Florida Agency for Health Care Administration  
State of Florida Office of Medicaid Cost Reimbursement Planning and Finance  
2727 Mahan Drive - Mail Stop 23  
Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

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<th>Current Rate</th>
<th>New Rate</th>
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Basis:
- [ ] Budget
- [ ] Unaudited costs
- [ ] Desk audited costs
- [ ] Field audited costs
- [ ] Medicare - Prospective
- [X] Payment System Rate
- [ ] Average Nursing Home Rate

Rate Type:
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  - [ ] Total Prospective
- [X] Prospective Adjusted for New Costs
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  - [ ] Total Interim
- [ ] Settlement based on costs

W. Rydell Samuel, Administrator
Medicaid Cost Reimbursement Analysis

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Adventist Health System
Family Practice Center of Avon Park
1006 W. Pleasant Street
Avon Park, FL 33825

Provider Number: 000707900
Date: 10/01/2014
Fiscal Year End: N/A
Audit Status: N/A

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W. Rydell Samuel, Administrator

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# Florida Agency for Health Care Administration
## Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

**Provider:** Starke HMA, LLC  
**Address:** Shands Starke RHC  
1550 S. Water Street  
Starke, FL 32091  
**Provider Number:** 002352500  
**Date:** 10/01/2014  
**Fiscal Year End:** N/A  
**Audit Status:** N/A

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**Signature:** W. Rydell Samuel, Administrator  
**Medicaid Cost Reimbursement Analysis**

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**Report Calculated:** 10/6/2014 2:09:11PM  
**Report Printed:** 10/6/2014
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W. Rydell Samuel, Administrator
Medicaid Cost Reimbursement Analyst

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers  

Campbellton-Graceville Hospital  
Campbellton Graceville Hospital Physicians Office  
5429 College Drive, Suite B  
Graceville, FL 32440  

Provider Number: 003227500  
Date: 10/01/2014  
Fiscal Year End: N/A  
Audit Status: N/A  

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Calhoun Liberty Hospital Assoc.
Calhoun Liberty Hospital Primary Care Clinic
20370 NE Burns Ave.
Blountstown, FL 32424

Provider Number: 005955000
Date: 10/01/2014
Fiscal Year End: N/A
Audit Status: N/A

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Rate Type:

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Sacred Heart Medical Group on the Gulf  
55 Avenue E  
Apalachicola, FL 32320

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W. Rydell Samuel, Administrator
Medicaid Cost Reimbursement Analysis

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers  

Healthmark of Walton  
4415 US Hwy 331  
DeFuniak Springs, FL 32435  

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- [ ] Field audited costs  
- [ ] Medicare - Prospective  
- [x] Payment System Rate  
- [ ] Average Nursing Home Rate  

**Rate Type:**  
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- [ ] Total Prospective  
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W. Rydell Samuel, Administrator  
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Tallahassee, Florida 32308  

**Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers**

Provider Number: 660005100  
Date: 10/01/2014  
Fiscal Year End: N/A  
Audit Status: N/A  

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Blountstown Family Practice Provider Number: 660037900  
17808 NE Charley Johns St Date: 10/01/2014  
Blountstown, FL 32424 Fiscal Year End: N/A  

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Medicaid Cost Reimbursement Analyst

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**Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers**

Wakulla Family Medicine  
15 Council Moore Rd  
Crawfordville, FL 32327

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Gateway Medical Clinic - Crestview  
127-C Redstone Ave  
Crestview, FL 32539

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**Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers**

N. Okaloosa Medical Center
1045 US Hwy 331, Ste D
DeFuniak, FL 32435

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**Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers**  

Center for Family Health  
P.O. Box 2177  
Arcadia, Fl 34265  

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Lake Butler Hospital RHC
850 E. Main St
Lake Butler, FL 32054

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- Total Interim
- Settlement based on costs

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Madison Memorial Health Care
194 NE Hancock Ave
Madison, FL 32340

Provider Number: 660093000
Date: 10/01/2014
Fiscal Year End: N/A
Audit Status: N/A

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Basis:
- Budget
- Unaudited costs
- Desk audited costs
- Field audited costs
- Medicare - Prospective
- Payment System Rate
- Average Nursing Home Rate

Rate Type:
- Prospective
- Total Prospective
- Prospective Adjusted for New Costs
- Interim
- Total Interim
- Settlement based on costs

W. Rydell Samuel, Administrator
Medicaid Cost Reimbursement Analyst

Distribution:
Fiscal Agent
Contract Management
Permanent File
Program Development:

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Florida Agency for Health Care Administration  
State of Florida Office of Medicaid Cost Reimbursement Planning and Finance  
2727 Mahan Drive - Mail Stop 23  
Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Doctor's Memorial Family Medicine  
Provider Number: 660123500  
Date: 10/01/2014

P.O. Box 228  
Mayo, FL 32066  
Fiscal Year End: N/A  
Audit Status: N/A

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W. Rydell Samuel, Administrator  
Medicaid Cost Reimbursement Analysis

Distribution:  
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- Contract Management  
- Permanent File  
- Program Development:

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Provider Number: 660124300
Date: 10/01/2014
Fiscal Year End: N/A
Audit Status: N/A

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**Rate Type:**
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- X Total Prospective
- Prospective Adjusted for New Costs
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- Total Interim
- Settlement based on costs

W. Rydell Samuel, Administrator
Medicaid Cost Reimbursement Analysis

**Distribution:**
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- Contract Management
- Permanent File
- Program Development:

For information Only (No Change in rate)

**Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers**

Nature Coast Family Health Services  
125 S.W. 7th Street  
Williston, FL 32696

<table>
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W. Rydell Samuel, Administrator  
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2727 Mahan Drive - Mail Stop 23  
Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Provider Number: 660138300  
Date: 10/01/2014  
Fiscal Year End: N/A  
Audit Status: N/A

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W. Rydell Samuel, Administrator
Medicaid Cost Reimbursement Analysis

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