & Interest of \$193,233 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$9.8038
- (2) 20% ROE (\$597,420) times the ROE factor (0.014583) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.4420
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	2,987,100

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.2948	52.2948	0.9285	51.3663
Direct Care	88.6800	88.6800	1.5745	87.1055
Indirect Care	60.2740	60.2740	1.0702	59.2038
Property	13.6500	10.2458	0.1819	10.0639
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Totals	214.8988	211.4946	3.7551	217.6420

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
2012/07	11,051,442	0.00	0.9417	0.9417		60	0.67	2,987,100	2,987,100	1
2013/01		0.10	0.4901	0.4901		60	0.67	2,987,100	3,030,000	
2013/07		0.10	0.6196	0.6196		60	0.67	2,987,100	3,048,780	
2014/01		0.20	0.8564	0.8564		60	0.67	2,987,100	3,074,880	
2014/07		0.20	1.2383	1.2383		60	0.67	2,987,100	3,112,980	

Message Code:

1 Per Bed Standard Limitation

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Bradren River Rehabilitation Center, LLC

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
2010 MANATEE AVE E	1/1/2013-6/30/2013	Number of Beds: 208	Superior: 0
BRADENTON, FL 34208	Days in CR 181	Maximum: 37,648	Standard: 184
County: Manatee [41]	First Used : 2013/01	Max Annualized: 75,920	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 29,752	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 5,938	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 20,140	FY Index: 1.30932625
Class at 1/94: North Large	Medical Utilization	67.69293%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	79.02677%	Cost: 1.02881379
Open Date: 01/01/1964	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1964	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21150000
Entered Medicaid 01/01/1971	Low Occupancy Adjustment Factor:	100.60555%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02517540
Previous Med # 005021			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	940,864	1,991,391	1,024,834	835,810		4,792,899	
1a	Audit Adjustments							
2	Cost Per Diem	46.7162	98.8774	50.8855	41.5000		237.9791	
3	Cost Per Diem Inflated	48.0623	101.3667	52.3517				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	48.0623	101.3667	52.3517	41.5000		243.2807	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.5382		52.8701				
7	Provider Target Rate	49.5495		53.9717				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	47.5934		54.2931				
10b	Base for line 10a	46.6220		53.1849				
11	Lesser of 5,7,8,10, 10a	47.5934	96.7737	52.3517	13.6500		210.3688	
12/13	Medical Adjustment Rate		1.9262	1.0420				
14	Prospective Per Diem 11	47.5934	98.6999	53.3937	13.6500		213.3370	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	3,327,646	5.0717
Indexed Asset Value	4,159,557	<60% of Base:	False	20% ROE(2):	831,911	0.1877
FRVS Base Asset:	1,984,948	Interest Rate:	8.5000%	Insurance Cost(3):	31,221	1.0494
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	39,105	1.3144
ROE Factor	0.015420	Amortization Rate:	8.5000%	Home Office(3):	8,024	0.2697
		Interest Only:	False	Replacement(3&4):	28,835	0.0000
		Yearly Payment:	346,537	Total FRVS PD:		7.8929

- (1) 80% Capital (\$3,327,646) amortized at 8.5000 % for 20 years Principal & Interest of \$346,537 divided by annual available days (75920) divided by Occup. Adj. (0.900) = \$5.0717
 (2) 20% ROE (\$831,911) times the ROE factor (0.015420) divided by annual available days (75920) divided by Occup. Adj. (0.900) = \$0.1877
 (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:	51,883
Comparison Bed	208	Effective PBS Limitation	5,928,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.5934	47.5934	0.8450	46.7484
Direct Care	98.6999	98.6999	1.7524	96.9475
Indirect Care	53.3937	53.3937	0.9480	52.4457
Property	13.6500	7.8929	0.1401	7.7528
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.0723
Supplemental Rate Add-on				9.9025
Totals	213.3370	207.5799	3.6855	235.8692

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	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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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	77.08	3,500,378	8,950,448	
2004/01		0.35	1.1103	1.1103		208	77.08	3,513,980	9,049,872	
2004/07		0.35	0.8378	0.8378		208	77.08	3,524,283	9,125,792	
2005/01		0.30	0.8595	0.8595		208	77.08	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		0.15	0.6104	0.6104		208	68.00	3,763,356	9,774,544	
2009/01		0.10	1.3268	1.3268		208	68.00	3,768,350	9,904,336	
2009/07		0.10	0.6841	0.6841		208	68.00	3,770,928	9,972,144	
2010/01		0.05	0.8643	0.8643		208	68.00	3,772,557	10,058,256	
2010/07		0.05	0.7107	0.7107		208	68.00	3,773,896	10,129,808	
2011/01	32,314	0.00	0.9198	0.9198		208	70.23	3,806,210	10,222,992	
2011/07	353,347	0.00	0.9028	0.9028		208	70.92	4,159,557	10,315,344	
2012/01		0.00	0.3865	0.3865		208	70.92	4,159,557	10,355,280	
2012/07		0.00	0.9417	0.9417		208	70.92	4,159,557	10,452,832	
2013/01		0.00	0.4901	0.4901		208	67.69	4,159,557	10,504,000	
2013/07		0.00	0.6196	0.6196		208	67.69	4,159,557	10,569,104	
2014/01		0.00	0.8564	0.8564		208	67.69	4,159,557	10,659,584	
2014/07		0.00	1.2383	1.2383		208	67.69	4,159,557	10,791,664	

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	9/1/2012-8/31/2013	Number of Beds: 120	Superior: 0
LAKE WALES, FL 33853	Days in CR 365	Maximum: 43,800	Standard: 184
County: Polk [53]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 40,225	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 8,909	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 29,694	FY Index: 1.30580299
Class at 1/94: South Large	Medical Utilization	73.81976%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.83790%	Cost: 1.03158969
Open Date: 10/01/1973	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1973	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21049917
Entered Medicaid 10/01/1973	Low Occupancy Adjustment Factor:	116.91485%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02602301
Previous Med # 212881			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,023,459	2,104,941	1,263,743	522,021		4,914,164	
1a	Audit Adjustments							
2	Cost Per Diem	34.4669	70.8878	42.5589	17.5800		165.4936	
3	Cost Per Diem Inflated	35.5557	72.7325	43.9033				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	35.5557	72.7325	43.9033	17.5800		169.7715	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	44.1212		53.3361				
7	Provider Target Rate	45.0405		54.4474				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	35.5557	72.7325	43.9033	13.6500		165.8415	
12/13	Medical Adjustment Rate		1.9490	1.1765				
14	Prospective Per Diem 11	35.5557	74.6815	45.0798	13.6500		168.9670	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

The Groves Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	2,708,333.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	2,003,438	6.5039
RS to Start Calcs:	1973/07	<60% of Base:	False	20% ROE(2):	500,860	0.1999
Indexed Asset Value	2,504,298	Interest Rate:	11.5000%	Insurance Cost(3):	80,517	2.0017
FRVS Base Asset:	1,240,145	Chase Rate:	9.5000%	Taxes Cost(3):	26,698	0.6637
Occup Adj Factor	0.9000	Amortization Rate:	11.5000%	Home Office(3):	0	0.0000
ROE Factor	0.015730	Interest Only:	False	Replacement(3&4):	120,025	0.0000
		Yearly Payment:	256,383	Total FRVS PD:		9.3692

- (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. (0.900) = \$6.5039
- (2) 20% ROE (\$500,860) times the ROE factor (0.015730) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.1999
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	35.5557	35.5557	0.6313	34.9244
Direct Care	74.6815	74.6815	1.3260	73.3555
Indirect Care	45.0798	45.0798	0.8004	44.2794
Property	13.6500	9.3692	0.1664	9.2028
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.6888
Supplemental Rate Add-on				9.9025
Totals	168.9670	164.6862	2.9241	193.3534

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
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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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		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	

Message Code:

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014

ID: 080062083120130901201201212014081440



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Lakeland Hills Center

Type of Cost Report: Prospective Type of Cost: Actual with Interim Component 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	9/1/2012-8/31/2013	Number of Beds: 120	Superior: 0
LAKELAND, FL 33805	Days in CR 365	Maximum: 43,800	Standard: 184
County: Polk [53]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 40,018	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 5,912	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 32,307	FY Index: 1.30580299
Class at 1/94: South Large	Medical Utilization	80.73117%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.36530%	Cost: 1.03158969
Open Date: 08/01/1972	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1972	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21049917
Entered Medicaid 08/01/1972	Low Occupancy Adjustment Factor:	116.31320%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02602301
Previous Med # 212865			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,057,446	2,256,241	1,320,366	560,526		5,194,579	
1a	Audit Adjustments							
2	Cost Per Diem	32.7312	69.8375	40.8693	17.3500		160.7880	
3	Cost Per Diem Inflated	33.7652	71.6549	42.1603				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	33.7652	71.6549	42.1603	17.3500		164.9304	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	44.4916		53.4462				
7	Provider Target Rate	45.4186		54.5598				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	33.7652	71.6549	42.1603	13.6500		161.2304	
12/13	Medical Adjustment Rate		2.4773	1.4576				
14	Prospective Per Diem 11	33.7652	74.1322	43.6179	13.6500		165.1653	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Lakeland Hills Center
FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	4,583,333.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	2,225,858	5.1521
RS to Start Calcs:	1972/07	<60% of Base:	False	20% ROE(2):	556,465	0.2220
Indexed Asset Value	2,782,323	Interest Rate:	6.7500%	Insurance Cost(3):	78,343	1.9577
FRVS Base Asset:	1,403,125	Chase Rate:	4.7500%	Taxes Cost(3):	28,893	0.7220
Occup Adj Factor	0.9000	Amortization Rate:	6.7500%	Home Office(3):	0	0.0000
ROE Factor	0.015730	Interest Only:	False	Replacement(3&4):	148,242	0.0000
		Yearly Payment:	203,096	Total FRVS PD:		8.0538

- (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. (0.900) = \$5.1521
- (2) 20% ROE (\$556,465) times the ROE factor (0.015730) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2220
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	33.7652	33.7652	0.5995	33.1657
Direct Care	74.1322	74.1322	1.3162	72.8160
Indirect Care	43.6179	43.6179	0.7744	42.8435
Property	13.6500	8.0538	0.1430	7.9108
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.5742
Supplemental Rate Add-on				9.9025
Totals	165.1653	159.5691	2.8331	190.2127

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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190.21

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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215.50

Tarpon Bayou 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
515 CHESAPEAKE DR	9/1/2012-8/31/2013	Number of Beds: 120	Superior: 0
TARPON SPRINGS, FL 34689	Days in CR 365	Maximum: 43,800	Standard: 184
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 38,671	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,652	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 30,151	FY Index: 1.30580299
Class at 1/94: North Large	Medical Utilization	77.96799%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	88.28995%	Cost: 1.03158969
Open Date: 07/01/1972	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1972	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21049917
Entered Medicaid 07/01/1972	Low Occupancy Adjustment Factor:	112.39811%	DC Sem Index: 1.24200000
Med # Active Date: 04/01/2009	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02602301
Previous Med # 212849			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,658,252	2,324,962	1,268,265	545,432		5,796,910	
1a	Audit Adjustments							
2	Cost Per Diem	54.9982	77.1106	42.0638	18.0900		192.2626	
3	Cost Per Diem Inflated	56.7356	79.1172	43.3926				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	56.7356	79.1172	43.3926	18.0900		197.3354	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	44.1212		53.3361				
7	Provider Target Rate	45.0405		54.4474				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	45.0405	79.1172	43.3926	13.6500		181.2003	
12/13	Medical Adjustment Rate		2.4893	1.3653				
14	Prospective Per Diem 11	45.0405	81.6065	44.7579	13.6500		185.0549	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Tarpon Bayou 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:	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	0.3021
FRVS Base Asset:	1,883,680	Interest Rate:	10.0000%	Insurance Cost(3):	95,668	2.4739
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	37,486	0.9694
ROE Factor	0.015730	Amortization Rate:	10.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	27,847	0.0000
		Yearly Payment:	350,701	Total FRVS PD:		12.6419

- (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. (0.900) = \$8.8965
- (2) 20% ROE (\$757,110) times the ROE factor (0.015730) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3021
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.0405	45.0405	0.7997	44.2408
Direct Care	81.6065	81.6065	1.4489	80.1576
Indirect Care	44.7579	44.7579	0.7947	43.9632
Property	13.6500	12.6419	0.2245	12.4174
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.8204
Supplemental Rate Add-on				9.9025
Totals	185.0549	184.0468	3.2678	215.5019

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	

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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
HUDSON, FL 34667	Days in CR 366	Maximum: 43,920	Standard: 184
County: Pasco [51]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 42,249	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,523	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 25,734	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	60.91032%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.19536%	Cost: 1.04963363
Open Date: 01/29/1993	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/29/1993	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 02/22/1993	Low Occupancy Adjustment Factor:	122.46214%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319651			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,062,915	1,602,710	1,063,005	929,512		4,658,142	
1a	Audit Adjustments							
2	Cost Per Diem	41.3039	62.2799	41.3074	36.1200		181.0112	
3	Cost Per Diem Inflated	43.3540	64.3257	43.3576				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.3540	64.3257	43.3576	36.1200		187.1573	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	48.4145		53.3361				
7	Provider Target Rate	49.4233		54.4474				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	43.3540	64.3257	43.3576	13.6500		164.6873	
12/13	Medical Adjustment Rate		0.7895	0.5322				
14	Prospective Per Diem 11	43.3540	65.1152	43.8898	13.6500		166.0090	
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 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):	4,488,582	10.1874
Indexed Asset Value	5,610,727	<60% of Base:	False	20% ROE(2):	1,122,145	0.4150
FRVS Base Asset:	3,861,960	Interest Rate:	6.5012%	Insurance Cost(3):	49,754	1.1776
Occup Adj Factor	0.9000	Chase Rate:	4.5000%	Taxes Cost(3):	73,228	1.7332
ROE Factor	0.014580	Amortization Rate:	6.5000%	Home Office(3):	27,602	0.6533
		Interest Only:	False	Replacement(3&4):	83,179	0.0000
		Yearly Payment:	401,588	Total FRVS PD:		14.1665

- (1) 80% Capital (\$4,488,582) amortized at 6.5000 % for 20 years Principal & Interest of \$401,588 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.1874
- (2) 20% ROE (\$1,122,145) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4150
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,861,960

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.3540	43.3540	0.7698	42.5842
Direct Care	65.1152	65.1152	1.1561	63.9591
Indirect Care	43.8898	43.8898	0.7793	43.1105
Property	13.6500	14.1665	0.2515	13.9150
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.4354
Supplemental Rate Add-on				9.9025
Totals	166.0090	166.5255	2.9567	193.9067

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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 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

0 080374-00 - 2014/07

193.91

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

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

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 080377-00 - 2014/07

198.43

Consulate Health Care of Brandon

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
701 VICTORIA ST	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
BRANDON, FL 33510	Days in CR 366	Maximum: 43,920	Standard: 184
County: Hillsborough [29]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 42,510	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,779	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 23,323	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	54.86474%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.78962%	Cost: 1.04963363
Open Date: 09/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 09/24/1985	Low Occupancy Adjustment Factor:	123.21867%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319660	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	996,660	1,426,180	999,929	870,181		4,292,950	
1a	Audit Adjustments							
2	Cost Per Diem	42.7329	61.1491	42.8731	37.3100		184.0651	
3	Cost Per Diem Inflated	44.8539	63.1577	45.0010				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.8539	63.1577	45.0010	37.3100		190.3226	
5a	Interim Adjustment	0.3102	0.4451	0.3121				
5b	Interim Adjusted Per Diem	45.1641	63.6028	45.3131				
6	Prior Semester: Provider Target Base	55.1654		53.3361				
7	Provider Target Rate	56.3148		54.4474				
7a	Interim Adjustment	0.3102		0.3121				
7b	Interim Adjustment Provider Target Rate	56.6250		54.7595				
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	45.1641	63.6028	45.3131	13.6500		167.7300	
12/13	Medical Adjustment Rate		0.3481	0.2480				
14	Prospective Per Diem 11	45.1641	63.9509	45.5611	13.6500		168.3261	
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

0 080377-00 - 2014/07

198.43

Rate Semester 07/01/2014 through 12/31/2014

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):	4,802,581	14.4980
Indexed Asset Value	6,003,226	<60% of Base:	False	20% ROE(2):	1,200,645	0.4441
FRVS Base Asset:	3,420,000	Interest Rate:	10.4000%	Insurance Cost(3):	50,506	1.1881
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	69,041	1.6241
ROE Factor	0.014580	Amortization Rate:	10.4000%	Home Office(3):	28,977	0.6817
		Interest Only:	False	Replacement(3&4):	92,175	0.0000
		Yearly Payment:	571,510	Total FRVS PD:		18.4360

- (1) 80% Capital (\$4,802,581) amortized at 10.4000 % for 20 years Principal & Interest of \$571,510 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.4980
- (2) 20% ROE (\$1,200,645) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4441
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.1641	45.1641	0.8019	44.3622
Direct Care	63.9509	63.9509	1.1355	62.8154
Indirect Care	45.5611	45.5611	0.8089	44.7522
Property	13.6500	18.4360	0.3273	18.1087
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.4938
Supplemental Rate Add-on				9.9025
Totals	168.3261	173.1121	3.0736	198.4348

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 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

0 080377-00 - 2014/07

198.43

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	8,981	1.00	1.3356	1.3356		120	58.26	4,781,880	4,781,880	8



Florida Agency for Health Care Administration
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198.43

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/07	31,452	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	

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 07/01/2014 through 12/31/2014

0 080384-00 - 2014/07

207.23

Consulate Health Care of Jacksonville

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
4101 SOUTHPOINT DRIVE EAST	1/1/2012-12/31/2012	Number of Beds: 116	Superior: 0
JACKSONVILLE , FL 32216	Days in CR 366	Maximum: 42,456	Standard: 184
County: Duval [16]	First Used : 2014/01	Max Annualized: 42,340	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 40,349	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,899	Inflation
Current Class North Large	Initial CR? False	Medicaid: 20,734	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	51.38665%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.03721%	Cost: 1.04963363
Open Date: 08/09/1996	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/09/1996	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/09/1996	Low Occupancy Adjustment Factor:	120.98775%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319503	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,008,471	1,415,106	905,262	782,086		4,110,925	
1a	Audit Adjustments							
2	Cost Per Diem	48.6385	68.2505	43.6608	37.7200		198.2698	
3	Cost Per Diem Inflated	51.0526	70.4924	45.8278				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	51.0526	70.4924	45.8278	37.7200		205.0928	
5a	Interim Adjustment	0.0100	0.0220					
5b	Interim Adjusted Per Diem	51.0626	70.5144					
6	Prior Semester: Provider Target Base	53.6803		52.5415				
7	Provider Target Rate	54.7988		53.6363				
7a	Interim Adjustment	0.0100						
7b	Interim Adjustment Provider Target Rate	54.8088						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	49.7653	70.5144	45.8278	13.6500		179.7575	
12/13	Medical Adjustment Rate		0.1100	0.0715				
14	Prospective Per Diem 11	49.7653	70.6244	45.8993	13.6500		179.9390	
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

0 080384-00 - 2014/07

207.23

Rate Semester 07/01/2014 through 12/31/2014

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):	4,332,535	10.1723
Indexed Asset Value	5,415,669	<60% of Base:	False	20% ROE(2):	1,083,134	0.4144
FRVS Base Asset:	4,181,452	Interest Rate:	6.5012%	Insurance Cost(3):	49,126	1.2175
Occup Adj Factor	0.9000	Chase Rate:	4.5000%	Taxes Cost(3):	76,373	1.8928
ROE Factor	0.014580	Amortization Rate:	6.5000%	Home Office(3):	31,233	0.7741
		Interest Only:	False	Replacement(3&4):	62,998	0.0000
		Yearly Payment:	387,627	Total FRVS PD:		14.4711

- (1) 80% Capital (\$4,332,535) amortized at 6.5000 % for 20 years Principal & Interest of \$387,627 divided by annual available days (42340) divided by Occup. Adj. (0.900) = \$10.1723
- (2) 20% ROE (\$1,083,134) times the ROE factor (0.014580) divided by annual available days (42340) divided by Occup. Adj. (0.900) = \$0.4144
- (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:	51,883
Comparison Bed	116	Effective PBS Limitation	4,181,452

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.7653	49.7653	0.8836	48.8817
Direct Care	70.6244	70.6244	1.2539	69.3705
Indirect Care	45.8993	45.8993	0.8149	45.0844
Property	13.6500	14.4711	0.2569	14.2142
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Quality Assess-Medicaid Share				19.7811
Totals	179.9390	180.7601	3.2093	207.2344

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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207.23

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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207.23

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

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

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201.56

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 NORTH	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
KISSIMMEE, FL 34741	Days in CR 366	Maximum: 43,920	Standard: 184
County: Osceola [49]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 43,040	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,534	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 26,785	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	62.23281%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	97.99636%	Cost: 1.04963363
Open Date: 08/20/1999	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/20/1999	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/20/1999	Low Occupancy Adjustment Factor:	124.75492%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319511			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,118,899	1,893,486	1,086,593	912,297		5,011,274	
1a	Audit Adjustments							
2	Cost Per Diem	41.7733	70.6920	40.5672	34.0600		187.0925	
3	Cost Per Diem Inflated	43.8467	73.0141	42.5807				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.8467	73.0141	42.5807	34.0600		193.5015	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	52.1624		53.3361				
7	Provider Target Rate	53.2493		54.4474				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	43.8467	73.0141	42.5807	13.6500		173.0915	
12/13	Medical Adjustment Rate		1.0048	0.5860				
14	Prospective Per Diem 11	43.8467	74.0189	43.1667	13.6500		174.6823	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	5,762,891.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,587,295	10.1663
RS to Start Calcs:	1999/07	<60% of Base:	False	20% ROE(2):	1,146,824	0.4242
Indexed Asset Value	5,734,119	Interest Rate:	6.2000%	Insurance Cost(3):	48,742	1.1325
FRVS Base Asset:	4,661,520	Chase Rate:	4.0000%	Taxes Cost(3):	71,397	1.6589
Occup Adj Factor	0.9000	Amortization Rate:	6.2000%	Home Office(3):	28,401	0.6599
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	118,781	0.0000
		Yearly Payment:	400,755	Total FRVS PD:		14.0418

- (1) 80% Capital (\$4,587,295) amortized at 6.2000 % for 20 years Principal & Interest of \$400,755 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.1663
- (2) 20% ROE (\$1,146,824) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4242
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,661,520

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.8467	43.8467	0.7785	43.0682
Direct Care	74.0189	74.0189	1.3142	72.7047
Indirect Care	43.1667	43.1667	0.7664	42.4003
Property	13.6500	14.0418	0.2493	13.7925
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.6947
Supplemental Rate Add-on				9.9025
Totals	174.6823	175.0741	3.1084	201.5629

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	59.59	5,040,219	5,441,640	
2007/01		0.80	1.0133	1.0133		120	59.59	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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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	

Message Code:

1 Per Bed Standard Limitation

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195.10

Consulate Health Care of Lakeland
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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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
LAKELAND, FL 33809	Days in CR 366	Maximum: 43,920	Standard: 184
County: Polk [53]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 41,180	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,054	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,077	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	65.75279%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.76138%	Cost: 1.04963363
Open Date: 12/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 12/01/1984	Low Occupancy Adjustment Factor:	119.36355%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319953			PS Target: 1.02083595

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,177,741	1,758,646	1,021,546	1,363,868		5,321,801	
1a	Audit Adjustments							
2	Cost Per Diem	43.4960	64.9498	37.7274	50.3700		196.5432	
3	Cost Per Diem Inflated	45.6549	67.0833	39.5999				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.6549	67.0833	39.5999	50.3700		202.7081	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	55.9567		53.3361				
7	Provider Target Rate	57.1226		54.4474				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	45.6549	67.0833	39.5999	13.6500		165.9881	
12/13	Medical Adjustment Rate		1.1888	0.7018				
14	Prospective Per Diem 11	45.6549	68.2721	40.3017	13.6500		167.8787	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

Consulate Health Care of Lakeland

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/1998	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	3,283,965 7.0175
RS to Start Calcs:	1984/07	<60% of Base:	True	20% ROE(2):	820,991 0.3037
Indexed Asset Value	4,104,956	Interest Rate:	8.5000%	Insurance Cost(3):	57,309 1.3917
FRVS Base Asset:	2,134,715	Chase Rate:	8.5000%	Taxes Cost(3):	60,169 1.4611
Occup Adj Factor	0.9000	Amortization Rate:	8.5000%	Home Office(3):	26,307 0.6388
ROE Factor	0.014580	Interest Only:	True	Replacement(3&4):	70,014 0.0000
		Yearly Payment:	276,630	Total FRVS PD:	10.8128

- (1) 80% Capital (\$3,283,965) amortized at 8.5000 % for 20 years Interest of \$276,630 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.0175
 (2) 20% ROE (\$820,991) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3037
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.6549	45.6549	0.8106	44.8443
Direct Care	68.2721	68.2721	1.2122	67.0599
Indirect Care	40.3017	40.3017	0.7156	39.5861
Property	13.6500	10.8128	0.1920	10.6208
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.0838
Supplemental Rate Add-on				9.9025
Totals	167.8787	165.0415	2.9304	195.0974

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	



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195.10

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	

Message Code:

5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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198.52

Consulate Health Care of Lake Parker

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
2020 W LAKE PARKER DR	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
LAKELAND, FL 33805	Days in CR 366	Maximum: 43,920	Standard: 184
County: Polk [53]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 41,953	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,730	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 23,712	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	56.52039%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.52140%	Cost: 1.04963363
Open Date: 04/12/1990	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/12/1990	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 05/14/1990	Low Occupancy Adjustment Factor:	121.60415%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319678	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,011,120	1,508,522	911,675	898,685		4,330,002	
1a	Audit Adjustments							
2	Cost Per Diem	42.6417	63.6185	38.4478	37.9000		182.6080	
3	Cost Per Diem Inflated	44.7582	65.7083	40.3561				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.7582	65.7083	40.3561	37.9000		188.7226	
5a	Interim Adjustment	0.0300	0.0373	0.0225				
5b	Interim Adjusted Per Diem	44.7882	65.7456	40.3786				
6	Prior Semester: Provider Target Base	54.4849		53.3361				
7	Provider Target Rate	55.6201		54.4474				
7a	Interim Adjustment	0.0300		0.0225				
7b	Interim Adjustment Provider Target Rate	55.6501		54.4699				
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	44.7882	65.7456	40.3786	13.6500		164.5624	
12/13	Medical Adjustment Rate		0.4823	0.2962				
14	Prospective Per Diem 11	44.7882	66.2279	40.6748	13.6500		165.3409	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	6,316,600.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	4,845,698	14.6281
RS to Start Calcs:	1990/01	<60% of Base:	False	20% ROE(2):	1,211,424	0.4481
Indexed Asset Value	6,057,122	Interest Rate:	10.4000%	Insurance Cost(3):	53,444	1.2739
FRVS Base Asset:	3,602,760	Chase Rate:	8.5000%	Taxes Cost(3):	57,410	1.3684
Occup Adj Factor	0.9000	Amortization Rate:	10.4000%	Home Office(3):	27,753	0.6615
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	57,546	0.0000
		Yearly Payment:	576,641	Total FRVS PD:		18.3800

- (1) 80% Capital (\$4,845,698) amortized at 10.4000 % for 20 years Principal & Interest of \$576,641 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.6281
- (2) 20% ROE (\$1,211,424) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4481
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,602,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.7882	44.7882	0.7952	43.9930
Direct Care	66.2279	66.2279	1.1759	65.0520
Indirect Care	40.6748	40.6748	0.7222	39.9526
Property	13.6500	18.3800	0.3263	18.0537
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.5668
Supplemental Rate Add-on				9.9025
Totals	165.3409	170.0709	3.0196	198.5206

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	4,170,124	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	2,963	1.00	1.3356	1.3356		120	56.62	4,646,490	4,781,880	
2000/07	28,832	1.00	1.1129	1.1129		120	56.62	4,727,033	4,835,040	
2001/01		1.00	1.2976	1.2976		120	56.62	4,788,371	4,897,800	
2001/07		1.00	0.9615	0.9615		120	56.62	4,834,411	4,944,840	
2002/01	26,424	1.00	1.0301	1.0301		120	57.87	4,910,634	4,995,720	
2002/07		1.00	0.8337	0.8337		120	57.87	4,951,574	5,037,360	
2003/01		1.00	1.3271	1.3271		120	57.87	5,017,286	5,104,200	
2003/07		1.00	1.1664	1.1664		120	59.05	5,075,808	5,163,720	
2004/01		1.00	1.1103	1.1103		120	59.05	5,132,165	5,221,080	
2004/07		1.00	0.8378	0.8378		120	62.79	5,175,162	5,264,880	



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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
2005/01		1.00	0.8595	0.8595		120	62.79	5,219,643	5,310,120	
2005/07		1.00	0.7364	0.7364		120	60.85	5,258,080	5,349,240	
2006/01		1.00	0.9068	0.9068		120	60.85	5,305,760	5,397,720	
2006/07		1.00	0.8133	0.8133		120	55.11	5,348,912	5,441,640	
2007/01		1.00	1.0133	1.0133		120	55.11	5,403,113	5,496,720	
2007/07		1.00	1.1050	1.1050		120	55.75	5,462,817	5,557,440	
2008/01		1.00	0.8556	0.8556		120	55.75	5,509,557	5,604,960	
2008/07		1.00	0.6104	0.6104		120	54.77	5,543,047	5,639,160	
2009/01		1.00	1.3268	1.3268		120	54.77	5,616,285	5,714,040	
2009/07		1.00	0.6841	0.6841		120	63.34	5,654,706	5,753,160	
2010/01		1.00	0.8643	0.8643		120	63.34	5,703,580	5,802,840	
2010/07		0.95	0.7107	0.7107		120	63.34	5,742,091	5,844,120	
2011/01		0.95	0.9198	0.9198		120	62.23	5,792,265	5,897,880	
2011/07		0.90	0.9028	0.9028		120	62.23	5,839,327	5,951,160	
2012/01		0.90	0.3865	0.3865		120	60.13	5,859,642	5,974,200	
2012/07		0.85	0.9417	0.9417		120	63.56	5,906,543	6,030,480	
2013/01		0.85	0.4901	0.4901		120	63.56	5,931,150	6,060,000	
2013/07		0.80	0.6196	0.6196		120	63.56	5,960,551	6,097,560	
2014/01		0.80	0.8564	0.8564		120	56.52	6,001,387	6,149,760	
2014/07		0.75	1.2383	1.2383		120	56.52	6,057,122	6,225,960	

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 07/01/2014 through 12/31/2014

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201.18

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	1/1/2012-12/31/2012	Number of Beds: 167	Superior: 0
MELBOURNE, FL 32934	Days in CR 366	Maximum: 61,122	Standard: 184
County: Brevard [5]	First Used : 2014/01	Max Annualized: 60,955	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 54,081	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 12,097	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 22,784	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	42.12940%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	88.48042%	Cost: 1.04963363
Open Date: 08/01/1994	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1994	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 08/19/1994	Low Occupancy Adjustment Factor:	112.64059%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319520			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	933,207	1,489,256	1,016,279	872,855		4,311,597
1a	Audit Adjustments						
2	Cost Per Diem	40.9589	65.3641	44.6049	38.3100		189.2379
3	Cost Per Diem Inflated	42.9918	67.5112	46.8188			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	42.9918	67.5112	46.8188	38.3100		195.6318
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	54.1515		54.6189			
7	Provider Target Rate	55.2798		55.7569			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	42.9918	67.5112	46.8188	13.6500		170.9718
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	42.9918	67.5112	46.8188	13.6500		170.9718
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	8,789,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	6,074,503	13.1768
RS to Start Calcs:	1994/07	<60% of Base:	False	20% ROE(2):	1,518,626	0.4036
Indexed Asset Value	7,593,129	Interest Rate:	10.4000%	Insurance Cost(3):	50,060	0.9256
FRVS Base Asset:	5,597,125	Chase Rate:	8.5000%	Taxes Cost(3):	89,185	1.6491
Occup Adj Factor	0.9000	Amortization Rate:	10.4000%	Home Office(3):	37,775	0.6985
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	97,283	0.0000
		Yearly Payment:	722,870	Total FRVS PD:		16.8536

- (1) 80% Capital (\$6,074,503) amortized at 10.4000 % for 20 years Principal & Interest of \$722,870 divided by annual available days (60955) divided by Occup. Adj. (0.900) = \$13.1768
- (2) 20% ROE (\$1,518,626) times the ROE factor (0.014580) divided by annual available days (60955) divided by Occup. Adj. (0.900) = \$0.4036
- (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:	34,361
Comparison Date:	07/01/1994	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	4,123,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.9918	42.9918	0.7633	42.2285
Direct Care	67.5112	67.5112	1.1987	66.3125
Indirect Care	46.8188	46.8188	0.8313	45.9875
Property	13.6500	16.8536	0.2992	16.5544
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.1906
Supplemental Rate Add-on				9.9025
Totals	170.9718	174.1754	3.0925	201.1760

Medicaid Trend Adjustment



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201.18

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 - 2014/07

201.18

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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



Florida Agency for Health Care Administration
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189.22

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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
NEW PORT RICHEY, FL 34653	Days in CR 366	Maximum: 43,920	Standard: 184
County: Pasco [51]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 42,215	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,545	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,158	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	66.70141%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.11794%	Cost: 1.04963363
Open Date: 04/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 04/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 04/01/1984	Low Occupancy Adjustment Factor:	122.36358%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319970			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,235,516	1,741,727	1,016,652	1,476,042		5,469,937
1a	Audit Adjustments						
2	Cost Per Diem	43.8780	61.8555	36.1053	52.4200		194.2588
3	Cost Per Diem Inflated	46.0558	63.8873	37.8973			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.0558	63.8873	37.8973	52.4200		200.2604
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.5676		53.3361			
7	Provider Target Rate	50.6004		54.4474			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	46.0558	63.8873	37.8973	13.6500		161.4904
12/13	Medical Adjustment Rate		1.2004	0.7121			
14	Prospective Per Diem 11	46.0558	65.0877	38.6094	13.6500		163.4029
15	Inflated Usual & Customary Charge						0.00



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189.22

Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	3,167,203 6.7680
RS to Start Calcs:	1984/01	<60% of Base:	True	20% ROE(2):	791,801 0.2929
Indexed Asset Value	3,959,004	Interest Rate:	8.5000%	Insurance Cost(3):	63,332 1.5002
FRVS Base Asset:	2,097,277	Chase Rate:	8.5000%	Taxes Cost(3):	55,092 1.3050
Occup Adj Factor	0.9000	Amortization Rate:	8.5000%	Home Office(3):	25,377 0.6011
ROE Factor	0.014580	Interest Only:	True	Replacement(3&4):	117,090 0.0000
		Yearly Payment:	266,794	Total FRVS PD:	10.4672

- (1) 80% Capital (\$3,167,203) amortized at 8.5000 % for 20 years Interest of \$266,794 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$6.7680
- (2) 20% ROE (\$791,801) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2929
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.0558	46.0558	0.8177	45.2381
Direct Care	65.0877	65.0877	1.1556	63.9321
Indirect Care	38.6094	38.6094	0.6855	37.9239
Property	13.6500	10.4672	0.1858	10.2814
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.9405
Supplemental Rate Add-on				9.9025
Totals	163.4029	160.2201	2.8446	189.2185

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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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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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	

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
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192.48

Consulate Health Care of North Ft. Myers

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
991 PONDELLA RD	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
NORTH FORT MYERS, FL	Days in CR 366	Maximum: 43,920	Standard: 184
33903	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
County: Lee [36]	Last Used: 2014/07	Total Patient: 40,863	Total: 184
Region: South Area: 8	Unaudited	Medicare: 7,807	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 23,909	FY Index: 1.28335532
Current Class South Large	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: South Large	Occupancy:	58.51014%	Cost: 1.04963363
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	93.03962%	Target: 1.01458517
Open Date: 06/01/1985	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20250000
Acquired Date: 06/01/1985	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 06/01/1985	Weighted Low Occ Adjustment Factor:	118.44471%	DC Inflation: 1.03284823
Med # Active Date: 10/01/2012	Interim Component Effective Date:	100.00000%	PS Target: 1.02083595
Previous Med # 320111		01/01/2014	

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,022,287	1,505,203	934,870	1,222,706		4,685,066	
1a	Audit Adjustments							
2	Cost Per Diem	42.7574	62.9555	39.1012	51.1400		195.9541	
3	Cost Per Diem Inflated	44.8796	65.0235	41.0419				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.8796	65.0235	41.0419	51.1400		202.0850	
5a	Interim Adjustment	0.4814	0.6976	0.4334				
5b	Interim Adjusted Per Diem	45.3610	65.7211	41.4753				
6	Prior Semester: Provider Target Base	52.5065		55.4668				
7	Provider Target Rate	53.6005		56.6225				
7a	Interim Adjustment	0.4814		0.4334				
7b	Interim Adjustment Provider Target Rate	54.0819		57.0559				
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	45.3610	65.7211	41.4753	13.6500		166.2074	
12/13	Medical Adjustment Rate		0.6292	0.3971				
14	Prospective Per Diem 11	45.3610	66.3503	41.8724	13.6500		167.2337	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

Consulate Health Care of North Ft. Myers

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:	1985/01	Type:	None	80% Capital(1):	3,045,678 6.5083
Indexed Asset Value	3,807,097	<60% of Base:	True	20% ROE(2):	761,419 0.2816
FRVS Base Asset:	2,181,402	Interest Rate:	8.5000%	Insurance Cost(3):	62,421 1.5276
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	68,038 1.6650
ROE Factor	0.014580	Amortization Rate:	8.5000%	Home Office(3):	27,434 0.6714
		Interest Only:	True	Replacement(3&4):	79,277 0.0000
		Yearly Payment:	256,557	Total FRVS PD:	10.6539

- (1) 80% Capital (\$3,045,678) amortized at 8.5000 % for 20 years Interest of \$256,557 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$6.5083
 (2) 20% ROE (\$761,419) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.2816
 (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:	51,883
Comparison Bed	78	Effective PBS Limitation	2,223,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.3610	45.3610	0.8054	44.5556
Direct Care	66.3503	66.3503	1.1781	65.1722
Indirect Care	41.8724	41.8724	0.7434	41.1290
Property	13.6500	10.6539	0.1892	10.4647
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.2535
Supplemental Rate Add-on				9.9025
Totals	167.2337	164.2376	2.9161	192.4775

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
1985/01	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	

Message Code:



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 Computation of Nursing Home Medicaid Reimbursement Rate
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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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
ORANGE PARK, FL 32073	Days in CR 366	Maximum: 43,920	Standard: 184
County: Clay [10]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 42,168	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,563	Inflation
Current Class North Large	Initial CR? False	Medicaid: 26,276	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	62.31265%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.01093%	Cost: 1.04963363
Open Date: 12/12/1989	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/12/1989	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 01/09/1990	Low Occupancy Adjustment Factor:	122.22735%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319538			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,081,947	1,588,276	1,080,213	955,133		4,705,569
1a	Audit Adjustments						
2	Cost Per Diem	41.1762	60.4459	41.1103	36.3500		179.0824
3	Cost Per Diem Inflated	43.2199	62.4314	43.1508			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	43.2199	62.4314	43.1508	36.3500		185.1521
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	58.7062		51.2053			
7	Provider Target Rate	59.9294		52.2722			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	43.2199	62.4314	43.1508	13.6500		162.4521
12/13	Medical Adjustment Rate		0.8648	0.5977			
14	Prospective Per Diem 11	43.2199	63.2962	43.7485	13.6500		163.9146
15	Inflated Usual & Customary Charge						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,916,053	11.1576
Indexed Asset Value	6,145,066	<60% of Base:	False	20% ROE(2):	1,229,013	0.4546
FRVS Base Asset:	3,578,520	Interest Rate:	6.5012%	Insurance Cost(3):	49,327	1.1698
Occup Adj Factor	0.9000	Chase Rate:	4.5000%	Taxes Cost(3):	45,616	1.0818
ROE Factor	0.014580	Amortization Rate:	6.5000%	Home Office(3):	27,893	0.6615
		Interest Only:	False	Replacement(3&4):	43,270	0.0000
		Yearly Payment:	439,833	Total FRVS PD:		14.5253

- (1) 80% Capital (\$4,916,053) amortized at 6.5000 % for 20 years Principal & Interest of \$439,833 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.1576
 (2) 20% ROE (\$1,229,013) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4546
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,578,520

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.2199	43.2199	0.7674	42.4525
Direct Care	63.2962	63.2962	1.1238	62.1724
Indirect Care	43.7485	43.7485	0.7768	42.9717
Property	13.6500	14.5253	0.2579	14.2674
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.9999
Supplemental Rate Add-on				9.9025
Totals	163.9146	164.7899	2.9259	191.7664

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	

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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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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
PENSACOLA, FL 32505	Days in CR 366	Maximum: 43,920	Standard: 184
County: Escambia [17]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 42,122	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,411	Inflation
Current Class North Large	Initial CR? False	Medicaid: 23,861	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	56.64736%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.90619%	Cost: 1.04963363
Open Date: 01/08/1997	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/08/1997	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 01/08/1997	Low Occupancy Adjustment Factor:	122.09401%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319686			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,050,112	1,506,816	940,309	808,172		4,305,409	
1a	Audit Adjustments							
2	Cost Per Diem	44.0096	63.1497	39.4078	33.8700		180.4371	
3	Cost Per Diem Inflated	46.1940	65.2241	41.3638				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.1940	65.2241	41.3638	33.8700		186.6519	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	59.2458		51.3255				
7	Provider Target Rate	60.4802		52.3949				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	46.1940	65.2241	41.3638	13.6500		166.4319	
12/13	Medical Adjustment Rate		0.4878	0.3093				
14	Prospective Per Diem 11	46.1940	65.7119	41.6731	13.6500		167.2290	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,560,901	13.7684
Indexed Asset Value	5,701,126	<60% of Base:	False	20% ROE(2):	1,140,225	0.4217
FRVS Base Asset:	4,383,120	Interest Rate:	10.4000%	Insurance Cost(3):	49,208	1.1682
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	45,420	1.0783
ROE Factor	0.014580	Amortization Rate:	10.4000%	Home Office(3):	27,906	0.6625
		Interest Only:	False	Replacement(3&4):	36,779	0.0000
		Yearly Payment:	542,750	Total FRVS PD:		17.0991

- (1) 80% Capital (\$4,560,901) amortized at 10.4000 % for 20 years Principal & Interest of \$542,750 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$13.7684
- (2) 20% ROE (\$1,140,225) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4217
- (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:	36,526
Comparison Date:	07/01/1996	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	4,383,120

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.1940	46.1940	0.8202	45.3738
Direct Care	65.7119	65.7119	1.1667	64.5452
Indirect Care	41.6731	41.6731	0.7399	40.9332
Property	13.6500	17.0991	0.3036	16.7955
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.3837
Supplemental Rate Add-on				9.9025
Totals	167.2290	170.6781	3.0304	197.9339

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid FRVS Property Reimbursement Rate
 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

0 080405-00 - 2014/07

197.93

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	59.58	4,852,713	5,310,120	
2005/07		0.90	0.7364	0.7364		120	59.58	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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197.93

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	

Message Code:

1 Per Bed Standard Limitation 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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198.40

Consulate Health Care of Safety Harbor

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
1410 DR MARTIN LUTHER KING JR ST N	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
SAFETY HARBOR, FL 34695	Days in CR 366	Maximum: 43,920	Standard: 184
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 42,431	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 4,902	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 30,819	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	72.63322%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.60974%	Cost: 1.04963363
Open Date: 09/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 09/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 09/01/1985	Low Occupancy Adjustment Factor:	122.98967%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319694	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,338,533	1,986,970	1,155,969	1,103,320		5,584,792	
1a	Audit Adjustments							
2	Cost Per Diem	43.4321	64.4722	37.5083	35.8000		181.2126	
3	Cost Per Diem Inflated	45.5878	66.5900	39.3700				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.5878	66.5900	39.3700	35.8000		187.3478	
5a	Interim Adjustment	0.0400	0.0648	0.0377				
5b	Interim Adjusted Per Diem	45.6278	66.6548	39.4077				
6	Prior Semester: Provider Target Base	53.7258		53.3361				
7	Provider Target Rate	54.8452		54.4474				
7a	Interim Adjustment	0.0400		0.0377				
7b	Interim Adjustment Provider Target Rate	54.8852		54.4851				
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	45.6278	66.6548	39.4077	13.6500		165.3403	
12/13	Medical Adjustment Rate		1.6972	1.0034				
14	Prospective Per Diem 11	45.6278	68.3520	40.4111	13.6500		168.0409	
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 07/01/2014 through 12/31/2014

Consulate Health Care of Safety Harbor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	01/01/2001	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	4,016,483.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	4,766,892	10.8191
RS to Start Calcs:	1985/10	<60% of Base:	False	20% ROE(2):	1,191,723	0.4408
Indexed Asset Value	5,958,615	Interest Rate:	6.5012%	Insurance Cost(3):	48,369	1.1399
FRVS Base Asset:	3,420,000	Chase Rate:	4.5000%	Taxes Cost(3):	43,450	1.0240
Occup Adj Factor	0.9000	Amortization Rate:	6.5000%	Home Office(3):	24,849	0.5856
ROE Factor	0.014580	Interest Only:	False	Replacement(3&4):	97,083	0.0000
		Yearly Payment:	426,488	Total FRVS PD:		14.0094

- (1) 80% Capital (\$4,766,892) amortized at 6.5000 % for 20 years Principal & Interest of \$426,488 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.8191
- (2) 20% ROE (\$1,191,723) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4408
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.6278	45.6278	0.8101	44.8177
Direct Care	68.3520	68.3520	1.2136	67.1384
Indirect Care	40.4111	40.4111	0.7175	39.6936
Property	13.6500	14.0094	0.2487	13.7607
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.0840
Supplemental Rate Add-on				9.9025
Totals	168.0409	168.4003	2.9899	198.3969

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	

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
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 Rate Semester 07/01/2014 through 12/31/2014

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208.51

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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
SEMINOLE , FL 33777	Days in CR 366	Maximum: 43,920	Standard: 184
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 40,619	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,573	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 25,173	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	61.97346%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.48406%	Cost: 1.04963363
Open Date: 10/01/1995	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/03/1995	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 11/03/1995	Low Occupancy Adjustment Factor:	117.73745%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319708			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,112,191	1,688,881	1,138,491	972,433		4,911,995	
1a	Audit Adjustments							
2	Cost Per Diem	44.1819	67.0910	45.2267	38.6300		195.1296	
3	Cost Per Diem Inflated	46.3748	69.2948	47.4715				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.3748	69.2948	47.4715	38.6300		201.7711	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	50.8240		53.3361				
7	Provider Target Rate	51.8830		54.4474				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	46.3748	69.2948	47.4715	13.6500		176.7911	
12/13	Medical Adjustment Rate		0.9334	0.6394				
14	Prospective Per Diem 11	46.3748	70.2282	48.1109	13.6500		178.3639	
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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Rate Semester 07/01/2014 through 12/31/2014

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):	4,618,518	10.4823
Indexed Asset Value	5,773,147	<60% of Base:	False	20% ROE(2):	1,154,629	0.4271
FRVS Base Asset:	4,188,480	Interest Rate:	6.5012%	Insurance Cost(3):	51,368	1.2646
Occup Adj Factor	0.9000	Chase Rate:	4.5000%	Taxes Cost(3):	73,689	1.8142
ROE Factor	0.014580	Amortization Rate:	6.5000%	Home Office(3):	28,686	0.7062
		Interest Only:	False	Replacement(3&4):	82,134	0.0000
		Yearly Payment:	413,213	Total FRVS PD:		14.6944

- (1) 80% Capital (\$4,618,518) amortized at 6.5000 % for 20 years Principal & Interest of \$413,213 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.4823
- (2) 20% ROE (\$1,154,629) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4271
- (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:	34,904
Comparison Date:	01/01/1995	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	4,188,480

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.3748	46.3748	0.8234	45.5514
Direct Care	70.2282	70.2282	1.2469	68.9813
Indirect Care	48.1109	48.1109	0.8542	47.2567
Property	13.6500	14.6944	0.2609	14.4335
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.3840
Supplemental Rate Add-on				9.9025
Totals	178.3639	179.4083	3.1854	208.5094

Medicaid Trend Adjustment



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208.51

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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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	

Message Code:

1 Per Bed Standard Limitation

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Florida Agency for Health Care Administration
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227.15

Consulate Health Care of Sarasota
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Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective		CHOW Status based on this Cost Report: No Change	
Type of Ownership: Proprietary : Corporation			
Provider Information	Cost Report	Patient Days	Ratings Days
4783 FRUITVILLE ROAD	1/1/2012-12/31/2012	Number of Beds: 81	Superior: 0
SARASOTA, FL 34232	Days in CR 366	Maximum: 29,646	Standard: 184
County: Sarasota [58]	First Used : 2014/01	Max Annualized: 29,565	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 27,187	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,902	Inflation
Current Class South Small	Initial CR? False	Medicaid: 18,592	FY Index: 1.28335532
Class at 1/94: South Small	Medical Utilization		Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy: 91.70546%	68.38563%	Cost: 1.04963363
Open Date: 02/18/1998	Statewide Low Occupancy Threshold: 78.55110%		Target: 1.01458517
Acquired Date: 02/18/1998	Medicaid Low Occupancy Threshold: 41.17760%		DC FY Index: 1.20250000
Entered Medicaid 02/18/1998	Low Occupancy Adjustment Factor: 116.74625%		DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor: 100.00000%		DC Inflation: 1.03284823
Previous Med # 320137			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	928,931	1,411,912	876,829	744,981		3,962,653	
1a	Audit Adjustments							
2	Cost Per Diem	49.9640	75.9419	47.1616	40.0700		213.1375	
3	Cost Per Diem Inflated	52.4439	78.4365	49.5024				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	52.4439	78.4365	49.5024	40.0700		220.4528	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	63.7984		67.7484				
7	Provider Target Rate	65.1277		69.1600				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	62.8974	105.8360	81.6951	13.6500			
9	Prior Semester: Class Ceiling Target Base	67.3414		79.1810				
10	Target Rate Class Ceiling	68.3236		80.3359				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	52.4439	78.4365	49.5024	13.6500		194.0328	
12/13	Medical Adjustment Rate		1.6224	1.0239				
14	Prospective Per Diem 11	52.4439	80.0589	50.5263	13.6500		196.6791	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	3,174,066	10.6725
Indexed Asset Value	3,967,583	<60% of Base:	False	20% ROE(2):	793,517	0.4348
FRVS Base Asset:	3,033,045	Interest Rate:	6.5012%	Insurance Cost(3):	50,350	1.8520
Occup Adj Factor	0.9000	Chase Rate:	4.5000%	Taxes Cost(3):	52,004	1.9128
ROE Factor	0.014580	Amortization Rate:	6.5000%	Home Office(3):	19,500	0.7173
		Interest Only:	False	Replacement(3&4):	56,467	0.0000
		Yearly Payment:	283,980	Total FRVS PD:		15.5894

- (1) 80% Capital (\$3,174,066) amortized at 6.5000 % for 20 years Principal & Interest of \$283,980 divided by annual available days (29565) divided by Occup. Adj. (0.900) = \$10.6725
- (2) 20% ROE (\$793,517) times the ROE factor (0.014580) divided by annual available days (29565) divided by Occup. Adj. (0.900) = \$0.4348
- (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:	51,883
Comparison Bed	81	Effective PBS Limitation	3,033,045

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	52.4439	52.4439	0.9311	51.5128
Direct Care	80.0589	80.0589	1.4215	78.6374
Indirect Care	50.5263	50.5263	0.8971	49.6292
Property	13.6500	15.5894	0.2768	15.3126
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.1521
Supplemental Rate Add-on				9.9025
Totals	196.6791	198.6185	3.5265	227.1466

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
1998/01	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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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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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Florida Agency for Health Care Administration
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Consulate Health Care of Port Charlotte
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Type of Cost Report: Prospective Type of Cost: Actual Type of Rate: Prospective		CHOW Status based on this Cost Report: No Change	
Type of Ownership: Proprietary : Corporation			
Provider Information	Cost Report	Patient Days	Ratings Days
18480 COCHRAN BLVD	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
PORT CHARLOTTE, FL 33948	Days in CR 366	Maximum: 43,920	Standard: 184
County: Charlotte [8]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 40,684	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,938	Inflation
Current Class South Large	Initial CR? False	Medicaid: 24,665	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	60.62580%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.63206%	Cost: 1.04963363
Open Date: 03/12/1998	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/12/1998	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 03/12/1998	Low Occupancy Adjustment Factor:	117.92586%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 320129			PS Target: 1.02083595

Rate Calculations							
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Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,124,170	1,691,533	1,036,432	940,476		4,792,611	
1a	Audit Adjustments							
2	Cost Per Diem	45.5775	68.5803	42.0204	38.1300		194.3082	
3	Cost Per Diem Inflated	47.8397	70.8330	44.1060				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	47.8397	70.8330	44.1060	38.1300		200.9087	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	54.7889		55.4668				
7	Provider Target Rate	55.9305		56.6225				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	47.8397	70.8330	44.1060	13.6500		176.4287	
12/13	Medical Adjustment Rate		0.8467	0.5272				
14	Prospective Per Diem 11	47.8397	71.6797	44.6332	13.6500		177.8026	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,360,169	9.8960
Indexed Asset Value	5,450,211	<60% of Base:	False	20% ROE(2):	1,090,042	0.4032
FRVS Base Asset:	4,306,175	Interest Rate:	6.5012%	Insurance Cost(3):	48,686	1.1967
Occup Adj Factor	0.9000	Chase Rate:	4.5000%	Taxes Cost(3):	94,065	2.3121
ROE Factor	0.014580	Amortization Rate:	6.5000%	Home Office(3):	26,821	0.6593
		Interest Only:	False	Replacement(3&4):	76,881	0.0000
		Yearly Payment:	390,099	Total FRVS PD:		14.4673

- (1) 80% Capital (\$4,360,169) amortized at 6.5000 % for 20 years Principal & Interest of \$390,099 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.8960
 (2) 20% ROE (\$1,090,042) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4032
 (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:	51,883
Comparison Bed 115	Effective PBS Limitation	4,306,175

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.8397	47.8397	0.8494	46.9903
Direct Care	71.6797	71.6797	1.2727	70.4070
Indirect Care	44.6332	44.6332	0.7925	43.8407
Property	13.6500	14.4673	0.2569	14.2104
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.6127
Supplemental Rate Add-on				9.9025
Totals	177.8026	178.6199	3.1715	206.9636

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
1998/01	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	



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206.96

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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193.70

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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
TALLAHASSEE , FL 32308	Days in CR 366	Maximum: 43,920	Standard: 84
County: Leon [37]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 100
Region: North Area: 2	Last Used: 2014/07	Total Patient: 42,175	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 12,976	Inflation
Current Class North Large	Initial CR? False	Medicaid: 18,614	FY Index: 1.28335532
Class at 1/94: North Large	Medical Utilization	44.13515%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.02687%	Cost: 1.04963363
Open Date: 03/09/1992	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/09/1992	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 04/01/1992	Low Occupancy Adjustment Factor:	122.24765%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319716			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	750,364	1,142,469	829,304	642,741		3,364,877
1a	Audit Adjustments						
2	Cost Per Diem	40.3118	61.3769	44.5527	34.5300		180.7714
3	Cost Per Diem Inflated	42.3126	63.3930	46.7640			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	42.3126	63.3930	46.7640	34.5300		186.9996
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	52.6677		60.0492			
7	Provider Target Rate	53.7651		61.3004			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	42.3126	63.3930	46.7640	13.6500		166.1196
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	42.3126	63.3930	46.7640	13.6500		166.1196
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
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0 080428-00 - 2014/07

193.70

Rate Semester 07/01/2014 through 12/31/2014

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):	4,391,796	13.2579
Indexed Asset Value	5,489,745	<60% of Base:	False	20% ROE(2):	1,097,949	0.4061
FRVS Base Asset:	3,718,320	Interest Rate:	10.4000%	Insurance Cost(3):	48,800	1.1571
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	58,540	1.3880
ROE Factor	0.014580	Amortization Rate:	10.4000%	Home Office(3):	29,040	0.6886
		Interest Only:	False	Replacement(3&4):	354,327	0.0000
		Yearly Payment:	522,626	Total FRVS PD:		16.8977

- (1) 80% Capital (\$4,391,796) amortized at 10.4000 % for 20 years Principal & Interest of \$522,626 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$13.2579
- (2) 20% ROE (\$1,097,949) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4061
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,718,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.3126	42.3126	0.7513	41.5613
Direct Care	63.3930	63.3930	1.1255	62.2675
Indirect Care	46.7640	46.7640	0.8303	45.9337
Property	13.6500	16.8977	0.3000	16.5977
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.4373
Supplemental Rate Add-on				9.9025
Totals	166.1196	169.3673	3.0071	193.7000

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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193.70

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	39,359	0.80	1.3356	1.3356		120	35.91	4,472,789	4,781,880	
2000/07		0.90	1.1129	1.1129		120	35.91	4,502,039	4,835,040	
2001/01		0.90	1.2976	1.2976		120	35.91	4,502,039	4,897,800	5
2001/07		1.00	0.9615	0.9615		120	35.91	4,564,844	4,944,840	
2002/01	40,688	1.00	1.0301	1.0301		120	36.36	4,636,618	4,995,720	
2002/07		1.00	0.8337	0.8337		120	36.36	4,636,618	5,037,360	5
2003/01		1.00	1.3271	1.3271		120	36.36	4,703,076	5,104,200	
2003/07		1.00	1.1664	1.1664		120	36.36	4,739,341	5,163,720	
2004/01	31,591	1.00	1.1103	1.1103		120	39.95	4,809,154	5,221,080	
2004/07	37,299	1.00	0.8378	0.8378		120	43.20	4,878,100	5,264,880	
2005/01		1.00	0.8595	0.8595		120	43.20	4,911,032	5,310,120	
2005/07		1.00	0.7364	0.7364		120	42.50	4,938,978	5,349,240	
2006/01		1.00	0.9068	0.9068		120	42.50	4,973,586	5,397,720	
2006/07		1.00	0.8133	0.8133		120	37.80	5,001,386	5,441,640	



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193.70

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2007/01		1.00	1.0133	1.0133		120	37.80	5,036,216	5,496,720	
2007/07		1.00	1.1050	1.1050		120	32.46	5,069,060	5,557,440	
2008/01		1.00	0.8556	0.8556		120	32.46	5,094,657	5,604,960	
2008/07		1.00	0.6104	0.6104		120	31.72	5,112,592	5,639,160	
2009/01		1.00	1.3268	1.3268		120	31.72	5,151,714	5,714,040	
2009/07		1.00	0.6841	0.6841		120	36.71	5,175,237	5,753,160	
2010/01		1.00	0.8643	0.8643		120	36.71	5,205,092	5,802,840	
2010/07		1.00	0.7107	0.7107		120	36.71	5,229,783	5,844,120	
2011/01		1.00	0.9198	0.9198		120	39.93	5,264,706	5,897,880	
2011/07		1.00	0.9028	0.9028		120	39.93	5,299,213	5,951,160	
2012/01		1.00	0.3865	0.3865		120	48.23	5,317,173	5,974,200	
2012/07		0.95	0.9417	0.9417		120	48.23	5,358,885	6,030,480	
2013/01		0.95	0.4901	0.4901		120	51.44	5,382,221	6,060,000	
2013/07		0.90	0.6196	0.6196		120	51.44	5,410,290	6,097,560	
2014/01		0.90	0.8564	0.8564		120	44.14	5,443,758	6,149,760	
2014/07		0.85	1.2383	1.2383		120	44.14	5,489,745	6,225,960	

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 07/01/2014 through 12/31/2014

0 080430-00 - 2014/07

202.21

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 STREET	1/1/2012-12/31/2012	Number of Beds: 159	Superior: 0
VERO BEACH , FL 32960	Days in CR 366	Maximum: 58,194	Standard: 184
County: Indian River [31]	First Used : 2014/01	Max Annualized: 58,035	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 54,036	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,326	Inflation
Current Class South Large	Initial CR? False	Medicaid: 35,803	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	66.25768%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.85493%	Cost: 1.04963363
Open Date: 10/01/1984	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 10/01/1984	Low Occupancy Adjustment Factor:	118.20959%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 320145			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,543,543	2,450,824	1,421,296	1,897,917		7,313,579
1a	Audit Adjustments						
2	Cost Per Diem	43.1121	68.4530	39.6977	53.0100		204.2728
3	Cost Per Diem Inflated	45.2519	70.7016	41.6680			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.2519	70.7016	41.6680	53.0100		210.6315
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	53.1789		55.4668			
7	Provider Target Rate	54.2869		56.6225			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	45.2519	70.7016	41.6680	13.6500		171.2715
12/13	Medical Adjustment Rate		1.2931	0.7621			
14	Prospective Per Diem 11	45.2519	71.9947	42.4301	13.6500		173.3267
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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202.21

Rate Semester 07/01/2014 through 12/31/2014

Consulate Health Care of Vero Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/1998	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	5,883,453 9.4886
RS to Start Calcs:	1984/07	<60% of Base:	True	20% ROE(2):	1,470,863 0.4106
Indexed Asset Value	7,354,316	Interest Rate:	8.5000%	Insurance Cost(3):	55,309 1.0236
FRVS Base Asset:	2,240,349	Chase Rate:	8.5000%	Taxes Cost(3):	82,881 1.5338
Occup Adj Factor	0.9000	Amortization Rate:	8.5000%	Home Office(3):	34,703 0.6422
ROE Factor	0.014580	Interest Only:	True	Replacement(3&4):	152,764 0.0000
		Yearly Payment:	495,602	Total FRVS PD:	13.0988

- (1) 80% Capital (\$5,883,453) amortized at 8.5000 % for 20 years Interest of \$495,602 divided by annual available days (58035) divided by Occup. Adj. (0.900) = \$9.4886
- (2) 20% ROE (\$1,470,863) times the ROE factor (0.014580) divided by annual available days (58035) divided by Occup. Adj. (0.900) = \$0.4106
- (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:	51,883
Comparison Bed 120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.2519	45.2519	0.8035	44.4484
Direct Care	71.9947	71.9947	1.2783	70.7164
Indirect Care	42.4301	42.4301	0.7534	41.6767
Property	13.6500	13.0988	0.2326	12.8662
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.6024
Supplemental Rate Add-on				9.9025
Totals	173.3267	172.7755	3.0678	202.2126

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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 Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2012

0 080430-00 - 2014/07

202.21

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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202.21

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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202.21

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2014/07		0.50	1.2383	1.2383		159	66.26	7,354,316	8,249,397	

Message Code:

5 Uncorrected Licensure Deficiency

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 080431-00 - 2014/07

205.23

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	1/1/2012-12/31/2012	Number of Beds: 116	Superior: 0
ALTAMONTE SPRINGS, FL	Days in CR 366	Maximum: 42,456	Standard: 184
32714	First Used : 2014/01	Max Annualized: 42,340	Conditional: 0
County: Seminole [59]	Last Used: 2014/07	Total Patient: 40,578	Total: 184
Region: Central Area: 7	Unaudited	Medicare: 8,892	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 19,120	FY Index: 1.28335532
Current Class Central Large	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: North Large	Occupancy:	47.11913%	Cost: 1.04963363
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	95.57660%	Target: 1.01458517
Open Date: 01/20/1994	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20250000
Acquired Date: 01/20/1994	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 02/17/1994	Weighted Low Occ Adjustment Factor:	121.67443%	DC Inflation: 1.03284823
Med # Active Date: 10/01/2012		100.00000%	PS Target: 1.02083595
Previous Med # 319546			

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	819,866	1,277,254	850,479	694,821		3,642,419	
1a	Audit Adjustments							
2	Cost Per Diem	42.8800	66.8020	44.4811	36.3400		190.5031	
3	Cost Per Diem Inflated	45.0083	68.9963	46.6889				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.0083	68.9963	46.6889	36.3400		197.0335	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	57.8652		55.4227				
7	Provider Target Rate	59.0709		56.5775				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	45.0083	68.9963	46.6889	13.6500		174.3435	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	45.0083	68.9963	46.6889	13.6500		174.3435	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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205.23

Rate Semester 07/01/2014 through 12/31/2014

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):	4,219,839	13.1781
Indexed Asset Value	5,274,799	<60% of Base:	False	20% ROE(2):	1,054,960	0.4036
FRVS Base Asset:	3,757,815	Interest Rate:	10.4000%	Insurance Cost(3):	48,221	1.1884
Occup Adj Factor	0.9000	Chase Rate:	8.5000%	Taxes Cost(3):	68,537	1.6890
ROE Factor	0.014580	Amortization Rate:	10.4000%	Home Office(3):	29,478	0.7265
		Interest Only:	False	Replacement(3&4):	51,415	0.0000
		Yearly Payment:	502,163	Total FRVS PD:		17.1856

- (1) 80% Capital (\$4,219,839) amortized at 10.4000 % for 20 years Principal & Interest of \$502,163 divided by annual available days (42340) divided by Occup. Adj. (0.900) = \$13.1781
- (2) 20% ROE (\$1,054,960) times the ROE factor (0.014580) divided by annual available days (42340) divided by Occup. Adj. (0.900) = \$0.4036
- (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:	33,255
Comparison Date:	07/01/1993	Current RS PBS:	51,883
Comparison Bed	113	Effective PBS Limitation	3,757,815

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.0083	45.0083	0.7991	44.2092
Direct Care	68.9963	68.9963	1.2250	67.7713
Indirect Care	46.6889	46.6889	0.8290	45.8599
Property	13.6500	17.1856	0.3051	16.8805
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.6055
Supplemental Rate Add-on				9.9025
Totals	174.3435	177.8791	3.1582	205.2289

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		113	55.68	4,009,127	4,389,598	
1999/07		0.60	1.2299	1.2299		113	58.75	4,009,127	4,443,612	5
2000/01		0.60	1.3356	1.3356		113	58.75	4,071,076	4,502,937	
2000/07		0.70	1.1129	1.1129		113	58.75	4,102,790	4,552,996	
2001/01		0.70	1.2976	1.2976		113	58.75	4,140,056	4,612,095	
2001/07		0.80	0.9615	0.9615		113	58.75	4,171,901	4,656,391	
2002/01		0.80	1.0301	1.0301		113	58.75	4,206,282	4,704,303	
2002/07	40,626	0.90	0.8337	0.8337		113	62.34	4,278,468	4,743,514	
2003/01		0.90	1.3271	1.3271		113	62.34	4,329,570	4,806,455	
2003/07		1.00	1.1664	1.1664		113	62.34	4,380,070	4,862,503	
2004/01		1.00	1.1103	1.1103		113	62.34	4,428,702	4,916,517	
2004/07	32,991	1.00	0.8378	0.8378		116	57.89	4,498,797	5,089,384	
2005/01		1.00	0.8595	0.8595		116	57.89	4,537,464	5,133,116	
2005/07		1.00	0.7364	0.7364		116	57.89	4,570,878	5,170,932	
2006/01	18,227	1.00	0.9068	0.9068		116	51.87	4,628,195	5,217,796	
2006/07		1.00	0.8133	0.8133		116	51.87	4,663,694	5,260,252	
2007/01		1.00	1.0133	1.0133		116	55.04	4,710,951	5,313,496	
2007/07		1.00	1.1050	1.1050		116	55.04	4,710,951	5,372,192	5
2008/01		1.00	0.8556	0.8556		116	58.49	4,803,759	5,418,128	
2008/07		1.00	0.6104	0.6104		116	58.49	4,833,081	5,451,188	



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205.23

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2009/01		1.00	1.3268	1.3268		116	55.33	4,897,206	5,523,572	
2009/07		1.00	0.6841	0.6841		116	55.33	4,930,708	5,561,388	
2010/01		1.00	0.8643	0.8643		116	48.43	4,968,233	5,609,412	
2010/07		1.00	0.7107	0.7107		116	48.43	4,999,324	5,649,316	
2011/01		1.00	0.9198	0.9198		116	48.43	5,039,815	5,701,284	
2011/07		1.00	0.9028	0.9028		116	45.35	5,077,331	5,752,788	
2012/01		1.00	0.3865	0.3865		116	45.35	5,093,512	5,775,060	
2012/07		1.00	0.9417	0.9417		116	45.35	5,133,062	5,829,464	
2013/01		1.00	0.4901	0.4901		116	49.19	5,155,562	5,858,000	
2013/07		1.00	0.6196	0.6196		116	49.19	5,184,131	5,894,308	
2014/01		1.00	0.8564	0.8564		116	47.12	5,222,167	5,944,768	
2014/07		0.95	1.2383	1.2383		116	47.12	5,274,799	6,018,428	

Message Code:

1 Per Bed Standard Limitation 5 Uncorrected Licensure Deficiency

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Florida Agency for Health Care Administration
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212.47

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 ROAD	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
WEST PALM BEACH , FL	Days in CR 366	Maximum: 43,920	Standard: 184
33406	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
County: Palm Beach [50]	Last Used: 2014/07	Total Patient: 42,340	Total: 184
Region: South Area: 9	Unaudited	Medicare: 8,254	Inflation
Control: Proprietary : Corporation	Initial CR? False	Medicaid: 26,551	FY Index: 1.28335532
Current Class South Large	Medical Utilization		Semester Index: 1.34705290
Class at 1/94: South Large	Occupancy:	62.70902%	Cost: 1.04963363
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	96.40255%	Target: 1.01458517
Open Date: 03/18/1985	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index: 1.20250000
Acquired Date: 03/18/1985	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index: 1.24200000
Entered Medicaid 03/18/1985	Weighted Low Occ Adjustment Factor:	122.72591%	DC Inflation: 1.03284823
Med # Active Date: 10/01/2012		100.00000%	PS Target: 1.02083595
Previous Med # 320153			

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,186,644	1,995,842	1,221,560	1,294,096		5,698,142	
1a	Audit Adjustments							
2	Cost Per Diem	44.6930	75.1701	46.0081	48.7400		214.6112	
3	Cost Per Diem Inflated	46.9113	77.6393	48.2916				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.9113	77.6393	48.2916	48.7400		221.5822	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	64.7631		57.7588				
7	Provider Target Rate	66.1125		58.9623				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	46.9113	77.6393	48.2916	13.6500		186.4922	
12/13	Medical Adjustment Rate		1.1101	0.6905				
14	Prospective Per Diem 11	46.9113	78.7494	48.9821	13.6500		188.2928	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Consulate Health Care of West Palm Beach

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	04/01/1998	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	0.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	None	80% Capital(1):	3,602,800 7.6988
RS to Start Calcs:	1985/01	<60% of Base:	True	20% ROE(2):	900,700 0.3331
Indexed Asset Value	4,503,500	Interest Rate:	8.5000%	Insurance Cost(3):	61,363 1.4493
FRVS Base Asset:	2,282,012	Chase Rate:	8.5000%	Taxes Cost(3):	84,886 2.0049
Occup Adj Factor	0.9000	Amortization Rate:	8.5000%	Home Office(3):	29,991 0.7083
ROE Factor	0.014580	Interest Only:	True	Replacement(3&4):	320,433 0.0000
		Yearly Payment:	303,487	Total FRVS PD:	12.1944

- (1) 80% Capital (\$3,602,800) amortized at 8.5000 % for 20 years Interest of \$303,487 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$7.6988
- (2) 20% ROE (\$900,700) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3331
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,420,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.9113	46.9113	0.8329	46.0784
Direct Care	78.7494	78.7494	1.3982	77.3512
Indirect Care	48.9821	48.9821	0.8697	48.1124
Property	13.6500	12.1944	0.2165	11.9779
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.0443
Supplemental Rate Add-on				9.9025
Totals	188.2928	186.8372	3.3173	212.4667

Medicaid Trend Adjustment



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212.47

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
1985/01	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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212.47

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2000/01		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	73.44	4,094,264	5,441,640	
2007/01		0.90	1.0133	1.0133		120	73.44	4,094,264	5,496,720	5
2007/07		0.85	1.1050	1.1050		120	73.44	4,170,412	5,557,440	
2008/01		0.85	0.8556	0.8556		120	73.44	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	

Message Code:



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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	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
WINTER HAVEN, FL 33881	Days in CR 366	Maximum: 43,920	Standard: 184
County: Polk [53]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 39,894	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,525	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 15,627	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	39.17130%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.83333%	Cost: 1.04963363
Open Date: 10/02/1998	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/02/1998	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 10/02/1998	Low Occupancy Adjustment Factor:	115.63597%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319724			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	670,618	1,077,821	748,082	593,045		3,089,566
1a	Audit Adjustments						
2	Cost Per Diem	42.9141	68.9717	47.8711	37.9500		197.7069
3	Cost Per Diem Inflated	45.0441	71.2373	50.2471			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.0441	71.2373	50.2471	37.9500		204.4785
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base	49.0426		53.3361			
7	Provider Target Rate	50.0644		54.4474			
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation						
10b	Base for line 10a						
11	Lesser of 5,7,8,10, 10a	45.0441	71.2373	50.2471	13.6500		180.1785
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	45.0441	71.2373	50.2471	13.6500		180.1785
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,405,688 9.7638
Indexed Asset Value	5,507,110	<60% of Base:	False	20% ROE(2):	1,101,422 0.4074
FRVS Base Asset:	4,545,840	Interest Rate:	6.2000%	Insurance Cost(3):	48,934 1.2266
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	77,173 1.9345
ROE Factor	0.014580	Amortization Rate:	6.2000%	Home Office(3):	31,388 0.7868
		Interest Only:	False	Replacement(3&4):	54,477 0.0000
		Yearly Payment:	384,890	Total FRVS PD:	14.1191

- (1) 80% Capital (\$4,405,688) amortized at 6.2000 % for 20 years Principal & Interest of \$384,890 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.7638
 (2) 20% ROE (\$1,101,422) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4074
 (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:	51,883
Comparison Bed 120	Effective PBS Limitation	4,545,840

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.0441	45.0441	0.7998	44.2443
Direct Care	71.2373	71.2373	1.2648	69.9725
Indirect Care	50.2471	50.2471	0.8921	49.3550
Property	13.6500	14.1191	0.2507	13.8684
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.0150
Supplemental Rate Add-on				9.9025
Totals	180.1785	180.6476	3.2074	206.3577

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	5,401,480	6,060,000	



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206.36

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



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214.76

Franco Nursing 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
800 NW 95TH STREET	1/1/2012-12/31/2012	Number of Beds: 120	Superior: 0
MIAMI , FL 33150	Days in CR 366	Maximum: 43,920	Standard: 184
County: Dade [13]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 39,806	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,278	Inflation
Current Class South Large	Initial CR? False	Medicaid: 23,665	FY Index: 1.28335532
Class at 1/94: South Large	Medical Utilization	59.45084%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.63297%	Cost: 1.04963363
Open Date: 01/04/1996	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/04/1996	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 01/04/1996	Low Occupancy Adjustment Factor:	115.38090%	DC Sem Index: 1.24200000
Med # Active Date: 10/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 319554	Interim Component Effective Date:	01/01/2014	PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,012,550	1,618,899	1,252,211	878,681		4,762,341	
1a	Audit Adjustments							
2	Cost Per Diem	42.7868	68.4090	52.9141	37.1300		201.2399	
3	Cost Per Diem Inflated	44.9105	70.6561	55.5404				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.9105	70.6561	55.5404	37.1300		208.2370	
5a	Interim Adjustment	0.2000	0.3221	0.2493				
5b	Interim Adjusted Per Diem	45.1105	70.9782	55.7897				
6	Prior Semester: Provider Target Base	55.4666		55.4668				
7	Provider Target Rate	56.6223		56.6225				
7a	Interim Adjustment	0.2000		0.2493				
7b	Interim Adjustment Provider Target Rate	56.8223		56.8718				
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	45.1105	70.9782	55.7897	13.6500		185.5284	
12/13	Medical Adjustment Rate		0.7547	0.5932				
14	Prospective Per Diem 11	45.1105	71.7329	56.3829	13.6500		186.8763	
15	Inflated Usual & Customary Charge		Usual and Customary Limitations not applied after 7/1/2002.					0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,558,462	10.1024
Indexed Asset Value	5,698,077	<60% of Base:	False	20% ROE(2):	1,139,615	0.4215
FRVS Base Asset:	4,252,320	Interest Rate:	6.2000%	Insurance Cost(3):	49,706	1.2487
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	60,680	1.5244
ROE Factor	0.014580	Amortization Rate:	6.2000%	Home Office(3):	31,088	0.7810
		Interest Only:	False	Replacement(3&4):	156,648	0.0000
		Yearly Payment:	398,237	Total FRVS PD:		14.0780

- (1) 80% Capital (\$4,558,462) amortized at 6.2000 % for 20 years Principal & Interest of \$398,237 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.1024
 (2) 20% ROE (\$1,139,615) times the ROE factor (0.014580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4215
 (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:	35,436
Comparison Date:	07/01/1995	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	4,252,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.1105	45.1105	0.8009	44.3096
Direct Care	71.7329	71.7329	1.2736	70.4593
Indirect Care	56.3829	56.3829	1.0011	55.3818
Property	13.6500	14.0780	0.2500	13.8280
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.8806
Supplemental Rate Add-on				9.9025
Totals	186.8763	187.3043	3.3256	214.7618

Medicaid Trend Adjustment



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214.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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0 080436-00 - 2014/07

214.76

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2011/01		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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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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 07/01/2014 through 12/31/2014

0 081046-00 - 2014/07

239.17

The Villages Rehabilitation and Nursing Center

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
900 HIGHWAY 466	2/1/2013-1/31/2014	Number of Beds: 120	Superior: 0
LADY LAKE, FL 32159	Days in CR 365	Maximum: 43,800	Standard: 184
County: Lake [35]	First Used : 2013/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 25,890	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 11,588	Inflation
Current Class North Large	Initial CR? True	Medicaid: 13,026	FY Index: 1.31445245
Class at 1/94: North Large	Medical Utilization	50.31286%	Semester Index: 1.34705290
Operating Ex <= 18 months	Occupancy:	59.10959%	Cost: 1.00000000
Open Date: 03/11/2013	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 10/11/2011	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21633187
Entered Medicaid 03/11/2013	Low Occupancy Adjustment Factor:	75.24986%	DC Sem Index: 1.24200000
Med # Active Date: 03/11/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	605,839	1,289,971	839,420	1,189,013		3,924,243
1a	Audit Adjustments						
2	Cost Per Diem	46.5100	99.0305	64.4419	91.2800		301.2624
3	Cost Per Diem Inflated	46.5100	99.0305	64.4419			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.5100	99.0305	64.4419	91.2800		301.2624
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	18.6230		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	48.2550		56.8657			
10b	Base for line 10a	47.2701		55.7050			
11	Lesser of 5,7,8,10, 10a	46.5100	95.0998	56.8657	18.6230		217.0985
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	46.5100	95.0998	56.8657	18.6230		217.0985
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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239.17

Rate Semester 07/01/2014 through 12/31/2014

The Villages Rehabilitation and Nursing Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	03/11/2013	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	12,000,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	4,841,846 9.9320
RS to Start Calcs:	2011/07	<60% of Base:	False	20% ROE(2):	1,210,461 0.4830
Indexed Asset Value	6,052,307	Interest Rate:	5.5000%	Insurance Cost(3):	246,300 9.5133
FRVS Base Asset:	0	Chase Rate:	3.2500%	Taxes Cost(3):	197,000 7.6091
Occup Adj Factor	0.9000	Amortization Rate:	5.2500%	Home Office(3):	0 0.0000
ROE Factor	0.015729	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	391,518	Total FRVS PD:	27.5374

- (1) 80% Capital (\$4,841,846) amortized at 5.2500 % for 20 years Principal & Interest of \$391,518 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.9320
- (2) 20% ROE (\$1,210,461) times the ROE factor (0.015729) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.4830
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	6,030,480

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.5100	46.5100	0.8258	45.6842
Direct Care	95.0998	95.0998	1.6885	93.4113
Indirect Care	56.8657	56.8657	1.0097	55.8560
Property	18.6230	27.5374	0.4889	27.0485
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				7.2646
Supplemental Rate Add-on				9.9025
Totals	217.0985	226.0129	4.0129	239.1671

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 081046-00 - 2014/07

239.17

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	16,970,820	0.00	0.4901	0.4901		120	50.31	6,030,480	6,030,480	1
2013/07		0.10	0.6196	0.6196		120	50.31	6,033,900	6,097,560	
2014/01		0.10	0.8564	0.8564		120	50.31	6,038,625	6,149,760	
2014/07		0.20	1.2383	1.2383		120	50.31	6,052,307	6,225,960	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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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 07/01/2014 through 12/31/2014

0 082204-00 - 2014/07

247.40

University Plaza Rehabilitation & Nursing Center

Type of Cost Report: **Interim New Facility** Type of Cost: **Estimated** Type of Rate: **Interim**
 Type of Ownership: **Proprietary : Individual** CHOW Status based on this Cost Report: **New Provider**

Provider Information	Cost Report	Patient Days	Ratings Days
724 NW 19TH ST	1/1/2013-12/31/2013	Number of Beds: 148	Superior: 0
MIAMI, FL 33136	Days in CR 365	Maximum: 54,020	Standard: 184
County: Dade [13]	First Used : 2013/07	Max Annualized: 54,020	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 30,565	Total: 184
Control: Proprietary : Individual	Unaudited	Medicare: 9,168	Inflation
Current Class South Large	Initial CR? True	Medicaid: 19,868	FY Index: 1.31456505
Class at 1/94: South Large	Medical Utilization	65.00245%	Semester Index: 1.34705290
Operating Ex <= 18 months	Occupancy:	56.58090%	Cost: 1.00000000
Open Date: 05/02/2013	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/23/2011	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 08/22/2013	Low Occupancy Adjustment Factor:	72.03069%	DC Sem Index: 1.24200000
Med # Active Date: 08/22/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,024,233	2,056,417	1,185,490	1,111,615		5,377,755
1a	Audit Adjustments						
2	Cost Per Diem	51.5519	103.5040	59.6683	55.9500		270.6742
3	Cost Per Diem Inflated	51.5519	103.5040	59.6683			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	51.5519	103.5040	59.6683	55.9500		270.6742
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	18.6230		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	53.2591		61.7947			
10b	Base for line 10a	52.1720		60.5334			
11	Lesser of 5,7,8,10, 10a	51.5519	98.4475	59.6683	18.6230		228.2907
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	51.5519	98.4475	59.6683	18.6230		228.2907
15	Inflated Usual & Customary Charge						0.00

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



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 Computation of Nursing Home Medicaid Reimbursement Rate

0 082204-00 - 2014/07

247.40

Rate Semester 07/01/2014 through 12/31/2014

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):	5,962,540 8.6694
Indexed Asset Value	7,453,175	<60% of Base:	False	20% ROE(2):	1,490,635 0.5111
FRVS Base Asset:	0	Interest Rate:	3.6767%	Insurance Cost(3):	98,200 3.2128
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	0 0.0000
ROE Factor	0.016670	Amortization Rate:	3.6767%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	421,490	Total FRVS PD:	12.3933

- (1) 80% Capital (\$5,962,540) amortized at 3.6767 % for 20 years Principal & Interest of \$421,490 divided by annual available days (54020) divided by Occup. Adj. (0.900) = \$8.6694
- (2) 20% ROE (\$1,490,635) times the ROE factor (0.016670) divided by annual available days (54020) divided by Occup. Adj. (0.900) = \$0.5111
- (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:	51,883
Comparison Bed	148	Effective PBS Limitation	7,437,592

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	51.5519	51.5519	0.9153	50.6366
Direct Care	98.4475	98.4475	1.7479	96.6996
Indirect Care	59.6683	59.6683	1.0594	58.6089
Property	18.6230	12.3933	0.2200	12.1733
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.3796
Supplemental Rate Add-on				9.9025
Totals	228.2907	222.0610	3.9426	247.4005

Medicaid Trend Adjustment



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Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2013

0 082204-00 - 2014/07

247.40

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	25,637,447	0.00	0.6196	0.6196		148	65.00	7,437,592	7,437,592	1
2014/01		0.10	0.8564	0.8564		148	65.00	7,443,959	7,584,704	
2014/07		0.10	1.2383	1.2383		148	65.00	7,453,175	7,678,684	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 086990-00 - 2014/07

241.83

Bartram Crossing

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
6209 BROOKS BARTRAM DRIVE	7/1/2013-6/30/2014	Number of Beds: 100	Superior: 0
JACKSONVILLE, FL 32258	Days in CR 365	Maximum: 36,500	Standard: 184
County: Duval [16]	First Used : 2013/07	Max Annualized: 36,500	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 24,269	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,735	Inflation
Current Class North Small	Initial CR? True	Medicaid: 12,750	FY Index: 1.32077436
Class at 1/94: North Small	Medical Utilization	52.53616%	Semester Index: 1.34705290
Operating Ex <= 18 months	Occupancy:	66.49041%	Cost: 1.00000000
Open Date: 07/09/2013	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/2013	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.22450000
Entered Medicaid 07/09/2013	Low Occupancy Adjustment Factor:	84.64606%	DC Sem Index: 1.24200000
Med # Active Date: 07/09/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	689,996	1,234,180	801,066	594,788		3,320,030	
1a	Audit Adjustments							
2	Cost Per Diem	54.1173	96.7984	62.8287	46.6500		260.3944	
3	Cost Per Diem Inflated	54.1173	96.7984	62.8287				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	54.1173	96.7984	62.8287	46.6500		260.3944	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	18.6230			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	55.2062		62.5497				
10b	Base for line 10a	54.0794		61.2730				
11	Lesser of 5,7,8,10, 10a	53.3690	93.7426	62.5497	18.6230		228.2843	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	53.3690	93.7426	62.5497	18.6230		228.2843	
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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0 086990-00 - 2014/07

241.83

Rate Semester 07/01/2014 through 12/31/2014

Bartram Crossing

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	07/09/2013	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	17,276,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	4,048,085 10.6262
RS to Start Calcs:	2013/01	<60% of Base:	False	20% ROE(2):	1,012,021 0.5545
Indexed Asset Value	5,060,106	Interest Rate:	3.8638%	Insurance Cost(3):	66,200 2.7278
FRVS Base Asset:	0	Chase Rate:	3.2500%	Taxes Cost(3):	0 0.0000
Occup Adj Factor	0.7500	Amortization Rate:	3.8638%	Home Office(3):	0 0.0000
ROE Factor	0.015000	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	290,893	Total FRVS PD:	13.9085

- (1) 80% Capital (\$4,048,085) amortized at 3.8638 % for 20 years Principal & Interest of \$290,893 divided by annual available days (36500) divided by Occup. Adj. (0.750) = \$10.6262
- (2) 20% ROE (\$1,012,021) times the ROE factor (0.015000) divided by annual available days (36500) divided by Occup. Adj. (0.750) = \$0.5545
- (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:	51,883
Comparison Bed	100	Effective PBS Limitation	5,050,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3690	53.3690	0.9476	52.4214
Direct Care	93.7426	93.7426	1.6644	92.0782
Indirect Care	62.5497	62.5497	1.1106	61.4391
Property	18.6230	13.9085	0.2469	13.6616
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				12.3298
Supplemental Rate Add-on				9.9025
Totals	228.2843	223.5698	3.9695	241.8326

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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0 086990-00 - 2014/07

241.83

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	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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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 07/01/2014 through 12/31/2014

0 088049-00 - 2014/07

269.80

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	10/11/2012-4/30/2013	Number of Beds: 120	Superior: 0
MIAMI , FL 33179	Days in CR 202	Maximum: 24,240	Standard: 184
County: Dade [13]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: South Area: 11	Last Used: 2014/07	Total Patient: 17,181	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 2,161	Inflation
Current Class South Large	Initial CR? False	Medicaid: 14,659	FY Index: 1.30228922
Class at 1/94: South Large	Medical Utilization	85.32099%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	70.87871%	Cost: 1.03437307
Open Date: 02/04/1992	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 02/04/1992	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20949917
Entered Medicaid 03/11/1992	Low Occupancy Adjustment Factor:	90.23261%	DC Sem Index: 1.24200000
Med # Active Date: 10/11/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02687131
Previous Med # 210617			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	788,361	1,492,731	959,361	163,741		3,404,194
1a	Audit Adjustments						
2	Cost Per Diem	53.7800	101.8303	65.4452	11.1700		232.2255
3	Cost Per Diem Inflated	55.6286	104.5666	67.6948			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	55.6286	104.5666	67.6948	11.1700		239.0600
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	57.5657		65.8239			
10b	Base for line 10a	56.3907		64.4804			
11	Lesser of 5,7,8,10, 10a	54.4176	98.4475	63.9416	11.1700		227.9767
12/13	Medical Adjustment Rate		3.9119	2.5408			
14	Prospective Per Diem 11	54.4176	102.3594	66.4824	11.1700		234.4294
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate

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Rate Semester 07/01/2014 through 12/31/2014

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):	4,243,306	13.3330
Indexed Asset Value	5,304,133	<60% of Base:	False	20% ROE(2):	1,060,827	0.3940
FRVS Base Asset:	3,718,320	Interest Rate:	11.1250%	Insurance Cost(3):	21,781	1.2677
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	27,495	1.6003
ROE Factor	0.014640	Amortization Rate:	11.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	525,587	Total FRVS PD:		16.5950

- (1) 80% Capital (\$4,243,306) amortized at 11.0000 % for 20 years Principal & Interest of \$525,587 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$13.3330
- (2) 20% ROE (\$1,060,827) times the ROE factor (0.014640) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.3940
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,718,320

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	54.4176	54.4176	0.9662	53.4514
Direct Care	102.3594	102.3594	1.8174	100.5420
Indirect Care	66.4824	66.4824	1.1804	65.3020
Property	11.1700	16.5950	0.2946	16.3004
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.3066
Supplemental Rate Add-on				9.9025
Totals	234.4294	239.8544	4.2586	269.8049

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
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	



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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	78.47	5,155,845	6,030,480	
2013/01		0.95	0.4901	0.4901		120	78.47	5,179,851	6,060,000	
2013/07		0.90	0.6196	0.6196		120	78.47	5,208,734	6,097,560	
2014/01		0.90	0.8564	0.8564		120	78.47	5,248,883	6,149,760	
2014/07		0.85	1.2383	1.2383		120	85.32	5,304,133	6,225,960	

Message Code:

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



Florida Agency for Health Care Administration
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238.03

Watercrest Care Center

Type of Cost Report: **Interim Change of Ownership - Budget** Type of Cost: **Estimated** Type of Rate: **Interim**
 Type of Ownership: **Unknown** CHOW Status based on this Cost Report: **Non-Related Party (NRP) CHOW**

Provider Information	Cost Report	Patient Days	Ratings Days
16650 W DIXIE HWY	4/1/2013-3/31/2014	Number of Beds: 150	Superior: 0
NORTH MIAMI BEACH, FL	Days in CR 365	Maximum: 54,750	Standard: 184
33160	First Used : 2013/01	Max Annualized: 54,750	Conditional: 0
County: Dade [13]	Last Used: 2014/07	Total Patient: 48,365	Total: 184
Region: South Area: 11	Unaudited	Medicare: 7,738	Inflation
Control: Unknown	Initial CR? False	Medicaid: 38,549	FY Index: 1.31422727
Current Class South Large	Medical Utilization	79.70433%	Semester Index: 1.34705290
Class at 1/94: South Large	Occupancy:	88.33790%	Cost: 1.00000000
Operating Ex > 18 months	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Open Date: 09/01/1984	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21900000
Acquired Date: 09/01/1984	Low Occupancy Adjustment Factor:	112.45915%	DC Sem Index: 1.24200000
Entered Medicaid 11/01/1984	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Med # Active Date: 05/01/2013			PS Target: 1.02083595
Previous Med # 310409			

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,720,213	3,913,132	1,868,505	653,020		8,154,870	
1a	Audit Adjustments							
2	Cost Per Diem	44.6241	101.5106	48.4709	16.9400		211.5456	
3	Cost Per Diem Inflated	44.6241	101.5106	48.4709				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.6241	101.5106	48.4709	16.9400		211.5456	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	52.1198		60.9485				
10b	Base for line 10a	51.0560		59.7045				
11	Lesser of 5,7,8,10, 10a	44.6241	98.4475	48.4709	13.6500		205.1925	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	44.6241	98.4475	48.4709	13.6500		205.1925	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Watercrest Care Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	09/01/1999	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	4,000,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	5,950,609 13.0385
RS to Start Calcs:	1984/07	<60% of Base:	False	20% ROE(2):	1,487,652 0.5440
Indexed Asset Value	7,438,261	Interest Rate:	9.0000%	Insurance Cost(3):	70,654 1.4608
FRVS Base Asset:	4,275,000	Chase Rate:	8.0000%	Taxes Cost(3):	48,450 1.0018
Occup Adj Factor	0.9000	Amortization Rate:	9.0000%	Home Office(3):	0 0.0000
ROE Factor	0.018020	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	642,470	Total FRVS PD:	16.0451

- (1) 80% Capital (\$5,950,609) amortized at 9.0000 % for 20 years Principal & Interest of \$642,470 divided by annual available days (54750) divided by Occup. Adj. (0.900) = \$13.0385
- (2) 20% ROE (\$1,487,652) times the ROE factor (0.018020) divided by annual available days (54750) divided by Occup. Adj. (0.900) = \$0.5440
- (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:	51,883
Comparison Bed	150	Effective PBS Limitation	4,275,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.6241	44.6241	0.7923	43.8318
Direct Care	98.4475	98.4475	1.7479	96.6996
Indirect Care	48.4709	48.4709	0.8606	47.6103
Property	13.6500	16.0451	0.2849	15.7602
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				24.2268
Supplemental Rate Add-on				9.9025
Totals	205.1925	207.5876	3.6857	238.0312

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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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	62,363	0.80	0.6104	0.6104		150	86.09	6,765,687	7,048,950	
2009/01		0.75	1.3268	1.3268		150	86.09	6,833,012	7,142,550	
2009/07		0.75	0.6841	0.6841		150	86.09	6,868,072	7,191,450	
2010/01	67,559	0.70	0.8643	0.8643		150	85.39	6,977,183	7,253,550	
2010/07	23,418	0.70	0.7107	0.7107		150	84.86	7,035,312	7,305,150	
2011/01		0.65	0.9198	0.9198		150	84.86	7,077,376	7,372,350	
2011/07	31,700	0.65	0.9028	0.9028		150	83.76	7,150,606	7,438,950	
2012/01		0.60	0.3865	0.3865		150	83.76	7,150,606	7,467,750	5
2012/07	108,558	0.60	0.9417	0.9417		150	83.52	7,316,241	7,538,100	
2013/01		0.55	0.4901	0.4901		150	79.70	7,335,966	7,575,000	
2013/07		0.55	0.6196	0.6196		150	79.70	7,360,967	7,621,950	
2014/01		0.50	0.8564	0.8564		150	79.70	7,392,487	7,687,200	



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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
2014/07		0.50	1.2383	1.2383		150	79.70	7,438,261	7,782,450	

Message Code:

- 1 Per Bed Standard Limitation
- 5 Uncorrected Licensure Deficiency

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Report Printed: 6/27/2014 ID:



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216.23

Osprey Point Nursing 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
1104 NORTH MAIN STREET	1/1/2013-12/31/2013	Number of Beds: 60	Superior: 0
BUSHNELL, FL 33513	Days in CR 365	Maximum: 21,900	Standard: 184
County: Sumter [60]	First Used : 2013/07	Max Annualized: 21,900	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 19,932	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 8,923	Inflation
Current Class North Small	Initial CR? False	Medicaid: 9,383	FY Index: 1.31456505
Class at 1/94: North Small	Medical Utilization	47.07506%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.01370%	Cost: 1.00000000
Open Date: 07/02/1999	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/02/1999	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 07/02/1999	Low Occupancy Adjustment Factor:	115.86560%	DC Sem Index: 1.24200000
Med # Active Date: 08/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 215597			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	476,652	657,996	565,521	420,358		2,120,527	
1a	Audit Adjustments							
2	Cost Per Diem	50.7995	70.1264	60.2708	44.8000		225.9967	
3	Cost Per Diem Inflated	50.7995	70.1264	60.2708				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	50.7995	70.1264	60.2708	44.8000		225.9967	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation	49.9864		62.3168				
10b	Base for line 10a	48.9661		61.0449				
11	Lesser of 5,7,8,10, 10a	49.9864	70.1264	60.2708	13.6500		194.0336	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	49.9864	70.1264	60.2708	13.6500		194.0336	
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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Rate Semester 07/01/2014 through 12/31/2014

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):	2,339,991	9.4021
Indexed Asset Value	2,924,989	<60% of Base:	False	20% ROE(2):	584,998	0.5565
FRVS Base Asset:	2,330,760	Interest Rate:	5.0000%	Insurance Cost(3):	12,300	0.6171
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	40,600	2.0369
ROE Factor	0.018750	Amortization Rate:	5.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	185,315	Total FRVS PD:		12.6126

- (1) 80% Capital (\$2,339,991) amortized at 5.0000 % for 20 years Principal & Interest of \$185,315 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$9.4021
- (2) 20% ROE (\$584,998) times the ROE factor (0.018750) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.5565
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	2,330,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.9864	49.9864	0.8875	49.0989
Direct Care	70.1264	70.1264	1.2451	68.8813
Indirect Care	60.2708	60.2708	1.0701	59.2007
Property	13.6500	12.6126	0.2239	12.3887
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				16.7585
Supplemental Rate Add-on				9.9025
Totals	194.0336	192.9962	3.4266	216.2306

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	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	45.61	2,635,579	2,819,580	
2009/01		1.00	1.3268	1.3268		60	45.61	2,664,578	2,857,020	
2009/07		1.00	0.6841	0.6841		60	45.61	2,679,694	2,876,580	
2010/01		1.00	0.8643	0.8643		60	43.87	2,698,168	2,901,420	
2010/07	28,133	1.00	0.7107	0.7107		60	46.61	2,742,552	2,922,060	
2011/01		1.00	0.9198	0.9198		60	46.61	2,763,930	2,948,940	
2011/07		1.00	0.9028	0.9028		60	46.61	2,785,076	2,975,580	
2012/01		1.00	0.3865	0.3865		60	47.03	2,794,280	2,987,100	
2012/07		1.00	0.9417	0.9417		60	47.03	2,816,781	3,015,240	
2013/01		1.00	0.4901	0.4901		60	47.06	2,828,593	3,030,000	
2013/07	29,652	1.00	0.6196	0.6196		60	47.08	2,873,247	3,048,780	
2014/01		1.00	0.8564	0.8564		60	47.08	2,894,310	3,074,880	



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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
2014/07		1.00	1.2383	1.2383		60	47.08	2,924,989	3,112,980	

Message Code:

1 Per Bed Standard Limitation

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222.15

Baya Pointe Nursing and Rehabilitation 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
587 SE ERMINE AVE	1/1/2013-12/31/2013	Number of Beds: 90	Superior: 0
LAKE CITY, FL 32025	Days in CR 365	Maximum: 32,850	Standard: 184
County: Columbia [12]	First Used : 2013/07	Max Annualized: 32,850	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 29,858	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,989	Inflation
Current Class North Small	Initial CR? False	Medicaid: 16,384	FY Index: 1.31456505
Class at 1/94: North Small	Medical Utilization	54.87307%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.89193%	Cost: 1.00000000
Open Date: 01/07/1994	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/07/1994	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 01/25/1994	Low Occupancy Adjustment Factor:	115.71058%	DC Sem Index: 1.24200000
Med # Active Date: 08/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 308111			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	803,801	1,294,829	925,293	746,619		3,770,542
1a	Audit Adjustments						
2	Cost Per Diem	49.0601	79.0301	56.4754	45.5700		230.1356
3	Cost Per Diem Inflated	49.0601	79.0301	56.4754			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	49.0601	79.0301	56.4754	45.5700		230.1356
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500		
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932			
10	Target Rate Class Ceiling	54.4184		66.1441			
10a	New Provider Target Limitation	53.2712		60.1441			
10b	Base for line 10a	52.1839		58.9165			
11	Lesser of 5,7,8,10, 10a	49.0601	79.0301	56.4754	13.6500		198.2156
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	49.0601	79.0301	56.4754	13.6500		198.2156
15	Inflated Usual & Customary Charge						0.00

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



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Rate Semester 07/01/2014 through 12/31/2014

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):	3,610,510 9.6713
Indexed Asset Value	4,513,137	<60% of Base:	False	20% ROE(2):	902,627 0.5724
FRVS Base Asset:	1,995,300	Interest Rate:	5.0000%	Insurance Cost(3):	16,400 0.5493
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	84,200 2.8200
ROE Factor	0.018750	Amortization Rate:	5.0000%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	285,933	Total FRVS PD:	13.6130

- (1) 80% Capital (\$3,610,510) amortized at 5.0000 % for 20 years Principal & Interest of \$285,933 divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$9.6713
- (2) 20% ROE (\$902,627) times the ROE factor (0.018750) divided by annual available days (32850) divided by Occup. Adj. (0.90) = \$0.5724
- (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:	33,255
Comparison Date:	07/01/1993	Current RS PBS:	51,883
Comparison Bed	60	Effective PBS Limitation	1,995,300

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.0601	49.0601	0.8711	48.1890
Direct Care	79.0301	79.0301	1.4032	77.6269
Indirect Care	56.4754	56.4754	1.0027	55.4727
Property	13.6500	13.6130	0.2417	13.3713
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				17.5883
Supplemental Rate Add-on				9.9025
Totals	198.2156	198.1786	3.5187	222.1507

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	46,204	1.00	0.8595	0.8595		60	66.97	2,412,514	2,655,060	
2005/07	7,976	1.00	0.7364	0.7364		60	66.97	2,438,256	2,674,620	
2006/01	34,687	1.00	0.9068	0.9068		60	66.97	2,495,053	2,698,860	
2006/07	576	1.00	0.8133	0.8133		60	66.97	2,515,921	2,720,820	
2007/01		1.00	1.0133	1.0133		60	66.97	2,541,415	2,748,360	
2007/07		1.00	1.1050	1.1050		60	66.97	2,569,498	2,778,720	
2008/01	1,408,884	1.00	0.8556	0.8556		90	60.87	4,000,367	4,203,720	
2008/07		1.00	0.6104	0.6104		90	60.87	4,024,785	4,229,370	



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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	60.87	4,078,186	4,285,530	
2009/07		1.00	0.6841	0.6841		90	46.35	4,101,697	4,314,870	
2010/01	16,736	1.00	0.8643	0.8643		90	54.16	4,153,343	4,352,130	
2010/07		1.00	0.7107	0.7107		90	54.16	4,182,410	4,383,090	
2011/01		1.00	0.9198	0.9198		90	53.94	4,220,138	4,423,410	
2011/07		1.00	0.9028	0.9028		90	53.94	4,257,503	4,463,370	
2012/01		1.00	0.3865	0.3865		90	53.94	4,273,641	4,480,650	
2012/07		1.00	0.9417	0.9417		90	54.51	4,313,527	4,522,860	
2013/01		1.00	0.4901	0.4901		90	54.51	4,334,479	4,545,000	
2013/07	61,723	1.00	0.6196	0.6196		90	54.87	4,422,995	4,573,170	
2014/01		1.00	0.8564	0.8564		90	54.87	4,460,784	4,612,320	
2014/07		0.95	1.2383	1.2383		90	54.87	4,513,137	4,669,470	

Message Code:

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

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241.93

Hawthorne Health and Rehab of Sarasota

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
5381 Desoto Road	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 0
SARASOTA, FL 34235	Days in CR 365	Maximum: 43,800	Standard: 184
County: Sarasota [58]	First Used : 2013/01	Max Annualized: 43,800	Conditional: 0
Region: South Area: 8	Last Used: 2014/07	Total Patient: 16,123	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,080	Inflation
Current Class South Large	Initial CR? True	Medicaid: 6,491	FY Index: 1.31456505
Class at 1/94: South Large	Medical Utilization	40.25926%	Semester Index: 1.34705290
Operating Ex <= 18 months	Occupancy:	36.81050%	Cost: 1.00000000
Open Date: 01/15/2013	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/22/2012	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 01/15/2013	Low Occupancy Adjustment Factor:	46.86185%	DC Sem Index: 1.24200000
Med # Active Date: 01/15/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med #			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	537,974	648,762	732,857	709,531		2,629,124
1a	Audit Adjustments						
2	Cost Per Diem	82.8800	99.9479	112.9036	109.3100		405.0415
3	Cost Per Diem Inflated	82.8800	99.9479	112.9036			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	82.8800	99.9479	112.9036	109.3100		405.0415
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	18.6230		
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224			
10	Target Rate Class Ceiling	56.5683		63.9416			
10a	New Provider Target Limitation	53.0089		61.1206			
10b	Base for line 10a	51.9270		59.8731			
11	Lesser of 5,7,8,10, 10a	53.0089	98.4475	61.1206	18.6230		231.2000
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	53.0089	98.4475	61.1206	18.6230		231.2000
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

0 094353-00 - 2014/07

241.93

Rate Semester 07/01/2014 through 12/31/2014

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):	4,838,354	9.5180
Indexed Asset Value	6,047,943	<60% of Base:	False	20% ROE(2):	1,209,589	0.5115
FRVS Base Asset:	0	Interest Rate:	4.7500%	Insurance Cost(3):	51,840	3.2153
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	15,000	0.9303
ROE Factor	0.016670	Amortization Rate:	4.7500%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	375,199	Total FRVS PD:		14.1751

- (1) 80% Capital (\$4,838,354) amortized at 4.7500 % for 20 years Principal & Interest of \$375,199 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.5180
- (2) 20% ROE (\$1,209,589) times the ROE factor (0.016670) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5115
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	6,030,480

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.0089	53.0089	0.9412	52.0677
Direct Care	98.4475	98.4475	1.7479	96.6996
Indirect Care	61.1206	61.1206	1.0852	60.0354
Property	18.6230	14.1751	0.2517	13.9234
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				9.3053
Supplemental Rate Add-on				9.9025
Totals	231.2000	226.7521	4.0260	241.9339

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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Rate Semester 7/1/2014 through 12/31/2014 Based on Cost Report: 12/31/2013

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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	18,567,623	0.00	0.4901	0.4901		120	40.26	6,030,480	6,030,480	1
2013/07		0.10	0.6196	0.6196		120	40.26	6,033,217	6,097,560	
2014/01		0.10	0.8564	0.8564		120	40.26	6,036,997	6,149,760	
2014/07		0.20	1.2383	1.2383		120	40.26	6,047,943	6,225,960	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



Florida Agency for Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Finance
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

0 096150-00 - 2014/07

224.13

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 HILL VIEW DR	1/1/2012-12/31/2012	Number of Beds: 82	Superior: 0
PENSACOLA, FL 32514	Days in CR 366	Maximum: 30,012	Standard: 184
County: Escambia [17]	First Used : 2014/01	Max Annualized: 29,930	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 27,401	Total: 184
Control: Nonprofit : 501(c)(3) Organization	Unaudited	Medicare: 1,782	Inflation
Current Class North Small	Initial CR? False	Medicaid: 5,118	FY Index: 1.28335532
Class at 1/94: North Small	Medical Utilization	18.67815%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	91.30015%	Cost: 1.04963363
Open Date: 05/01/1981	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 05/01/1981	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.20250000
Entered Medicaid 09/01/1988	Low Occupancy Adjustment Factor:	116.23026%	DC Sem Index: 1.24200000
Med # Active Date: 08/01/2012	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.03284823
Previous Med # 210374			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	281,355	442,788	341,934	57,885		1,123,961	
1a	Audit Adjustments							
2	Cost Per Diem	54.9736	86.5158	66.8101	11.3101		219.6096	
3	Cost Per Diem Inflated	57.7021	89.3577	70.1261				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.7021	89.3577	70.1261	11.3101		228.4960	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	84.4426		113.4223				
7	Provider Target Rate	86.2020		115.7856				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	53.3690	93.7426	69.3890	13.6500			
9	Prior Semester: Class Ceiling Target Base	53.6361		65.1932				
10	Target Rate Class Ceiling	54.4184		66.1441				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	53.3690	89.3577	66.1441	11.3101		220.1809	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	53.3690	89.3577	66.1441	11.3101		220.1809	
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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Rate Semester 07/01/2014 through 12/31/2014

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 6.2823
Indexed Asset Value	3,096,767	<60% of Base:	False	20% ROE(2):	619,353 0.3352
FRVS Base Asset:	2,040,570	Interest Rate:	3.2900%	Insurance Cost(3):	11,343 0.4140
Occup Adj Factor	0.9000	Chase Rate:	4.0000%	Taxes Cost(3):	8,767 0.3200
ROE Factor	0.014580	Amortization Rate:	3.2900%	Home Office(3):	51,503 1.8796
		Interest Only:	False	Replacement(3&4):	2,028,800 0.0000
		Yearly Payment:	169,225	Total FRVS PD:	9.2311

- (1) 80% Capital (\$2,477,414) amortized at 3.2900 % for 20 years Principal & Interest of \$169,225 divided by annual available days (29930) divided by Occup. Adj. (0.900) = \$6.2823
 (2) 20% ROE (\$619,353) times the ROE factor (0.014580) divided by annual available days (29930) divided by Occup. Adj. (0.900) = \$0.3352
 (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:	22,673
Comparison Date:	07/01/1980	Current RS PBS:	51,883
Comparison Bed	90	Effective PBS Limitation	2,040,570

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	53.3690	53.3690	0.9476	52.4214
Direct Care	89.3577	89.3577	1.5866	87.7711
Indirect Care	66.1441	66.1441	1.1744	64.9697
Property	11.3101	9.2311	0.1639	9.0672
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Totals	220.1809	218.1019	3.8725	224.1319

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
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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	22.65	3,096,767	4,141,000	
2013/07		0.35	0.6196	0.6196		82	22.65	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	

Message Code:

1 Per Bed Standard Limitation 5 Uncorrected Licensure Deficiency

NC68L Report Calculated: 6/27/2014 4:14:19 PM

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Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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240.23

Palm Garden of Aventura

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 21251 E DIXIE HIGHWAY NORTH MIAMI BEACH , FL 33180 County: Dade [13] Region: South Area: 11 Control: Proprietary : Corporation Current Class South Large Class at 1/94: South Large Operating Ex > 18 months Open Date: 07/13/1988 Acquired Date: 07/13/1988 Entered Medicaid 07/13/1988 Med # Active Date: 11/01/2013 Previous Med # 257494	Cost Report 11/1/2013-10/31/2014 Days in CR 365 First Used : 2013/07 Last Used: 2014/07 Unaudited Initial CR? False Medical Utilization Occupancy: Statewide Low Occupancy Threshold: Medicaid Low Occupancy Threshold: Low Occupancy Adjustment Factor: Weighted Low Occ Adjustment Factor:
Patient Days Number of Beds: 120 Maximum: 43,800 Max Annualized: 43,800 Total Patient: 42,162 Medicare: 12,181 Medicaid: 24,184	Ratings Days Superior: 0 Standard: 184 Conditional: 0 Total: 184 Inflation FY Index: 1.33573201 Semester Index: 1.34705290 Cost: 1.00000000 Target: 1.01458517 DC FY Index: 1.23283061 DC Sem Index: 1.24200000 DC Inflation: 1.00000000 PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,191,726	2,144,063	1,497,246	798,314		5,631,349	
1a	Audit Adjustments							
2	Cost Per Diem	49.2775	88.6563	61.9106	33.0100		232.8544	
3	Cost Per Diem Inflated	49.2775	88.6563	61.9106				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	49.2775	88.6563	61.9106	33.0100		232.8544	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	49.3748		62.1177				
10b	Base for line 10a	48.3670		60.8498				
11	Lesser of 5,7,8,10, 10a	49.2775	88.6563	61.9106	13.6500		213.4944	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	49.2775	88.6563	61.9106	13.6500		213.4944	
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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Rate Semester 07/01/2014 through 12/31/2014

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):	4,576,122	11.2307
Indexed Asset Value	5,720,153	<60% of Base:	False	20% ROE(2):	1,144,031	0.5682
FRVS Base Asset:	3,559,440	Interest Rate:	7.5100%	Insurance Cost(3):	41,301	0.9796
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	141,365	3.3529
ROE Factor	0.019580	Amortization Rate:	7.5100%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	442,715	Total FRVS PD:		16.1314

- (1) 80% Capital (\$4,576,122) amortized at 7.5100 % for 20 years Principal & Interest of \$442,715 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.2307
- (2) 20% ROE (\$1,144,031) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5682
- (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	51,883
			3,559,440

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	49.2775	49.2775	0.8749	48.4026
Direct Care	88.6563	88.6563	1.5741	87.0822
Indirect Care	61.9106	61.9106	1.0992	60.8114
Property	13.6500	16.1314	0.2864	15.8450
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				18.1877
Supplemental Rate Add-on				9.9025
Totals	213.4944	215.9758	3.8346	240.2314

Medicaid Trend Adjustment



Florida Agency for Health Care Administration
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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
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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0 098577-00 - 2014/07

240.23

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	57.36	5,637,202	6,097,560	
2014/01		0.70	0.8564	0.8564		120	57.36	5,670,997	6,149,760	
2014/07		0.70	1.2383	1.2383		120	57.36	5,720,153	6,225,960	

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 07/01/2014 through 12/31/2014

0 098580-00 - 2014/07

244.59

Palm Garden of Clearwater

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
3480 MCMULLEN BOOTH RD	11/1/2013-10/31/2014	Number of Beds: 120	Superior: 0
CLEARWATER, FL 33761	Days in CR 365	Maximum: 43,800	Standard: 184
County: Pinellas [52]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 41,435	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,479	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 23,262	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	56.14094%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.60046%	Cost: 1.00000000
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 09/18/1987	Low Occupancy Adjustment Factor:	120.43174%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257460			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,080,024	2,214,965	1,338,339	866,510		5,499,838
1a	Audit Adjustments						
2	Cost Per Diem	46.4287	95.2182	57.5333	37.2500		236.4302
3	Cost Per Diem Inflated	46.4287	95.2182	57.5333			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.4287	95.2182	57.5333	37.2500		236.4302
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	46.6540		57.7766			
10b	Base for line 10a	45.7018		56.5973			
11	Lesser of 5,7,8,10, 10a	46.4287	95.2182	57.5333	13.6500		212.8302
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	46.4287	95.2182	57.5333	13.6500		212.8302
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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 Computation of Nursing Home Medicaid Reimbursement Rate

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244.59

Rate Semester 07/01/2014 through 12/31/2014

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):	4,834,862 15.1918
Indexed Asset Value	6,043,578	<60% of Base:	False	20% ROE(2):	1,208,716 0.6004
FRVS Base Asset:	3,503,400	Interest Rate:	11.0000%	Insurance Cost(3):	42,503 1.0258
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	81,999 1.9790
ROE Factor	0.019580	Amortization Rate:	11.0000%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	598,859	Total FRVS PD:	18.7970

- (1) 80% Capital (\$4,834,862) amortized at 11.0000 % for 20 years Principal & Interest of \$598,859 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$15.1918
- (2) 20% ROE (\$1,208,716) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.6004
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,503,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.4287	46.4287	0.8243	45.6044
Direct Care	95.2182	95.2182	1.6906	93.5276
Indirect Care	57.5333	57.5333	1.0215	56.5118
Property	13.6500	18.7970	0.3337	18.4633
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.5766
Supplemental Rate Add-on				9.9025
Totals	212.8302	217.9772	3.8701	244.5862

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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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
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	22,533	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	56.14	5,962,131	6,097,560	
2014/01		0.65	0.8564	0.8564		120	56.14	5,995,322	6,149,760	
2014/07		0.65	1.2383	1.2383		120	56.14	6,043,578	6,225,960	

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
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 Rate Semester 07/01/2014 through 12/31/2014

0 098581-00 - 2014/07

231.33

Palm Garden of Gainesville

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
227 SW 62ND BLVD	11/1/2013-10/31/2014	Number of Beds: 120	Superior: 0
GAINESVILLE, FL 32607	Days in CR 365	Maximum: 43,800	Standard: 184
County: Alachua [1]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 42,885	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 15,208	Inflation
Current Class North Large	Initial CR? False	Medicaid: 20,362	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	47.48047%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	97.91096%	Cost: 1.00000000
Open Date: 07/20/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/20/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 07/21/1987	Low Occupancy Adjustment Factor:	124.64620%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257265			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	908,002	1,909,076	1,125,052	788,824		4,730,954	
1a	Audit Adjustments							
2	Cost Per Diem	44.5930	93.7568	55.2525	38.7400		232.3423	
3	Cost Per Diem Inflated	44.5930	93.7568	55.2525				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.5930	93.7568	55.2525	38.7400		232.3423	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	44.6227		55.5568				
10b	Base for line 10a	43.7119		54.4228				
11	Lesser of 5,7,8,10, 10a	44.5930	93.7568	55.2525	13.6500		207.2523	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	44.5930	93.7568	55.2525	13.6500		207.2523	
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

0 098581-00 - 2014/07

231.33

Rate Semester 07/01/2014 through 12/31/2014

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):	4,773,415	11.6705
Indexed Asset Value	5,966,769	<60% of Base:	False	20% ROE(2):	1,193,354	0.5927
FRVS Base Asset:	3,503,400	Interest Rate:	7.4600%	Insurance Cost(3):	43,685	1.0187
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	116,516	2.7169
ROE Factor	0.019580	Amortization Rate:	7.4600%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	460,052	Total FRVS PD:		15.9988

- (1) 80% Capital (\$4,773,415) amortized at 7.4600 % for 20 years Principal & Interest of \$460,052 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$11.6705
 (2) 20% ROE (\$1,193,354) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5927
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,503,400

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.5930	44.5930	0.7918	43.8012
Direct Care	93.7568	93.7568	1.6647	92.0921
Indirect Care	55.2525	55.2525	0.9810	54.2715
Property	13.6500	15.9988	0.2841	15.7147
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				15.5502
Supplemental Rate Add-on				9.9025
Totals	207.2523	209.6011	3.7216	231.3322

Medicaid Trend Adjustment



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231.33

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	4,781,880	4,781,880	5
2000/07		1.00	1.1129	1.1129		120	41.35	5,450,146	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	41.35	5,450,146	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	41.35	5,450,146	4,944,840	3
2002/01	37,693	1.00	1.0301	1.0301		120	48.64	5,450,146	4,995,720	3



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231.33

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	5,450,146	5,037,360	3
2003/01		1.00	1.3271	1.3271		120	48.64	5,450,146	5,104,200	3
2003/07		1.00	1.1664	1.1664		120	48.64	5,450,146	5,163,720	3
2004/01		1.00	1.1103	1.1103		120	48.64	5,450,146	5,221,080	3
2004/07		1.00	0.8378	0.8378		120	48.64	5,450,146	5,264,880	3
2005/01	40,493	1.00	0.8595	0.8595		120	42.38	5,450,146	5,310,120	3
2005/07		1.00	0.7364	0.7364		120	42.38	5,450,146	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		0.70	0.6196	0.6196		120	47.48	5,897,254	6,097,560	
2014/01		0.65	0.8564	0.8564		120	47.48	5,925,595	6,149,760	
2014/07		0.65	1.2383	1.2383		120	47.48	5,966,769	6,225,960	

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 |
| 8 Limited to Current RS Per Bed Standard |



Florida Agency for Health Care Administration
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236.84

Palm Garden of Jacksonville

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
5725 SPRING PARK ROAD	11/1/2013-10/31/2014	Number of Beds: 120	Superior: 0
JACKSONVILLE , FL 32216	Days in CR 365	Maximum: 43,800	Standard: 184
County: Duval [16]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: North Area: 4	Last Used: 2014/07	Total Patient: 42,149	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,574	Inflation
Current Class North Large	Initial CR? False	Medicaid: 26,748	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	63.46058%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.23059%	Cost: 1.00000000
Open Date: 03/02/1990	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/02/1990	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 03/14/1990	Low Occupancy Adjustment Factor:	122.50699%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257273			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,253,508	2,418,738	1,424,845	685,551		5,782,642	
1a	Audit Adjustments							
2	Cost Per Diem	46.8636	90.4269	53.2692	25.6300		216.1897	
3	Cost Per Diem Inflated	46.8636	90.4269	53.2692				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.8636	90.4269	53.2692	25.6300		216.1897	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.0809		53.5932				
10b	Base for line 10a	46.1199		52.4993				
11	Lesser of 5,7,8,10, 10a	46.8636	90.4269	53.2692	13.6500		204.2097	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	46.8636	90.4269	53.2692	13.6500		204.2097	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,929,986	14.8725
Indexed Asset Value	6,162,482	<60% of Base:	False	20% ROE(2):	1,232,496	0.6122
FRVS Base Asset:	3,182,438	Interest Rate:	10.3900%	Insurance Cost(3):	43,042	1.0212
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	67,160	1.5934
ROE Factor	0.019580	Amortization Rate:	10.3900%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	586,275	Total FRVS PD:		18.0993

- (1) 80% Capital (\$4,929,986) amortized at 10.3900 % for 20 years Principal & Interest of \$586,275 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.8725
- (2) 20% ROE (\$1,232,496) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.6122
- (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:	51,883
Comparison Bed	106	Effective PBS Limitation	3,182,438

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.8636	46.8636	0.8321	46.0315
Direct Care	90.4269	90.4269	1.6055	88.8214
Indirect Care	53.2692	53.2692	0.9458	52.3234
Property	13.6500	18.0993	0.3214	17.7779
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Quality Assess-Medicaid Share				21.9827
Totals	204.2097	208.6590	3.7048	236.8394

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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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		0.80	0.6196	0.6196		120	63.46	6,064,232	6,097,560	
2014/01		0.80	0.8564	0.8564		120	63.46	6,105,778	6,149,760	
2014/07		0.75	1.2383	1.2383		120	63.46	6,162,482	6,225,960	

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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238.61

Palm Garden of Largo

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
10500 STARKEY RD	11/1/2013-10/31/2014	Number of Beds: 140	Superior: 0
LARGO, FL 33777	Days in CR 365	Maximum: 51,100	Standard: 184
County: Pinellas [52]	First Used : 2013/07	Max Annualized: 51,100	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 47,303	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 9,250	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 29,604	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	62.58377%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	92.56947%	Cost: 1.00000000
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 07/31/1987	Low Occupancy Adjustment Factor:	117.84618%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257478			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,357,953	2,659,527	1,718,468	955,913		6,691,861
1a	Audit Adjustments						
2	Cost Per Diem	45.8706	89.8367	58.0485	32.2900		226.0458
3	Cost Per Diem Inflated	45.8706	89.8367	58.0485			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	45.8706	89.8367	58.0485	32.2900		226.0458
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	45.8472		56.2148			
10b	Base for line 10a	44.9114		55.0674			
11	Lesser of 5,7,8,10, 10a	45.8472	89.8367	56.2148	13.6500		205.5487
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	45.8472	89.8367	56.2148	13.6500		205.5487
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

0 098583-00 - 2014/07

238.61

Rate Semester 07/01/2014 through 12/31/2014

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):	5,678,704	15.2942
Indexed Asset Value	7,098,380	<60% of Base:	False	20% ROE(2):	1,419,676	0.6044
FRVS Base Asset:	2,277,210	Interest Rate:	11.0000%	Insurance Cost(3):	53,205	1.1248
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	110,424	2.3344
ROE Factor	0.019580	Amortization Rate:	11.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	703,379	Total FRVS PD:		19.3578

- (1) 80% Capital (\$5,678,704) amortized at 11.0000 % for 20 years Principal & Interest of \$703,379 divided by annual available days (51100) divided by Occup. Adj. (0.90) = \$15.2942
- (2) 20% ROE (\$1,419,676) times the ROE factor (0.019580) divided by annual available days (51100) divided by Occup. Adj. (0.90) = \$0.6044
- (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	51,883
			2,277,210

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.8472	45.8472	0.8140	45.0332
Direct Care	89.8367	89.8367	1.5951	88.2416
Indirect Care	56.2148	56.2148	0.9981	55.2167
Property	13.6500	19.3578	0.3437	19.0141
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.2060
Supplemental Rate Add-on				9.9025
Totals	205.5487	211.2565	3.7509	238.6141

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 7/1/2014 through 12/31/2014 Based on Cost Report: 10/31/2014

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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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238.61

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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		0.70	0.6196	0.6196		140	62.58	7,002,717	7,113,820	
2014/01		0.65	0.8564	0.8564		140	62.58	7,041,701	7,174,720	
2014/07		0.65	1.2383	1.2383		140	62.58	7,098,380	7,263,620	

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
 Computation of Nursing Home Medicaid Reimbursement Rate
 Rate Semester 07/01/2014 through 12/31/2014

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231.07

Palm Garden of Ocala

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
2700 SW 34TH ST	11/1/2013-10/31/2014	Number of Beds: 180	Superior: 0
OCALA, FL 34474	Days in CR 365	Maximum: 65,700	Standard: 184
County: Marion [42]	First Used : 2013/07	Max Annualized: 65,700	Conditional: 0
Region: North Area: 3	Last Used: 2014/07	Total Patient: 61,180	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 17,262	Inflation
Current Class North Large	Initial CR? False	Medicaid: 39,209	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	64.08794%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.12024%	Cost: 1.00000000
Open Date: 06/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 06/01/1987	Low Occupancy Adjustment Factor:	118.54734%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257290			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,808,251	3,386,179	2,148,214	1,548,756		8,891,400
1a	Audit Adjustments						
2	Cost Per Diem	46.1183	86.3623	54.7888	39.5000		226.7694
3	Cost Per Diem Inflated	46.1183	86.3623	54.7888			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	46.1183	86.3623	54.7888	39.5000		226.7694
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	45.9656		55.1046			
10b	Base for line 10a	45.0274		53.9799			
11	Lesser of 5,7,8,10, 10a	45.9656	86.3623	54.7888	13.6500		200.7667
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	45.9656	86.3623	54.7888	13.6500		200.7667
15	Inflated Usual & Customary Charge						0.00

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



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231.07

Rate Semester 07/01/2014 through 12/31/2014

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):	7,286,278	13.8414
Indexed Asset Value	9,107,847	<60% of Base:	False	20% ROE(2):	1,821,569	0.6032
FRVS Base Asset:	1,720,920	Interest Rate:	9.5600%	Insurance Cost(3):	64,148	1.0485
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	125,324	2.0484
ROE Factor	0.019580	Amortization Rate:	9.5600%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	818,441	Total FRVS PD:		17.5415

- (1) 80% Capital (\$7,286,278) amortized at 9.5600 % for 20 years Principal & Interest of \$818,441 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$13.8414
 (2) 20% ROE (\$1,821,569) times the ROE factor (0.019580) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.6032
 (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,720,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.9656	45.9656	0.8161	45.1495
Direct Care	86.3623	86.3623	1.5334	84.8289
Indirect Care	54.7888	54.7888	0.9728	53.8160
Property	13.6500	17.5415	0.3115	17.2300
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Quality Assess-Medicaid Share				20.1443
Totals	200.7667	204.6582	3.6338	231.0712

Medicaid Trend Adjustment



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231.07

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	
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	53,831	0.65	0.6196	0.6196		180	64.09	8,990,624	9,146,340	
2014/01		0.65	0.8564	0.8564		180	64.09	9,040,675	9,224,640	
2014/07		0.60	1.2383	1.2383		180	64.09	9,107,847	9,338,940	

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
 Office of Medicaid Cost Reimbursement Planning and Finance
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 Rate Semester 07/01/2014 through 12/31/2014

0 098586-00 - 2014/07

231.04

Palm Garden of Orlando

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
654 N ECONLOCKHATCHEE TRAIL	11/1/2013-10/31/2014	Number of Beds: 120	Superior: 0
ORLANDO, FL 32825-6402	Days in CR 365	Maximum: 43,800	Standard: 184
County: Orange [48]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 40,887	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 7,781	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 26,167	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	63.99834%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.34932%	Cost: 1.00000000
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 09/21/1987	Low Occupancy Adjustment Factor:	118.83897%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257303			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,218,440	2,263,846	1,403,015	743,404		5,628,705	
1a	Audit Adjustments							
2	Cost Per Diem	46.5640	86.5153	53.6177	28.4100		215.1070	
3	Cost Per Diem Inflated	46.5640	86.5153	53.6177				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.5640	86.5153	53.6177	28.4100		215.1070	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	46.7806		57.1352				
10b	Base for line 10a	45.8258		55.9690				
11	Lesser of 5,7,8,10, 10a	46.5640	86.5153	53.6177	13.6500		200.3470	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	46.5640	86.5153	53.6177	13.6500		200.3470	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,869,563	12.8268
Indexed Asset Value	6,086,954	<60% of Base:	False	20% ROE(2):	1,217,391	0.6047
FRVS Base Asset:	1,751,700	Interest Rate:	8.4600%	Insurance Cost(3):	43,998	1.0761
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	58,688	1.4354
ROE Factor	0.019580	Amortization Rate:	8.4600%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	505,632	Total FRVS PD:		15.9430

- (1) 80% Capital (\$4,869,563) amortized at 8.4600 % for 20 years Principal & Interest of \$505,632 divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$12.8268
 (2) 20% ROE (\$1,217,391) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.90) = \$0.6047
 (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,751,700

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.5640	46.5640	0.8267	45.7373
Direct Care	86.5153	86.5153	1.5361	84.9792
Indirect Care	53.6177	53.6177	0.9520	52.6657
Property	13.6500	15.9430	0.2831	15.6599
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.0954
Supplemental Rate Add-on				9.9025
Totals	200.3470	202.6400	3.5979	231.0400

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	4,493,400	4,493,400	5
1998/01		1.00	1.1663	1.1663		120	56.22	5,275,028	4,545,840	3
1998/07		1.00	1.0794	1.0794		120	56.22	5,275,028	4,594,920	3
1999/01		1.00	1.4499	1.4499		120	57.01	5,275,028	4,661,520	3
1999/07		1.00	1.2299	1.2299		120	67.01	4,718,880	4,718,880	5
2000/01		1.00	1.3356	1.3356		120	67.01	5,339,906	4,781,880	3
2000/07		1.00	1.1129	1.1129		120	67.01	5,339,906	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	67.01	5,339,906	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	67.01	5,339,906	4,944,840	3
2002/01	63,538	1.00	1.0301	1.0301		120	62.29	5,339,906	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	5,339,906	5,037,360	3
2003/01		1.00	1.3271	1.3271		120	62.29	5,339,906	5,104,200	3
2003/07		1.00	1.1664	1.1664		120	62.29	5,339,906	5,163,720	3
2004/01		1.00	1.1103	1.1103		120	62.29	5,339,906	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	64.00	6,004,922	6,097,560	
2014/01		0.65	0.8564	0.8564		120	64.00	6,038,351	6,149,760	
2014/07		0.65	1.2383	1.2383		120	64.00	6,086,954	6,225,960	

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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Palm Garden of Pinellas

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
200 16TH AVE SE	11/1/2013-10/31/2014	Number of Beds: 120	Superior: 0
LARGO, FL 33771	Days in CR 365	Maximum: 43,800	Standard: 153
County: Pinellas [52]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 31
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 40,865	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,328	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 25,724	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	62.94873%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	93.29909%	Cost: 1.00000000
Open Date: 06/14/1991	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 06/14/1991	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 06/25/1991	Low Occupancy Adjustment Factor:	118.77503%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257508			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,110,013	2,305,678	1,432,579	851,207		5,699,477	
1a	Audit Adjustments							
2	Cost Per Diem	43.1509	89.6314	55.6904	33.0900		221.5627	
3	Cost Per Diem Inflated	43.1509	89.6314	55.6904				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.1509	89.6314	55.6904	33.0900		221.5627	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	45.3146		57.1745				
10b	Base for line 10a	44.3897		56.0075				
11	Lesser of 5,7,8,10, 10a	43.1509	89.6314	55.6904	13.6500		202.1227	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	43.1509	89.6314	55.6904	13.6500		202.1227	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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		
		Amount:	5,500,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Fixed	80% Capital(1):	4,947,304	14.9248
RS to Start Calcs:	1991/01	<60% of Base:	False	20% ROE(2):	1,236,826	0.6143
Indexed Asset Value	6,184,130	Interest Rate:	10.3900%	Insurance Cost(3):	45,410	1.1112
FRVS Base Asset:	3,642,240	Chase Rate:	7.7500%	Taxes Cost(3):	82,891	2.0284
Occup Adj Factor	0.9000	Amortization Rate:	10.3900%	Home Office(3):	0	0.0000
ROE Factor	0.019580	Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	588,335	Total FRVS PD:		18.6787

- (1) 80% Capital (\$4,947,304) amortized at 10.3900 % for 20 years Principal & Interest of \$588,335 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.9248
- (2) 20% ROE (\$1,236,826) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.6143
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.1509	43.1509	0.7661	42.3848
Direct Care	89.6314	89.6314	1.5914	88.0400
Indirect Care	55.6904	55.6904	0.9888	54.7016
Property	13.6500	18.6787	0.3316	18.3471
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.5982
Supplemental Rate Add-on				9.9025
Totals	202.1227	207.1514	3.6779	235.9742

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	62.95	6,079,220	6,097,560	
2014/01		0.85	0.8564	0.8564		120	62.95	6,123,471	6,149,760	
2014/07		0.80	1.2383	1.2383		120	62.95	6,184,130	6,225,960	

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 Port Saint Lucie

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		
1751 SE HILLMOOR DRIVE	11/1/2013-10/31/2014	Number of Beds: 120	Superior:	0	
PORT SAINT LUCIE, FL 34952	Days in CR 365	Maximum: 43,800	Standard:	184	
County: St Lucie [56]	First Used : 2013/07	Max Annualized: 43,800	Conditional:	0	
Region: South Area: 9	Last Used: 2014/07	Total Patient: 41,776	Total:	184	
Control: Proprietary : Corporation	Unaudited	Medicare: 7,624	Inflation		
Current Class South Large	Initial CR? False	Medicaid: 28,128	FY Index:	1.33573201	
Class at 1/94: South Large	Medical Utilization		Semester Index:	1.34705290	
Operating Ex > 18 months	Occupancy:	67.33052%	Cost:	1.00000000	
Open Date: 02/25/1988	Statewide Low Occupancy Threshold:	95.37900%	Target:	1.01458517	
Acquired Date: 02/25/1988	Medicaid Low Occupancy Threshold:	78.55110%	DC FY Index:	1.23283061	
Entered Medicaid 02/25/1988	Low Occupancy Adjustment Factor:	41.17760%	DC Sem Index:	1.24200000	
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	121.42287%	DC Inflation:	1.00000000	
Previous Med # 257249		100.00000%	PS Target:	1.02083595	

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,310,460	2,446,375	1,595,716	956,633		6,309,184	
1a	Audit Adjustments							
2	Cost Per Diem	46.5892	86.9729	56.7305	34.0100		224.3026	
3	Cost Per Diem Inflated	46.5892	86.9729	56.7305				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.5892	86.9729	56.7305	34.0100		224.3026	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	47.4077		56.9835				
10b	Base for line 10a	46.4401		55.8204				
11	Lesser of 5,7,8,10, 10a	46.5892	86.9729	56.7305	13.6500		203.9426	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	46.5892	86.9729	56.7305	13.6500		203.9426	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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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):	4,588,475	10.0071
Indexed Asset Value	5,735,594	<60% of Base:	False	20% ROE(2):	1,147,119	0.5698
FRVS Base Asset:	3,530,760	Interest Rate:	6.0000%	Insurance Cost(3):	40,968	0.9807
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	101,013	2.4180
ROE Factor	0.019580	Amortization Rate:	6.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	394,479	Total FRVS PD:		13.9756

- (1) 80% Capital (\$4,588,475) amortized at 6.0000 % for 20 years Principal & Interest of \$394,479 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.0071
 (2) 20% ROE (\$1,147,119) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5698
 (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,530,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.5892	46.5892	0.8272	45.7620
Direct Care	86.9729	86.9729	1.5442	85.4287
Indirect Care	56.7305	56.7305	1.0073	55.7232
Property	13.6500	13.9756	0.2481	13.7275
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.0598
Supplemental Rate Add-on				9.9025
Totals	203.9426	204.2682	3.6268	230.6037

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	5,806,005	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		0.70	0.6196	0.6196		120	67.33	5,655,890	6,097,560	
2014/01		0.70	0.8564	0.8564		120	67.33	5,689,797	6,149,760	
2014/07		0.65	1.2383	1.2383		120	67.33	5,735,594	6,225,960	

Message Code:

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



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Palm Garden of Sun City

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
3850 UPPER CREEK DR SUN CITY CENTER, FL 33573 County: Hillsborough [29] Region: Central Area: 6 Control: Proprietary : Corporation Current Class Central Large Class at 1/94: North Large Operating Ex > 18 months Open Date: 06/01/1991 Acquired Date: 06/01/1991 Entered Medicaid 06/01/1991 Med # Active Date: 11/01/2013 Previous Med # 257516	11/1/2013-10/31/2014 Days in CR 365 First Used : 2013/07 Last Used: 2014/07 Unaudited Initial CR? False Medical Utilization Occupancy: Statewide Low Occupancy Threshold: Medicaid Low Occupancy Threshold: Low Occupancy Adjustment Factor: Weighted Low Occ Adjustment Factor:	Number of Beds: 120 Maximum: 43,800 Max Annualized: 43,800 Total Patient: 41,522 Medicare: 9,782 Medicaid: 22,578 54.37599% 94.79909% 78.55110% 41.17760% 120.68461% 100.00000%	Superior: 0 Standard: 184 Conditional: 0 Total: 184 Inflation FY Index: 1.33573201 Semester Index: 1.34705290 Cost: 1.00000000 Target: 1.01458517 DC FY Index: 1.23283061 DC Sem Index: 1.24200000 DC Inflation: 1.00000000 PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,092,487	2,118,008	1,253,252	869,027		5,332,774
1a	Audit Adjustments						
2	Cost Per Diem	48.3872	93.8085	55.5077	38.4900		236.1934
3	Cost Per Diem Inflated	48.3872	93.8085	55.5077			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	48.3872	93.8085	55.5077	38.4900		236.1934
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	48.5711		55.8335			
10b	Base for line 10a	47.5797		54.6939			
11	Lesser of 5,7,8,10, 10a	48.3872	93.8085	55.5077	13.6500		211.3534
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	48.3872	93.8085	55.5077	13.6500		211.3534
15	Inflated Usual & Customary Charge						0.00
Usual and Customary Limitations not applied after 7/1/2002.							



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,920,044	14.8425
Indexed Asset Value	6,150,055	<60% of Base:	False	20% ROE(2):	1,230,011	0.6109
FRVS Base Asset:	3,642,240	Interest Rate:	10.3900%	Insurance Cost(3):	39,263	0.9456
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	95,762	2.3063
ROE Factor	0.019580	Amortization Rate:	10.3900%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	585,093	Total FRVS PD:		18.7053

- (1) 80% Capital (\$4,920,044) amortized at 10.3900 % for 20 years Principal & Interest of \$585,093 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.8425
- (2) 20% ROE (\$1,230,011) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.6109
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,642,240

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	48.3872	48.3872	0.8591	47.5281
Direct Care	93.8085	93.8085	1.6656	92.1429
Indirect Care	55.5077	55.5077	0.9855	54.5222
Property	13.6500	18.7053	0.3321	18.3732
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.1279
Supplemental Rate Add-on				9.9025
Totals	211.3534	216.4087	3.8423	241.5968

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	5,505,000	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	4,718,880	4,718,880	5
2000/01		0.90	1.3356	1.3356		120	54.86	5,544,068	4,781,880	3
2000/07		1.00	1.1129	1.1129		120	54.86	5,544,068	4,835,040	3
2001/01		1.00	1.2976	1.2976		120	54.86	5,544,068	4,897,800	3
2001/07		1.00	0.9615	0.9615		120	54.86	5,544,068	4,944,840	3
2002/01		1.00	1.0301	1.0301		120	55.62	5,544,068	4,995,720	3
2002/07		1.00	0.8337	0.8337		120	55.62	5,544,068	5,037,360	3
2003/01		1.00	1.3271	1.3271		120	55.62	5,544,068	5,104,200	3
2003/07		1.00	1.1664	1.1664		120	55.62	5,544,068	5,163,720	3
2004/01		1.00	1.1103	1.1103		120	55.62	5,544,068	5,221,080	3
2004/07		1.00	0.8378	0.8378		120	55.62	5,544,068	5,264,880	3
2005/01	28,798	1.00	0.8595	0.8595		120	50.21	5,544,068	5,310,120	3
2005/07		1.00	0.7364	0.7364		120	50.21	5,544,068	5,349,240	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
2006/01		1.00	0.9068	0.9068		120	50.21	5,544,068	5,397,720	3
2006/07		1.00	0.8133	0.8133		120	43.97	5,544,068	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		0.85	0.6196	0.6196		120	54.38	6,046,885	6,097,560	
2014/01		0.85	0.8564	0.8564		120	54.38	6,090,404	6,149,760	
2014/07		0.80	1.2383	1.2383		120	54.38	6,150,055	6,225,960	

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
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 07/01/2014 through 12/31/2014

0 098590-00 - 2014/07

242.63

Palm Garden of Tampa

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
3612 E 138TH AVE	11/1/2013-10/31/2014	Number of Beds: 120	Superior: 0
TAMPA, FL 33613	Days in CR 365	Maximum: 43,800	Standard: 184
County: Hillsborough [29]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 42,657	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,563	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 29,056	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	68.11543%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	97.39041%	Cost: 1.00000000
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 11/01/1987	Low Occupancy Adjustment Factor:	123.98351%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257524			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,360,643	2,722,538	1,618,296	748,483		6,449,960	
1a	Audit Adjustments							
2	Cost Per Diem	46.8283	93.6997	55.6958	25.7600		221.9838	
3	Cost Per Diem Inflated	46.8283	93.6997	55.6958				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	46.8283	93.6997	55.6958	25.7600		221.9838	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	46.9860		55.9105				
10b	Base for line 10a	46.0270		54.7693				
11	Lesser of 5,7,8,10, 10a	46.8283	93.6997	55.6958	13.6500		209.8738	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	46.8283	93.6997	55.6958	13.6500		209.8738	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,567,626	14.3521
Indexed Asset Value	5,709,533	<60% of Base:	False	20% ROE(2):	1,141,907	0.5672
FRVS Base Asset:	3,007,085	Interest Rate:	11.0000%	Insurance Cost(3):	45,494	1.0665
Occup Adj Factor	0.9000	Chase Rate:	8.0000%	Taxes Cost(3):	77,546	1.8179
ROE Factor	0.019580	Amortization Rate:	11.0000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	565,758	Total FRVS PD:		17.8037

- (1) 80% Capital (\$4,567,626) amortized at 11.0000 % for 20 years Principal & Interest of \$565,758 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$14.3521
- (2) 20% ROE (\$1,141,907) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5672
- (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:	51,883
Comparison Bed	103	Effective PBS Limitation	3,007,085

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	46.8283	46.8283	0.8314	45.9969
Direct Care	93.6997	93.6997	1.6636	92.0361
Indirect Care	55.6958	55.6958	0.9889	54.7069
Property	13.6500	17.8037	0.3161	17.4876
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4985
Supplemental Rate Add-on				9.9025
Totals	209.8738	214.0275	3.8000	242.6285

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		0.70	0.6196	0.6196		120	68.12	5,632,587	6,097,560	
2014/01		0.65	0.8564	0.8564		120	68.12	5,663,944	6,149,760	
2014/07		0.65	1.2383	1.2383		120	68.12	5,709,533	6,225,960	

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 07/01/2014 through 12/31/2014

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226.18

Palm Garden of Vero Beach

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
1755 37TH STREET	11/1/2013-10/31/2014	Number of Beds: 180	Superior: 0
VERO BEACH , FL 32960	Days in CR 365	Maximum: 65,700	Standard: 184
County: Indian River [31]	First Used : 2013/07	Max Annualized: 65,700	Conditional: 0
Region: South Area: 9	Last Used: 2014/07	Total Patient: 62,310	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 11,919	Inflation
Current Class South Large	Initial CR? False	Medicaid: 47,083	FY Index: 1.33573201
Class at 1/94: South Large	Medical Utilization	75.56251%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	94.84018%	Cost: 1.00000000
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 11/25/1987	Low Occupancy Adjustment Factor:	120.73692%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257311			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	2,151,321	4,093,978	2,267,873	1,446,861		9,960,033	
1a	Audit Adjustments							
2	Cost Per Diem	45.6921	86.9524	48.1676	30.7300		211.5421	
3	Cost Per Diem Inflated	45.6921	86.9524	48.1676				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	45.6921	86.9524	48.1676	30.7300		211.5421	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	46.4232		55.3643				
10b	Base for line 10a	45.4757		54.2343				
11	Lesser of 5,7,8,10, 10a	45.6921	86.9524	48.1676	13.6500		194.4621	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	45.6921	86.9524	48.1676	13.6500		194.4621	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	7,717,166.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	7,129,374 12.5745
RS to Start Calcs:	1987/07	<60% of Base:	False	20% ROE(2):	1,782,343 0.5902
Indexed Asset Value	8,911,717	Interest Rate:	8.5200%	Insurance Cost(3):	57,896 0.9292
FRVS Base Asset:	2,656,745	Chase Rate:	8.2500%	Taxes Cost(3):	134,134 2.1527
Occup Adj Factor	0.9000	Amortization Rate:	8.5200%	Home Office(3):	0 0.0000
ROE Factor	0.019580	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	743,528	Total FRVS PD:	16.2466

- (1) 80% Capital (\$7,129,374) amortized at 8.5200 % for 20 years Principal & Interest of \$743,528 divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$12.5745
- (2) 20% ROE (\$1,782,343) times the ROE factor (0.019580) divided by annual available days (65700) divided by Occup. Adj. (0.90) = \$0.5902
- (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:	51,883
Comparison Bed	91	Effective PBS Limitation	2,656,745

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	45.6921	45.6921	0.8113	44.8808
Direct Care	86.9524	86.9524	1.5438	85.4086
Indirect Care	48.1676	48.1676	0.8552	47.3124
Property	13.6500	16.2466	0.2885	15.9581
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.7135
Supplemental Rate Add-on				9.9025
Totals	194.4621	197.0587	3.4988	226.1759

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
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



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
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		0.70	0.6196	0.6196		180	75.56	8,791,616	9,146,340	
2014/01		0.65	0.8564	0.8564		180	75.56	8,840,559	9,224,640	
2014/07		0.65	1.2383	1.2383		180	75.56	8,911,717	9,338,940	

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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Palm Garden of West Palm Beach

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
300 EXECUTIVE CENTER DRIVE WEST PALM BEACH , FL 33401 County: Palm Beach [50] Region: South Area: 9 Control: Proprietary : Corporation Current Class South Large Class at 1/94: South Large Operating Ex > 18 months Open Date: 04/20/1988 Acquired Date: 04/20/1988 Entered Medicaid 04/20/1988 Med # Active Date: 11/01/2013 Previous Med # 257257	11/1/2013-10/31/2014	Number of Beds: 176	Superior: 0
	Days in CR 365	Maximum: 64,240	Standard: 184
	First Used : 2013/07	Max Annualized: 64,240	Conditional: 0
	Last Used: 2014/07	Total Patient: 61,105	Total: 184
	Unaudited	Medicare: 6,573	Inflation
	Initial CR? False	Medicaid: 35,393	FY Index: 1.33573201
	Medical Utilization	57.92161%	Semester Index: 1.34705290
	Occupancy:	95.11986%	Cost: 1.00000000
	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Low Occupancy Adjustment Factor:	121.09297%	DC Sem Index: 1.24200000	
Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000	
			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,547,664	3,187,464	1,691,645	1,049,756		7,476,529	
1a	Audit Adjustments							
2	Cost Per Diem	43.7280	90.0592	47.7960	29.6600		211.2432	
3	Cost Per Diem Inflated	43.7280	90.0592	47.7960				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	43.7280	90.0592	47.7960	29.6600		211.2432	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	54.4176	98.4475	67.4576	13.6500			
9	Prior Semester: Class Ceiling Target Base	55.7551		63.0224				
10	Target Rate Class Ceiling	56.5683		63.9416				
10a	New Provider Target Limitation	45.7352		53.4989				
10b	Base for line 10a	44.8017		52.4070				
11	Lesser of 5,7,8,10, 10a	43.7280	90.0592	47.7960	13.6500		195.2332	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	43.7280	90.0592	47.7960	13.6500		195.2332	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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Rate Semester 07/01/2014 through 12/31/2014

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):	6,974,846 12.5815
Indexed Asset Value	8,718,557	<60% of Base:	False	20% ROE(2):	1,743,711 0.5905
FRVS Base Asset:	3,530,760	Interest Rate:	8.5200%	Insurance Cost(3):	76,719 1.2555
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	161,706 2.6464
ROE Factor	0.019580	Amortization Rate:	8.5200%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	727,412	Total FRVS PD:	17.0739

- (1) 80% Capital (\$6,974,846) amortized at 8.5200 % for 20 years Principal & Interest of \$727,412 divided by annual available days (64240) divided by Occup. Adj. (0.900) = \$12.5815
- (2) 20% ROE (\$1,743,711) times the ROE factor (0.019580) divided by annual available days (64240) divided by Occup. Adj. (0.900) = \$0.5905
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,530,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	43.7280	43.7280	0.7764	42.9516
Direct Care	90.0592	90.0592	1.5990	88.4602
Indirect Care	47.7960	47.7960	0.8486	46.9474
Property	13.6500	17.0739	0.3031	16.7708
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				22.4272
Supplemental Rate Add-on				9.9025
Totals	195.2332	198.6571	3.5271	227.4597

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	57.92	8,597,401	8,943,088	
2014/01		0.70	0.8564	0.8564		176	57.92	8,648,942	9,019,648	
2014/07		0.65	1.2383	1.2383		176	57.92	8,718,557	9,131,408	

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 |
|--|



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219.51

Palm Garden of Winter Haven

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
1120 CYPRESS GARDENS BLVD	11/1/2013-10/31/2014	Number of Beds: 120	Superior: 0
WINTER HAVEN, FL 33884	Days in CR 365	Maximum: 43,800	Standard: 184
County: Polk [53]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 6	Last Used: 2014/07	Total Patient: 42,302	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,558	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 30,224	FY Index: 1.33573201
Class at 1/94: South Large	Medical Utilization	71.44816%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	96.57991%	Cost: 1.00000000
Open Date: 07/01/1987	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 07/01/1987	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 07/09/1987	Low Occupancy Adjustment Factor:	122.95170%	DC Sem Index: 1.24200000
Med # Active Date: 11/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 257320			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,273,433	2,424,595	1,573,499	931,806		6,203,333	
1a	Audit Adjustments							
2	Cost Per Diem	42.1332	80.2209	52.0612	30.8300		205.2453	
3	Cost Per Diem Inflated	42.1332	80.2209	52.0612				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	42.1332	80.2209	52.0612	30.8300		205.2453	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	44.7721		56.2651				
10b	Base for line 10a	43.8583		55.1167				
11	Lesser of 5,7,8,10, 10a	42.1332	80.2209	52.0612	13.6500		188.0653	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	42.1332	80.2209	52.0612	13.6500		188.0653	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,885,828	13.1910
Indexed Asset Value	6,107,285	<60% of Base:	False	20% ROE(2):	1,221,457	0.6067
FRVS Base Asset:	1,751,700	Interest Rate:	8.8000%	Insurance Cost(3):	48,260	1.1408
Occup Adj Factor	0.9000	Chase Rate:	8.2500%	Taxes Cost(3):	80,924	1.9130
ROE Factor	0.019580	Amortization Rate:	8.8000%	Home Office(3):	0	0.0000
		Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	519,991	Total FRVS PD:		16.8515

- (1) 80% Capital (\$4,885,828) amortized at 8.8000 % for 20 years Principal & Interest of \$519,991 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$13.1910
- (2) 20% ROE (\$1,221,457) times the ROE factor (0.019580) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.6067
- (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	51,883
			1,751,700

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	42.1332	42.1332	0.7481	41.3851
Direct Care	80.2209	80.2209	1.4243	78.7966
Indirect Care	52.0612	52.0612	0.9244	51.1368
Property	13.6500	16.8515	0.2992	16.5523
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.7389
Supplemental Rate Add-on				9.9025
Totals	188.0653	191.2668	3.3960	219.5122

Medicaid Trend Adjustment



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219.51

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	3,392,603	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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0 098593-00 - 2014/07

219.51

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	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	20,057	0.70	0.6196	0.6196		120	71.45	6,024,979	6,097,560	
2014/01		0.65	0.8564	0.8564		120	71.45	6,058,520	6,149,760	
2014/07		0.65	1.2383	1.2383		120	71.45	6,107,285	6,225,960	

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
 Rate Semester 07/01/2014 through 12/31/2014

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233.55

Community Health and Rehabilitation 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
3611 TRANSMITTER ROAD	11/1/2013-10/31/2014	Number of Beds: 120	Superior: 0
PANAMA CITY, FL 32404-9799	Days in CR 365	Maximum: 43,800	Standard: 184
County: Bay [3]	First Used : 2014/01	Max Annualized: 43,800	Conditional: 0
Region: North Area: 2	Last Used: 2014/07	Total Patient: 42,574	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,856	Inflation
Current Class North Large	Initial CR? False	Medicaid: 23,416	FY Index: 1.33573201
Class at 1/94: North Large	Medical Utilization	55.00070%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	97.20091%	Cost: 1.00000000
Open Date: 11/04/1997	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 11/04/1997	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23283061
Entered Medicaid 11/04/1997	Low Occupancy Adjustment Factor:	123.74226%	DC Sem Index: 1.24200000
Med # Active Date: 01/01/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 318779			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	1,115,070	2,017,092	1,368,869	481,667		4,982,698
1a	Audit Adjustments						
2	Cost Per Diem	47.6200	86.1416	58.4587	20.5700		212.7903
3	Cost Per Diem Inflated	47.6200	86.1416	58.4587			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	47.6200	86.1416	58.4587	20.5700		212.7903
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500		
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527			
10	Target Rate Class Ceiling	50.8465		60.1169			
10a	New Provider Target Limitation	48.0153		59.3491			
10b	Base for line 10a	47.0353		58.1377			
11	Lesser of 5,7,8,10, 10a	47.6200	86.1416	58.4587	13.6500		205.8703
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	47.6200	86.1416	58.4587	13.6500		205.8703
15	Inflated Usual & Customary Charge						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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233.55

Rate Semester 07/01/2014 through 12/31/2014

Community Health and Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	11/04/1997	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	6,320,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	4,494,188	10.9878
RS to Start Calcs:	1997/07	<60% of Base:	False	20% ROE(2):	1,123,547	0.5908
Indexed Asset Value	5,617,735	Interest Rate:	7.4600%	Insurance Cost(3):	53,018	1.2453
FRVS Base Asset:	4,444,920	Chase Rate:	7.7500%	Taxes Cost(3):	42,797	1.0052
Occup Adj Factor	0.9000	Amortization Rate:	7.4600%	Home Office(3):	0	0.0000
ROE Factor	0.020729	Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	433,140	Total FRVS PD:		13.8291

- (1) 80% Capital (\$4,494,188) amortized at 7.4600 % for 20 years Principal & Interest of \$433,140 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$10.9878
- (2) 20% ROE (\$1,123,547) times the ROE factor (0.020729) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5908
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	4,444,920

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	47.6200	47.6200	0.8455	46.7745
Direct Care	86.1416	86.1416	1.5295	84.6121
Indirect Care	58.4587	58.4587	1.0379	57.4208
Property	13.6500	13.8291	0.2455	13.5836
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				21.2599
Supplemental Rate Add-on				9.9025
Totals	205.8703	206.0494	3.6584	233.5534

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
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	49.31	5,228,866	5,753,160	
2010/01		1.00	0.8643	0.8643		120	49.31	5,269,384	5,802,840	
2010/07		1.00	0.7107	0.7107		120	44.97	5,300,004	5,844,120	
2011/01		1.00	0.9198	0.9198		120	44.97	5,339,863	5,897,880	
2011/07		1.00	0.9028	0.9028		120	46.37	5,380,507	5,951,160	
2012/01		1.00	0.3865	0.3865		120	46.37	5,398,040	5,974,200	



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233.55

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
2012/07		1.00	0.9417	0.9417		120	50.54	5,444,751	6,030,480	
2013/01		1.00	0.4901	0.4901		120	50.54	5,469,272	6,060,000	
2013/07		1.00	0.6196	0.6196		120	52.96	5,501,903	6,097,560	
2014/01		1.00	0.8564	0.8564		120	55.00	5,549,021	6,149,760	
2014/07		1.00	1.2383	1.2383		120	55.00	5,617,735	6,225,960	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



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 Rate Semester 07/01/2014 through 12/31/2014

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211.74

Gulfport Rehabilitation 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: **NRP CHOW Re-entry to Medicaid**

Provider Information	Cost Report	Patient Days	Ratings Days
1430 PASADENA AVE S	11/1/2013-7/31/2014	Number of Beds: 126	Superior: 0
SOUTH PASADENA, FL 33707	Days in CR 273	Maximum: 34,398	Standard: 184
County: Pinellas [52]	First Used : 2013/07	Max Annualized: 45,990	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 6,790	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 1,002	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 4,648	FY Index: 1.33316403
Class at 1/94: North Large	Medical Utilization	68.45361%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	19.73952%	Cost: 1.00000000
Open Date: 01/01/1970	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 01/01/1970	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23100000
Entered Medicaid 01/01/1970	Low Occupancy Adjustment Factor:	25.12953%	DC Sem Index: 1.24200000
Med # Active Date: 11/24/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 281891			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals
1	Total Cost	399,260	343,762	362,322	143,716		1,249,060
1a	Audit Adjustments						
2	Cost Per Diem	85.8993	73.9591	77.9522	30.9200		268.7306
3	Cost Per Diem Inflated	85.8993	73.9591	77.9522			
4	Low Occupancy Adjustment						
5	Occupancy Adjusted/Inflated Per Diem	85.8993	73.9591	77.9522	30.9200		268.7306
5a	Interim Adjustment						
5b	Interim Adjusted Per Diem						
6	Prior Semester: Provider Target Base						
7	Provider Target Rate						
7a	Interim Adjustment						
7b	Interim Adjustment Provider Target Rate						
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500		
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784			
10	Target Rate Class Ceiling	53.7075		61.9692			
10a	New Provider Target Limitation	50.0492		57.6379			
10b	Base for line 10a	49.0277		56.4615			
11	Lesser of 5,7,8,10, 10a	50.0492	73.9591	57.6379	13.6500		195.2962
12/13	Medical Adjustment Rate						
14	Prospective Per Diem 11	50.0492	73.9591	57.6379	13.6500		195.2962
15	Inflated Usual & Customary Charge						0.00



Florida Agency for Health Care Administration
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211.74

Rate Semester 07/01/2014 through 12/31/2014

Gulfport Rehabilitation Center

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	10/01/1985	Mortgage Information		Calculation of FRVS Per Diem	
		Amount:	1,896,724.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	1,321,554 3.3859
RS to Start Calcs:	1971/07	<60% of Base:	False	20% ROE(2):	330,388 0.1605
Indexed Asset Value	1,651,942	Interest Rate:	11.7683%	Insurance Cost(3):	37,250 5.4860
FRVS Base Asset:	842,445	Chase Rate:	6.7500%	Taxes Cost(3):	12,717 1.8729
Occup Adj Factor	0.9000	Amortization Rate:	8.7500%	Home Office(3):	0 0.0000
ROE Factor	0.020104	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	140,145	Total FRVS PD:	10.9053

- (1) 80% Capital (\$1,321,554) amortized at 8.7500 % for 20 years Principal & Interest of \$140,145 divided by annual available days (45990) divided by Occup. Adj. (0.900) = \$3.3859
- (2) 20% ROE (\$330,388) times the ROE factor (0.020104) divided by annual available days (45990) divided by Occup. Adj. (0.900) = \$0.1605
- (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:	51,883
Comparison Bed	126	Effective PBS Limitation	3,591,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	50.0492	50.0492	0.8886	49.1606
Direct Care	73.9591	73.9591	1.3132	72.6459
Indirect Care	57.6379	57.6379	1.0234	56.6145
Property	13.6500	10.9053	0.1936	10.7117
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				12.7088
Supplemental Rate Add-on				9.9025
Totals	195.2962	192.5515	3.4188	211.7440

Medicaid Trend Adjustment



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211.74

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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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		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	68.45	1,651,942	6,402,438	12
2014/01		0.00	0.8564	0.8564		126	68.45	1,651,942	6,457,248	
2014/07		0.00	1.2383	1.2383		126	68.45	1,651,942	6,537,258	

Message Code:

- | | |
|----|----------------------------------|
| 5 | Uncorrected Licensure Deficiency |
| 11 | Not in Medicaid |
| 12 | Re-Entry to Medicaid |



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The Terrace of Kissimmee

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
221 PARK PLACE BLVD	1/1/2014-12/31/2014	Number of Beds: 120	Superior: 0
KISSIMMEE, FL 34741	Days in CR 365	Maximum: 43,800	Standard: 184
County: Osceola [49]	First Used : 2013/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 7	Last Used: 2014/07	Total Patient: 41,752	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 10,289	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 27,250	FY Index: 1.34088282
Class at 1/94: North Large	Medical Utilization	65.26633%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.32420%	Cost: 1.00000000
Open Date: 12/28/1993	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/28/1993	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23650000
Entered Medicaid 01/13/1994	Low Occupancy Adjustment Factor:	121.35311%	DC Sem Index: 1.24200000
Med # Active Date: 12/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 253421			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,200,749	2,187,116	1,261,028	932,223		5,581,116	
1a	Audit Adjustments							
2	Cost Per Diem	44.0642	80.2611	46.2763	34.2100		204.8116	
3	Cost Per Diem Inflated	44.0642	80.2611	46.2763				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.0642	80.2611	46.2763	34.2100		204.8116	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation	48.4354		56.1040				
10b	Base for line 10a	47.4468		54.9589				
11	Lesser of 5,7,8,10, 10a	44.0642	80.2611	46.2763	13.6500		184.2516	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	44.0642	80.2611	46.2763	13.6500		184.2516	
15	Inflated Usual & Customary Charge	Usual and Customary Limitations not applied after 7/1/2002.						0.00



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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):	4,424,060 8.3395
Indexed Asset Value	5,530,075	<60% of Base:	False	20% ROE(2):	1,106,015 0.5816
FRVS Base Asset:	3,930,360	Interest Rate:	4.2500%	Insurance Cost(3):	57,098 1.3676
Occup Adj Factor	0.9000	Chase Rate:	3.2500%	Taxes Cost(3):	71,308 1.7079
ROE Factor	0.020729	Amortization Rate:	4.2500%	Home Office(3):	0 0.0000
		Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	328,744	Total FRVS PD:	11.9966

- (1) 80% Capital (\$4,424,060) amortized at 4.2500 % for 20 years Principal & Interest of \$328,744 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$8.3395
- (2) 20% ROE (\$1,106,015) times the ROE factor (0.020729) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5816
- (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:	32,753
Comparison Date:	01/01/1993	Current RS PBS:	51,883
Comparison Bed	120	Effective PBS Limitation	3,930,360

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.0642	44.0642	0.7824	43.2818
Direct Care	80.2611	80.2611	1.4250	78.8361
Indirect Care	46.2763	46.2763	0.8216	45.4547
Property	13.6500	11.9966	0.2130	11.7836
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				20.4385
Supplemental Rate Add-on				9.9025
Totals	184.2516	182.5982	3.2420	209.6972

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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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	65.27	5,421,665	6,097,560	
2014/01		0.95	0.8564	0.8564		120	65.27	5,465,776	6,149,760	
2014/07		0.95	1.2383	1.2383		120	65.27	5,530,075	6,225,960	

Message Code:

1 Per Bed Standard Limitation

NC68L Report Calculated: 6/27/2014 4:14:19 PM

Report Printed: 6/27/2014 ID:



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223.06

Baptist Manor

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
10095 HILLVIEW ROAD	10/1/2013-9/30/2014	Number of Beds: 170	Superior: 0
PENSACOLA, FL 32514	Days in CR 365	Maximum: 62,050	Standard: 184
County: Escambia [17]	First Used: 2013/07	Max Annualized: 62,050	Conditional: 0
Region: North Area: 1	Last Used: 2014/07	Total Patient: 54,462	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 11,601	Inflation
Current Class North Large	Initial CR? False	Medicaid: 33,430	FY Index: 1.33316403
Class at 1/94: North Large	Medical Utilization	61.38225%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	87.77115%	Cost: 1.00000000
Open Date: 12/01/1985	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 12/01/1985	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23100000
Entered Medicaid 12/01/1985	Low Occupancy Adjustment Factor:	111.73765%	DC Sem Index: 1.24200000
Med # Active Date: 12/01/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 208809			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,502,239	2,825,487	1,806,335	1,001,897		7,135,958	
1a	Audit Adjustments							
2	Cost Per Diem	44.9369	84.5195	54.0334	29.9700		213.4598	
3	Cost Per Diem Inflated	44.9369	84.5195	54.0334				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	44.9369	84.5195	54.0334	29.9700		213.4598	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	49.7653	95.0998	62.5446	13.6500			
9	Prior Semester: Class Ceiling Target Base	50.1156		59.2527				
10	Target Rate Class Ceiling	50.8465		60.1169				
10a	New Provider Target Limitation	47.1348		56.6298				
10b	Base for line 10a	46.1727		55.4739				
11	Lesser of 5,7,8,10, 10a	44.9369	84.5195	54.0334	13.6500		197.1398	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	44.9369	84.5195	54.0334	13.6500		197.1398	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

Baptist Manor

FRVS

FRVS Status as of this Semester

On FRVS

Began FRVS:	02/01/2009	Mortgage Information		Calculation of FRVS Per Diem		
		Amount:	10,700,000.00	Total Amount	Per Diem	
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	6,927,474	9.4819
RS to Start Calcs:	1985/10	<60% of Base:	False	20% ROE(2):	1,731,868	0.6655
Indexed Asset Value	8,659,342	Interest Rate:	4.5800%	Insurance Cost(3):	61,500	1.1292
FRVS Base Asset:	2,972,345	Chase Rate:	3.2500%	Taxes Cost(3):	55,200	1.0136
Occup Adj Factor	0.9000	Amortization Rate:	4.5800%	Home Office(3):	59,000	1.0833
ROE Factor	0.021460	Interest Only:	False	Replacement(3&4):	0	0.0000
		Yearly Payment:	529,516	Total FRVS PD:		13.3735

- (1) 80% Capital (\$6,927,474) amortized at 4.5800 % for 20 years Principal & Interest of \$529,516 divided by annual available days (62050) divided by Occup. Adj. (0.90) = \$9.4819
- (2) 20% ROE (\$1,731,868) times the ROE factor (0.021460) divided by annual available days (62050) divided by Occup. Adj. (0.90) = \$0.6655
- (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:	51,883
Comparison Bed	170	Effective PBS Limitation	4,845,000

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	44.9369	44.9369	0.7979	44.1390
Direct Care	84.5195	84.5195	1.5007	83.0188
Indirect Care	54.0334	54.0334	0.9594	53.0740
Property	13.6500	13.3735	0.2374	13.1361
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				19.7930
Supplemental Rate Add-on				9.9025
Totals	197.1398	196.8633	3.4954	223.0634

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 7/1/2014 through 12/31/2014 Based on Cost Report: 9/30/2014

0 100509-00 - 2014/07

223.06

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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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223.06

Rate Semester	New Asset	Index Factor	Actual Dodge	Limited Dodge	Credit Forward	Beds	Medicaid Utilization	Indexed Cost	Rate Semester Per Bed Standard	Message Code
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	61.38	8,560,442	8,638,210	
2014/01		0.55	0.8564	0.8564		170	61.38	8,600,762	8,712,160	
2014/07		0.55	1.2383	1.2383		170	61.38	8,659,342	8,820,110	

Message Code:

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 07/01/2014 through 12/31/2014

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220.63

The Oaks of Clearwater

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
420 BAY AVE	1/1/2014-12/31/2014	Number of Beds: 60	Superior: 0
CLEARWATER, FL 33756	Days in CR 365	Maximum: 21,900	Standard: 184
County: Pinellas [52]	First Used : 2014/01	Max Annualized: 21,900	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 19,710	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 3,400	Inflation
Current Class Central Small	Initial CR? False	Medicaid: 13,210	FY Index: 1.34088282
Class at 1/94: North Small	Medical Utilization	67.02182%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	90.00000%	Cost: 1.00000000
Open Date: 03/30/1989	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 03/30/1989	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.23650000
Entered Medicaid 07/15/1991	Low Occupancy Adjustment Factor:	114.57510%	DC Sem Index: 1.24200000
Med # Active Date: 01/17/2014	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.00000000
Previous Med # 203823			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	765,107	853,583	828,899	70,806		2,518,395	
1a	Audit Adjustments							
2	Cost Per Diem	57.9188	64.6164	62.7478	5.3600		190.6430	
3	Cost Per Diem Inflated	57.9188	64.6164	62.7478				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	57.9188	64.6164	62.7478	5.3600		190.6430	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base							
7	Provider Target Rate							
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	58.1332	99.7893	75.5421	13.6500			
9	Prior Semester: Class Ceiling Target Base	60.4813		71.4442				
10	Target Rate Class Ceiling	61.3634		72.4862				
10a	New Provider Target Limitation	58.2373		65.0558				
10b	Base for line 10a	57.0486		63.7280				
11	Lesser of 5,7,8,10, 10a	57.9188	64.6164	62.7478	5.3600		190.6430	
12/13	Medical Adjustment Rate							
14	Prospective Per Diem 11	57.9188	64.6164	62.7478	5.3600		190.6430	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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	
		Amount:	21,000,000.00	Total Amount	Per Diem
Year of Phase-In/Full:		Type:	Variable	80% Capital(1):	1,344,845 4.4028
RS to Start Calcs:	1989/01	<60% of Base:	False	20% ROE(2):	336,211 0.3802
Indexed Asset Value	1,681,056	Interest Rate:	2.6600%	Insurance Cost(3):	8,280 0.4201
FRVS Base Asset:	1,258,595	Chase Rate:	3.2500%	Taxes Cost(3):	7,620 0.3866
Occup Adj Factor	0.9000	Amortization Rate:	2.6600%	Home Office(3):	0 0.0000
ROE Factor	0.022290	Interest Only:	False	Replacement(3&4):	0 0.0000
		Yearly Payment:	86,780	Total FRVS PD:	5.5897

- (1) 80% Capital (\$1,344,845) amortized at 2.6600 % for 20 years Principal & Interest of \$86,780 divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$4.4028
- (2) 20% ROE (\$336,211) times the ROE factor (0.022290) divided by annual available days (21900) divided by Occup. Adj. (0.900) = \$0.3802
- (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:	51,883
Comparison Bed	60	Effective PBS Limitation	1,778,760

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	57.9188	57.9188	1.0284	56.8904
Direct Care	64.6164	64.6164	1.1473	63.4691
Indirect Care	62.7478	62.7478	1.1141	61.6337
Property	5.3600	5.5897	0.0992	5.4905
ROE				
ROE Adjustment				
Quality Assess-Medicaid Share				23.2460
Supplemental Rate Add-on				9.9025
Totals	190.6430	190.8727	3.3890	220.6322

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	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	



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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		0.75	0.8564	0.8564		60	67.02	1,666,610	3,074,880	
2014/07		0.70	1.2383	1.2383		60	67.02	1,681,056	3,112,980	

Message Code:

5 Uncorrected Licensure Deficiency



Florida Agency for Health Care Administration
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 Rate Semester 07/01/2014 through 12/31/2014

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210.30

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	1/1/2013-12/31/2013	Number of Beds: 120	Superior: 184
SAINT PETERSBURG, FL 33716	Days in CR 365	Maximum: 43,800	Standard: 0
County: Pinellas [52]	First Used : 2014/07	Max Annualized: 43,800	Conditional: 0
Region: Central Area: 5	Last Used: 2014/07	Total Patient: 41,879	Total: 184
Control: Proprietary : Corporation	Unaudited	Medicare: 6,360	Inflation
Current Class Central Large	Initial CR? False	Medicaid: 28,364	FY Index: 1.31456505
Class at 1/94: North Large	Medical Utilization	67.72846%	Semester Index: 1.34705290
Operating Ex > 18 months	Occupancy:	95.61416%	Cost: 1.02471376
Open Date: 08/01/1988	Statewide Low Occupancy Threshold:	78.55110%	Target: 1.01458517
Acquired Date: 08/01/1988	Medicaid Low Occupancy Threshold:	41.17760%	DC FY Index: 1.21500000
Entered Medicaid 10/01/1988	Low Occupancy Adjustment Factor:	121.72224%	DC Sem Index: 1.24200000
Med # Active Date: 04/30/2013	Weighted Low Occ Adjustment Factor:	100.00000%	DC Inflation: 1.02222222
Previous Med # 035167			PS Target: 1.02083595

Rate Calculations

Item	Description	Operating	Direct	InDirect	Property	ROE	Totals	
1	Total Cost	1,014,067	2,104,214	1,360,123	886,942		5,365,346	
1a	Audit Adjustments							
2	Cost Per Diem	35.7519	74.1861	47.9524	31.2700		189.1604	
3	Cost Per Diem Inflated	36.6355	75.8347	49.1375				
4	Low Occupancy Adjustment							
5	Occupancy Adjusted/Inflated Per Diem	36.6355	75.8347	49.1375	31.2700		192.8777	
5a	Interim Adjustment							
5b	Interim Adjusted Per Diem							
6	Prior Semester: Provider Target Base	46.3492		53.3361				
7	Provider Target Rate	47.3149		54.4474				
7a	Interim Adjustment							
7b	Interim Adjustment Provider Target Rate							
8	Cost Based Class Ceilings	52.0915	96.7737	65.0011	13.6500			
9	Prior Semester: Class Ceiling Target Base	52.9354		61.0784				
10	Target Rate Class Ceiling	53.7075		61.9692				
10a	New Provider Target Limitation							
10b	Base for line 10a							
11	Lesser of 5,7,8,10, 10a	36.6355	75.8347	49.1375	13.6500		175.2577	
12/13	Medical Adjustment Rate		1.5125	0.9800				
14	Prospective Per Diem 11	36.6355	77.3472	50.1175	13.6500		177.7502	
15	Inflated Usual & Customary Charge						0.00	
		Usual and Customary Limitations not applied after 7/1/2002.						



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Rate Semester 07/01/2014 through 12/31/2014

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):	4,560,306 9.8114
Indexed Asset Value	5,700,382	<60% of Base:	False	20% ROE(2):	1,140,076 0.5423
FRVS Base Asset:	3,559,440	Interest Rate:	5.8318%	Insurance Cost(3):	150,121 3.5846
Occup Adj Factor	0.9000	Chase Rate:	7.7500%	Taxes Cost(3):	80,832 1.9301
ROE Factor	0.018750	Amortization Rate:	5.8318%	Home Office(3):	50,256 1.2000
		Interest Only:	False	Replacement(3&4):	26,403 0.0000
		Yearly Payment:	386,766	Total FRVS PD:	17.0684

- (1) 80% Capital (\$4,560,306) amortized at 5.8318 % for 20 years Principal & Interest of \$386,766 divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$9.8114
- (2) 20% ROE (\$1,140,076) times the ROE factor (0.018750) divided by annual available days (43800) divided by Occup. Adj. (0.900) = \$0.5423
- (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:	51,883
Comparison Bed	120	Effective PBS Limitation	3,559,440

Comparison of Reimbursement under Cost vs. FRVS

Components	Cost	FRVS	Adjustment*	Final Component
Operating	36.6355	36.6355	0.6505	35.9850
Direct Care	77.3472	77.3472	1.3733	75.9739
Indirect Care	50.1175	50.1175	0.8898	49.2277
Property	13.6500	17.0684	0.3031	16.7653
ROE				
ROE Adjustment				
Supplemental Rate Add-on				9.9025
Quality Assess-Medicaid Share				22.4491
Totals	177.7502	181.1686	3.2167	210.3035

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	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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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	

Message Code:

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