

RECEIVED

NOV 10 2010

MEDICAID
PROGRAM ANALYSIS

Letter of Agreement

THIS LETTER OF AGREEMENT made and entered into in duplicate on the 9th day of Nov 2010, by and between Manatee County (the County), and the State of Florida, through its Agency for Health Care Administration (the Agency),

1. Per House Bill 5001, the General Appropriations Act of State Fiscal Year 2010-2011, passed by the 2010 Florida Legislature, County and the Agency, agree that County will remit to the State an amount not to exceed a grand total of \$163,541.
 - a) The County and the Agency have agreed that these funds will only be used to increase the provision of health services for the Medicaid, uninsured, and underinsured people of the County and the State of Florida at large.
 - b) The increased provision of Medicaid, uninsured, and underinsured funded health services will be accomplished through the following Medicaid programs:
 - i. The Disproportionate Share Hospital (DSH) program.
 - ii. The removal of inpatient and outpatient reimbursement ceilings for teaching, specialty and community hospital education program hospitals.
 - iii. The removal of inpatient and outpatient reimbursement ceilings for hospitals whose charity care and Medicaid days as a percentage of total adjusted hospital days equals or exceeds 11 percent.
 - iv. The removal of inpatient and outpatient reimbursement ceilings for hospitals whose Medicaid days, as a percentage of total hospital days, exceed 7.3 percent, and are trauma centers.
 - v. Increase the annual cap on outpatient services for adults from \$500 to \$1,500.
 - vi. Medicaid Low Income Pool (LIP) payments to rural hospitals, trauma centers, specialty pediatric hospitals, primary care services and other Medicaid participating safety-net hospitals.
 - vii. Medicaid LIP payments to hospitals in the approved appropriations categories.
 - viii. Medicaid LIP payments to Federally Qualified Health Centers.
 - ix. Medicaid LIP payments to Provider Access Systems (PAS) for Medicaid and the uninsured in rural areas.
 - x. Medicaid LIP payments for the expansion of primary care services to low income, uninsured individuals.

2. The County will pay the State an amount not to exceed the grand total amount of \$163,541. The County will transfer payments to the State in the following manner:
 - a) The first quarterly payment of \$40,886 for the months of July, August, and September is due upon notification by the Agency.
 - b) Each successive payment of \$40,885 is due as follows, November 1, 2010, March 31, 2011 and June 15, 2011.
 - c) The State will bill the County each quarter payments are due.
3. The enhanced FMAP is in effect for the first six months of SFY 2010-11. Any payments made by the Agency on or after January 1, 2011, will not be eligible for the enhanced FMAP. Therefore, the County will be responsible for funding the State share required as a result of the reduced FMAP. If funding is not adequate due to the FMAP change, the State will reduce the rate to the level of funded by the County.
4. Timelines: This agreement must be signed and submitted to the Agency no later than May 31, 2011, to be effective for SFY 2011.
5. The anticipated annual distribution for State Fiscal Year 2010-2011 to Manatee County Rural Health Services is \$930,000.
6. The County and the State agree that the State will maintain necessary records and supporting documentation applicable to Medicaid, uninsured, and underinsured health services covered by this Letter of Agreement. Further, the County and State agree that the County shall have access to these records and the supporting documentation by requesting the same from the State.
7. The County and the State agree that any modifications to this Letter of Agreement shall be in the same form, namely the exchange of signed copies of a revised Letter of Agreement.
8. The County confirms that there are no pre-arranged agreements (contractual or otherwise) between the respective counties, taxing districts, and/or the providers to re-direct any portion of these aforementioned Medicaid supplemental payments in order to satisfy non-Medicaid, non-uninsured, and non-underinsured activities.
9. The County agrees the following provision shall be included in any agreements between the County and local providers where funding is provided for the Medicaid program. Funding provided in this agreement shall be prioritized so that designated funding shall first be used to fund the Medicaid program (including LIP) and used secondarily for other purposes.
10. This Letter of Agreement covers the period of July 1, 2010 through June 30, 2011.

WITNESSETH:

IN WITNESS WHEREOF the parties have duly executed this Letter of Agreement on the day and year above first written.

Manatee County

State of Florida

[Handwritten Signature]
Signature 11/9/10

[Handwritten Signature]
Phil E. Williams
Assistant Deputy Secretary for Medicaid Finance,
Agency for Health Care Administration

Donna G. Hays
Name

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MEDICAID
PROGRAM ANALYSIS

Chairman
Title

ATTEST: R. B. SHORE
CLERK OF CIRCUIT COURT
BY: *[Handwritten Signature]*
SUSAN G. ROMINE DEPUTY CLERK



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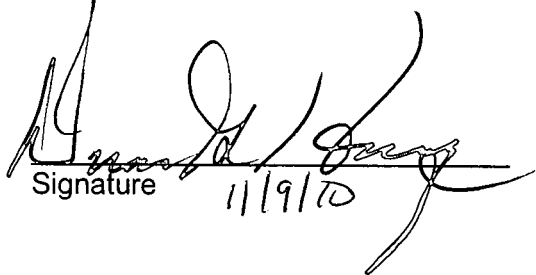
2. The County will pay the State an amount not to exceed the grand total amount of \$287,809. The County will transfer payments to the State in the following manner:
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4. Timelines: This agreement must be signed and submitted to the Agency no later than May 31, 2011, to be effective for SFY 2011.
5. The anticipated annual distribution for State Fiscal Year 2010-2011 to Manatee County Rural Health Services is \$818,336.
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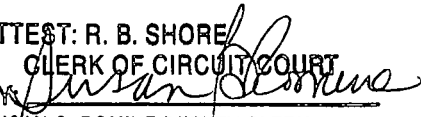

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Phil E. Williams
Assistant Deputy Secretary for Medicaid Finance,
Agency for Health Care Administration

Donna G. Hayes
Name

Chairman
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ATTEST: R. B. SHORE
CLERK OF CIRCUIT COURT
BY 
SUSAN G. ROMINE DEPUTY CLERK



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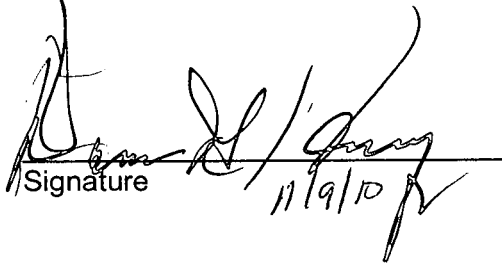
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Donna G. Hayes
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Chairman
Title

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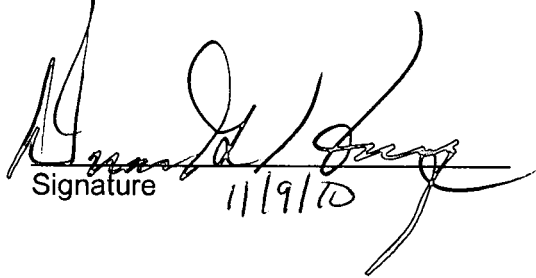
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Assistant Deputy Secretary for Medicaid Finance,
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Donna G. Hayes
Name

Chairman
Title

ATTEST: R. B. SHORE
CLERK OF CIRCUIT COURT
BY Susan G. Romine
SUSAN G. ROMINE DEPUTY CLERK



MEMORANDUM OF UNDERSTANDING

THIS MEMORANDUM OF UNDERSTANDING is made and entered into on the 09th day of November 2010, by and between the Manatee County Board of County Commissioners (the County), and Manatee County Rural Health Services, Inc., (MCRHS).

1. The County, by way of the attached Letter of Agreement between the County and the State of Florida Agency for Health Care Administration (Exhibit 1), agrees to pay to the State of Florida Agency for Health Care Administration for the provision of health care services for the Medicaid, uninsured, and underinsured people of Manatee County.
2. MCRHS is the Federally Qualified Community Health Center identified by the State of Florida Agency for Health Care Administration to receive the funding identified in Exhibit 1. As the recipient of this funding, MCRHS agrees to provide these identified health care services for the Medicaid, uninsured, and underinsured people of Manatee County.
3. Upon request by the County's Director of the Community Services Department, MCRHS agrees to furnish copies of any reports submitted to the State of Florida Agency for Health Care Administration, related to the provision of health care services for the Medicaid, uninsured, and underinsured people of Manatee County.
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WITNESSES

Sign Name: _____

Print Name: _____

Sign Name: _____

Print Name: _____

MANATEE COUNTY RURAL HEALTH SERVICES

By: _____

Print Name: WALTER L. PRESHA SR.

Title: _____

Phone Number: 941-776-4017

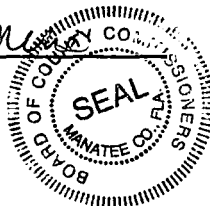
Date of Execution: _____

COUNTY

ATTEST: R. B. SHORE
CLERK OF THE CIRCUIT COURT

By: _____

DEPUTY CLERK



COUNTY OF MANATEE, FLORIDA
by and through its
Board of County Commissioners

By: _____

CHAIRMAN

Date of Execution: November 9, 2010

EXHIBIT 1

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Phil E. Williams
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Agency for Health Care Administration

Name

Title

**ATTEST: R. B. SHORE
CLERK OF CIRCUIT COURT**

**BY: _____
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Print Name: Melissa Anguiano
Sign Name: Sylvia S Camarena
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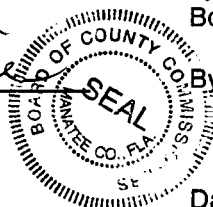
MANATEE COUNTY RURAL HEALTH SERVICES

By: W L Presha Sr
Print Name: WALTER L PRESHA SR
Title: President and CEO
Phone Number: 941-776-4017
Date of Execution: 11-1-10

COUNTY

ATTEST: R. B. SHORE
CLERK OF THE CIRCUIT COURT

By: Susan Romine
DEPUTY CLERK



COUNTY OF MANATEE, FLORIDA
by and through its
Board of County Commissioners

By: David G. Long
CHAIRMAN

Date of Execution: November 9, 2010

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 4. Timelines: This agreement must be signed and submitted to the Agency no later than May 31, 2011, to be effective for SFY 2011.
 5. The anticipated annual distribution for State Fiscal Year 2010-2011 to Manatee County Rural Health Services is \$818,336.
 6. The County and the State agree that the State will maintain necessary records and supporting documentation applicable to Medicaid, uninsured, and underinsured health services covered by this Letter of Agreement. Further, the County and State agree that the County shall have access to these records and the supporting documentation by requesting the same from the State.
 7. The County and the State agree that any modifications to this Letter of Agreement shall be in the same form, namely the exchange of signed copies of a revised Letter of Agreement.
 8. The County confirms that there are no pre-arranged agreements (contractual or otherwise) between the respective counties, taxing districts, and/or the providers to re-direct any portion of these aforementioned Medicaid supplemental payments in order to satisfy non-Medicaid, non-uninsured, and non-underinsured activities.
 9. The County agrees the following provision shall be included in any agreements between the County and local providers where funding is provided for the Medicaid program. Funding provided in this agreement shall be prioritized so that designated funding shall first be used to fund the Medicaid program (including LIP) and used secondarily for other purposes.
 10. This Letter of Agreement covers the period of July 1, 2010 through June 30, 2011.

WITNESSETH:

IN WITNESS WHEREOF the parties have duly executed this Letter of Agreement on the day and year above first written.

Manatee County

State of Florida

Signature

Phil E. Williams
Assistant Deputy Secretary for Medicaid Finance,
Agency for Health Care Administration

Name

Title

MANATEE COUNTY GOVERNMENT AGENDA MEMORANDUM

SUBJECT	Agency for Health Care Administration	TYPE AGENDA ITEM	Consent
DATE REQUESTED	November 9, 2010	DATE SUBMITTED/REVISED	October 29, 2010
BRIEFINGS? Who?	None	CONSEQUENCES IF DEFERRED	Delay in availability of health care funds for Rural Health Services
DEPARTMENT/DIVISION	Community Services/ Human Services	AUTHORIZED BY TITLE	Brenda Rogers, Director Community Services Dept.
CONTACT PERSON TELEPHONE/EXTENSION	Janice Dunbar-Smith/ Elaine Maholtz - Ext 3030	PRESENTER/TITLE TELEPHONE/EXTENSION	Brenda Rogers, Director Community Services Ext. 3030
ADMINISTRATIVE APPROVAL		<i>[Signature]</i>	

ACTION DESIRED

INDICATE WHETHER 1) REPORT; 2) DISCUSSION; 3) FORM OF MOTION; OR 4) OTHER ACTION REQUIRED

Authorization for the Chairman to execute two (2) Letters of Agreement with the Agency for Health Care Administration (AHCA), one in the amount of \$163,541 for the Low Income Pool Program, the other in the amount of \$287,809 also for the Low Income Pool Program, providing funds to Manatee County Rural Health Services (RHS) to increase the provision of health care services for Medicaid, uninsured and underinsured persons in Manatee County for the time period July 1, 2010 - June 30, 2011.

Authorization for the Chairman to execute two (2) FY2010-2011 Memorandums of Understanding with Manatee County Rural Health Services (RHS) to provide health care services in Manatee County for the time period of July 1, 2010 through June 30, 2011.

ENABLING/REGULATING AUTHORITY

Federal/State law(s), administrative ruling(s), Manatee County Comp Plan/Land Development Code, ordinances, resolutions, policy

11.1.4 Efficiency in Service Delivery

BACKGROUND/DISCUSSION

See Page 2

APPROVED IN OPEN SESSION

COUNTY ATTORNEY REVIEW

NOV 29 2010

BOARD OF COUNTY COMMISSIONERS
MANATEE COUNTY, FLORIDA

Check appropriate box	
<input type="checkbox"/>	REVIEWED Written Comments: <input type="checkbox"/> Attached <input type="checkbox"/> Available from Attorney (Attorney's initials:)
<input type="checkbox"/>	NOT REVIEWED (No apparent legal issues.)
<input type="checkbox"/>	NOT REVIEWED (Utilizes exact form or procedure previously approved by CAO.)
<input checked="" type="checkbox"/>	OTHER County Attorney review and discussion held during FY2007/2008 funding and agreement process. Attached documents in same form as used last year.

ATTACHMENTS: (List in order as attached)		INSTRUCTIONS TO BOARD RECORDS: <i>Originals scanned given to E.M.</i>	
Two Letters of Agreement with AHCA (Two copies of each Letter) Two Memorandums of Understanding with RHS (Two copies of each MOU)		<p>Rush Item – Please call Community Services for pick-up. <i>for AHCA</i></p> <p>Return all Letters of Agreement to Community Services; An original of each Letter of Agreement will be returned to Board Records when received from the funding source (AHCA). <i>8/12/10</i></p> <p>One of each fully executed Memorandum for Board Records; One of each fully executed Memorandum to Community Services for mailing to Agency. <i>Given to E.M. 11/10/10</i></p>	
COST:	\$451,350	SOURCE (ACCT # & NAME):	Rural Health Services 0010950022.582000
COMMENTS:	None	AMT./FREQ. OF RECURRING COSTS: (ATTACH FISCAL IMPACT STATEMENT)	N/A

BACKGROUND/DISCUSSION (CONTINUED FROM PAGE 1):

- In October 2004, the Manatee County Board of County Commissioners approved County participation with the State of Florida Agency for Health Care Administration (AHCA) Matching Programs Upper Payment Limit, Low Income Pool Program. This participation allowed for additional funding to come into Manatee County for expansion of healthcare services for Medicaid, uninsured and underinsured residents of Manatee County. Manatee County has participated on an annual basis utilizing funds currently budgeted for the Manatee County health care provider.
- Funding for Rural Health Services was adopted by the Board as part of the FY2010-2011 budget process. Through the attached Letters of Agreement, the noted County funds will be forwarded to AHCA. In turn, AHCA matches the County funds. This action then provides for additional Federal funds to be drawn down by the State, and made available to the local health care provider.
- The form of the attached FY2010-2011 Letter of Agreement has been developed by AHCA based on applicable rules and standards. The County has executed this form of the Letter of Agreement as standard practice in the past and in current years. These funds for healthcare services will also assist in increasing access to primary care services through RHS renovation of the Westgate Family Healthcare Center in Manatee County.
- During FY2007-2008, discussion occurred between AHCA and County staff regarding the use of this Letter of Agreement. Staff attempted to modify the form of the Letter of Agreement to provide for a firm written commitment from AHCA with respect to the return of these funds to Manatee County Rural Health Services to serve Manatee County citizens. AHCA has not been willing to amend this portion of the Letter of Agreement. However, the following provides a comfort level to staff in bringing these documents forward for Board approval at this time: 1) on an annual basis, RHS forwards to AHCA a statistical report related to the health care provided, with certification of the report signed by the RHS President/CEO; 2) the fact that the majority of the services covered by these funds are currently being provided by RHS; and 3) the attached Memorandums of Understanding between RHS and the County.
- Manatee County Rural Health Services may be visited throughout the contract year by Community Services Department staff, to ensure that the programs are conducted based upon the intended use of the funds. Monthly desk audits may also be conducted.