# *Division of Community Services*

7375 Powell Road • Wildwood, FL 34785 • Phone (352) 689-4490 • FAX: (352) 689-4491
http://sumtercountyfl.gov/CommunityServices

DATE: April 4, 2011

TO: BOARD OF SUMTER COUNTY COMMISSIONERS

FROM: COMMUNITY SERVICES DIVISION

SUBJECT: HEALTH CARE RESPONSIBILITY ACT CLAIMS

- $4.00 per capita is budget allocation
- Generally claims are completed within 60 days

Eligible Individual

- Certified resident of the county
- Indigent
- Received medical care at participating hospital
- Must have been emergency medical condition
- 45 days maximum inpatient service per year

***March 2011***

| | | | | | |
|---|---|---|---|---|---|
| Total paid to Hospitals | | | $ 208.28 | | |
| LRMC | $ | 92.64 | LifeStream | $ | 0.00 |
| ORMC | $ | 92.62 | Brooksville | $ | 23.02 |
| Shands | $ | 0.00 | Tampa General | $ | 0.00 |
| Average claim | | | $ 69.43 | | |

FY 11 Maximum Liability $ 389,540.00 (per updated HCRA handbook)

Expended YTD $ 6014.85
.015 %

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