Sunland Marianna I
3700 Williams Drive
Marianna, FL 32446

Provider Type: ICF/IID

<table>
<thead>
<tr>
<th>Level of Care</th>
<th>Current Rate</th>
<th>New Rate</th>
<th>Effective Date</th>
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<tbody>
<tr>
<td>#7 Institutional</td>
<td>311.04</td>
<td>323.20</td>
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<tr>
<td>#8 Non-Ambulatory &amp; #9 Medical</td>
<td>446.23</td>
<td>458.97</td>
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Rate Type:

- Interim: X
- Prospective: X

Total Interim
Interim Component
Settlement Based on Costs

Prospective Adjusted for New Cost

Distribution:
Contract Management
DPODS - DCF (4)

Home Office:

For Information only - No Change in rate

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

Provider Number: 028004600
Date: 7/27/2020
FYE: 6/30/2019
Audit Status: Unaudited Costs

Tacachale Facility I
1621 N.E. Waldo Road
Gainesville, FL 32609

Provider Type: ICF/IID

<table>
<thead>
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<th>Level of Care</th>
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<tbody>
<tr>
<td>#7 Institutional</td>
<td>321.49</td>
<td>336.42</td>
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<td>#8 Non-Ambulatory &amp; #9 Medical</td>
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Rate Type:
- Interim
- X
- Prospective
- Total Interim
- Interim Component
- Settlement Based on Costs
- Total Prospective
- Prospective Adjusted for New Cost

Comments:

Distribution:
Contract Management
DPODS - DCF (4)
Home Office:
Attn: Revenue Management/Tacachale
1621 N. E. Waldo Road.
Gainesville, FL 32609

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Medicaid Cost Reimbursement Analysis

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

**Tacachale Facility II**  
1621 N. E. Waldo Road  
Gainesville, FL 32609

Provider Number: 028006200  
Date: 7/27/2020  
FYE: 6/30/2019  
Audit Status: Unaudited Costs

Provider Type: ICF/IID

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Rate Type: Interim X Prospective

- Total Interim
- Interim Component
- Settlement Based on Costs
- Total Prospective
- Prospective Adjusted for New Cost

Comments:

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**Distribution:**  
Contract Management  
DPODS - DCF (4)

Home Office:  
Attn: Revenue Management/Tacachale  
1621 N. E. Waldo Road.  
Gainesville, FL 32609

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Medicaid Cost Reimbursement Analysis

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**Sunland Marianna II**
3700 Williams Drive  
Marianna, FL 32446

Provider Type: ICF/IID

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**Provider Number:** 028009700  
**Date:** 7/27/2020  
**FYE:** 6/30/2019  
**Audit Status:** Unaudited Costs

**Rate Type:**

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<tr>
<td>Interim Component</td>
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**Distribution:**

Contract Management  
DPODS - DCF (4)  
Home Office:

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Tacachale Facility IV
1621 N.E. Waldo Road
Gainesville, FL 32609

Provider Number: 028015100
Date: 7/27/2020
FYE: 6/30/2019
Audit Status: Unaudited Costs

Provider Type: ICF/IID

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<td>#7 Institutional</td>
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<td>#8 Non-Ambulatory &amp; #9 Medical</td>
<td>517.09</td>
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Rate Type: Interim X Prospective

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Comments:

Distribution:
Contract Management
DPODS - DCF (4)

Home Office:
Attn: Revenue Management/Tacachale
1621 N. E. Waldo Road.
Gainesville, FL 32609

W.Rydell Samuel
Medicaid Cost Reimbursement Analysis

For Information only - No Change in rate
Sunland Marianna III  
3700 Williams Drive  
Marianna, FL 32446

Provider Number: 028016000  
Date: 7/27/2020  
FYE: 6/30/2019  
Audit Status: Unaudited Costs

Provider Type: ICF/IID

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<td>#8 Non-Ambulatory &amp; #9 Medical</td>
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Rate Type:
- Interim
- Prospective

Distribution:
Contract Management
DPODS - DCF (4)
Home Office:

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For Information only - No Change in rate
Tacachale Facility V  
1621 N.E. Waldo Road 
Gainesville, FL 32609

Provider Number: 028024100  
Date: 7/27/2020  
FYE: 6/30/2019  
Audit Status: Unaudited Costs

Provider Type: ICF/IID

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<tr>
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<td>#8 Non-Ambulatory &amp; #9 Medical</td>
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Rate Type: 
- Interim
- X
- Total Interim
- Prospect
- Total Prospective
- Interim Component
- Prospective Adjusted for New Cost
- Settlement Based on Costs

Comments:

Distribution:
Contract Management
DPODS - DCF (4)
Home Office:
Attn: Revenue Management/Tacachale
1621 N. E. Waldo Road.
Gainesville, FL 32609

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Medicaid Cost Reimbursement Analysis

For Information only - No Change in rate

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Tacachale Facility VII  
1621 N.E. Waldo Road  
Gainesville, FL 32609  

Provider Number: 028026700  
Date: 7/27/2020  
FYE: 6/30/2019  
Audit Status: Unaudited Costs  

Provider Type: ICF/IID  

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<tr>
<td>#8 Non-Ambulatory &amp; #9 Medical</td>
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Rate Type:  
- Interim: X  
- Prospective: X  

Total Interim  
Interim Component  
Settlement Based on Costs  
Prospective Adjusted for New Cost  

Comments:

Distribution:  
Contract Management  
DPODS - DCF (4)  
Home Office:  
Attn: Revenue Management/Tacachale  
1621 N. E. Waldo Road.  
Gainesville, FL 32609

W. Rydell Samuel  
Medicaid Cost Reimbursement Analysis  

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Tacachale Facility VIII  
1621 N.E. WALDO ROAD  
GAINESVILLE, FL  32609

Provider Type: ICF/IID

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Rate Type:

- Interim
- Prospective

Total Interim: Interim Component

Total Prospective: Prospective Adjusted for New Cost

Comments:

Distribution:

Contract Management
DPODS - DCF (4)
Attn: Revenue Management/Tacachale
1621 N. E. Waldo Road.
Gainesville, FL  32609

W.Rydell Samuel
Medicaid Cost Reimbursement Analysis

For Information only - No Change in rate

Printed on: 7/28/2020 8:17 AM,Batch ID: 4HXBW , User ID: FDHC\berryal
Sunland Marianna IV  
3700 Williams Road  
Marianna, FL 32446

Provider Type: ICF/IID

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<th>Effective Date</th>
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<tr>
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<tr>
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Rate Type:

- Interim: X
- Prospective: X

Total Interim: X
Interim Component: X
Settlement Based on Costs: X
Prospective Adjusted for New Cost: X

Comments:

Distribution:

Contract Management  
DPODS - DCF (4)

Home Office:

W. Rydell Samuel  
Medicaid Cost Reimbursement Analysis

For Information only - No Change in rate
## Sunland Marianna V

3700 Williams Drive  
Marianna, FL  32446

Provider Number: 028562500  
Date: 7/27/2020  
FYE: 6/30/2019  
Audit Status: Unaudited Costs

Provider Type: ICF/IID

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<tr>
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Rate Type:

- [ ] Interim
- [x] Prospective

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**For Information only - No Change in rate**