

DRAFT

LAKE SHORE HOSPITAL AUTHORITY
BOARD OF TRUSTEES

Special Meeting – November 1, 2022, 5:15 p.m.

This meeting was conducted as a public meeting and a Virtual meeting.

Present: Brandon Beil, Chair
Stephen M. Douglas, Vice-Chair

Lory Chancy – Secretary/Treasurer
Don Kennedy, Trustee

Absent:

Also

Present: Dale Williams, Executive Director
Fred Koberlein, Attorney
Cynthia Watson, LSHA Staff
Don Savoie, Meridian
Alan Paulin, Meridian
Mike Peacock, Hope Bridges
Sylvester Warren
Joshua Garner

Sonja Markham, LSHA Staff
Karl Plenge, NOC
Barbara Lemley
Lauren Cohn, Meridian
Richard Anderson, Meridian
Molly White, Your ER Solutions
Morgan McMullen, Lake City Reporter
Vanessa George

14 participants participated in the LSHA Virtual Regular Board Meeting.

CALL TO ORDER

Chairman Beil called the in person/virtual November 1, 2022, Special Meeting to order at 5:20 P.M. Chairman Beil called for additions/deletions to the Agenda. Mr. Dale Williams advised that due to this special meeting falling on November 1, October bank statements and the monthly staff report will not be available until the next scheduled meeting. Agenda additions requested are: LSH – Option 4, Mr. Mike Peacock (memo attached), D & O insurance renewal, and a legal services agreement with RKK attorneys. Agenda deletions requested are: removal of the Lake City Medical Center presentation. **Motion** by Mrs. Lory Chancy to approve adoption of the Agenda. **Second** by Mr. Don Kennedy. All in favor. **Motion carried.**

INDIVIDUAL APPEARANCES

Comments by Ms. Barbara Lemley. (handout provided by Ms. Lemley, attached to minutes)

NEW BUSINESS

Lake Shore Hospital – Presentation by Mr. Michael Peacock, representing Hope Bridges VA Transitional Housing and ACE Medical.

Lake Shore Hospital – Presentation by Mr. Don Savoie, representing Meridian Behavioral Healthcare. (Three (3) ring binder provided at the meeting. A copy is available in the offices of LSHA).

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Lake Shore Hospital - Mr. Williams reminded the Trustees of Option #3 regarding the use of the main hospital - Razing the Building

The Authority indicated it would consider razing the main hospital building as an option. The estimated cost to raze the building is \$2.5 million. It should be noted this is an estimate only. It was not determined by bid or by a professional consultant.

Women's Center – Presentation by Dr. Molly White representing Emergency Medical Physicians at Lake Shore (EM PALS) f.k.a. Your ER Solutions. (attached)

Women's Center - Mr. Richard Powell explained Option #2 - LSHA Urgent Care Facility (attached)

Women's Center – Mr. Williams reported on his conversation with Ms. Jill Adams, Administrator, Lake City Medical Center. HCA is in the process of creating an Urgent Care division. When complete, HCA may have an interest in leasing a building from the Authority.

Mr. Williams recommended to the Trustees to hold off on decisions related to the Pharmacy and Dental services until final decisions are made on the Hospital Building and the Women's Center.

Public comments by Ms. Barbara Lemley, Mr. Sylvester Warren, Ms. Vanessa George and Mr. Joshua Garner.

Comments and discussion on the proposals by the Trustees.

Motion by Mr. Don Kennedy to proceed with negotiations on the Women's Center immediately with Dr's Michael and Molly White to get them up and running. **Second** by Mr. Stephen Douglas. All in favor. **Motion carried.**

Motion by Mr. Brandon Beil to discontinue negotiations with Hope Bridges. **Second** by Mr. Don Kennedy. All in favor. **Motion carried.**

Mr. Williams will work on behalf of the Authority and work with Meridian Behavioral Healthcare to schedule community meetings for Meridian to answer questions pertaining to utilization of the hospital for behavioral healthcare services. The Trustees requested that a report on Meridian outreach efforts be made by the January regular scheduled meeting. The other option will be to raze the hospital building.

November 14, 2022, Regular Board Meeting

The November 14, 2022 will take place at the Authority office at 5:15 pm.

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UNFINISHED BUSINESS

None.

STAFF REPORT

Staff report will be in the November 14, 2022, packet.

BOARD MEMBER COMMENTS

Comment by Mr. Stephen Douglas.

Chairman Beil called for a Motion to adjourn meeting.

Meeting adjourned.

Respectfully submitted,

Lory Chancy, Secretary/Treasurer

Date of Approval

COLUMBIA COUNTY, FL – Tonight's meeting of the infamous Lake Shore Hospital Authority should be a doozie. Hospital Authority Manager Dale Williams once again waited until the last minute to have the backup material available for public inspection. Absent from the backup material is any mention of the \$33,000,000 Willie Peacock settlement.

Background

In May 2020, the Lake Shore Hospital Authority Governor's Board (the Board) was advised that its tenant, CHS, was abandoning the Hospital.

On June 25, 2020, the Board authorized part-time Authority Manager Dale Williams to request Statements of Interest.

Three weeks later, at the July 2020 Board meeting, there wasn't one mention of the Statements of Interest.

One month later, on September 10, the Governor's Board was still trying to figure out what to do. The Hospital was within thirty days of abandonment. Four months had passed since Manager Williams was advised the Hospital was being abandoned.

During a special September 14, 2020, meeting, Manager Williams explained that maintaining the vacated Hospital would cost \$147,000 a month. The Board approved \$150k.

During the October and November Board meetings, there was no mention of the previously agreed Request for Proposal/Statements of Interest. The Hospital was now vacant for sixty days.

Finally, during the first meeting in January, Manager Williams mentioned the proposals and asked the Board members to contact the staff to set up a date.

During the February 8, 2021, meeting, there was no mention of any of the proposers for the Hospital. While Hospital Authority Manager Williams provided no documents showing the expenditures to keep the Hospital vacant, it appeared from the earlier figures the cost was about \$620,000.

After spending approximately \$620,000 to keep the empty Hospital going, one proposer appeared in front of the Board on March 17. On March 18, there was a regular meeting of the Authority. None of the proposals were mentioned in the minutes.

By May 10, 2021, one year after the Board discovered CHS was leaving town, only one proposer visited the Authority, Ace Medical.

Hospital Authority Loses the Required Board Member

Sometime after May, Dr. Mark Thompson had to resign from the Board. He moved out of the County. The Florida legislation establishing the Authority required that one Board member must be a physician practicing at the Hospital and also a Columbia County resident. Both requirements had to be met. Dr. Thompson was out.

In January 2022, Governor DeSantis appointed former public defender investigator and Republican operative Don Kennedy to be on the Board. He is not a physician practicing at the Hospital. He has stated he doesn't want to be on the Board.

Now almost a year and a half after the Hospital was vacated and having spent over a million dollars on the vacated Hospital, there still was no urgency by Authority Manager Williams or the Governor's Board to get the ball rolling.

In January, the Board blew off a proposal from Meridian CEO Don Savoie.

In March 2022, Willie Peacock appeared at the Board meeting as the representative of Haven Health. His presentation disappeared, and Manager Williams said it could not be found.

In April, Heaven Health Peacock reappeared as Hope Bridges Peacock. He claimed that his attorney advised him to switch horses.

In May, now two years after Manager Williams knew CHS was vacating the Hospital, he informed the Board that he was working on scheduling a meeting of respondents to the RFP.

In June, Florida Gateway College President Larry Barrett made a presentation. The FGC Board was not behind President Barrett's proposal.

Mike Peacock was also back, this time with a gaggle of folk, including Ace Medical. A new player, Julie Smith, appeared as an expert in veteran housing. However, her dream project was stalled in Tallahassee. She was silent about that.

Also, Meridian made a second presentation.

The big event during the June 2022 meeting was Board member Stephen Douglas making a motion for Authority Attorney Fred Koberlein, Jr., and Authority accountant-auditor-external auditor-financial advisor (all one person) Richard Powell, CPA, a forty-year friend of Manager Williams, to work out a lease and other details with Hope Bridges principal, Willie Peacock. The motion passed unanimously.

Willie Peacock - Hope Bridges, Willie Peacock - Well Care: A \$33 million settlement

On November 3, 2020, in the US District Court Southern District of Florida, Gilead Sciences filed suit against many defendants. Highlighted in the media was one defendant, Willie Peacock.

Yes, that is the same Peacock making a play to take over the Authority's vacated Hospital, Shands at Lake Shore.

In every article exploring the Well Care sham found by the Observer, Well Care and its president, Mike Peacock, are highlighted.

In June of this year, Well Care and certain executives settled with Gilead for \$33,000,000.

The 2020 [complaint](#) [alleged](#) that Mike Peacock and others wrongfully obtained millions of dollars in illicit profits by exploiting Gilead's charitable program, which provided the qualifying uninsured with free, life-saving HIV drugs.

Fierce Pharma, an industry publication, reported, "At the time, the company said the defendants established a scheme to recruit homeless or low-income people in Florida to seek fraudulent preexposure prophylaxis (PrEP) prescriptions through the company's free-drug access program."

"Then the participating clinics pocketed reimbursement payments and often took the medicines back to repackage them and sell them on the black market."

[Zoey Becker](#) of Fierce Pharma reported that a Gilead spokesperson explained the scheme this way. "Well Care and its president, Mike Peacock, played a central role in the conspiracy by partnering with one of the main defendant groups to expand the fraudulent scheme to Jacksonville and enrich themselves at Gilead's expense. The Well Care defendants actively recruited and paid thousands of vulnerable Floridians to enroll in Gilead's free-drug program for PrEP regardless of whether they wanted or needed PrEP medication, putting patient safety at risk."

Paul Schlosser of Endpoints News reported on the Gilead settlement, explaining that the lawsuit took 18 months and 860 court filings.

Mr. Schlosser wrote on June 29, 2022, "Gilead, along with healthcare clinic Well Care and execs Mike Peacock and Shajuandrine Garcia, reached a settlement worth \$33 million last week."

Mr. Scholsser highlighted the following from Gilead's initial 138-page filing stating that the "schemes included a common modus operandi":

"...recruiting individuals who earn low incomes or are homeless to serve as placeholder "patients"; prescribing those "patients" medically unnecessary, inappropriate, and often unwanted PrEP medication; falsely certifying to Gilead's representatives that the prescriptions are medically necessary and appropriate; seeking reimbursement from Gilead, under false pretenses, for the cost of those fraudulently dispensed medications; unlawfully removing PrEP medication from its original, FDA-approved packaging and separating it from its original, FDA-approved labeling; repackaging PrEP medication in an unlawful, trademark-infringing, and potentially dangerous manner for dispensation to the recruited "patients"; and unlawfully repurchasing those medications back from "patients" for pennies on the dollar so they can be resold at a higher price on the black market. In addition to defrauding Gilead out of tens of millions of dollars and jeopardizing Gilead's hard-earned goodwill, Defendants' schemes have placed at risk the health — and even the lives—of Floridians who are economically challenged."

Mr. Scholsser continued, "Gilead further blasted the defendants in its original filing, calling the schemes 'a colossal financial fraud.'"

Where is the Governor's Board?

Weeks ago, Barbara Jeffords Lemley made a public record request for the contract and other information surrounding the Willie Peacock Hope Bridges deal.

Ms. Lemley was stonewalled and received nothing.

Even though there hasn't been a meeting of the Board in two months, Manager Williams did not provide the backup material to the public until yesterday.

Attorney Fred Koberlein billed the Authority for writing a contract. So far, he has not produced the contract.

Epilogue

In about an hour the Governor's illegally constituted Board meets.

Under Board Chairman Beil, the rest of the Governor's appointments, and Authority part-time Manager Dale Williams, anything is possible

LAKE SHORE HOSPITAL AUTHORITY
DR. WHITE ER ALTERNATIVE
PROPOSAL

OPTION 1

	2023			2024		
	EST. ANNUAL VISITS	REIMB RATE	TOTAL	EST. ANNUAL VISITS	REIMB. RATE	TOTAL
MEDICAID (SUPPLEMENT)	1710 (5 visits per day)	\$ 150	\$ 256,500	2394 (7 visits per day)	\$ 150	\$ 359,100
LSHA PATIENTS	1710 (5 visits per day)	\$ 611	1,044,810	2565 (8 visits per day)	\$ 452	1,159,380
	<u>3,420</u>		1,301,310	<u>4,959</u>		1,518,480
PROPERTY TAXES			10,000			10,000
			1,311,310			1,528,480
HEALTHCARE SERVICES BUDGET			(350,000)			(350,000)
NET COST TO AUTHORITY			<u>\$ 961,310</u>			<u>\$ 1,178,480</u>
EQUIVALENT MILLAGE			0.28 MILLS			0.34 MILLS
START-UP COSTS			<u>\$650,000</u>			<u>\$ -</u>
PER VISIT RATES:	RATE	ANNUAL	TOTAL (Mid Range)	ANNUAL (max)	TOTAL (max)	
0-7.9 PER DAY	\$ 611	1,368	\$ 835,848	2,702	\$ 1,650,800	
8-12.9 PER DAY	\$ 452	3,420	\$ 1,545,840	4,412	\$ 1,994,134	
>15 PER DAY	\$ 283	5,164	\$ 1,461,469	6,840	\$ 1,935,720 (20 per day)	

OPTION 2

REVENUE GUARANTEE @ \$125,000 PER MONTH FOR \$1,500,000 PER YEAR FOR THREE YEARS

UNDER THIS ALTERNATE PROPOSAL, LSHA WOULD GUARANTEE EMS PALS \$1,500,000 IN OPERATING REVENUE PER YEAR FOR THREE YEARS. THE REVENUE WOULD CONSIST OF LSHA PATIENT FEES AT THE ABOVE RATES OR OTHER RATES, AND CASH SUBSIDIES TO THE EXTENT THAT PATIENT FEES WERE INADEQUATE. AFTER DEDUCTING THE CURRENT HEALTHCARE SERVICES BUDGET OF \$350,000 THIS WOULD RESULT IN \$1,150,000 IN ADDITIONAL FUNDING FROM LSHA PER YEAR OR APPROXIMATELY 0.34 MILLS.

Women's Center - 2 Story building - Option 1

Emergency Medicine Physicians at Lake Shore

What we will do

Provide Emergency Medicine level care for Columbia County.

Cost of Emergency Medicine care

Quality healthcare is expensive. In 2018/2019 the cost to run Lake Shore's ER was over \$7 million per year

CHS spent around \$5 million per year and the groups staffing the ER spent over \$2 million per year.

So why did CHS and ER groups run Lake Shore?

CHS made money off admissions and procedures

The ER groups made money off *other* CHS contracts outside of Columbia County

Our cost

We estimate a cost reduction of more than 70% compared to CHS.

As opposed to \$7 million per year combined cost of CHS and ER contract groups -- our cost should be less than \$2 million per year.

Since we would not be a hospital we will not receive revenue from admissions or procedures.

Our costs include:

1. More than 10 employees
2. Will offer services exceeding free standing ERs
3. Will offer higher quality of care
4. Maintenance of equipment
5. Pharmaceuticals and equipment (sutures, procedure kits, etc.)
6. All materials to run a free-standing ER

Why is our cost more than 70% less?

1. Significant reduction in administrative overhead
2. Open during peak hours (as opposed to 24/7)
3. Ability to adjust hours to community demand
4. Use rapid point of care testing as opposed to a full-fledged lab. Send out testing by courier available.
5. No in house radiologist. Instead, our providers will offer many real time interpretations of x-rays.
6. Will staff more efficiently.
7. We will offer simplified billing as opposed to multiple bills after the visit
8. We are excited to offer telehealth
9. Our focus is on reducing hospital admissions and providing on going care as needed

What care are we proposing?

As a minimum we perform all procedures, interventions and treatments offered at a free-standing ER (see table).

Although the term has been used, we are not proposing an urgent care and will offer a distinctly different level of care.

In fact, we will be most like a full-fledged hospital-based ER with the following exceptions:

1. We will focus on keeping patients out of hospitals by offering ongoing visits and treatments designed specifically to help people avoid unnecessary hospital admission.
2. If admission is needed, we will partner with hospitals to offer best options to our patients.
3. We will not have specialists on call.
4. We will limit use of narcotics and controlled substances. We believe through sedation we should be able to rectify most painful conditions. We also feel on going narcotic treatment is best delivered in an inpatient setting.

Why are we more than an ER?

1. We will be emergency medicine physician led (as opposed to administratively led).
2. We will offer procedural sedation when appropriate. For example, dislocation reduction, fracture management, complex lacerations, large abscesses, etc.
3. We plan to offer IV-less sedation. To our knowledge this is not available in any Emergency Room in the United States.
4. We plan to offer tele-medicine
5. We plan to offer the ability to schedule appointments
6. When needed we would like to provide on call after hours (tele health)
7. We are looking into the option of home visits
8. We would like to offer durable medical equipment such as walkers, wheelchairs and similar.

Startup costs

This includes Emergency Medicine related equipment and would be purchased and owned by the board. We believe it would be best for the board to own the equipment and building and for our business to rent the space and maintain the equipment through service contracts.

Authority board rates

Our rates are significantly less than what was paid to CHS in 2018/2019. We made no adjustment for inflation or for increased cost of care for the last 5 years.

The average cost of care in 2018/2019 was \$611.30 per visit. Given ER cost of care is never evenly distributed (some patients cost a lot and others cost much less) we considered median (or middle) cost and quartile.

Median cost paid by Authority Board to CHS in 2018/2019 was \$453.50

Upper and Lower quartile cost paid by Authority Board to CHS in 2018/2019 was \$736 and \$297 respectively.

We expect business to grow rapidly and build a reduced cost model based on authority board visits per day.

At low volumes (<8 authority visits per day) the clinic would be reimbursed at more than \$100 per visit below 2018 CHS upper quartile rates.

At 8 to less than 13 visits per day we would be paid at less than the median rate for CHS in 2018.

Beyond 13 or more visits per day, the clinic would receive significantly less than the lower quartile for CHS in 2018.

We are offering a better product at a significant cost reduction from CHS from five years ago.

Medicaid

The authority board has an interest in moving patients from authority board to Medicaid. We have an interest to provide care regardless of insurance. Medicaid reimbursement is too low for any private clinic to accept without loss. For our ER services we ask for a Medicaid supplement for the first 24 months and then a rate two thirds less thereafter. We believe this will offer a tremendous service to our community at a reduced cost to the board while continuing to provide Medicaid recipients a community-based care alternative.

Why a staggered model based on volume?

We are in this for the long haul and view the authority board and community as our partners. Reduced cost with volume growth only make sense as it reduces risk to the board while allowing us to continue to deliver excellence to the community.

Given significantly lower risk -- Why would we risk opening a clinic?

We both entered medicine to take care of people and have been blessed with long careers. We believe we have a calling to give back to a community that has given so much to us over the nearly 20 years.

Working with our patients in our clinic would truly be a privilege.

Moreover, Emergency Medicine, like any other business, is reliant on customers. We believe we will offer the best product and therefore believe we will be able to care for a significant number of people. We believe any relative losses will disappear as word-of-mouth spreads and our volumes grow.

Two Models

We outlined two models. One has a revenue guarantee and the other does not. We prefer the model without the guarantee as we believe our model will be successful. No income guarantee represents a greater risk to us, but we believe in what we are offering and do not think it is the board's responsibility to ensure our success.

Dale Williams

From: Michael White <mjw22@hotmail.com>
Sent: Monday, October 31, 2022 7:36 AM
To: Dale Williams
Subject: Authority board table

	EM PALS	Urgent Care	Free Standing ER	Hospital Based ER
Chest pain	✓	X	✓	✓
Abdominal Pain	✓	X	✓	✓
Trouble breathing	✓	X	✓	✓
EKG	✓	rarely	✓	✓
Cardiac Labs	✓	rarely	✓	✓
Ultrasound	✓	X	X	✓
Xray	✓	sometimes	✓	✓
CT scan	✓	X	✓	✓
Lacerations	✓	only simple	✓	✓
Abscess	✓	only simple	✓	✓
Rapid Lab results	✓	limited	X	X
Little to no wait time	✓	X	X	X
Short care start to care complete	✓	Variable	X	X
Efficient billing	✓	Variable	X	X
Fracture reduction	✓	X	X	✓
IV fluids	✓	X	✓	✓
IV medications	✓	X	✓	✓
Sedation for painful procedures	✓	X	X	✓

LAKE SHORE HOSPITAL AUTHORITY
PRIMARY CARE AND URGENT CARE CENTER
PROPOSED BUSINESS PLAN

OVERVIEW

After directly operating the Shands Lake Shore Hospital for many years, in 1987 the Lake Shore Hospital Authority (LSHA) leased the hospital facilities to Santa Fe Healthcare. Under the terms of the lease LSHA began funding indigent care at the hospital based upon specific conditions contained in the various versions of the lease agreement. LSHA levied a millage up to three mills to support this indigent care program. This millage rate was .962 during recent years. In 2020 the existing lessee, Community Health Systems, elected to terminate the lease and closed the hospital and returned the building facilities to LSHA. The Authority received a \$7.5 million termination fee from Community Health Systems at that time.

For the subsequent two years LSHA has attempted to find tenants for the vacated facilities, especially tenants who would provide health care services to the underserved population surrounding the hospital campus. While several prospects made proposals to operate hospital and urgent care facilities out of the vacated buildings, all proposals required the LSHA to make significant expenditures and guarantees regarding building improvements, equipment purchases and operating costs, including patient reimbursements. These amounted to requiring the LSHA to make significant outlays of public funds without adequate oversight of the use of the funds. Proposals that did not require significant LSHA expenditures also did not provide for comprehensive, high level medical care to the targeted underserved population.

During this time LSHA maintained contracts with several individual medical providers for patient services, but these providers were under-utilized, primarily due to qualification criteria. This resulted in only 315 patient visits during the past year, although it is acknowledged that there is a much greater need for medical services by the county indigent population.

BUSINESS PLAN

In the light of these circumstances, LSHA staff has prepared a study of the projected costs of directly operating a combined primary care and indigent care center in the vacant two story building referenced as the "Women's Center". The proposed Clinic would operate 10 hours per day week days and 5 hours per day on weekends. Hours would be adjusted as necessary based on patient volumes. Services would include all services normally provided by primary health Clinics and urgent care centers, with enhanced diagnostic services generally found in emergency department settings. Such services will be enhanced and expanded in future years.

REVENUES

The Clinic would apply for designation as a "Rural Health Clinic" which would allow it to collect substantially higher reimbursement rates from Medicare and Medicaid patients than would otherwise be possible. That would make these patients able to substantially contribute to the facility's operating costs. Additionally the guidelines for authority board patients would be streamlined and modernized for visits to the Clinic. These patients would be billed on a sliding fee basis and would be encouraged to utilize the

Women's Center (2 story building) - Option 2

Clinic for both primary and urgent care needs. The new qualifications would only apply to visits at the LSHA Clinic. For the purpose of this study the estimated patient volumes by payor class included in the initial outside clinic proposal were utilized.

This business plan is formulated based on the following criteria for patient services:

1. All existing service contracts would be cancelled and future patient services would only be performed at the LSHA Clinic.
2. LSHA would no longer fund any portion of hospital inpatient services. Such services would be performed and funded in accordance with individual hospital policies and guidelines.
3. If emergency room or hospital facilities are required by LSHA patients, they would be referred to and transported to the hospital of their choice, by EMS based upon their criteria.

EXPENSES

The primary strategy to reduce Clinic costs below other proposals is to utilize to the greatest extent possible, the existing LSHA operating budget. This creates substantial savings in administrative personnel, insurance, telephone/ internet, professional, and occupancy costs. Thus nearly the entire Operating Fund budget can be allocated to the clinical facility.

Personnel include 6.3 professional positions including a fulltime doctor and ARNP or PA and 4.3 FTE nursing and technical positions. This staffing level will provide capacity for at least 6,000 patient visits. Compensation levels have been calculated at the upper range of comparable Florida positions, and include FRS retirement and health insurance at the rate for Columbia County employees. There is a possibility that certain of these positions will be retained on a contractual basis.

Other operating expenses are based on information in the above-referenced outside study.

INITIAL COSTS

The estimated initial, non-recurring costs are as follows:

Building renovations	\$280,500
Equipment	269,500
Marketing campaign	<u>100,000</u>
Total	<u>\$650,000</u>

The costs are detailed on page 4 of this report.

Women's Center (2 story building) Option 2

FINANCIAL PROJECTION

As shown on page 2, the projected finances of this project would be as follows for the first full year:

Estimated Facility Costs	\$ 1,600,844
Operating Fund budget offset	(457,221)
Healthcare Services Fund offset	(350,000)
Patient revenue	(403,500)
Net Required Subsidy	<u>\$(390,123)</u>

To increase this subsidy to \$700,000 per year to provide a contingency would require a millage rate of 0.20 mills.

Women's Center (2 story building) Option 2

LAKE SHORE HOSPITAL AUTHORITY
 PRIMARY AND URGENT CARE CENTER
 PROPOSED BUDGET
 LSHA BUDGET

	FTE	TOTAL	OFFSET	NET BUDGET
PERSONNEL SERVICES				
PHYSICIAN	1	\$ 300,000	\$ -	\$ 300,000
REGISTERED NURSE	1.42	106,500	-	106,500
LPN/PARAMEDIC	1.42	71,000	-	71,000
XRAY/ULTRASOUND TECH	1.42	85,200	-	85,200
ARNP/PA	1	110,000	-	110,000
PRN SALARY ALLOWANCE		40,000		40,000
OFFICE MANAGER	1	75,000	(75,000)	-
GREETER/REGISTRATION	1.42	56,800	(56,800)	-
	<u>8.68</u>	<u>844,500</u>	<u>(131,800)</u>	<u>712,700</u>
FICA		64,604	(10,082)	54,522
RETIREMENT (FRS)		96,540	(15,815)	80,725
HEALTH INS		86,400	-	86,400
WORKERS COMP		15,000	(2,500)	12,500
		<u>1,107,044</u>	<u>(160,197)</u>	<u>946,847</u>
OPERATING EXPENSES				
EHR BILLING COMPANY		30,000	-	30,000
RADIOLOGY READS		34,200	-	34,200
LICENSES		1,900	-	1,900
CLOUD STORAGE		4,000	-	4,000
INTERNET		5,000	(3,000)	2,000
WEBSITE		10,000	(5,000)	5,000
TELEPHONE		10,000	(7,000)	3,000
COMPUTER MAINTENANCE		5,000	(3,000)	2,000
INSURANCE		40,000	(40,000)	-
FINANCIAL MANAGEMENT		40,000	-	40,000
EQUIPMENT SERVICE		5,000	-	5,000
MEDICAL EQUIPMENT SERVICE CONTRACTS		13,600	-	13,600
LAB		62,800	-	62,800
PHARMACY		25,000	-	25,000
OPHTHOLOGY		2,300	-	2,300
BIOMEDICAL CONTRACT		8,000	-	8,000
CONTINUING EDUCATION		5,000	-	5,000
QUALITY ASSURANCE		10,000	-	10,000
PHARMACY SUPPLIES		35,000	-	35,000
LAB SUPPLIES		7,000	-	7,000
NEEDLES/IVS		25,000	-	25,000
PAPER SUPPLIES		10,000	-	10,000
RENT/UTILITIES		50,000	(50,000)	-
ACCOUNTING/LEGAL		45,000	(45,000)	-
ADVERTISING		50,000	(4,000)	46,000
		<u>533,800</u>	<u>(157,000)</u>	<u>336,800</u>
		<u>\$ 1,600,844</u>	<u>\$ (317,197)</u>	<u>\$ 1,283,647</u>
OPERATING FUND BUDGET BALANCE				(140,024)
HEALTHCARE SERVICES BUDGET BALANCE				(350,000)
REVENUES NEEDED TO BALANCE				<u>793,623</u>
REVENUES				
MEDICARE 700 @ \$125		\$ 87,500	\$ (87,500)	
MEDICAID 1,700 @ \$125		212,500	(212,500)	
COMMERCIAL INS 685 @ \$100		68,500	(68,500)	
SELF PAY 350 @ \$100		35,000	(35,000)	
LSHA PATIENTS 2600 @ \$150		325,000	(390,000)	
		<u>\$ 728,500</u>	<u>(793,500)</u>	
NET RECURRING FUNDING NEEDED			\$ 500,000	
EQUIVALENT MILLAGE			0.15 MILLS	

Women's Center (2 story building) Option 2

LAKE SHORE HOSPITAL AUTHORITY
PRIMARY AND URGENT CARE STUDY PROPOSED STAFFING PLAN

POSITION	SALARY.COM		FTE	TOTAL
	SALARY RANGE	BUDGET SALARY		
URGENT CARE/ ER PHYSICIAN	\$177,600-\$350,000	\$ 300,000	1.00	\$ 300,000
URGENT CARE ARNP	106,500-116,500	110,000	1.00	110,000
URGENT CARE REGISTERED NURSE	64,500-83,000	75,000	1.42	106,500
LPN/PARAMEDIC	44,000-54,000	50,000	1.42	71,000
XRAY/ULTRASOUND TECH	54,000-65,000	60,000	1.42	85,200
OFFICE MANAGER	59,500-74,000	70,000	1.00	75,000
GREETER/ REGISTRATION	N/A	40,000	1.42	56,800
				\$ 804,500

PATIENT VISIT CAPACITY	ANNUAL VISITS
PHYSICIAN	4,200
ARNP/PA	2,200
	6,400

PROJECTED VISITS	
MEDICARE @ \$125	700 \$ 87,500
MEDICAID @ \$125	1,700 212,500
COMMERCIAL INS @ \$100	685 68,500
SELF PAY @ \$100	350 35,000
LSHA @ \$150	2,600 390,000
	6,035 \$ 793,500
PERCENT OF CAPACITY	94.20%

Women's Center (2 story building) Option 2

LAKE SHORE HOSPITAL AUTHORITY
 PRIMARY AND URGENT CARE CENTER
 ESTIMATED STARTUP COSTS

<u>BUILDING RENOVATIONS</u>	<u>COST</u>
A/C UNIT	\$ 15,000
GUTTER REPAIR	4,600
REFRESH INTERIOR	34,900
CLEANING EXTERIOR	23,000
LED LIGHTING	33,000
REFRESH CEILING TILE	20,000
PAINTING PARKING LOT	60,000
REPAIR & CERTIFY ELEVATORS	50,000
FIRE SYSTEM INSPECTION	15,000
LANDSCAPING	25,000
	<u>280,500</u>

<u>EQUIPMENT</u>	
DIGITAL XRAY- FIXED	40,000
DIGITAL XRAY- PORTABLE	10,000
EQUIPMENT -STERILE CLAMPS	20,000
ULTRASOUND STERILIZER	8,000
LAB EQUIPMENT	20,000
MEDICINES SAFE	2,000
PICCOLO CHEMISTRY ANALYZER	10,000
POCHI (HEMATOLOGY ANALYZER)	9,000
ISTAT BLOOD ANALYZER	10,000
URINALYSIS	4,000
COVID	10,000
FLU/ RSV	20,000
NITROUS OXIDE PLUS CAPTURE	30,000
EXAM TABLES/RECLINER (5)	20,000
TONOPEN	5,000
MINI VENTILATOR + BIPAP	10,000
MINI CPAP	2,000
SLIT LAMP	5,000
BLACK LIGHT	500
PYXIS	10,000
BLANKET WARMER	3,000
FLUID WARMER	3,000
MEDICATION SCAN SYSTEM	5,000
REFRIGERATOR (2)	8,000
CENTRAL MONITORING SYSTEM	5,000
	<u>269,500</u>

<u>OTHER</u>	
MARKETING CAMPAIGN	100,000
TOTAL START UP (NON-RECURRING)	<u>\$ 650,000</u>

Women's Center (2 story building) Option 2

Insured: Lake Shore Hospital Authority

Insurer: Landmark American Insurance Company

Coverage: Not-For-Profit Entity Directors and Officers Liability and Employment Practices Liability

Limit of Liability: \$1,000,000 Per Claim
\$1,000,000 Annual Aggregate

Sublimit-Defense of Non-Monetary Damages: \$250,000 Per Claim / \$750,000 Aggregate / \$100,000 SIR

Policy Term: 12/14/2022 – 12/14/2023

Conditions: Exclusions: Amended Bodily Injury and Property Damage; Bankruptcy-Insolvency; Biometric Privacy Claims; Malpractice; Network Security and Privacy Information; Prior Acts – Inception; Regulatory; Sexual Abuse and Sexual Misconduct
 \$100,000 Retention D&O and EPLI Each Claim
 25% Minimum Earned Premium
 No Flat Cancellation
 Prior and/or Pending Litigation Date: 12/14/2021
CLAIMS MADE BASIS
 This Quote Expires: **12/14/2022**
 Required to bind coverage:
Completed, signed and dated surplus lines disclosure
Completed, signed and dated fraud statement
 Other terms, conditions and exclusions as described in policy

Premium: \$50,000.00 Premium
 \$50,000.00 Total Premium

Payment Terms: Will invoice – Due within 10 days of invoice date
(If full premium payment is not received by the due date indicated on the invoice, the policy is subject to cancellation for non-payment of premium by the insurer.)

The Landmark American Insurance Company is an approved, non-licensed insurer in the State of Florida. It is not subject to the Guaranty Fund. The A.M. Best rating is A+ XIV.

FLORIDA LAW REQUIRES US TO NOTIFY YOU OF THE FOLLOWING:

FLORIDA FRAUD STATEMENT

Section 817.234(1)(b), F.S.

Named Insured: Lake Shore Hospital Authority

Effective Date: 12/14/2022

Any person who knowingly and with the intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

Signature _____

Date _____

Surplus Lines Disclosure and Acknowledgement

At my direction, Florida League of Cities, Inc. agent of surplus lines broker has placed my coverage in the surplus lines market.

As required by Florida Statute 626.916, I have agreed to this placement. I understand that coverage may be available in the admitted market and that persons insured by surplus lines carriers are not protected by the Florida Insurance Guaranty Act with respect to any right of recovery for the obligation of an insolvent unlicensed insurer.

I further understand the policy forms, conditions, premiums, and deductibles used by surplus lines insurers may be different from those found in policies used in the admitted market. I have been advised to carefully read the entire policy.

Lake Shore Hospital Authority

Named Insured

By:

Signature of Named Insured

Date

Printed Name and Title of Person Signing

Landmark American Insurance Company

Name of Excess and Surplus Lines Carrier

Directors and Officers Liability

Type of Insurance

12/14/2022

Effective Date of Coverage

**LEGAL SERVICES AGREEMENT BETWEEN LAKE SHORE HOSPITAL
AUTHORITY OF COLUMBIA COUNTY AND ROBINSON, KENNON &
KENDRON, P.A.**

This Agreement for Legal Services is entered into between Lake Shore Hospital Authority of Columbia County (hereinafter the "Authority"), a body politic of the State of Florida, and Robinson Kennon & Kendron, P.A. (hereinafter the "Attorney"), a law firm authorized to practice law in the State of Florida, and collectively referred to herein from time to time as the "Parties", in accordance with the provisions and requirements of the Authority's enabling legislation (HB 999, Ch. 2005-315) and bylaws (*2013 Amended and Restated Bylaws of Lake Shore Hospital Authority of Columbia County, Florida*).

WITNESSETH

WHEREAS, the Authority procures an Attorney as it deems necessary, to act as a legal advisor, and provide the Authority and its officers and agencies, with legal advice and services required from time to time relating to the operation of the Authority; and

WHEREAS, the Authority advertised a solicitation, RFP 2022-001, to procure an attorney and a proposal was received from the Attorney; and

WHEREAS, the Parties wish to enter into this Agreement memorializing the Authority and Attorney's relationship and specifying the terms and conditions of the legal services arrangement between the Parties as more particularly set forth herein; and

WHEREAS, the Parties to this Agreement believe such a contractual Agreement will be in the best interest of the Parties as well as the citizens and residents of the Authority.

NOW, THEREFORE, in consideration of the mutual covenants, promises, rights, and responsibilities of the Parties hereto, the Authority and the Attorney covenant and agree as follows:

TERM

1. The effective date of this Agreement shall be the ___ day of November 2022 and shall remain in full force and effect until terminated by either party as provided herein. The Attorney recognizes and acknowledges that the Authority reserves the right to terminate the employment of the Attorney at any time for cause or no cause upon ninety (90) days' written notice to the Attorney. The Attorney shall have the right to resign upon ninety (90) days written notice to the Authority.

2. In the event the Attorney is terminated, the Attorney shall be entitled to all compensation and expenses billed, and otherwise provided herein, within thirty (30) days of the effective date of termination.

BILLING

1. The Authority agrees to compensate the Attorney for services rendered and costs incurred as follows:

A. A monthly flat fee of \$750.00, which shall include the Attorneys attendance at one (1) meeting of the Authority's Board and the Attorney's availability for routine telephone calls and inquiries; and

B. All other services are to be billed as follows:

- a. Attorneys administrative billing rate of \$165.00 per hour;
- b. Attorneys litigation billing rate of \$200.00 per hour;
- c. Paralegals, legal assistants, and legal clerks billing rate of \$60.00 per hour;

C. Costs incurred are to be billed as follows:

- a. Copying costs \$0.20 per copy;
- b. Travel mileage at the then-current IRS allowance;
- c. All other costs and expenses at the actual amount incurred.

2. The billing rates shall be adjusted annually effective the first (1st) day of October. The first annual adjustment shall cause the flat fee to increase to \$1,000.00 per month, and the hourly rates shall increase by \$15.00. Each annual adjustment shall cause the billing rates to increase in accordance with the Consumer Price Index - Urban (CPI-U) for August (released in September) by multiplying the then current administrative billing rate for services by the total percentage increase in the CPI-U for August (released during September) as published by the U.S. Department of Labor, Bureau of Labor Statistics.

3. Each monthly invoice shall itemize the services rendered pursuant to subsection 1.B. of this section by providing the nature of the services rendered, the date such service was rendered, and the amount of time expended in providing the services.

4. Each monthly invoice shall itemize all expenses and costs incurred.

5. The invoice shall be due upon receipt. The Authority agrees to pay the bill no later than the thirtieth (30th) day from the date it was submitted to the Authority. All invoices not paid within thirty (30) days from the billing shall bear interest on the unpaid balance at one and one-half percent (1 1/2%) per month. Interest will be applied monthly to any unpaid balance. The Authority further agrees to timely pay all invoices as required by and be subject to the provisions of Part VII, Chapter 218, Florida Statutes, referred to as the "Local Government Prompt Payment Act". The failure to pay any invoice for fees and costs rendered to the Authority in accordance with this Agreement will constitute a default by the Authority. In the event of default, the Authority consents to the Attorney's immediate cessation of all legal services on the Authority's behalf and to Attorney's withdrawal as the Authority's counsel from all pending litigation.

GENERAL

1. The Attorney shall keep the Authority informed of the status of the Authority's matters and will send the Authority, copies of all correspondence and pleadings related to the representation of the Authority so that the Board and Authority staff will be aware of the Authority's legal affairs.

2. During the course of the Authority's matters, the Authority may be required to provide to the Attorney documents such as tax records, expense records, bank records, deeds, etcetera. The Attorney will hold the records for the Authority during the pendency of the Authority's action. The Authority shall not provide the Attorney with original records unless specifically requested, in writing, to do so by the Attorney.

3. The Attorney shall strive to complete the Authority's work as expeditiously as possible at a fair and reasonable cost in accordance with the aforementioned rates.

4. In the event the Attorney is unavailable to attend any meetings of the City, the Attorney will designate a licensed and insured attorney to attend. At times, the Attorney may find that outside legal services are necessary to provide the highest quality of legal services to the Authority, and the Attorney and Authority shall strive to find competent outside legal services pursuant to the Authority's procurement policy. Additionally, the Attorney shall oversee all legal services provided by any outside legal service provider. If requested by the Authority's Board, legal fees and costs incurred by any such outside attorney shall be invoiced to the Authority in care of the Attorney, the amount of which

shall be included on the Attorney's invoice for services rendered and remitted to the outside attorney by the Attorney.

BENEFITS

The Attorney is an independent contractor and neither it nor any of its associates who have been appointed assistant Attorneys shall be entitled to those benefits afforded to full-time Authority employees.

CONTINUING LEGAL EDUCATION

The Authority agrees to reimburse the Attorney for the costs associated with continuing professional development and education in the legal areas of government and special districts by reimbursing the Attorney for the costs associated with registration fees, lodging, travel, and meals associated with a total of two (2) annual continuing legal education conferences in the aforementioned legal areas. Should the Authority desire to have the Attorney attend additional special educational programs, which would be of special benefit to the Authority with respect to legal issues, the Authority agrees to reimburse the Attorney for the costs associated with registration fees, lodging, travel, and meals associated with any additional special educational programs requested and approved by the Authority.

TERMINATION

Either party may terminate this Agreement upon providing written notice to the other party with a minimum of ninety (90) days' notice. The notice shall include the effective date of termination.

REPRESENTATION - CONFLICT OF INTEREST

1. The parties agree that the Attorney will not undertake future representation nor continue the present legal representation of any person or entity in a matter adverse to the Authority's legal interest during the term of this Agreement.

2. The Attorney agrees not to represent or provide legal services to any third party in any matters adverse to the interest of the Authority. If the Attorney becomes aware of any such conflict of interest, the Attorney will advise the Board and recuse themselves from any representation relating to the matter creating the conflict.

INSURANCE - PROFESSIONAL LIABILITY

The Attorney shall maintain professional liability insurance in a sum of no less than \$1,000,000.00, aggregate claims, and shall upon request provide a copy of the policy or certificate thereof to the Authority. If the Attorney's professional liability policy covers multiple attorneys, it shall not be necessary for each attorney to maintain separate coverage.

PUBLIC RECORDS

PUBLIC RECORDS CUSTODIAN

IF THE ATTORNEY HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE ATTORNEY'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT:

**Lake Shore Hospital Authority
PO Box 988
Lake City, Florida 32056
386-755-1090
Dale@lakeshoreha.org**

1. The Attorney shall comply with all laws allowing the public access to public records, specifically including, but not limited to Sections 119.0701, and 119.07(1), Florida Statutes Section 24(a) of Art. I of the Florida State Constitution. Notwithstanding any other termination provision in this Agreement, the Authority may unilaterally cancel this Agreement for refusal by the Attorney to comply with this section by not allowing public access to all documents, papers, letters, or other material made or received by the Attorney in conjunction with this Agreement unless the records are exempt. The Attorney agrees to comply with any requirements of the law including, but not limited to, the following:

A. Keep and maintain public records required by the Authority in order to perform the service.

B. Upon request from the Authority's custodian of public records, provide the Authority with a copy of requested records or allow the records to be inspected or copied within a reasonable time at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes, or as otherwise provided by law. The Authority may be billed in accordance with the rates reflected herein for the Attorney's or assistant Attorney's time.

C. Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the agreement term and

following termination of the Agreement if the Attorney does not transfer the records to the Authority.

If the Attorney considers any portion of any documents, data, or records submitted to the Authority to be confidential, proprietary, trade secret or otherwise not subject to disclosure pursuant to Chapter 119, Florida Statutes, the Florida Constitution, or other law, the Attorney and must simultaneously provide the Authority with a separate redacted copy of the information it claims as confidential and briefly describe in writing the grounds for claiming exemption from the public records law, including the specific statutory citation for such exemption. This redacted copy shall contain the contract name, and contract number, and shall be clearly titled "Confidential." The redacted copy should only redact those portions of material that the Attorney claims are confidential, proprietary, trade secret, or otherwise not subject to disclosure.

D. Upon termination of this Agreement, transfer all public records in possession of the Attorney or keep and maintain public records required by the Authority to perform the service. If the Attorney transfers all public records to the Authority upon the termination of this Agreement, the Attorney shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If the Attorney keeps and maintains public records upon termination of this Agreement, the Attorney shall meet all applicable requirements for retaining public records. All records stored electronically must be provided to the Authority upon request from the Authority's custodian of public records in a format that is compatible with the information technology systems of the Authority.

E. Failure of the Attorney to provide the above-described public records to the Authority within a reasonable time may subject the Attorney to penalties under Section 119.10, Florida Statutes, as amended.

E-VERIFY

1. As a condition precedent to entering into this Agreement, and in compliance with Section 448.095, Florida Statutes, the Attorney and its subcontractors shall, register with and use the E-Verify system to verify the work authorization status of all employees hired after January 1, 2021.

A. The Attorney shall require each of their subcontractors to provide the Attorney with an affidavit stating that the subcontractor does not employ, contract with, or subcontract with an unauthorized alien. The Attorney shall maintain a copy of the subcontractor's affidavit as part of and pursuant to the records retention requirements of this Agreement.

B. The Authority, Attorney, or any subcontractor who has a good faith belief that a person or entity with which it is contracting has

knowingly violated Section 448.09(1), Florida Statutes, or the provisions of this section shall terminate the contract with the person or entity.

C. The Authority, upon good faith belief that a subcontractor knowingly violated the provisions of this section, but the Attorney otherwise complied, shall promptly notify the Attorney and the Attorney shall immediately terminate the contract with the subcontractor.

D. A termination of this Agreement under the provisions of this section is not a breach of contract and may not be considered such. Any contract termination under the provisions of this section may be challenged pursuant to Section 448.095(2)(d), Florida Statutes. The Attorney acknowledges that upon the termination of this Agreement by the Authority for a violation of this section by the Attorney, the Attorney may not be awarded a public contract for at least one (1) year. The Attorney further acknowledges that the Attorney is liable for any additional costs incurred by the Authority as a result of the termination of any contract for a violation of this section.

E. The Attorney or subcontractor shall insert in any subcontracts the clauses set forth in this section, including this subsection, requiring the subcontractors to include these clauses in any lower-tier subcontracts. The Attorney shall be responsible for compliance by any subcontractor or lower-tier subcontractor with the clauses set forth in this section.

CONTROLLING LAW AND VENUE

The laws of the State of Florida shall govern the construction and interpretation of this Agreement. In the event of a dispute over the terms hereof, the parties agree that the venue shall be in Columbia County, Florida, and the parties agree to waive a jury trial.

ENTIRE AGREEMENT, SEVERABILITY, AND ELECTRONIC SIGNATURE ACT

1. The Authority and the Attorney agree that this Agreement, the Authority's solicitation (RFP 2022-001), and the proposal of the Attorney encompasses the Parties' understanding of their relationship and contractual obligations and that any promises made by one party to the other party which are not included within this written Agreement are not binding upon the other party.

2. The Parties agree that should any portion of this Agreement and the Attorney's proposal conflict then the provisions of this Agreement shall be controlling.

3. The Parties agree that should any portion of this Agreement be found to be ineffective, stricken, or null and void during any dispute over this Agreement, that portion found ineffective, stricken, or null and void shall not

cause the remainder of this Agreement to be held the same, and such remaining portions of this Agreement shall remain in full force and effect.

4. This Agreement, any amendments, or change orders related to the Agreement, may be executed in counterparts, each of which shall be an original and all of which shall constitute the same instrument. In accordance with the Electronic Signature Act of 1996, electronic signatures, including facsimile transmissions, may be used and shall have the same force and effect as a written signature. Each person signing this Agreement warrants that he or she is duly authorized to do so and to bind the respective party to the Agreement.

REPRESENTATIONS AND COVENANTS OF THE ATTORNEY

The Attorney represents and warrants the following to the Authority:

A. That the attorneys employed by the Attorney are duly licensed and authorized to practice law in the State of Florida and are in good standing under the rules and regulations of The Florida Bar; and

B. That the attorneys employed by the Attorney have no pending complaints or grievances filed against them with The Florida Bar.

[Remainder of the page left blank intentionally. Signature page to follow.]

IN WITNESS WHEREOF, the parties have executed this Agreement as of the ___ day of **November** 2022.

**LAKE SHORE HOSPITAL AUTHORITY
OF COLUMBIA COUNTY**

By: _____
Brandon Beil, Chairman

ATTEST:


APPROVED AS TO FORM AND
LEGALITY:

By: _____
Loretta Chancy,
Authority Secretary

By: _____
Frederick L. Koberlein, Jr.,
Authority Attorney

**ROBINSON, KENNON & KENDRON
P.A.**

By: 
Bruce Robinson,
Director

By: 
Thomas J. Kennon, III,
Director

November 9, 2022

TO: LSHA Trustees

FR: Dale Williams

RE: Additional Information – November 14, 2022, Agenda

Please note the following information regarding specific agenda items:

1.) Contract EM PALS –

As of this date, a DRAFT agreement is not available. I am currently waiting on a response from the White's legal counsel. If time permits, I will post the response when received. **Please note that the DRAFT to be received is not in final form and is not to be considered final.** The DRAFT will serve as an update on current negotiations.

2.) Women's Center – Interior and Exterior Improvements –

Please find attached a draft of the expected costs to make needed improvements to the interior and exterior of the Women's Center. This draft contains estimates and will change as actual pricing is received. Dwayne will be at the meeting to answer questions.

3.) Meridian Behavioral Healthcare –

A letter received on November 3, 2022, from Don Savoie is attached. I am trying to establish a conference call with Don to discuss; however, I have not been able to confirm a date and time as of this date. My goal is to speak with Don prior to the Trustee meeting.

Capital Expenditures

348 NE Methodist Terr. (2 story)

Womens Center

\$	19,000	A/C UNIT
\$	4,600	Gutter repair
\$	34,900	Refresh interior
\$	23,000	Cleaning exterior
\$	15,000	Reclaim retention pond and building line of sight
\$	33,000	Interior LED Lighting
\$	4,200	Security system upgrade
\$	20,000	Refresh Ceiling grid (updated grid and tile)
TBD		Network Project with core infrastructure
\$	60,000	Painting parking lot (\$2 sq foot)
\$	38,000	repair and certify Elevators
\$	15,000	Fire System inspection/certification
\$	266,700	Total



November 3rd, 2022

Lakeshore Hospital Authority
Board of Trustees
295 NE Franklin Street
Lake City, Florida 32055

BOARD OF DIRECTORS

Christina Seifert
Chairperson
Columbia

Jeff Feller
Vice Chairperson
Alachua

Stephanie McClendon
Secretary
Suwannee

Natasha Allen
Oxje

Denise Bennett
At Large

Jason Cason
Levy

Kindall Crummey
Baker

Patricia Knight
Glychist

Paul Metts
Alachua

Bob Milner
Bradford

Irma Phillips-Maxwell
Alachua

Becky Sharpe
Lafayette

Amanda Thomas
Union County

Dear Lakeshore Hospital Trustees,

The Board of Trustees of the Lakeshore Hospital Authority at its special meeting, held on November 1st, 2022, took the unprecedented step of requiring Meridian Behavioral Healthcare to schedule, meet with, justify, and defend the proposal to establish a psychiatric hospital and other ancillary health care services to an undefined segment of the community in order that our proposal be given ongoing consideration.

This requirement for public advocacy and persuasion throughout the county was not contemplated or requested of any other respondent who submitted proposals. In our view, this is offensive and only brings to the forefront the stigma and lack of empathy or caring for a significant portion of our community suffering with mental health and substance abuse issues.

The decision to accept or reject Meridian's proposal lies with the Board of Trustees. If you, as a Board, wish to receive input from the community then you should schedule a special meeting, in whatever location you feel appropriate, to receive the feedback you feel is required for you to make an informed decision. We do not feel it appropriate to place the onus and burden on Meridian to set up and preside over random meetings with no objective criteria for collecting and reporting information back to the Board.

Meridian will be happy, as part of those meetings, to present our intentions once again for the purpose of educating the community on the merits of this plan. As the Board of Trustees has already determined, Meridian is the last viable respondent to your request for proposals on the building. If your wish is to educate and inform the community of the value in Meridian's proposal, we stand ready to work with you. However, we would be very concerned if your intent is to simply shift the responsibility of this Board to a small but very vocal group of individuals.



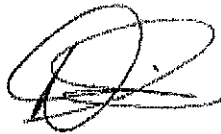
Admin Office: 1565 SW Williston Rd, Gainesville, FL 32608
352.374.5600 | 800.330.5615
TTY Area 800.955.8771 | TTY Local 800.955.8771
mbhci.org



Meridian has submitted a robust and workable plan to rehabilitate the building and provide much needed psychiatric hospital services to this community. Further, we have offered to work with other providers to offer emergency room, urgent care, pharmacy, and other desired health services in the facility as well as expressing willingness to provide training opportunities in conjunction with local colleges and universities. The proposal is solid and the only barrier to acceptance seems to be the long held and very real stigma that comes with mental illness and substance abuse.

You, as a Board of Trustees are charged with doing the right thing and certainly educating the public on those decisions is part of that charge. Meridian will stand side by side with you to accomplish that goal. We ask that you put aside the misinformation and aspersions set out against this proposal and work with us to establish a needed psychiatric/medical facility that benefits the entire community now and for years to come.

Sincerely,

A handwritten signature in black ink, appearing to read 'D. Savoie', with a stylized flourish at the end.

Donald P. Savoie
President / CEO

Staff Report
November 14, 2022, Regular Meeting

NEW	1
RENEW	5
INELIGIBLE (INCOME OR OTHER)	0
TOTAL CLIENTS SEEN IN OFFICE IN OCTOBER	6
ACTIVE MEMBERS	39
PUBLIC VISITS	24

PRIMARY CARE VISITS – 4 LOCATIONS	
September, 2022	16
YTD (Fiscal year October – Sept)	331

PHARMACY USAGE	
September, 2022	
PATIENTS SERVED	7
RX'S FILLED	18