

LFIR # 3209

1. Project Title	Ascension Sacred Heart Bay Medical Low Income Pool Fiscal Year 2022-
-	2023 Adjustment

Jay Trumbull 2. Senate Sponsor

3. Date of Request 03/22/2023

4. Project/Program Description

This Fiscal Year 2022-2023 funding and necessary proviso corrects an inaccurate reporting of charity care in the CMS-2552 used by the Agency for Health Care Administration (AHCA) to calculate Ascension Sacred Heart Bay Medical's Low Income Pool (LIP) payment for FY 22-23. The Low Income Pool submitted by the AHCA to the federal Centers for Medicare and Medicaid Services (CMS) underestimated Ascension Sacred Heart Bay Medical's LIP reimbursement by \$11,460,452. This request is to appropriate for fiscal year 2022-2023, \$4,005,428 in nonrecurring funds from the General Revenue Fund and \$7,455,024 in nonrecurring funds from the Medical Care Trust Fund to the AHČA.

5. State Agency to receive requested funds

Agency for Health Care Administration

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	11,460,452
Fixed Capital Outlay	0
Total State Funds Requested	11,460,452

7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	11,460,452	100%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	0	0%	
Other	0	0%	
Total Project Costs for Fiscal Year 2023-2024	11,460,452	100%	

8. Has this project previously received state funding? Yes

No

Fiscal Year	Amo	ount	Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		
2022-23	0	8,615,142	205	No	

9. Is future funding likely to be requested?

a. If yes, indicate nonrecurring amount per year.

h	Describe the	source of t	funding that	can be use	d in lieu of	state funding.
ν.	Describe the	300100 01	unung that			state runung.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?



Yes

If yes, indicate the amount of funds received and what the funds were used for.

In FY 2021, the hospital received \$18 million for COVID related expenses and lost revenue. These expenses were audited by the federal government to ensure compliance.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

- a. What is the current phase of the project?
 - OPlanning ODesign OConstruction
- b. Is the project "shovel ready" (i.e permitted)?
- c. What is the estimated start date of construction?
- d. What is the estimated completion date of construction?
- 12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

13. Details on how the requested state funds will be expended

Spending Category Description		Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other	Low Income Pool payments for reimbursement for charity medical care provided totaling \$11,460,452.	11,460,452
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	ust equal total from question #6)	11.460.452

14. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?



The proviso and funds corrects an inaccurate reporting of charity care in the CMS-2552 used by Agency for Health Care Administration (AHCA) to calculate Ascension Sacred Heart Bay Medical LIP payments for FY22-23. When AHCA switched from the FUHRS data report to the S10 report, Sacred Bay Medical was unable to adjust its data, which created the underpayment.

b. What activities and services will be provided to meet the intended purpose of these funds?

Sacred Heart Bay Medical is one of the largest providers of charity medical care in Region 2 and the funds will be used to continue providing health care services to this population.

c. What direct services will be provided to citizens by the appropriation project?

Ascension Sacred Heart Bay is the only Level II trauma center in the region and will continue to care for trauma patients as well as provide other charity care in the form of emergent and inpatient care.

d. Who is the target population served by this project? How many individuals are expected to be served?

All citizens of the panhandle who are poor and uninsured.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Sacred Heart Bay Medical will be reimbursed for almost all of their charity care costs incurred for FY 22-23 that qualify for reimbursement from the Low Income Pool program. This data is tracked using the S10 form submitted to the AHCA.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

Return of State Funds.

15. Requester Contact Information

a. First Name	Jules	Last Name	Kariher	
b. Organization	Ascension Sacred Heart	Bay Medical		
c. E-mail Address	jules.kariher@ascension.org			
d. Phone Number	(850)206-9495	Ext.		

16. Recipient Contact Information

a. Organization	Ascension Sacred Heart Ba	y Medical

b. Municipality and County Bay

c. Organization Type

□For Profit Entity

☑Non Profit 501(c)(3)

□Non Profit 501(c)(4)

□Local Entity

□University or College

□Other (please specify)



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d. First Name	Jules	Last Name	Kariher	
e. E-mail Address	jules.kariher@ascension.	org		
f. Phone Number	(850)206-9495			
17. Lobbyist Contact Information				
a. Name	Nicholas V. larossi			
b. Firm Name	Capital City Consulting LI	_C		

c. E-mail Address nick@cccfla.com

d. Phone Number (850)222-9075