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

Medicaid Reimbursement Rate Change Form

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

Provider Number: 0100706-05
Date: October 1, 2019
County: Duval

Provider Type:

HOSPITAL - SNU

<table>
<thead>
<tr>
<th>Current Rate</th>
<th>New Rate</th>
<th>Effective Date</th>
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</thead>
<tbody>
<tr>
<td>$219.54</td>
<td>$220.58</td>
<td>10/1/2019</td>
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</tbody>
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BASIS: Nursing Home Prospective County Average

W. Rydell Samuel
Medicaid Cost Reimbursement Analysis

DISTRIBUTION:
Hospital
AHCA
Contract Management

—— For Information Only
(No Change In Rate)
Medicaid Reimbursement Rate Change Form

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

Provider Number: 0195964-00  
Date: October 1, 2019  
County: Broward

**Provider Type:**

<table>
<thead>
<tr>
<th>HOSPITAL - SNU</th>
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<tbody>
<tr>
<td>Current Rate</td>
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<td>$238.91</td>
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</tbody>
</table>

**BASIS:** Nursing Home Prospective County Average

W. Rydell Samuel  
Medicaid Cost Reimbursement Analysis

**DISTRIBUTION:**

Hospital  
AHCA  
Contract Management

___ For Information Only  
(No Change In Rate)