

**HEALTH CARE RESPONSIBILITY ACT
AGREEMENT TO PROVIDE EMERGENCY MEDICAL SERVICES**

between
ST. VINCENT'S MEDICAL CENTER, INC.
and
NASSAU COUNTY, FLORIDA

In order to meet the hospital participation requirements under the Health care Responsibility Act, F.S. 154 and Administrative Rule 10C-26, this agreement is entered into between St. Vincent's Medical Center, Inc., hereinafter referred to as the "hospital" and Nassau County Florida, hereinafter referred to as the "county".

A. The Hospital agrees:

1. To provide emergency inpatient hospital care to county residents who are deemed indigent and who qualify for assistance under the Health Care Responsibility Act.
2. To provide outpatient hospital care **with prior authorization** to county residents who are deemed indigent and who qualify for assistance under the Health Care Responsibility Act.
3. To comply with the statute, rules, policies, procedures and other provisions outlined by the Health Care Responsibility Act.

B. The County agrees:

1. To determine eligibility and reimburse the hospital in accordance with the Health Care Responsibility Act.
2. To reimburse the hospital at 100% of the hospital's Medicaid inpatient and outpatient per diem rates in effect at the time hospital services are rendered to county residents qualified for assistance under the Health Care Responsibility Act.
3. To send payments to:
St. Vincent's Medical Center
P.O. Box 45167
Jacksonville, FL 32232-5167



NASSAU COUNTY
BOARD OF COUNTY COMMISSIONERS
 P. O. Box 1010
 Fernandina Beach, Florida 32035-1010

Nick Deonas
 David C. Howard
 Pete Cooper
 Floyd L. Vanzant
 Marianne Marshall

Dist. No. 1 Fernandina Beach
 Dist. No. 2 Fernandina Beach
 Dist. No. 3 Yulee
 Dist. No. 4 Hilliard
 Dist. No. 5 Callahan

VIA CERTIFIED MAIL

July 14, 2000

JOSEPH M. "Chip" OXLEY, JR.
 Ex-Officio Clerk

MICHAEL S. MULLIN
 County Attorney

WALTER D. GOSSETT
 County Coordinator

Ms. Carolyn Stokes
 P.O. Box 2982
 Jacksonville, Florida 32203

Dear Ms. Stokes:

In accordance with the Health Care Responsibility Act, enclosed is the Agreement to Provide Emergency Medical Services as approved and signed by the Nassau County Board of County Commissioners at a regularly scheduled meeting held July 10, 2000.

Please sign the agreement and return the document to this office for final disposition. We will forward to you by return mail a certified, fully executed copy for your records.

Should you have any questions, please let me know.

Sincerely,

J.M. "Chip" Oxley, Jr.
 Ex-Officio Clerk

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Enclosure

*Received 7-25-00
 Copies sent to Finance,
 ms Stokes + Barbara
 @ Health Dept*

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