

Interoffice Memorandum

November 18, 2021

TO:

Mayor Jerry L. Demings

-AND-

Board of County Commissioners

THRU:

Yolanda G. Martinez, EdPhD., PhD., Director

Health Services Department

FROM:

Christian C. Zuver, M.D., Medical Director C.Z.,

Office of the Medical Director/EMS Division

Contact: 407-836-7320

SUBJECT:

November 30, 2021 — Public Hearing

Application from Osceola Regional Hospital Inc. d/b/a Osceola Regional Medical Center for a Certificate of Public Convenience and Necessity to provide interfacility Basic Life Support and Advanced Life Support

transport services.

On July 13, 2021, Osceola Regional Hospital Inc. d/b/a Osceola Regional Medical Center ("Osceola Regional" or "Applicant") submitted its amended application for a Certificate of Public Convenience and Necessity ("COPCN") to Orange County's Office of the Medical Director/EMS Division ("EMS") proposing to provide interfacility Basic Life Support ("BLS") and Advanced Life Support ("ALS") transport services within the geographical areas of and primarily transporting from Hunter's Creek Freestanding ER (12100 S. John Young Pkwy., Orlando, FL 32837) and Millenia Free-standing ER (4056 Millenia Blvd., Orlando, FL 32839) to Osceola Regional Medical Center (700 West Oak Street, Kissimmee, FL 34741) ("Application").

EMS published notice of the Application on September 5, 2021 and received two written objections: (1) on September 29, 2021, EMS received a letter from RG Ambulance Service, Inc. d/b/a American Ambulance ("American Ambulance") objecting to Osceola Regional's Application, and (2) on September 30, 2021, EMS received a letter from Lifefleet Southeast, Inc., d/b/a American Medical Response ("AMR") objecting to Osceola Regional's Application.

EMS investigated the Application, the public need for the proposed service, and the geographical area involved. EMS concluded its investigation and made a recommendation to the Orange County Board of County Commissioners ("Board" or "BCC") on October 15, 2021. EMS recommended that the Board grant Osceola

Regional's Application for a COPCN to provide interfacility BLS and ALS transport services in Orange County with certain conditions of approval as believed to be necessary by Orange County's Health Services Department including that, prior to providing any BLS or ALS interfacility transport services under the COPCN, Osceola Regional will provide the following information to EMS which shall be deemed sufficient at EMS's discretion:

- (1) A current State of Florida ALS License Number;
- (2) A current employee roster and verification that all staffing requirements have been met; and
- (3) A vehicle roster including the registration numbers of each vehicle to be used during operations.

Prior to granting any certificate of public convenience and necessity, the Board is required by Section 20-93(b) of the Orange County Code to determine that the proposed service, to the extent to be authorized by the certificate, is or will be required by the present or future public convenience or necessity, and that the applicant is financially and otherwise able to provide adequate and uninterrupted service at the times required.

ACTION REQUESTED:

Grant Osceola Regional Hospital Inc. d/b/a Osceola Regional Medical Center's Application for a Certificate of Public Convenience and Necessity to Provide Interfacility Basic and Advanced Life Support Transport Services in Orange County for a two-year term on the condition that Osceola Regional provide the following information to EMS prior to providing any BLS or ALS interfacility transport services in Orange County, which shall be acceptable to EMS at EMS's sole discretion: (1) a current State of Florida ALS License Number, (2) a current employee roster and verification that all staffing requirements have been met, and (3) a vehicle roster including the registration numbers of each vehicle to be used during operations; and authorize the County Mayor or designee to execute and issue a Certificate of Public Convenience and Necessity in accordance with applicable law and consistent with direction from, and on behalf of, the Board of County Commissioners.

Attachments

C: Byron W. Brooks, AICP, County Administrator Danny Banks, Deputy County Administrator

ORANGE COUNTY, FLORIDA CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY for

OSCEOLA REGIONAL HOSPITAL INC. D/B/A OSCEOLA REGIONAL MEDICAL CENTER

WHEREAS, Section 401.25, Florida Statutes, governs the licensure of entities providing prehospital or interfacility advanced life support ("ALS") services or basic life support ("BLS") transportation services; and

WHEREAS, Section 401.25, Florida Statutes, requires applicants for licensure to obtain a certificate of public convenience and necessity from each county in which the applicant will operate; and

WHEREAS, Section 401.25, Florida Statutes, authorizes the governing body of each county to adopt ordinances that provide reasonable standards for certificates of public convenience and necessity, and requires the consideration of state guidelines, recommendations of the local or regional trauma agency created under Chapter 395, Florida Statutes, and the recommendations of municipalities within its jurisdiction when developing said standards; and

WHEREAS, Chapter 20, Article III, Orange County Code (the "Code"), governs the application for a certificate of public convenience and necessity in Orange County, Florida ("COPCN" or "Certificate") and provides reasonable standards; and

WHEREAS, on July 13, 2021, Osceola Regional Hospital Inc. d/b/a Osceola Regional Medical Center ("Osceola Regional" or "Applicant") submitted its amended application for a COPCN to Orange County's Office of the Medical Director/EMS Division ("EMS") to provide interfacility BLS and ALS transport services within the geographical areas of and primarily transporting from Hunter's Creek Freestanding ER (12100 S. John Young Pkwy., Orlando, FL 32837) and Millenia Free-standing ER (4056 Millenia Blvd., Orlando, FL 32839) to Osceola Regional Medical Center (700 West Oak Street, Kissimmee, FL 34741) ("Application"); and

WHEREAS, EMS investigated the Application, the public need for the proposed service, and the geographical area involved. EMS notified appropriate providers, cities, and towns of the Application and published notice of the Application in the Orlando Sentinel. EMS recommended that the Orange County Board of County Commissioners ("Board" or "BCC") grant Osceola Regional's Application with certain conditions of approval; and

 WHEREAS, the Board has considered the Application, EMS's recommendation, all applicable recommendations from municipalities within Orange County, Florida (the "County"), and all applicable objections. The Board has determined that the Applicant's proposed service, to the extent authorized by this Certificate, is or will be required by the present or future public convenience or necessity. The Board has determined that the Applicant is financially and otherwise able to provide adequate and uninterrupted service as required.

NOW THEREFORE, BE IT RESOLVED BY THE ORANGE COUNTY BOARD OF COUNTY COMMISSIONERS:

- 50 Section 1. Recitals. The above recitals are hereby incorporated into this Certificate.
- 52 <u>Section 2. Application and Certificate.</u> The Board hereby grants Osceola Regional's Application for permission to provide interfacility BLS and ALS transport services in Orange
- County, Florida in accordance with the terms, conditions, and limitations of this Certificate. The Board hereby issues this Certificate to Osceola Regional Hospital Inc. d/b/a Osceola
- Regional Medical Center. The Board certifies that Osceola Regional's proposed services are for the benefit of the population of the County or the benefit of the population of some
- 58 geographic area of the County.

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- 60 <u>Section 3.</u> Term. The "Term" of this Certificate is the period of time during which this Certificate is valid and effective. This Certificate's Term shall be for a two-year period beginning
- on **December 15, 2021** and expiring on **December 14, 2023**. Notwithstanding the foregoing, the Term may expire earlier if this Certificate is suspended or revoked pursuant to Orange County Code.

66 Section 4. Conditions and Limitations.

- A. In accordance with Section 20-93, Orange County Code, the Board grants Osceola Regional's Application and issues this Certificate with certain conditions and limitations as deemed by the Board to be necessary or proper in the public interest as set forth herein.
- B. Osceola Regional shall provide the following information to EMS prior to providing any BLS or ALS interfacility transport services in the County, which shall be acceptable to EMS at EMS's sole discretion:
 - (1) A current State of Florida ALS License Number;
- (2) A current employee roster and verification that all staffing requirements have been met; and
- 82 (3) A vehicle roster including the registration numbers of each vehicle to be used during operations.
- Section 5. Indemnification. In consideration of this Certificate, which permits Osceola Regional to provide BLS and ALS interfacility transport services in Orange County, pursuant to Section 20-93, Orange County Code, and to the fullest extent permitted by law, Osceola Regional agrees to defend, indemnify, and hold harmless the County, its officials, agents, and
- employees from and against any and all claims, suits, judgments, demands, liabilities, damages,
- or indirectly out of or caused in whole or in part by any act or omission of Osceola Regional or
- its subcontractors (if any), anyone directly or indirectly employed by them, or anyone for whose acts any of them may be liable; excepting those acts or omissions arising out of the sole negligence of the County.
- Section 6. Compliance with Laws. By accepting this Certificate or providing BLS or ALS interfacility transport services in Orange County pursuant to this Certificate, Osceola Regional agrees to comply with all applicable state and local laws and regulations.

.00	ADOPTED THIS DAY	Y OF	, 2021.
102			
104			ORANGE COUNTY, FLORIDA By: Board of County Commissioners
106			By:
108			Jerry L. Demings
110			Orange County Mayor
112	ATTEST: Phil Diamond, CPA, County Co	omotroller	
114	As Clerk of the Board of County Commis		
116	By: Deputy Clerk		
118	Dopaty Clork		



Crystal Ford, Compliance Officer Orange County EMS 2002-A E. Michigan Street Orlando, FL 32806 June 25, 2021

RE: Application for Orange County COPCN for Osceola Regional Medical Center

Dear Ms. Ford:

Attached, please find our application for Certificate of Public Convenience and Necessity (COPCN) for provision of emergency medical patient transportation services by Osceola Regional Medical Center.

Osceola Regional Medical Center is seeking approval to initiate transportation services for transport between HCA freestanding emergency rooms and HCA affiliated Hospitals. Initially, this ambulance service would provide Advanced Life Support and Basic Life Support Interfacility transportation services of admitted patients from our Freestanding ERs to our main hospital, Osceola Regional Medical Center. As we further develop the service, it will provide patient transportation services for patients between all HCA affiliated FSERs and Hospital facilities in Central Florida in service counties of Orange, Osceola, Polk and Seminole.

Your review and approval of our application will be appreciated.

If you have any questions concerning this application or require additional information, please contact myself or Keri Pintozzi, Assistant Chief Financial Officer at (407) 518-3520.

Sincerely,

Davide M. Carbone, FACHE Chief Executive Officer



APPLICATION FOR CERTIFICATE OF CONVENIENCE AND NECESSITY FOR AMBULANCE AND FIRE/RESCUE SERVICES

	ATION DATE: 06/25/2021		
OPO	SED DATE OPERATIONS WILL BEGIN: 08/01/2021		
CTI	ON I: GENERAL INFORMATION		
1.	NAME OF SERVICE: Osceola Regional Medical Center Inter-facility Transport		
2.	. BUSINESS ADDRESS (INCLUDE COUNTY):		
	700 West Oak Street, Kissimmee, Florida 34741 (Osceola)		
3.	CONTACT INFORMATION: Business Phone 407-518-3520		
	Mobile Phone 407-433-9219		
	Email Keri.Pintozzi@hcahealthcare.com		
4.	OWNERSHIP TYPE: PRIVATE CORPORATION GOVERNMENT AGENCY GOTHER		
	a. If other, please describe:		
5.	LEVEL OF SERVICE: □ALS TRANSPORT □ALS TRANSPORT (INTERFACILITY)		
	□BLS TRANSPORT □BLS TRANSPORT (INTERFACILITY) □ALS NON-TRANSPORT □BLS NON-TRANSPORT □ALS AIR TRANSPORT		
6.	CORPORATE OFFICERS AND DIRECTORS:		
7.	NAME ADDRESS POSITION See attached for list of Corporate Officers and Directors (Attachment A)		

8.	DESCRIBE THE PROPOSED GEOGRAPHIC AREA OR AREAS TO BE COVERED BY YOUR SERVICE:
	Primarily transporting from: Hunter's Creek Freestanding ER (12100 S. John Young Pkwy., Orlando, FL 32837) and Millenia Free-standing ER (4056 Millenia Blvd., Orlando, FL 32839) To: Osecola Regional Medical Center (700 West Oak Street, Kissimmee, FL 34741) (Osceola and Orange Counties)
9.	STATEMENT OF FACTS SHOWING THE DEMAND OR NEED FOR THE PROPOSED SERVICE:
	This service would provide inter-facility transportation (Advanced Life Support and
	Basic Life Support Services) of emergency room patients and patients to be
	admitted from Hunter's Creek and Millenia Free-standing ERs to main hospital, Osceola
	Regional Medical Center. Eventually to transport to and from other HCA facilities.
	(NUMBER AND TYPE OF UNITS, STATION LOCATION, ETC): Purchase of 2 Wheeled Coach Citymedic Type III Ambulances Initial station locations: Osceola Regional Medical Center - 700 West Oak Street, Kissimmee, Florida 32741 (main) Hunter's Creek Free-standing ER - 12100 S. John Young Pkwy, Orlando, FL 32837 (satellite 1)
	Millenia Free-standing ER - 4056 Millenia Blvd., Orlando, FL 32839 (satellite 2)
11	NUMBER OF VEHICLES IN OPERATION: 2 (initially)
12	. EMPLOYEE ROSTER (please attach extra sheets as needed):
	NAME CURRENT CPR CARD (Y/N)
tart	up operations - hiring process has not begun. Will hire to staff both ambulances 24/7

SECTION II: REQUISITES TO OBTAINING LICENSE

1.	RATE CHART PROVIDED TO EMS OFFICE:		Initally, Osceola Regional Medical Center is requesting	
	☐ YES, DATE:	☑ NO	Internal facility transport only and will not bill to any patients for services from Satellite locations to Main campus.	
2.	REFERENCES/LETTERS OF SUPPORT SUBMITT	ED TO E	MS OFFICE (Attachment I):	
	☐ Business or work references for 5 year	rs, includ	ling one letter of reference	
	☐ Five personal references, including or	ne letter	of reference	
	☑ Five credit references, including one I	etter of	reference	
3.	BUSINESS AGREEMENT LETTER PROVIDED TO	EMS OF	FICE (INTERFACILITY ONLY,	
	Attachment V):		Initially, Business Agreement Not Applicable du to Intrafacility transport between Freestanding	
	☐ YES, DATE:	☑ NO	Emergency Rooms (which is a department of the Main Hospital) and the Main Hospital	
4.	ATTESTATION THAT PARAMEDICS ARE STATE CERTIFIED PROVIDED TO EMS OFFICE (ALS			
	ONLY, Attachment IV): All Paramedics to be h	ired will b	e state certified. Hiring has not begun.	
	☑ YES, DATE: Can provide when onboarding	□ NO		
5.	EQUIPMENT LIST PROVIDED TO EMS OFFICE	(ALS ON	LY, Attachment IV):	
	☑ YES, DATE: 06/25/2021	□NO		
6.	FINANCIAL STATEMENT SUBMITTED TO EMS	OFFICE:	(Attachment B)	
	☑ YES, DATE: 06/25/2021	□NO		
	Example: Current letter from bank verifying numbers please).	business	account status (no account	
7.	PROOF OF INSURANCE SUBMITTED TO EMS	OFFICE:	(Attachment VI)	
	☑ YES, DATE: 06/25/2021	□NO		

ATTACHMENT I: REFERENCES

ss references. Submission of at leas	t one letter of referenc
ADDRESS	PHONE
Submission of at least one letter of	reference from list belo
ADDRESS	PHONE
	ADDRESS

4. Please supply a current financial statement. See Attachment B

ATTACHMENT II: COMMUNICATION CAPABILITIES

	700 West Oak Street, Kissimmee, Florida 34741 Hours 24/7
	tte 1: (Hunter's Creek ER) 12100 S. John Young Pkwy., Orlando, FL 32837 Hours: 24/7
	te 2: (Millenia ER) 4056 Millenia Blvd., Orlando, FL 32839 Hours: 24/7 LL HOSPITALS TO WHICH YOU WILL NORMALLY TRANSPORT PATIENTS:
.131 M	LE HOSPITALS TO WHICH TOO WILL NORWALLY TRANSPORT PATIENTS:
N/A	New service
COMI	MUNICATIONS EQUIPMENT: ØTELEPHONE ØTWO-WAY RADIO ØTHER
a.	Number of vehicles equipped with two-way radios: 2
h	Frequency(s): 000464.73750000, 000462.13750000
C.	Call numbers: WRCK597
d.	Number of vehicles equipped with mobile phones: 2
APPR	DXIMATE DATE FCC RADIO LICENSE WILL BE EFFECTIVE (ATTACH IF CURRENT):
See	Attachement D
LICT O	ALL HOSPITALS, SUPERVISING PHYSICIANS, AND OTHER EMERGENCY AGENCIES
LIST F	the front tribe, but hit to the first of the british and a free front from the

ATTACHMENT III (ALS ONLY): ADVANCED LIFE SUPPORT CERTIFICATION AND LICENSURE REQUIREMENTS

1.	IF LICENSED AMBULANCE SERVICE IN THE STATE OF FLORIDA, PROVIDE CURRENT ALS NUMBER: Filing application with State of Florida (pending)
2.	PROVIDE THE NAME, ADDRESS, PHONE NUMBER AND FLORIDA MEDICAL LICENSE NUMBER OF YOUR MEDICAL DIRECTOR:
	David Lane, MD, Chief of Emergency Department. ME138099
	700 West Oak Street, Kissimmee, Florida 34741, 727-503-6363
3.	DESCRIBE THE STAFFING PATTERNS TO ASSURE COMPLIANCE WITH EMTS, DRIVERS,
	AND PARAMEDICS:
	Staffing coverage for 24/7/365
4.	PROVIDE A STATEMENT SIGNED BY THE ALS PROVIDER AND IT'S MEDICAL DIRECTOR
	ATTESTING TO THE FACT THAT ALL UTILIZED PARAMEDICS ARE CERTIFIED AND
	AUTHORIZED TO PERFORM ADVANCED LIFE SUPPORT IN THE STATE OF FLORIDA (Attachment E)
5.	PROVIDE A LIST OF ALL EQUIPMENT AND DRUGS CARRIED IN ADDITION TO THE
	MINIMUM EQUIPMENT SPECIFIED IN FLORIDA ADMINISTRATIVE CODE 64J-1.003 (Attachment IV)

ATTACHMENT IV (INTERFACILITY ONLY): BUSINESS AGREEMENT – Provide a written business agreement between the applicant and participating facilities

Not applicable

<u>ATTACHMENT V: VEHICLE ROSTER – Provide a roster including</u> <u>make, model, mileage, and all vehicle identification and</u> <u>registration numbers</u>

See attached

ATTACHMENT VI: PROOF OF INSURANCE – Provide a copy of vehicle liability insurance

See attached

<u>ATTACHMENT VII: RATE CHART – A proposed schedule of</u>
<u>rates, fares, and charges (if applicable)</u>

Not applicable

APPLICATION FOR CERTIFICATE OF CONVENIENCE AND NECESITY FOR AMBULANCE AND FIRE RESCUE:

I, the undersigned representative of the service named in this application, do hereby attest the information provided in this application is truthful and honest to the best of my knowledge, and that my service meets all of the requirements for operation of ambulance or fire rescue service in Orange County and the State of Florida. I acknowledge that as provided in Orange County Code of Ordinances Chapter 20, Division 2, Section 20-91, licenses obtained by an application in which any material fact was intentionally omitted or falsely stated are subject to revocation.

SIGNATURE OF APPLICANT OR REPRESENTATIVE

1/25/2021

NAME AND TITLE

DATE

NOTARY SEAL

NOTARY SIGNATURE



ATTACHMENT A

Corporate Officers and Directors

OFFICERS AND DIRECTORS OF OSCEOLA REGIONAL HOSPITAL, INC.

* Samuel N. Hazen	President	One Park Plaza Nashville, TN 37203
Charles J. Hall	Senior Vice President	One Park Plaza Nashville, TN 37203
Richard Hammett	Senior Vice President	101 N. Monroe St, Ste 801 Tallahassee, FL 32301
A. Bruce Moore, Jr.	Senior Vice President	One Park Plaza Nashville, TN 37203
J. William B. Morrow	Senior Vice President and Treasurer	One Park Plaza Nashville, TN 37203
Joseph A. Sowell, III	Senior Vice President	One Park Plaza Nashville, TN 37203
Robert A. Waterman	Senior Vice President	One Park Plaza Nashville, TN 37203
* Christopher F. Wyatt	Senior Vice President	One Park Plaza Nashville, TN 37203
Kevin A. Ball	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203
Mike T. Bray	Vice President	One Park Plaza Nashville, TN 37203
Davide Carbone	Vice President	700 W. Oak Street Kissimmee, FL 34741
Monica Cintado	Vice President	One Park Plaza Nashville, TN 37203
Natalie H. Cline	Vice President and Secretary	One Park Plaza Nashville, TN 37203
John L. Crothers	Vice President	One Park Plaza Nashville, TN 37203
Jaime DeRensis	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203
Kristin Dyer	Vice President	101 N. Monroe St, Ste 801 Tallahassee, FL 32301
* John M. Franck II	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203

Shirley Fuller Cooper	Vice President	One Park Plaza Nashville, TN 37203
Dennis Green	Vice President	One Park Plaza Nashville, TN 37203
Ronald Lee Grubbs, Jr.	Vice President	One Park Plaza Nashville, TN 37203
John M. Hackett	Vice President	One Park Plaza Nashville, TN 37203
Seth A. Killingbeck	Vice President and Assistant Secretary	One Park Plaza Nashville, TN 37203
L. Erik Larsen	Vice President	One Park Plaza Nashville, TN 37203
T. Scott Noonan	Vice President	One Park Plaza Nashville, TN 37203
Nicholas L. Paul	Vice President	1100 Dr. Martin L. King, Jr. Blvd Suite 1500 Nashville, TN 37203
Ricardo Pavon	Vice President	One Park Plaza Nashville, TN 37203
Doug L. Downey	Assistant Secretary	One Park Plaza Nashville, TN 37203
Deborah H. Mullin	Assistant Secretary	One Park Plaza Nashville, TN 37203
Shirley Scharf Cheatham	Assistant Secretary	One Park Plaza Nashville, TN 37203
John I. Starling	Assistant Secretary	One Park Plaza Nashville, TN 37203

*Directors

Persons employed in the capacity of Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Administrator and Assistant Administrator of facilities owned and/or operated by this Company or by a partnership for which this Company acts as general partner or by a limited liability company for which this Company acts as managing member, are hereby authorized to, subject to the Company's policies and procedures, (a) manage the facilities and all day-to-day operations of, and the employees and agents of the Company at, such facilities, and take such other acts as are necessary or appropriate for the proper functioning of the facilities, and (b) negotiate and enter into contracts and agreements necessary to conduct the day-to-day business of such facilities, including, but not limited to, physician contracts, personal property leases, purchase agreements, cost reports, and similar documents (but specifically excluding any contracts or leases relating to real estate, except for leases to tenants in buildings owned by or leased to the Company entered into pursuant to the Company's policies and procedures) which with the advice of legal counsel shall be deemed appropriate and advisable, and to execute and deliver Certificates of Resolution required in connection with such contracts and agreements.

ATTACHMENT I

Business/Work References

Personal References

Credit References



June 21, 2021

Orange County
Mayor Demmings, and
Board of County Commissioners
c/o Crystal Ford – Orange County EMS Compliance Officer
201 S. Rosalind Avenue
Orlando, FL 32801

Re: Osceola Regional Medical Center - COPCN Application

Dear Mayor Demmings and Commissioners:

It is a privilege to write this letter in support of Osceola Regional Medical Center and their request to obtain a Certificate Of Public Convenience and Necessity (COPCN) for Orange County. The Medical Center desires to initiate an Interfacility Ambulance Transport Service between its two Freestanding Emergency Rooms; Hunter's Creek ER and Millenia ER, to the Main Hospital campus in Osceola County. Osceola Regional Medical Center has already received their COPCN from Osceola County and the hospital is in the process of acquiring its Advanced / Basic Life Support Service License from State of Florida, Department of Health, and Emergency Medical Services.

The undersigned Physicians are not employees of the hospital. We each provide services to Osceola Regional Medical Center though a variety of individual Professional Service Agreements, including Physician staffing and coverage for; Emergency Services, Anesthesia Services, Hospitalists Services, Pathology Services and Radiology Services. We are therefore separate businesses providing services for Osceola Regional Medical Center.

I am Osceola Regional's Chief of Emergency Department, providing physician services and medical oversite of the Main ED, and our two Free Standing ERs. I also have been appointed the Medical Director for the Medical Center's new Interfacility Ambulance Transportations Service. I will provide oversite of all of the clinical policies used in this service. I have significant past experience, working in this same role for a large ambulance service in Washington DC, and the state of Maryland. I am writing on behalf of the physicians listed below, all who are in support of Osceola Regional Medical Center's COPCN application.

The Medical Center is now in the process of purchasing two new Type III ambulances from Wheeled Coach (based in Orlando) and is acquiring all the additional equipment, supplies and staff, and is developing policies and procedures needed to operate this service in a safe and efficient manner.

We are confident that this Interfacility Ambulance Transport will become another successful service offering for the community and patients the Medical Center serves. This service will help expedite

transfers between Osceola's Free-Standing ERs and the main hospital for those patients needing a higher level of care or additional specialists. This Interfacility transport capacity will ensure the patient transportation is efficient and safe, with direction provided by the Medical Center's own team of hospital-based clinician.

Your review and approval of Osceola Regional Medical Center's COPCN application will be appreciated.

Sincerely,

David Lane, MD

Chief of Emergency Department

On behalf of:

Tejal Patel, MD Chief of Radiology

Jamie Pulaski, MD **Chief of Anesthesia Services**

Mohammed Sharif, MD **Chief of Intensivist Services**

Maria Wallis-Crespo, MD **Chief of Pathology Services**

Zeeshan Zafar, MD **Chief of Hospitalist Services**

Cc; Davide Carbone Osceola Regional Medical Center, Chief Executive Officer

Nicole H. Wilson Orange County Commissioner - District 1 (Hunter's Creek ER)

Victoria P. Siplin Orange County Commissioner - District 6 (Millenia ER) **Christine Moore** Orange County Commissioner - District 2

Orange County Commissioner - District 3 Mayra Uribe Maribel Gomez Cordero Orange County Commissioner - District 4

Emily Bonilla Orange County Commissioner - District 5

III NELSON MULLINS

Jo O. Thacker (407) 839-4230

lo.thacker@nelsonmullins.com

NELSON MULLINS RILEY & SCARBOROUGH LLP ATTORNEYS AND COUNSELORS AT LAW

390 North Orange Avenue, Suite 1400 Orlando, FL 32801 T 407.839.4200 F 407.425.8377 nelsonmullins.com

June 23, 2021

Orange County
Mayor Jerry L. Demings and
Board of County Commissioners
c/o Crystal Ford – Orange County EMS Compliance Officer
201 S. Rosalind Avenue
Orlando, FL 32801

Re: Osceola Regional Medical Center - COPCN Application

Dear Mayor Demings:

It is a privilege to write this letter in support of Osceola Regional Medical Center and its request to obtain a Certificate of Public Convenience and Necessity (COPCN) from Orange County. The Medical Center desires to initiate an Inter-facility Ambulance Transport Service between its two Freestanding Emergency Rooms; Hunter's Creek ER and Millenia ER, to the Main Hospital campus in Osceola County. Osceola Regional Medical Center has already received a COPCN from Osceola County and the hospital is in the process of acquiring its Advanced / Basic Life Support Service License from State of Florida, Department of Health, and Emergency Medical Services.

I have been on the Board of Trustees of Osceola Regional Medical Center for 7 years and have been the Chairperson since January 2021. I am writing on behalf of the entire voluntary Board of Trustees in support of this application. In fact, our Board recently passed a resolution (attached) in support of this application and the Board Members on the attached resolution are adding their individual names as members of our community in support as well.

Osceola Regional Medical Center ("Medical Center") is the oldest (88 years) and largest (404 bed) and most comprehensive Hospital in Osceola County. In addition to the current free Standing Emergency Rooms; Hunter's Creek ER (opened in 2014) and Millenia ER (opened in 2019), Osceola Regional is the only Trauma facility and the only teaching hospital in our county, with over 190 physician Residents and Fellows in affiliation with the University of Central Florida – College of Medicine. In addition to a Trauma Level II service, our Medical Center offers numerous services, including; Certified Comprehensive Stroke Center, High Risk OB and Level III NICU, CV surgery, Cardiac Cath, EP and Structural Heart programs, Behavioral Health services and an Acute Physical Therapy Rehabilitation Medicine unit, among many other services.

Orange County, Board of County Commissioners c/o Crystal Ford – Orange County EMS Compliance Officer Re: Osceola Regional Medical Center - COPCN Application June 23, 2021 Page 2 of 2

The Medical Center is now in the process of purchasing two new Type III ambulances from Wheeled Coach (based in Orlando) and is acquiring all the additional equipment and supplies as well as personnel to fully equip and staff the ambulances. Policies and procedures will be in place to operate this service in a safe and efficient manner.

I have confidence that Inter-facility Transport will become another successful service offering for the community and patients the Medical Center serves. This service will help expedite transfers between the Medical Center's Free Standing ERs and the main hospital for those patients needing a higher level of care or additional specialists. This Inter-facility transport will ensure the patient transportation is timely and provided by the Medical Center's own team of hospital based clinicians.

Your review and approval of Osceola Regional Medical Center's COPCN application will be greatly appreciated.

Sincerely,

Jo Thacker

go O. Macker

Chairperson - Board of Trustees

Cc; Davide M. Carbone
Nicole H. Wilson
Victoria P. Siplin
Christine Moore
Mayra Uribe

Chief Executive Officer, Osceola Regional Medical Center
Orange County Commissioner - District 1 (Hunter's Creek ER)
Orange County Commissioner - District 2
Orange County Commissioner - District 3

Maribel Gomez Cordero Orange County Commissioner - District 4
Emily Bonilla Orange County Commissioner - District 5

Osceola Region Medical Center Board of Trustees

Resolution

Initiation of Inter-Facility Ambulance Transportation and the acquisition of required COPCN from Orange County June 17, 2021

We the undersigned members of the Board of Trustees of Osceola Regional Medical Center, based in Kissimmee, Florida are in support of, and have unanimously approved and passed this Board Resolution for Osceola Regional Medical Center ("Medical Center") to apply for and obtain the required Certificate Of Public Convenience and Necessity (COPCN) and to initiate an Inter-facility Ambulance Transport Service between its affiliated facilities, including the Hunter's Creek ER and the Millenia ER.

In support of this, the Medical Center has received the required COPCN from Osceola County, and is now applying for a COPCN from Orange County. It is also in the process of Purchasing 2 Type III ambulances and all required equipment, supplies, and staff, needed to operate a safe and efficient ambulance transportation service.

This new Inter-facility Ambulance Transport Service will offer the community and the Medical Center's patients a safe, reliable, timely, efficient and high quality transportation service to expedite transfers between the Free Standing ERs and the main hospital for those patients needing a higher level of care or additional specialists.

Motion brought forth, Seconded and Unanimously Passed On this 17th Day of June, in the year 2021.

Jo Thacker, Board Chair Attorney, Nelson Mullins, Orlando, FL Grant LaCert, Vice Chair Attorney, Kissimmee Utility Authority

Davide Carbone, Secretary President and CEO – Osceola Regional Medical Center Atlee Mercer, Immediate Past Chair Community Representative / Healthcare Consumer

Cheryl L. Grieb, Member

Richard Hammett, Member

Mike Horner, Member

Sayed Hussain, MD, Member

Osceola County Commissioner

President, HCA North Florida Division

CEO, Macy Island Consulting, LLC

Cardiologist, Florida Cardiology

William Munoz, MD, Member Chief of Staff, Internal Medicine, Central Florida Primary Care

John Newstreet, Member President, Osceola Chamber of Commerce Jorge Otoya, MD, Member Oncologist, Osceola Oncology Specialists

Edward Ross, MD, Member Chair of Internal Medicine, UCF College of Medicine Carlos Velez, Member Senior Group Account Executive – Orlando Magic

Chief James Walls, Member Chief, Kissimmee Fire Department

Jo Thacker, Board Chairperson

go O. Macker

Signed On Behalf of the above Board Members

Date: June 23, 2021



APPLICATION FOR CREDIT

Date:	06/25/21	
		-

GENERAL INFORMATION:

On behalf of: Osceola Regional Hospital, inc.

Applicant: Address:

HCA Healthcare One Park Plaza Nashville, TN 37203

City, State, Zip: Phone:

(615) 344-9551

Purchasing Contact:

Facility Supply Chain Director

Dun & Bradstreet:

19-430-3616

NYSE Symbol:

HCA

Payment Contact:

Joe Arcuri, AVP - Supply Chain Financial Ops

Sales Tax: HCA is a taxable corporation, unless a Sales Tax Exemption

Certificate accompanies the purchase order

BUSINESS REFERENCES:

C.R Bard Inc.

1 Executive Drive Suite 304 Chelmsford, MA 01824 Contact: Valerie Garcia Phone: (240) 526-5624

Email: AR.Covington@BD.com

Medline Industries, Inc.

One Medline Place Mundelein, Illinois 60060

Contact: Rhonda V. Hinks Phone: (847) 949-3181 Fax: (847) 949-3155

Email: RHinks@Medline.com

Johnson & Johnson Health Care Systems, Inc.

425 Hoes Lane

Piscataway, NJ 08854 **Contact: John Shipley** Phone: (732) 562-3264

Email: jshipley@its.jnj.com

Staples, Inc.

300 Arbor Lake Dr. Columbia, SC 29223 Contact: Susan Louis Phone: (941) 926-2456

Email: susan.louis@staples.com

BANK REFERENCE INFORMATION ONLY: (See instructions below)

Wells Fargo Bank 301 College Street Charlotte, NC 28288 **Balance Confirmation Services**

R4057-01N, PO Box 40028 Roanoke, VA 24022 Ph. (540) 563-7323

Fax: (844) 879-0544

In order to obtain bank reference information, the company requesting must complete SECTION 1: "REQUESTER INFORMATION" of the attached *Commercial Credit Inquiry Form. Email completed form to Cindy Butterbaugh, Administrative Assistant, HCA | Corporate Treasury Cindy.Butterbaugh@hcahealthcare.com | Ph. (615) 344-2859

OFFICERS:

Sam Hazen, President and Chief Executive Officer Bill Rutherford, Chief Financial Officer

ATTACHMENT B

Financial Statement

COMBINED FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

HCA Healthcare, Inc. Hospitals in the State of Florida Year Ended December 31, 2020 With Report of Independent Auditors

Combined Financial Statements and Supplementary Information

Year Ended December 31, 2020

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Ernst & Young LLP 222 2nd Avenue South Suite 2100 Nashville, TN 37201 Tel: +1 615 252 2000 Fax: +1 615 242 9128 ey.com

Report of Independent Auditors

Management of HCA Healthcare, Inc.

We have audited the accompanying combined financial statements of HCA Healthcare, Inc. Hospitals in the State of Florida (comprised of the hospital subsidiaries of HCA Healthcare, Inc. licensed to operate in the state of Florida as listed in Note 1 to the combined financial statements), which comprise the combined balance sheet as of December 31, 2020, and the related combined statements of income, changes in equity and cash flows for the year then ended, and the related notes to the combined financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in conformity with U.S. generally accepted accounting principles; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free of material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the combined financial position of HCA Healthcare, Inc. Hospitals in the State of Florida at December 31, 2020, and the combined results of its operations and its cash flows for the year then ended in conformity with U.S. generally accepted accounting principles.

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the combined financial statements as a whole. The accompanying supplemental combining information of HCA Healthcare, Inc. Hospitals in the State of Florida as of and for the year ended December 31, 2020 is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The Information has been subjected to the auditing procedures applied in the audit of the combined financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. In our opinion, the supplementary information is fairly stated, in all material respects, in relation to the financial statements as a whole.

May 21, 2021

Ernst + Young LLP

HCA Healthcare, Inc. Hospitals in the State of Florida Combined Balance Sheet

December 31, 2020

Assets	
Current assets:	
Cash	\$ 1,660,028
Accounts receivable	1,314,106,020
Inventories	331,506,496
Prepaid expenses and other current assets	40,701,874
Estimated receivable under	
third-party reimbursement programs, net	35,153,752
	1,723,128,170
Property and equipment, at cost:	
Land	518,521,144
Buildings	3,744,808,853
Equipment	5,187,223,204
Construction in progress	269,112,377
	9,719,665,578
Accumulated depreciation	(5,045,918,576)
	4,673,747,002
Goodwill	432,201,382
Due from an HCA Healthcare, Inc. affiliate, net	8,672,815,083
Right-of-use operating lease assets	110,987,235
Other assets	7,792,802
Total assets	\$15,620,671,674
Liabilities and equity	
Current liabilities:	
Accounts payable	\$ 442,579,863
Accrued expenses	393,519,808
Current portion of finance lease obligations	14,518,362
	850,618,033
Other liabilities	142,923,443
Finance lease obligations	30,774,123
Right-of-use operating lease obligations	85,895,215
Notes payable to an HCA Healthcare, Inc. affiliate	1,500,000
Equity Attributable to HCA Healthcare, Inc. Hospitals in the State of Florida	14,498,012,521
Noncontrolling interests	10,948,339
	14,508,960,860
Total liabilities and equity	\$15,620,671,674

Combined Income Statement

Year Ended December 31, 2020

Revenues	\$ 10,385,741,416
Salaries and benefits	3,563,446,813
Supplies	1,677,249,058
Other operating expenses	2,487,748,285
Depreciation	483,846,224
Interest expense	41,625,831
Management fees	 338,760,806
	8,592,677,017
Income before nonoperating gains and income taxes	1,793,064,399
Nonoperating gains, net	509,667,852
Income before income taxes	2,302,732,251
Provision for income taxes	523,638,769
Net income	1,779,093,482
Net income attributable to noncontrolling interests	714,562
Net income attributable to HCA Healthcare, Inc. Hospitals in the State of Florida	\$ 1,778,378,920

Combined Statement of Changes in Equity

Balance at January 1, 2020	Equity Attributable to HCA Healthcare, Inc. Hospitals in the State of Florida		Equity Attributable to Noncontrolling Interests		Total	
	\$	12,414,200,284	\$ 10,234,778	\$	12,424,435,062	
Net income		1,778,378,920	714,562		1,779,093,482	
Distributions to noncontrolling interests			(1,001)		(1,001)	
Distributions to affiliates		(165,641)			(165,641)	
Contributions from affiliates		305,598,958			305,598,958	
Balance at December 31, 2020	\$	14,498,012,521	\$ 10,948,339	\$	14,508,960,860	

Combined Statement of Cash Flows

Year Ended December 31, 2020

Operating activities	
Net income	\$ 1,779,093,482
Adjustments to reconcile net income to net cash provided by operating	
activities and nonoperating gains:	
Depreciation	495,241,497
Increase (decrease) in cash from operating assets and liabilities:	
Accounts receivable	27,122,036
Inventories	(13,653,140)
Prepaid expenses and other current assets	1,142,766
Accounts payable and accrued expenses	55,244,013
Estimated receivable under third-party reimbursement programs	(26,337,104)
Other	55,648,746
Net cash provided by operating activities and nonoperating gains	2,373,502,296
Investing activities	
Purchases of property and equipment, net	(678,504,536)
Acquistion of healthcare entities	(16,388,725)
Net cash used in investing activites	(694,893,261)
Financing activities	
Principal payments on lease obligations	(11,373,675)
Distributions to noncontrolling interests	(1,001)
Distributions to affiliates	(165,641)
Contributions from affiliates	305,598,958
Net transfers to an HCA Healthcare, Inc. affiliate	(1,973,887,991)
Net cash used in financing activities	(1,679,829,350)
Decrease in cash	(1,220,315)
Cash at January 1, 2020	2,880,343
Cash at December 31, 2020	\$ 1,660,028
Current linformation significant non-each activity	
Supplemental information, significant non-cash activity:	\$ 31,865,251
Acquisition of property and equipment, under capital lease obligation	\$ 31,865,251

Notes to Combined Financial Statements

December 31, 2020

1. Organization

HCA Healthcare, Inc. Hospitals in the State of Florida (the Florida Hospitals) reflects the combination of certain HCA Healthcare, Inc. affiliates in the state of Florida. HCA Healthcare, Inc. is a holding company whose affiliates own and operate hospitals and related health care entities. The term "affiliates" includes direct and indirect subsidiaries of HCA Healthcare, Inc. and partnerships and joint ventures in which such subsidiaries are partners. The term "HCA" refers to HCA Healthcare, Inc. and its affiliates unless otherwise stated or indicated by context. The Florida Hospitals is a group of general acute care hospitals which are located in the state of Florida.

The combined financial statements of the Florida Hospitals include the following facilities:

- Bay Hospital, Inc. d/b/a Gulf Coast Regional Medical Center
- Blake Medical Center a division of HCA Health Services of Florida, Inc. an indirect wholly owned subsidiary of HCA
- Brandon Regional Hospital a division of Galencare, Inc. an indirect wholly owned subsidiary of HCA
- Central Florida Regional Hospital, Inc.
- · Citrus Memorial Hospital, Inc.
- Columbia Hospital Corporation of South Broward d/b/a Westside Regional Medical Center
- · Englewood Community Hospital, Inc.
- · Fawcett Memorial Hospital, Inc.
- · Fort Walton Beach Medical Center, Inc.
- Galen of Florida, Inc. d/b/a St. Petersburg General Hospital
- JFK Medical Center Limited Partnership d/b/a JFK Medical Center (a Delaware limited partnership)
- Kendall Healthcare Group, Ltd. (a Florida limited partnership) a division of Columbia Hospital Corporation of Kendall—an indirect wholly owned subsidiary of HCA
- Largo Medical Center, Inc.
- Lawnwood Medical Center, Inc.
- Marion Community Hospital, Inc. d/b/a Ocala Regional Medical Center
- Memorial Hospital Jacksonville a division of Memorial Healthcare Group, Inc. an indirect wholly owned subsidiary of HCA

Notes to Combined Financial Statements (continued)

1. Organization (continued)

- Miami Beach Healthcare Group, Ltd. d/b/a Aventura Hospital and Medical Center (a Florida limited partnership) a division of Columbia Hospital Corporation of Miami Beach an indirect wholly owned subsidiary of HCA
- · New Port Richey Hospital, Inc. d/b/a Medical Center of Trinity
- · North Florida Regional Medical Center, Inc.
- Northside Hospital a division of Galencare, Inc. an indirect wholly owned subsidiary of HCA
- · Northwest Medical Center, Inc.
- · Notami Hospitals of Florida, Inc. d/b/a Lake City Medical Center
- Oak Hill Hospitala division of HCA Health Services of Florida, Inc., an indirect wholly owned subsidiary of HCA
- · Okaloosa Hospital, Inc. d/b/a Twin Cities Hospital
- Okeechobee Hospital, Inc. d/b/a Raulerson Hospital
- · Orange Park Medical Center, Inc.
- · Osceola Regional Hospital, Inc.
- Oviedo Medical Center, LLC
- Palms West Hospital Limited Partnership (a Delaware limited partnership)
- · Plantation General Hospital, Limited Partnership (a Delaware limited partnership)
- Poinciana Medical Center, Inc.
- · Putnam Community Medical Center of North Florida, LLC
- Regional Medical Center Bayonet Point a division of HCA Health Services of Florida, Inc.
 -an indirect wholly owned subsidiary of HCA
- Saint Lucie Medical Center a division of HCA Health Services of Florida, Inc. -an indirect wholly owned subsidiary of HCA
- Sarasota Doctors Hospital, Inc.
- · Sebring Health Services, LLC d/b/a Highlands Regional Medical Center
- · Sun City Hospital, Inc. d/b/a South Bay Hospital
- Tallahassee Medical Center, Inc. d/b/a Capital Regional Medical Center
- University Hospital, Ltd. (a Florida limited partnership)
- West Florida MHT, LLC d/b/a Memorial Hospital of Tampa and Tampa Community Hospital a Campus of Memorial Hospital of Tampa
- West Florida PPH, LLC d/b/a Palms of Pasadena Hospital
- West Florida Regional Medical Center, Inc. d/b/a West Florida Hospital

Notes to Combined Financial Statements (continued)

1. Organization (continued)

All significant intercompany accounts and transactions among the Florida Hospitals have been eliminated in the combined financial statements.

The Florida Hospitals provide a full range of inpatient and outpatient services as permitted by the licenses issued to the Florida Hospitals from the state of Florida. Activities associated with the provision of health care services within the hospital setting are the major and central operations of the Florida Hospitals. Revenues and expenses arise from, and are recorded based on, the Florida Hospitals activities.

The Florida Hospitals also engage in activities and transactions that do not relate to the direct care of patients within the hospital setting and are, therefore, incidental or peripheral to the Florida Hospitals' major ongoing operations. Activities and transactions that are incidental or peripheral to the operation of the Florida Hospitals are recorded as nonoperating gains or losses.

Substantially all of the Florida Hospitals' tangible assets are pledged as collateral under certain of HCA's outstanding indebtedness.

2. Accounting Policies

COVID-19 Pandemic and CARES Act Funding

On March 11, 2020, the World Health Organization designated COVID-19 as a global pandemic. Patient volumes and the related revenues for certain of our services have been and continue to be impacted. Certain portions of the Florida Hospitals' patient population, particularly segments with a high mortality risk, could remain wary of real or perceived opportunities for exposure to the virus.

The Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") provides for a deferral of payments of the employer portion of Social Security tax incurred during the pandemic, allowing half of such payroll taxes to be deferred until December 2021 and the remaining half until December 2022. At December 31, 2020, the Florida Hospitals had deferred \$109,761,000 of Social Security taxes. Additionally, the CARES Act created a payroll tax credit designed to encourage companies to retain employees during the pandemic. During the year ended December 31, 2020, the Florida Hospitals evaluated its eligibility for this credit and recorded \$14,559,000 of employee retention payroll tax credits as reductions to salaries and benefits.

The Florida Hospitals believe the extent of the COVID-19 pandemic's impact on the operating results and financial condition has been and will continue to be driven by many factors, most of which are beyond its control and ability to forecast. Because of these uncertainties, the Florida Hospitals cannot estimate how long or how severely the pandemic will impact its business. If the Florida Hospitals experience declines in cash flows and results of operations, such declines could have an impact on the inputs and assumptions used in significant accounting estimates.

Notes to Combined Financial Statements (continued)

2. Accounting Policies (continued)

Revenues

Revenues generally relate to contracts with patients in which the Florida Hospitals' performance obligations are to provide health care services to the patients. Revenues are recorded during the period the Florida Hospitals' obligations to provide health care services are satisfied. Performance obligations for inpatient services are generally satisfied over periods that average approximately five days, and revenues are recognized based on charges incurred in relation to total expected charges. Performance obligations for outpatient services are generally satisfied over a period of less than one day. The contractual relationships with patients, in most cases, also involve a thirdparty payer (Medicare, Medicaid, managed care health plans and commercial insurance companies, including plans offered through the health insurance exchanges) and the transaction prices for the services provided are dependent upon the terms provided by (Medicare and Medicaid) or negotiated with (managed care health plans and commercial insurance companies) the third-party payers. The payment arrangements with third-party payers for the services the Florida Hospitals provide to the related patients typically specify payments at amounts less than the Florida Hospitals' standard charges. Medicare generally pays for inpatient and outpatient services at prospectively determined rates based on clinical, diagnostic and other factors. Services provided to patients having Medicaid coverage are generally paid at prospectively determined rates per discharge, per identified service or per covered member. Agreements with commercial insurance carriers, managed care and preferred provider organizations generally provide for payments based upon predetermined rates per diagnosis, per diem rates or discounted fee-forservice rates. Management continually reviews the contractual estimation process to consider and incorporate updates to laws and regulations and the frequent changes in managed care contractual terms resulting from contract renegotiations and renewals.

Revenues are based upon the estimated amounts the Florida Hospitals expect to be entitled to receive from patients and third-party payers. Estimates of contractual allowances under managed care and commercial insurance plans are based upon the payment terms specified in the related contractual agreements. Revenues related to uninsured patients and uninsured copayment and deductible amounts for patients who have health care coverage may have discounts applied (uninsured discounts and contractual discounts). The Florida Hospitals also record estimated implicit price concessions (based primarily on historical collection experience) related to uninsured accounts to record self-pay revenues at the estimated amounts the Florida Hospitals expect to collect. Revenues by primary third-party payer and other (including uninsured patients) for the year ended December 31, 2020, follows:

Notes to Combined Financial Statements (continued)

2. Accounting Policies (continued)

Revenues (continued)

	2020	Ratio
Medicare	\$2,525,499,000	25%
Managed Medicare	1,980,103,000	19
Medicaid and Managed Medicaid	330,511,000	3
Managed care and other insurers	5,026,140 ,000	48
Other	523,488,000	5
Revenues	\$10,385,741,000	100%

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. Estimated reimbursement amounts are adjusted in subsequent periods as cost reports are prepared and filed and as final settlements are determined (in relation to certain government programs, primarily Medicare, this is generally referred to as the "cost report" filing and settlement process). The adjustments to estimated reimbursement amounts resulted in net increases to revenues of approximately \$70,525,000 in 2020.

The Emergency Medical Treatment and Labor Act ("EMTALA") requires any hospital participating in the Medicare program to conduct an appropriate medical screening examination of every person who presents to the hospital's emergency room for treatment and, if the individual is suffering from an emergency medical condition, to either stabilize the condition or make an appropriate transfer of the individual to a facility able to handle the condition. The obligation to screen and stabilize emergency medical conditions exists regardless of an individual's ability to pay for treatment. Federal and state laws and regulations require, and the Florida Hospitals' commitment to providing quality patient care encourages, the Florida Hospitals to provide services to patients who are financially unable to pay for the health care services they receive. Patients treated at hospitals for non-elective care, who have income at or below 400% of the federal poverty level are eligible for charity care, and the Florida Hospitals limit the patient responsibility amounts for patients to a percentage of their annual household income, computed on a sliding scale based upon their annual income and the applicable percentage of the federal poverty level. The federal poverty level is established by the federal government and is based on income and family size. Because the Florida Hospitals do not pursue collection of amounts determined to qualify as charity care, they are not reported in revenues. The Florida Hospitals provide discounts to uninsured patients who do not qualify for Medicaid or charity care. The Florida Hospitals may attempt to provide assistance to uninsured patients to help determine whether they may qualify for Medicaid, other federal or state assistance, or charity care. If an uninsured patient does not qualify for these programs, the uninsured discount is applied.

Notes to Combined Financial Statements (continued)

2. Accounting Policies (continued)

Revenues (continued)

The collection of outstanding receivables from Medicare, Medicaid, managed care payers, other third-party payers and patients is the Florida Hospitals' primary source of cash and is critical to its operating performance. The primary collection risks relate to uninsured patient accounts, including patient accounts for which the primary insurance carrier has paid the amounts covered by the applicable agreement, but patient responsibility amounts (deductibles and copayments) remain outstanding. Implicit price concessions relate primarily to amounts due directly from patients. Estimated implicit price concessions are recorded for all uninsured accounts, regardless of the aging of those accounts. Accounts are written off when all reasonable collection efforts have been performed.

The estimates for implicit price concessions are based upon management's assessment of historical writeoffs and expected net collections, business and economic conditions, trends in federal, state and private employer health care coverage and other collection indicators. The results of detailed reviews of historical writeoffs and collections are the primary source of information in estimating the collectability of the accounts receivable. The Florida Hospitals perform the hindsight analysis quarterly, utilizing rolling twelve-months accounts receivable collection and write-off data. The Florida Hospitals believe the quarterly updates to the estimated implicit price concession amounts provide reasonable estimates of the revenues and valuations of the accounts receivable. These routine, quarterly changes in estimates have not resulted in material adjustments to the valuations of the accounts receivable or results of operations.

To quantify the total impact of uninsured accounts, the Florida Hospitals believe it is beneficial to view total uncompensated care, which is comprised of charity care, uninsured discounts and implicit price concessions. Total uncompensated care for the year ended December 31, 2020 was \$9,594,514,000. The estimated cost of total uncompensated care for the year ended December 31, 2020, was approximately \$778,047,000 (including \$381,206,000 related to charity care). These estimates are based on the cost-to-charges ratio of patient care costs; including salaries and benefits, supplies, other operating expenses and depreciation, to gross patient charges.

Nonoperating Gains, net

Nonoperating gains represent the net results of operations from activities or transactions incidental or peripheral to the direct care of patients within the hospital setting and are primarily comprised of property management activities, rental activities, contract services to other providers, interest income and certain interest expense on amounts due from/to an HCA affiliate.

Notes to Combined Financial Statements (continued)

2. Accounting Policies (continued)

Accounts Receivable

The Florida Hospitals receive payment for services rendered from federal and state agencies (under the Medicare, Medicaid and other programs), managed care health plans, commercial insurance companies, employers and patients. The Florida Hospitals recognize that revenues and receivables from government agencies are significant to the Florida Hospitals' operations, but do not believe there are significant credit risks associated with these government agencies. During 2020, approximately 14% and 12% of the Florida Hospitals' revenues related to patients participating in each of the BlueCross and United programs, respectively. The Florida Hospitals do not believe there are any other significant concentrations of revenues from any particular payer that would subject the Florida Hospitals to any significant credit risks in the collection of its accounts receivable. Changes in general economic conditions, patient accounting service center operations, payer mix, or federal or state governmental health care coverage could affect the Florida Hospitals' collection of accounts receivable, cash flows and results of operations.

Inventories

Inventories consist principally of pharmaceuticals and supplies and are stated at the lower of cost (first-in, first-out) or market.

Property and Equipment

Depreciation expense is computed using the straight-line method. Buildings and improvements are depreciated over estimated useful lives ranging generally from 10 to 40 years. Estimated useful lives of equipment vary generally from four to 10 years.

When events, circumstances or operating results indicate the carrying values of certain long-lived assets expected to be held and used might be impaired, the Florida Hospitals prepare projections of the undiscounted future cash flows expected to result from the use of the assets and their eventual disposition. If the projections indicate the recorded amounts are not expected to be recoverable, such amounts are reduced to estimated fair value. Fair value may be estimated based upon internal evaluations that include quantitative analyses of revenues and cash flows, reviews of recent sales of similar assets and independent appraisals.

Notes to Combined Financial Statements (continued)

2. Accounting Policies (continued)

Property and Equipment (continued)

Property and equipment to be disposed of is reported at the lower of the carrying amounts or fair value less costs to sell or close. The estimates of fair value are usually based upon recent sales of similar assets and market responses based upon discussions with and offers received from potential buyers.

Goodwill

Goodwill is not amortized but is subject to annual impairment reviews. In addition to the annual impairment review, impairment reviews are performed whenever circumstances indicate a possible impairment may exist. The Florida Hospitals compare the fair value of the combined entity to its carrying value, on an annual basis, to determine if there is potential impairment. If the fair value of the combined entity is less than its carrying value, an impairment loss is recognized. Fair value is estimated based upon internal evaluations of the entity that include quantitative analyses of revenues and cash flows and reviews of recent sales of similar facilities.

Noncontrolling Interests

The combined financial statements include all assets, liabilities, revenues and expenses of less than 100% owned entities that the Florida Hospitals control. Accordingly the Florida Hospitals have recorded noncontrolling interests in the earnings and equity of such entities.

Due from/to an HCA Healthcare, Inc. Affiliate

Due from/to an HCA Healthcare, Inc. affiliate, in part, represents the net excess/deficit of funds transferred to a cash management account of an HCA affiliate over funds transferred to, or paid on behalf of, the Florida Hospitals. Generally, this balance is impacted by automatic cash transfers from the account to reimburse the Florida Hospitals' bank accounts for operating expenses and to pay the Florida Hospitals' debt; certain completed construction project additions; and fees and services provided by HCA affiliates, including information systems services, certain shared services and other operating expenses (such as payroll, interest, insurance, and income taxes); and through daily transfers of cash by the Florida Hospitals to the account.

Notes to Combined Financial Statements (continued)

2. Accounting Policies (continued)

Due from/to an HCA Healthcare, Inc. Affiliate (continued)

Information systems services fees represent an allocation of mainframe and other systems processing costs and the costs of related support services. The cost of these information systems services for the year ended December 31, 2020, was approximately \$207,095,000, of which approximately \$206,912,000 is included in the accompanying combined income statement as a component of other operating expenses and approximately \$183,000 is included as a component of nonoperating gains, net. Shared services fees represent an allocation of certain costs incurred by HCA affiliates to perform patient accounting and supplies management functions, including billing, collecting, purchasing, warehousing and distribution at centralized locations on behalf of the Florida Hospitals. The cost of these shared services for the year ended December 31, 2020, was approximately \$503,259,000, of which approximately \$500,938,000 is included in the accompanying combined income statement as a component of other operating expenses, approximately \$2,030,000 is included as a component of depreciation expense and approximately \$291,000 is included as a component of nonoperating gains, net. Management fees represent an allocation of corporate office expenses from HCA affiliates.

During the year ended December 31, 2020, the Florida Hospitals paid approximately \$247,391,000 to an HCA affiliate for contract staffing, which is included in the accompanying combined income statement as a component of salaries and benefits.

During the year ended December 31, 2020, the Florida Hospitals paid approximately \$151,894,000 to an HCA affiliate for outsourced lab services, of which approximately \$86,565,000 is included in the accompanying combined income statement as a component of salaries and benefits and approximately \$65,329,000 is included as a component of other operating expenses.

The Florida Hospitals are charged interest monthly on amounts due to an HCA affiliate at a variable rate of prime plus 2% (5.25% at December 31, 2020) based on the outstanding balance for the prior month-end, pursuant to an arrangement with an HCA affiliate. For amounts due from an HCA affiliate, the Florida Hospitals receive interest income monthly at a variable rate of prime plus 2% (5.25% at December 31, 2020) based on the outstanding balance for the prior month-end, pursuant to an arrangement with an HCA affiliate. Interest expense under these arrangements for the year ended December 31, 2020, was approximately \$65,627,000, of which approximately \$39,877,000 is included in the accompanying combined income statement as interest expense and approximately \$25,750,000 is included as a component of nonoperating gains, net. Interest income under these arrangements of approximately \$518,710,000 is included in the accompanying combined income statement as a component of nonoperating gains, net.

Notes to Combined Financial Statements (continued)

2. Accounting Policies (continued)

Due from/to an HCA Healthcare, Inc. Affiliate (continued)

A summary of amounts due from/(to) an HCA Healthcare, Inc. affiliate at December 31, 2020, follows:

8.36% medium-term notes; due 2024; allocated from an HCA affiliate \$(1,500,000) Due from an HCA affiliate, net \$8,672,815,000

All principal and interest payments on debt allocated from an HCA affiliate are made on behalf of the Florida Hospitals by an HCA affiliate. The difference between the carrying value and the fair value of the debt allocated from an HCA affiliate is not material.

Income Taxes

HCA Healthcare, Inc. files consolidated federal and state income tax returns which include the accounts of the Florida Hospitals. The provision for income taxes is determined utilizing maximum federal and state statutory rates applied to income before income taxes, exclusive of income attributed to partnerships where income is taxed at the partner level. Income tax benefits or liabilities, including deferred amounts, are reflected in the amounts due to/from an HCA affiliate. All income tax payments are made on behalf of the Florida Hospitals by an HCA affiliate.

Insurance Programs

Risks related to professional and general liability claims have been transferred to HCA affiliates and these affiliates maintain the related reserves; accordingly, no reserve for professional and general liability risks is recorded on the accompanying combined balance sheet. The costs of professional and general liability coverage are allocated by the HCA affiliates to the Florida Hospitals based on actuarially determined estimates. The cost for the year ended December 31, 2020, net of any incentive credits earned, was approximately \$214,604,000, of which approximately \$214,019,000 is included in the accompanying combined income statement as a component of other operating expenses and approximately \$585,000 is included as a component of nonoperating gains, net.

The Florida Hospitals participate in a self-insured program for workers' compensation claims which is administered by an HCA affiliate. The cost of this self-insured coverage is allocated to all participating HCA affiliates based, in part, on actual claims experience. The cost for the year ended December 31, 2020, was approximately \$33,307,000 of which approximately \$33,283,000 is included as a component of salaries and benefits in the accompanying combined income statement and approximately \$24,000 is included as a component of nonoperating gains, net.

Notes to Combined Financial Statements (continued)

2. Accounting Policies (continued)

Insurance Programs (continued)

The Florida Hospitals participate in a self-insurance program for employee health insurance which is administered by an HCA affiliate. The cost of the self-insured coverage is allocated by the HCA affiliate to the Florida Hospitals based on actual claims incurred. The reserve for incurred but not paid claims is maintained by an HCA affiliate and adjusted, as necessary, through additional allocations of cost or credits to all HCA affiliates participating in the self-insured program. The cost of the employee health insurance program for the year ended December 31, 2020, was approximately \$208,245,000 of which approximately \$206,767,000 is included as a component of salaries and benefits in the accompanying combined income statement and approximately \$1,478,000 is included as a component of nonoperating gains, net.

Services provided by the Florida Hospitals for self-insured claims related to employees and their dependents, excluding copayments and deductibles, are not reported as a component of revenues, and the corresponding employee medical expense allocations are not reported as a component of salaries and benefits in the accompanying combined income statement. Claims for these services were approximately \$134,405,000 for the year ended December 31, 2020.

Comprehensive Income

The Florida Hospitals' comprehensive income is equal to net income for the year ended December 31, 2020.

Contribution from HCA

During 2020, an HCA affiliate, in its discretion, adjusted the management fee charged to the Florida Hospitals for 2019 by approximately \$305,443,000, resulting in corresponding increases to both equity of parent and due from an HCA affiliate in the accompanying balance sheet.

Use of Estimates

The preparation of combined financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the combined financial statements and accompanying notes. Actual results could differ from those estimates.

Notes to Combined Financial Statements (continued)

3. Retirement Plans

The Florida Hospitals participate in HCA's contributory benefit plans, which are available to employees who meet certain minimum requirements, and require that HCA match on behalf of the Florida Hospitals certain percentages of participants' contributions up to certain maximum levels. The cost of these plans for the year ended December 31, 2020, was approximately \$78,785,000, of which approximately \$78,298,000 is included as a component of salaries and benefits in the accompanying combined income statement and approximately \$487,000 is included as a component of nonoperating gains, net.

4. Leases

The Florida Hospitals lease property and equipment under finance and operating leases. For leases with terms greater than 12 months, the related assets and obligations are recorded at the present value of lease payments over the term. Many of the leases include rental escalation clauses and renewal options that are factored into our determination of lease payments, when appropriate. The Florida Hospitals do not separate lease and nonlease components of contracts. Generally, the estimated incremental borrowing rate is used to discount the lease payments, as most of the leases do not provide a readily determinable implicit interest rate.

The following table presents lease-related assets and liabilities as of December 31, 2020:

	Balance Sheet Classification	December 31, 2020
Assets:		
Operating leases	Right-of-use operating lease assets	\$110,987,000
Finance leases	Property and equipment	44,410,000
Total lease assets		\$155,397,000
Liabilities:		
Current:		
Operating leases	Accrued expenses	26,469,000
Finance leases	Current portion of finance lease obligations	14,518,000
Noncurrent:		
Operating leases	Right-of-use operating lease obligations	85,895,000
Finance leases	Finance lease obligations	30,774,000
Total lease liabilities		\$157,656,000
Weighted-average remaining t	erm:	
Operating leases		7.0 years
Finance leases		3.9 years
Weighted-average discount rat	te:	
Operating leases		4.2%
		3.2%

Notes to Combined Financial Statements (continued)

4. Leases (continued)

The following table presents certain information related to lease expense for finance and operating leases for the year ended December 31, 2020:

Finance lease expense:	
Depreciation	\$ 11,822,000
Interest expense	1,358,000
Total finance lease expense	13,180,000
Operating lease expense (including short-	
term and variable lease expenses):	
Included in other operating expenses	105,183,000
Included in nonoperating gains, net	9,405,000
Total lease expense	\$ 127,768,000

The following table presents supplemental cash flow information for the year ended December 31, 2020:

Cash paid for amounts included in the measurement of lease liabilities:

Operating cash flows for operating leases \$ 3

Operating cash flows for operating leases	\$ 55,119,000
Operating cash flows for finance leases	1,067,000
Financing cash flows for finance leases	11,374,000

The following table reconciles the undiscounted minimum lease payment amounts to the operating and finance lease liabilities recorded on the balance sheet at December 31, 2020, are as follows:

	Operating Leases	Finance Leases
2021	\$ 30,238,000	\$ 15,344,000
2022	25,753,000	12,894,000
2023	18,483,000	9,755,000
2024 2025	13,028,000 9,865,000	5,649,000 4,049,000
Thereafter	36,311,000	27,000
Total minimum rental commitments	133,678,000	47,717,000
Less amounts representing interest	(21,314,000)	(2,425,000)
Present value of future minimum lease payments	112,364,000	45,292,000
Less: current lease obligations	(26,469,000)	(14,518,000)
Long-term lease obligations	\$ 85,895,000	\$ 30,774,000

Notes to Combined Financial Statements (continued)

5. Commitments and Contingencies

The Florida Hospitals operate in a highly regulated and litigious industry. As a result, various lawsuits, claims, and legal and regulatory proceedings have been and can be expected to be instituted or asserted against it. The Florida Hospitals are subject to claims and suits arising in the ordinary course of business, including claims for personal injuries or wrongful restriction of, or interference with, physicians' staff privileges. In certain of these actions, the claimants may seek punitive damages against the Florida Hospitals which may not be covered by insurance. The Florida Hospitals are subject to claims for additional taxes and related interest and penalties. The resolution of any such lawsuits, claims, or legal and regulatory proceedings could have a material, adverse effect on the Florida Hospitals' results of operations or financial position.

6. Subsequent Events

The Florida Hospitals evaluated all events or transactions that occurred after December 31, 2020 through May 21, 2021, the date the combined financial statements were available to be issued.

HCA Healthcare, Inc. Hospitals in the State of Florida

Notes to Combined Financial Statements (continued)

Supplementary Information

Combining Balance Sheet

December 31, 2020

		y Hospital, Inc. h/a Gulf Coast Regional ledical Center	Blake Medical Center	Bruodon Regional Hospital	Central Florida Regional Bospital, Inc.	Citrus Memorial Hospital, Inc.	Columbia Hospital Corporation of South Brownel d/b/a Westside Regional Medical Conter	Englewood Community Hospital, Inc.	Fawcett Memorial Hospital, Inc.	
Assets										
Current assets:					4					
Cash	2	11,126 S	- \$	5,881 \$		- :		2,783 \$	3,145	
Accounts receivable		28,668,864	37,422,407	53,883,892	28,152,968	20,574,935	29,082,047	6,870,101	18,592,807	
hrventories		B.470,943	11,319,125	9,860,244	7,786,374	6,316,416	1,956,667	2,452,999	6.901.917	
Prepaid expenses and other current assets		859,452	2,25R,558	1,4RG,434	1,097,187	791,766	548.644	62#,103	499,262	
Estimated receivable/(payable) under										
third-party reunburscurent programs		(33,099)	7,988,685	133,322	943,877	1,931,803	567,351		(4,646	
		37,977,386	58,988,695	65,369,773	38.031,795	29,614,920	39,188,520	9,953,988	25,992,485	
Property and equipment, at cost:										
Land		9,237,907	2,607.697	14,235,217	16,738,106	-	8.427,523	1,369,632	7.557,180	
Buildings		70,830,057	74,546,467	157,240,205	40,007,735	56,001,713	117,770,378	1K,903,871	80,755,010	
Equipment		132,719,721	117,989,961	217,866,819	85,486,231	83,158,921	160,952,581	30,406,020	94,739,375	
Construction in progress		9.055,106	2,654,615	6,295,168	182,639	637,875	2,166,039	323,440	1,075,598	
		-221,842,791	197,798,740	395,637,409	142,414,711	139,794,509	289,316,541	51,004.963	i88,127,163	
Accumulated depreciation		(98,598,259)	(123,345,364)	(205,744,4HE)	(85,471,440)	(43,567,241)	(159,752,148)	(35,640,231)	(105,370,603)	
		123,244,532	74,453,376	189,892,921	56,943,271	96,231,268	129,564.393	15,364.732	¥2.756,560	
Goodwill		7,900,930	9,884,598	532,805	8,906,339	53.111,223	•	_	12,972,398	
Due from/(to) an HCA Holdings, Inc. affiliate		127,673,673	373,904,470	961,719,045	114,895,921	(154,105,163)	410,392,044	35,06x,294	110,431,224	
Right-of-use operating lease assets		905,394	1,135,614	1,841,527	198,094	38,671	615,596	403,398	2,666,666	
Other assets		21,216	19,407	50,830	50,293	ete	166,296	40,410	19,851	
Total assets	S	297.723,131 S	518,386,160 \$	1,219.406,981 \$	219,025,913 \$	24,890,920	579.926,849 \$	60,830,822 \$	234,839,184	
Liabilities and equity										
Corrent liabilities;										
Accounts payable	\$	11,195,696 \$	12,236,547 \$	17,971,274 \$	10,538,387 \$	8,330,536 \$	6,770,616 \$	2,422,827 \$	8,137,562	
Accrued expenses		9,585,671	8,825,795	13,467,811	7,554,115	6,423,726	8,727,562	2,543,983	6.714,459	
Current pertion of Finance lease obligations		339,161	620.267	159,561	239,021	141,010	363.33%	24,969	281,066	
		21,120,528	21,682,609	31,598,453	18,331,523	14,902,372	15,861,516	4,991,779	15,133,067	
Other timbilities		3,073,454	3,372,592	5,540,797	2,693,696	2,469,716	3,762.179	758,451	2.302.685	
Finance lease obligations		1,002,815	2,416,506	287,731	1,499,446	227,491	1,257,9KG	50,384	1,059,038	
Right-of-use operating lease obligations		588,196	690.347	1,672,832	38,000	7,911	382_336	274,467	2,061,644	
Notes payable to an HCA Holdings, Inc. affiliate		-	-	-	-	-	-	-	-	
Equity (daffect)		271,938,13k	490,324,106	1.180,306,868	196,413,248	7,283,530	55K,722,832	54,755,741	214,282,730	
Noncontrolling interests				_	-	-	-			
		271,938,138	490,224,106	1,180,306,868	196,413,248	7,283,530	558,722,832	54,755,741	214,282,730	
Total liabilities and creaty (delicit)	3	297.723,131 \$	518,386,160 S	1,219,406,901 \$	219,025,913 \$	24,890,920 \$	579,926,849 \$	60,830,822 \$	234,839,184	

		Fort Walton Beach Medical Center, Inc.	Galen of Florida, Inc. d/b/a St. Petersburg General Huspital	JFK Medical Center Limited Partnership d/h/s JFK Medical Center		Kendall Bealtheare Group, Ltd.	Largo Medical Center, Inc.	Lawnwood Medical Center, Inc.	Marioa Community Raspital, Inc. d/b/a Ocala Regional Medical Center	Memorial Bospital Jacksonville
Assets										
Current assets.						** *** *				
Cash	2	45,837		79,554	2	59,673 \$	2,566			
Accounts receivable		32,709,171	9,240.683	69,529,482		73,354,682	33,854,091	60,396,078	74,192,771	62.699,455
Inventories		2,854,855	3,002,191	19,694,603		14,191,774	12,739,308	13,089,136	15,337,946	14,973,534
Prepaid expenses and other current assets		1,342,510	447,485	679,549		574,657	1,070,601	119,664	1,705,234	2,572,176
Enimated receivable/(payable) under										
third-purry roumbursement programs		6311,052	186,285	2,497,093		709,102	1,452,076	1,570,312	4,660,007	241,515
		43,596,425	12,877,851	92,480,281		\$8,000,ERR	49,318,643	75,175,190	95,299,383	10,486,680
Property and equipment, at cost:										
Land		8,768,515	1,509,394	13,403,491		9,140,949	19,657,770	7,644.111	17,572,166	33,887,087
Buildings		99,735,340	51,332,348	272,489,394		189,843,292	90,801,557	×1,309,056	195,254,389	196,176,618
Equipment		121,830,714	68,587,084	324,154,370		192,338,470	134,680,198	127,552,839	256,001,522	262,338,604
Construction in progress		7,518,993	156,05%	7,559,156		19,840,384	13,056,657	4,822,475	4,969,926	3,742,157
		237,873,562	121,584,884	617,806,411		411,163,095	258,196,182	221,328,481	473,794,003	496,144,466
Accumulated depreciation		(141,504,016)	(88,918,967)	(348,532,296)		(195,542,690)	(134,680,054)	(128,740,794)	(189,092,574)	(298,520,048)
		96,369,546	32,665,917	269,274,115		215,620,485	123,516,128	92,587,687	284,705,429	197,624,418
Goodwill		-	-	92,751,044		5,204,924	12,546,865	11,583,321	7,947,833	_
Duo from/(to) on HCA Holdings, Inc. affiliate		322,516,728	112,876,198	(51,519,590)		659,220,000	441,418,402	288,681,501	203,330,509	939,298,477
Right-of-one operating lease assets		3,008,827	177,974	8.196,703		16,627,625	865,798	1,295,838	1,263,435	11.510,635
Other assets		473,059	24,196	86,405		97,989	38,169		592,493	163,826
Total assets	\$	465,964,585	158,622,136 \$	411,268.958	\$	985,660,831 \$	627,724,005	469,323,537	593,139,071 \$	1,229,084,036
Liabilities and equity										
Corrent Itabilities:										
Accounts payable	2	10,838,608	4,734,821 \$	26,170,699	\$	19,268,290 \$	18,523,573 \$	12,114,29%	23,011.937 \$	15,145,945
Accrued expenses		9,498,906	3,140,185	23,601,650		18,507,122	9,883,127	14,016,939	18.359.851	20,760,362
Current portion of Finance lesse obligations		1,007,475	225,979	1,293,403		472,744	598,969	1,639,894	278,760	1,000,865
		21,344,989	8,100,985	51,065,752		38,248,156	29,005,649	27,171.131	41,642,54R	34,907,172
Other liabilities		3,571,548	1,260,961	7,745,734		11,260,817	5,681,477	4,684,927	6,025,312	5,381,734
Finance lease obligations		266,018	849,287	1,550,192		1,040,129	52,230	243,079	287,522	1,688,040
Right-of-use operating lease obligations		2.596,245	141,967	5,102,521		14,405,024	438,813	735,132	438,576	10,122,306
Notes payable to an HCA Holdings, Inc. affiliate		-	-	-		-	-	-	-	-
Equity (deficit)		43K,185,785	148,268,936	345,804,759		920,786,705	592,545,816	436,489,268	544,745,213	1,174,984,784
Noncontrolling interests		-	_			-		-		-
		438,185,785	148,268,936	345,804,759		920,706,705	592,545,X16	436,489,268	544,745,213	1,174,984,784
Total liabilities and equity (defical)	S	465,964,585	158,622,136 \$	411,268,958	\$	985,660,831 \$	627,724,005 \$	469,323,537 1	593,139,071 \$	1,229,084,036

	Grou	ieach Healthcare pp, Ltd. d/b/a tura Hospital Iedical Conter	New Port Rickey Huspital, Inc. d/b/a Medical Center of Trialty	North Florida Regional Medical Cesser, Inc.	Northride Elospital	Northwest Medical Cessor, Inc.	Nocami Hospitals of Florida, Inc. d/ls/a Letts City Medical Center	Onk HM Hospital	Okaleosa Hospital, Inc. d/b/a Twin Cities Respital
Assets	-								
Current assets:									
Cash	2	614,073		431,704 \$	929 \$	4,585 \$	1.839 \$	11,145 \$	4,260
Accentate receivable		50,387.717	28,035,444	70,690,574	17,515,020	29,842,878	14,940,237	26,851,443	6,877,359
Inventories		13,781,290	5,568,103	20,349,180	6,933,327	7,002,185	3,407,530	5,491,813	2.161,318
Prepaid expenses and other current assets		2,098,860	MGK, SIR	2,789,10%	982.519	256,165	232,581	2,767,061	346,033
Estimated receivable/(payable) under									
third-party reimbursement programs		328,070	1,946,000	230,435	1,862,427	161,280	(954,993)	(764,126)	100,577
		67,210,010	36,421,385	94,491,001	27,294,422	37,267,093	17,623,194	34,357,336	8,689,547
Property and equipment, at cost:									
Land		11,961,102	45,153,907	25,247,600	3,460,009	8,086,739	3,546,326	8,922,478	1,137,678
Buildings		252,426,732	178,301,750	176,818,097	67,104,890	88,060,279	27,488,369	RG,523,548	21,040,409
Equipment		197,390,138	157,194,564	214,172,791	92,726,591	137,600,361	58,850,234	167,182,745	37,245,510
Construction in progress		1,118,376	339,280	\$1,771,434	4,911,840	2,105,547	402,716	7,268,852	24,163
	-	462,896,348	380,989,501	468,009,923	164,243,330	235,452,1026	90,287,645	269,897,623	59,447,760
Accumulated depreciation		(230,951,528)	(124,767,970)	(223,746,586)	(115,814,078)	(111,804,490)	(50,968,733)	(149,804,896)	(35,512,404)
		231,944,820	256,221,531	245,263,336	52,3119,260	124,048,336	39318,913	120,092,727	23,935,356
Goodwill		402,117	9,807,429	25,187,114	-	11,179,444	4,541,203	6,326,041	2.628,725
Due from/(to) an HCA Holdings, Inc. affiliate		232,582,652	(231,964,713)	390,737,964	40,591,774	76,451,412	30,001,000	399,640,275	96,350,577
Right-of-use operating lease assets		1,281,087	737,654	3,186,521	639,593	12,957,818	436,724	-	537,496
Other exects		-	-	860,587	18,671	129,275	(530,325)	400	
Total assets	\$	533,420,6M6	5 71,223,216 S	759,726,523 S	120,933,720 S	262,733,378 \$	91,410,709 \$	560,917,679 \$	132,141,701
Liabilities and equity									
Currem liabilities:									
Accounts payable	\$	16,513,934		25,572,503 \$	8,229,206 \$	7,717,163 \$	3,791,355 \$	15,730,602 \$	2,699,160
Accrued expenses		13,957,787	8,606,077	17,172,169	6,526,220	10,404,081	4,894,131	E,775,76E	2,707,066
Current portion of Finance lease obligations		3711,7316	\$09,332	237,005	47,762	59,853	43,717	342,496	26,451
		38,850,459	20,603,616	42,981,677	14,803,198	[8,]81,097	8,729,193	24,848,866	5,432,677
Other liabilities		4,460,071	3,250,363	6,301,321	2,496,712	2,823,430	1,437,674	3,669,531	699,743
Finance lease obligations		1,113,142	997,793	328,599	77,951	114,945	63,060	1,193,143	40,655
Right-of-use operating lease obligations		680,293	195,168	2,323,127	382,178	11,156,154	328,863	-	313,614
Notes payable to an HCA Holdings. Inc. affiliate		-	-	-	-	-		1,500,000	**
Equity (deficit)		496,316,721	46,176,346	697,021,732	103,173,691	230,457,752	80,674,447	529,706,141	125,655,012
Noncontrolling interests		-		10.770.867	-		177,472		-
-		496,316,721	46,176,346	707,792,599	103,173,691	230,457,752	80,851,919	529,706,141	125,655,012
Total liabilities and equity (deficit)	\$	533,420,686	71,223,286 5	759,726,523 \$	120,933,720 \$	262,733,374 \$	91,410,709 \$	560.917.679 \$	132,141,701

	ы	Okecehober iospital, Inc. o/a Rusterson Hospital	Orange Park Medical Center, Inc.	Oscenia Regional Hospital, Inc.	Ovieto Medical Center, LLC	Palme West Hospital Limited Partnership	Plantation General Hospital Limited Fartnership	Poinciana Medical Cepter, Inc.	Putaum Community Medical Center of North Florida, LLC
Aspets									
Current sample:			194929 #	6,619 \$	21,027 \$	1,773 \$	EN. N40 S		
Cash	2	13,255 \$	126,212 \$,	- \$	# # # # # # # # # # # # # # # # # # #
Accounts receivable		#,096,382	46,228,442	\$2,965,837	13,055,151	23,985,181 5,510,523	54,248,728	7,266,340	7,996,803
Inventories		3,097,342	7,919,738	11,184,459	3,443,141		12,836,619	2,107,003	1.881,133
Prepaid expenses and other current assets		1.284.376	1,606,579	1,391,215	510,655	260,761	1,190,617	351,405	64,200
Estimated receivable/(psyable) under									
third-party reimbursement programs			7,361,878	998,537	253,711	852,588	(3,699,923)	4,580	(448,976)
		11,491,355	63,742,849	66,546,647	17,283,685	30,610,126	64,664,881	9,731,24#	9,493,160
Property and equipment, at cost:									
Land		1,090,600	13,721,323	12,149,046	8,701,524	7,742,760	80,523,314	×,326,776	1,215,000
Buildings		12.320,305	126,289,227	92,597,201	53,266,946	49,161,901	159,653,769	32,104,564	7,691,493
Equipment		39,440,342	173,348,314	192,036,189	80,005,902	104,085,521	193,997,40x	61,287,692	33,779,950
Construction in progress		310,645	40,581,132	4,776,408	2,463	1,309,520	16,003,129	1.476,919	8,218,367
		53,161,892	353,939,996	301,558,644	141,976,835	162,299,602	459,177,620	103,195,951	50,904,810
Accumulated depreciation		(36,599,274)	(160,483,025)	(157,894,624)	(42,673,105)	(105,768,963)	(207,825,720)	(37,640,967)	(17,361,912)
		16,562,618	193,456,971	143,664,220	99,303,730	56,530,639	242,351,900	65,554,984	33,542,828
Goodwill		3,591,981	4,007.243	2,874,927	-	-	11,840,161	_	_
Duc from/(to) an HCA. Holdings, Inc. affiliate		226,784,477	87,129,9R5	365,279,644	(114,358,337)	330,854,657	12.920.707	(29,021,453)	(15,410,410)
Right-of-use operating lease assets		290,805	1,394,767	8,510,244	-	1,848,676	1,070,990	5,638,202	564,862
Other assets		5,046	134.905	57,126	56,713	718,678	-	515	
Total assets	\$	258.726,282 S	349,866,720 \$	5×6,932,828 S	2,285,793 \$	420,563,476 \$	332,84x,639 \$	51,903,496 \$	2R,196,440
Liabilities and equity									
Current l'abilities									
Accounts payable	2	2,044,691 \$	15,744,686 \$	14,549,405 S	4,636,442 \$	6,412,691 \$	20,428,941 \$	2,541,628 \$	3.074,260
Accrued exponser		3,076,398	13,165,544	17,482,483	2,958,439	7,956,262	17,617,468	3,325,869	3,140,626
Current portion of Finance lease obligations		40,751	676,080	208,997	_	303,741	553,943	17,020	_
		5,161,840	29,586,310	32,240,885	7,595,081	14,671,694	38,608.357	5,884,517	6.214,866
Other liabilities		211.268	4.412.745	5,460,244	998,989	2,463,033	9,538,123	1,064,748	978,424
Finance lease obtigations		82,182	1,597,074	423,930	14,589	1,017,956	1,223,954	26,159	-
Right-of-use operating lease obligations		181,094	1,033,571	6,655,759	_	1,165,784	640,678	5,347,014	396,090
Notes payable to an HCA Holdings, Inc. offiline		-	-	-	_	-	-	~	
Equity (deficit)		252,369,898	313,237,020	542,152,010	(6,322,866)	401,245,009	282,845,532	39,581,058	20.601,040
Noncontrolling interests		-	-	-	_	-	_	-	_
•		252,389,898	313,237,020	542,152,010	(6,322,866)	401,245,009	282,845,532	39,581,058	20,601,040

		Regional Medical Center Bayonet Point	_	nint Lucie Medical Center		Sarasota Doctora Hospital, Inc.	Setring Health Services, LLC d/b/a Highlands Regional Medical Center	Sun City Hospital, Inc. d/b/s South Boy Hospital		Taltahanter Medical Center, Inc. d/b/n Capital Regional Medical Center
Assets										
Corrent assets:										
Cash	\$	-	2		\$	1.375	\$ 1.786 \$	1,200	\$	2,850
Accounts receivable		41,050,598		29,442,282		19,196,183	7,454,712	10,372,546		32,519,605
Inventories		11.666,768		7,695,791		7,210,741	2,226,013	2,145,230		6,5%7.275
Prepaid expenses and other current assets		438,372		392,917		773.673	232,761	225,863		1,260,337
Estimated receivable/(payable) under										
third-party reimbursement programs		215,330		(375,90%		(12,650)	(119,07K)	35,188		539,942
		\$3,371,068		37,161,082		27,169,320	9,790,194	12,740,027		40,910,009
Property and equipment, at cost:										
Land		8,006,466		4,467,561		10,833,924	400,000	13,091,158		13,301,822
Baildings		70.239,389		45,499,428		71,735,700	7,979,826	34,034,678		89,536,265
Equipment		117,130,414		102,435,905		73,517,857	19,071,717	50,903,907		130,361,781
Construction in progress		880.299		934.001		3,545,759	 437,807	585,212		5,393,411
		196,236,564		153,336,895		159,633,240	27,889,350	94,616,933		23K,593,279
Accumulated depreciation		(125,920,201)		(113,199,444)		(72,596,312)	(10,048,591)	(54,997,885)		(130,540,400)
		70,336,367		40,137,451		#1,036,92H	17,840,759	43,619,870		104,052,871
Goodwill		9,566,239		7,749,900		18,886,395	652,138	-		1,499,384
Due from/(to) an HCA Holdings, Inc. affiliate		658,006.531		571,986,860		98,775,343	(29.314,559)	(18,136,526)		257,796,719
Right-of-use operating lease assets		483,70%		4,500,197		1,394,933	1,774,730	137,334		4,714,230
Other assets		-		900		2,207,378	 113,610	7,010		95,296
Total usecus	\$	791,763,913	3	661,536,390	\$	229,470,297	\$ ×56,872 \$	38,407,715	5	420,06K,509
Liabilities and equity										
Current liabilities:										
Accounts payable	2	19,262,975	\$	6,485,456	\$	5,765,315	\$ 2,733,748 \$	4,071,620	8	8,868,780
Accrued expenses		9,677,069		10,225,414		6,165,507	3,623,626	2,883,265		10,062,334
Current portion of Finance lease obligations		327,117		69,708		335,046	462,968	33,872		327,811
		29,267,161		16,788,578		12,265,868	6,820,342	6,907,757		19,258,925
Other liabilities		3,890,385		2,482,918		1,874,25H	844,114	1,044,822		3,264,985
Finance lease obligations		1,166,240		133.870		1,169,784	1,659,246	84,259		994,129
Right-of-ose operating lease obligations		342,192		2,514,857		1,147,549	1,425,539	109,225		3,775,792
Notes payable to an HCA Holdings, Inc. affiliate		-		-		-	-	-		-
Equity (deficit)		757,097,935		639,624,167		213,012,838	(9.892.369)	30,261,652		392,774,678
Noncontrolling interests				-		-	 -			_
		757,097,935		639,624,167		213,012,838	(9,892,369)	30,261,652		392,774.678
Total liabilities and equity(deficit)	\$	791,763,913	\$	661,536,390	2	229,470,297	\$ 856,872 S	38,407,715	\$	420,068,509

		University Hospital, Ltd.	Men	est Fiorida - IT, LLC d/b/s norial Hospital of Tampa		West Florida - PPH, LLC d/b/a Palms of Fasadena Hospital		Regio. Cente	it Florida nal Medical r Inc. d/h/a orida Hospital		Eliminations		Cambined Total
Assets													
Current assets;													
Cash	\$	1,473	S	1.869	2	677	3		K,622	2		\$	1,668,028
Accounts receivable		10,120,622		17,243,603		N_666,494			40,631,406				1,314,106,020
hyontones		3,919,653		4,568,18K		2,547,326			7,332,675				331,506,496
Proposed expenses and other current assets		193.370		1,343,876		360,271			1,786,497				40,701,874
Estimated receivable/(psyable) under													
third-party reimbursement programs		189,292		2,282,760		82,502			504,734				35,153,753
		14,424,409		25,440,296		11,657,270			30,263,934				1,723,128,170
Property and equipment, at cost:													
Land		3,061,046		29,330,000		12,840,000			10,436,240				518,521,144
Buildings		33,306,637		41,081,517		15,288,110			112,060,493				3,744,808,853
Egupyaeni		58,086,204		81,321,658		41,830,524			157,411,655				5,187,223,204
Construction in progress		8,507,255		18,621,338		162,628			5,167,570				269,112,377
	_	102,961,142		170,554,513		70,121,242			285,065,95%				9,719,663,578
Accumulated depreciation		(64.518.091)		(64,368,854)		(31,322,140)			(180,367,901)				(5,045,918,576
,		34,043,051		106,185,659		38,799,122			104,698,057				4,673,747,003
Goodwill		-		41,5K4,550		13,679,570			25,353,451				432,201,382
Due from/(to) an HCA Holdings, Inc. affiliate		281,478,809		(146,282,341)		(63,184,786)			267,317,088				8,672,815,083
Right-of-use operating lease assets		401,850		167,728		2,176,696			5,368,595				110,987,235
Other assets		758,718		_		150,000			-		443,857		7,792,802
Total assets	\$	335,106,837	\$	27,095,892	\$	3,277,872	\$		453,001,125	\$	443,857	\$	15,620,671,674
Liabilities and equity													
Current limbilities:													
Accounts payable	2	3,962,617	\$	5,906,714	2	4,113,646	5		12,822,732	\$		S	442,579,863
Accrued expenses		5,739,478		4,644,646		3,764,183			13,436,444				393,519,808
Current portion of Finance lease obligations		396,278		503,957		323,210			209,900				14,518,342
		10,094,373		11,055,317		8,200,039			26,464,966				N50,61R,033
Other liabilities		2,031,613		1,115,087		1,135,092			4,047,650				142,923,443
Finance lease obligations		926,008		1,366,001		965,815			215,667				30,774,123
Right-of-use operating lease obligations		239,98K		1,051		1,757,839			4,036,459				85,895,215
Notes payable to an HCA Holdings, Inc. offitiote		-		-		-			-				1,500,000
Equity		321,810,855		12,858,436		(1,780,913)			418,232,383		443,857		14,498,012,521
Noncontrolling interests						-			_				10,948,339
		321,810,855		12,858,436		(8,780,913)			418,232,383		443,857		14,508,960,860
Total liabilities and equity	\$	335,106,837	\$	27,095,892	5	3,277,872	2		453,001,125	5	443,857	2	15,620,671,674

Combining Income Statement

December 31, 2020

	d/b/a G	/ Hospital, Inc. ulf Coast Regional edical Center	Blake Medical Center	Brandon Regional Hospital	Central Florida Regional Hospital, Inc.	
Revenues	\$	257,958,023 \$	253,011,926 \$	453,614,921 \$	191,983,394	
Salaries and benefits		83,419,263	102,056,273	150,107,371	70,777,779	
Supplies		39,396,709	52,007,408	60,572,258	31,639,451	
Other operating expenses		59,986,856	71,655,976	95,520,126	50,680,319	
Depreciation		12,530,400	9,939,644	21,416,831	7,289,510	
Interest expense		48,959	25,391	29,657	15,636	
Management fees		8,419,361	8,247,207	14,769,357	6,273,881	
		203,801,548	243,931,899	342,415,600	166,676,576	
Income (loss) before nonoperating gains (losses) and income taxes		54,156,475	9,080,027	111,199,321	25,306,818	
Nonoperating gains (losses)		6,394,468	21,061,989	51,476,181	6,296,664	
Income (loss) before income taxes		60,550,943	30,142,016	162,675,502	31,603,482	
Provision for income taxes (benefit)		19,741,441	7,027,483	37,493,107	7,366,307	
Net income (loss)		40,809,502	23,114,533	125,182,395	24,237,175	
Net income attributable to noncontrolling interests		_				
Net income (loss) attributable to HCA Florida Hospitals	\$	40,809,502 \$	23,114,533 \$	125,182,395 \$	24,237,175	

Combining Income Statement (continued)

Columbia Hospital Corporation of Citrus South Broward Englewood d/b/a Westside Regional Community Fawcett Memorial Memorial Hospital, Inc. Hospital, Inc. Medical Center Hospital, Inc. 180,024,548 \$ 239,021,718 \$ 59,847,525 \$ 163,691,261 Revenues 66,878,489 68,195,070 74,404,934 24,613,234 Salaries and benefits 34,814,771 40,686,237 8,802,288 30,334,011 Supplies 43,925,247 53,774,562 16,016,687 42,577,371 Other operating expenses 10,181,676 12,801,234 2,287,526 9,391,256 Depreciation 118,777 5,325 17,463 6,285,857 Interest expense 7,722,996 1,931,028 5,909,096 5,494,189 Management fees 169,311,717 189,508,740 53,656,088 154,692,779 6,191,437 8,998,482 Income (loss) before nonoperating gains (losses) and income taxes 10,712,831 49,512,978 21,362,812 946,225 6,422,368 94,827 Nonoperating gains (losses) 10,807,658 70,875,790 7,137,662 15,420,850 Income (loss) before income taxes 1,696,676 3,613,431 Provision for income taxes (benefit) 2,459,701 16,446,303 5,440,986 11,807,419 8,347,957 54,429,487 Net income (loss) Net income attributable to noncontrolling interests 5,440,986 \$ 11,807,419 Net income (loss) attributable to HCA Florida Hospitals 8,347,957 \$ 54,429,487 \$

		Fort Walton Beach Medical Center, Inc.	Galen of Florida, Inc. d/b/2 St. Petersburg General Hospital	JFK Medical Center Limited Paratership d/b/a JFK Medical Center	Kendall Healthcare Group, Ltd.
Revenues	\$	298,226,219	\$ 90,504,295	\$ 544,420,896	\$ 475,937,767
Salaries and benefits Supplies Other operating expenses Depreciation Interest expense Management fees		87,582,942 47,048,229 62,997,977 11,043,038 45,609 9,802,077 218,519,872 79,706,347	39,050,140 11,365,442 24,236,699 4,170,940 6,735 2,986,706 81,816,662 8,687,633	201,327,839 101,268,516 136,491,585 29,711,210 110,850 17,976,375 486,886,375 57,534,521	150,178,341 75,439,927 115,739,336 20,686,766 55,158 15,731,883 377,831,411 98,106,356
Income (loss) before nonoperating gains (losses) and income taxes Nonoperating gains (losses) Income (loss) before income taxes Provision for income taxes (benefit) Net income (loss)		17,271,100 96,977,447 22,390,579 74,586,868	 5,730,419 14,418,052 3,358,227 11,059,825	2,180,317 59,714,838 13,933,983 45,780,855	34,794,119 132,900,475 30,759,919 102,140,556
Net income attributable to noncontrolling interests Net income (loss) attributable to HCA Florida Hospitals	S	74,586,868	\$ 11,059,825	\$ 45,780,855	\$ 102,140,556

	 Largo Medical Center, Inc.		Lawnwood Medical Center, Inc.		Marion Community Hospital, Inc. d/b/a Ocala Regional Medical Center	Memorial Hospital Jacksonville
Revenues	\$ 330,207,654	S	383,140,059	S	553,935,819	\$ 422,418,659
Salaries and benefits	117,906,236		125,587,281		163,162,383	129,869,060
Supplies	62,599,827		58,866,516		107,673,877	80,300,779
Other operating expenses	79,435,668		79,457,791		118,785,237	100,333,317
Depreciation	12,342,611		10,893,498		25,434,112	23,380,574
Interest expense	16,001		52,911		41,341	117,168
Management fees	10,753,889		12,341,587		17,720,112	 13,718,972
	283,054,232		287,199,584		432,817,062	 347,719,870
Income (loss) before nonoperating gains (losses) and income taxes	47,153,422		95,940,475		121,118,757	74,698,789
Nonoperating gains (losses)	21,686,298		15,138,519		11,408,220	50,772,133
Income (loss) before income taxes	68,839,720		111,078,994		132,526,977	125,470,922
Provision for income taxes (benefit)	15,978,234		25,708,325		30,776,539	29,016,741
Net income (loss)	52,861,486		85,370,669		101,750,438	 96,454,181
Net income attributable to noncontrolling interests	_		_		-	
Net income (loss) attributable to HCA Florida Hospitals	\$ 52,861,486	\$	85,370,669	\$	101,750,438	\$ 96,454,181

	Miami Beach Healthcare Group, Ltd. d/b/a Aventura Hospital and Medical Center	New Port Richey Hospital, Inc. d/b/a Medical Center of Trinity	North Florida Regional Medical Center, Inc.	Northside Hospital
Revenues	\$ 342,518,859	\$ 237,830,064	\$ 538,013,245	\$ 170,122,830
Salaries and benefits	128,747,735	95,526,881	162,591,398	67,504,275
Supplies	49,057,580	33,216,831	100,346,487	32,496,364
Other operating expenses	85,122,694	60,775,940	118,105,619	40,364,738
Depreciation	14,972,332	18,196,571	21,715,326	5,888,810
Interest expense	60,182	13,625,345	201,944	23,278
Management fees	11,243,616	7,889,779	17,427,027	5,522,966
	289,204,139	 229,231,347	 420,387,801	151,800,431
Income (loss) before nonoperating gains (losses) and income taxes	53,314,720	8,598,717	117,625,444	18,322,399
Nonoperating gains (losses)	11,520,949	329,344	27,776,283	1,864,467
Income (loss) before income taxes	64,835,669	8,928,061	145,401,727	20,186,866
Provision for income taxes (benefit)	15,214,237	2,107,523	32,980,430	4,673,940
Net income (loss)	49,621,432	6,820,538	112,421,297	15,512,926
Net income attributable to noncontrolling interests	_	_	694,722	-
Net income (loss) attributable to HCA Florida Hospitals	\$ 49,621,432	\$ 6,820,538	\$ 111,726,575 \$	15,512,926

	Northwest Medical Center, Inc.	Notami Hospitals of Florida, Inc. d/b/a Lake City Medical Center	Oak Hill Hospital	Okaloosa Hospital, Inc. d/b/a Twin Cities Hospital
Revenues	\$ 233,017,659	\$ 129,923,695	\$ 282,241,336	\$ 60,587,295
Salaries and benefits	76,063,148	37,195,361	103,642,027	19,145,803
Supplies	33,805,352	12,354,029	39,112,150	9,280,887
Other operating expenses	54,857,223	29,054,210	62,452,871	13,812,803
Depreciation	12,672,855	4,230,749	13,064,940	2,868,869
Interest expense	25,357	8,674	186,528	5,862
Management fees	7,572,996	4,099,942	 9,280,302	2,013,249
	184,996,931	86,942,965	227,738,818	47,127,473
Income (loss) before nonoperating gains (losses) and income taxes	48,020,728	42,980,730	54,502,518	13,459,822
Nonoperating gains (losses)	2,296,789	 800,409	 21,237,046	5,154,670
Income (loss) before income taxes	50,317,517	43,781,139	75,739,564	18,614,492
Provision for income taxes (benefit)	11,650,532	 10,127,198	17,498,470	4,285,307
Net income (loss)	38,666,985	33,653,941	58,241,094	14,329,185
Net income attributable to noncontrolling interests		19,840	***	-
Net income (loss) attributable to HCA Florida Hospitals	\$ 38,666,985	\$ 33,634,101	\$ 58,241,094	\$ 14,329,185

	Okeechobee Hospital, Inc. d/b/a Raulerson Hospital	Orange Park Medical Center, Inc.	Osceola Regional Hospital, Inc.	 Oviedo Medical Center, LLC
Revenues	\$ 74,766,723	\$ 365,385,463	\$ 427,028,505	\$ 88,443,896
Salaries and benefits	28,364,823	120,763,984	142,350,786	29,192,067
Supplies	7,803,612	48,821,223	62,641,824	11,487,379
Other operating expenses	16,067,395	98,243,179	102,150,215	23,773,856
Depreciation	2,557,688	16,501,594	18,535,185	10,200,830
Interest expense	9,705	89,558	35,800	6,483,755
Management fees	2,436,364	 11,930,167	14,037,515	2,836,318
Electronic health record incentive income	57,239,587	296,349,705	 339,751,325	83,974,205
Income (loss) before nonoperating gains (losses) and income taxes	17,527,136	69,035,758	87,277,180	4,469,691
Nonoperating gains (losses)	 13,578,224	5,807,112	17,975,436	(528,382)
Income (loss) before income taxes	31,105,360	74,842,870	105,252,616	3,941,309
Provision for income taxes (benefit)	7,137,582	 17,321,057	 24,399,133	902,914
Net income (loss)	23,967,778	57,521,813	80,853,483	3,038,395
Net income attributable to noncontrolling interests	 		_	
Net income (loss)attributable to HCA Florida Hospitals	\$ 23,967,778	\$ 57,521,813	\$ 80,853,483	\$ 3,038,395

	 Palms West Hospital Limited Partnership	Plantation General Hospital Limited Partnership	Poinciana Medical Center, Inc.		utnam Community Medical Center North Florida, LLC
Revenues	\$ 182,655,391	\$ 411,359,529	\$ 89,010,142	\$	75,905,133
Salaries and benefits	67,254,722	156,207,978	28,617,569		29,733,599
Supplies	26,185,867	61,820,913	8,850,230		10,245,189
Other operating expenses	44,444,282	109,406,042	20,573,997		23,805,947
Depreciation	6,906,333	25,039,374	5,668,949		3,263,345
Interest expense	23,866	57,693	2,365,353		-
Management fees	 6,052,566	13,444,241	2,877,749		2,459,877
	150,867,636	365,976,241	68,953,847		69,507,957
Income (loss) before nonoperating gains (losses) and income taxes	31,787,755	45,383,288	20,056,295		6,397,176
Nonoperating gains (losses)	 17,111,026	(2,178,544)	207,363		216,452
Income (loss) before income taxes	48,898,781	 43,204,744	20,263,658		6,613,628
Provision for income taxes (benefit)	11,323,634		 4,655,959	_	1,546,909
Net income (loss)	37,575,147	43,204,744	15,607,699		5,066,719
Net income attributable to noncontrolling interests		 _	_		_
Net income (loss) attributable to HCA Florida Hospitals	\$ 37,575,147	\$ 43,204,744	\$ 15,607,699	\$	5,066,719

		Regional Medical Center Bayonet Point	 Saint Lucie Medical Center	 Sarasota Doctors Hospital, Inc.	Serv High	bring Health ices, LLC d/b/a lands Regional edical Center
Revenues	S	319,471,934	\$ 210,461,339	\$ 154,626,241	\$	64,501,802
Salaries and benefits		104,364,410	68,505,164	52,717,806		24,581,064
Supplies		61,379,327	27,751,279	30,632,142		11,848,224
Other operating expenses		79,960,319	45,935,197	38,418,252 8,533,640		19,714,554
Depreciation		9,265,155 37,985	7,390,727 16,786	14,999		4,127,380 98,647
Interest expense		10,362,461	6,822,893	5,031,539		2,080,508
Management fees		265,369,657	 156,422,046	135,348,378	-	62,450,377
Income (loss) before nonoperating gains (losses) and income taxes		54,102,277	54,039,293	19,277,863		2,051,425
Nonoperating gains (losses)		35,303,422	 32,263,652	5,673,815		(41,323)
Income (loss) before income taxes		89,405,699	86,302,945	24,951,678		2,010,102
Provision for income taxes (benefit)		20,951,062	 19,925,480	5,830,802		475,672
Net income (loss)		68,454,637	66,377,465	19,120,876		1,534,430
Net income attributable to noncontrolling interests						
Net income (loss) attributable to HCA Florida Hospitals	\$	68,454,637	\$ 66,377,465	\$ 19,120,876	\$	1,534,430

		Sun City Hospital, Inc. d/b/a South Bay Hospital	Tallahassee Tallahassee Medical Center, Inc. d/b/a Capital Regional Medical Center		University Hospital, Ltd.	West Florida - dHT, LLC d/b/a lemorial Hospital of Tampa
Revenues	\$	70,185,070	\$ 293,627,311	\$	114,164,685	\$ 138,262,511
Salaries and benefits		33,504,716	84,746,288		53,010,268	53,711,689
Supplies		11,391,317	45,664,706		13,003,674	22,878,238
Other operating expenses		19,551,155	68,167,880		33,413,370	34,130,136
Depreciation		4,924,192	10,454,814		4,232,289	11,372,704
Interest expense		1,208,394	41,223		37,875	911,605
Management fees		2,325,320	 9,274,171		3,699,696	4,539,975
		72,905,094	218,349,082		107,397,172	127,544,347
Income (loss) before nonoperating gains (losses) and income taxes		(2,720,024)	75,278,229		6,767,513	10,718,164
Nonoperating gains (losses)		44,481	 12,817,186		15,078,543	159,586
Income (loss) before income taxes		(2,675,543)	88,095,415		21,846,056	10,877,750
Provision for income taxes (benefit)		(580,207)	20,322,688			 2,488,807
Net income (loss)		(2,095,336)	67,772,727		21,846,056	8,388,943
Net income attributable to noncontrolling interests		-	_			
Net income (loss) attributable to HCA Florida Hospitals	3	(2,095,336)	\$ 67,772,727	2	21,846,056	\$ 8,388,943

	 West Florida - PPH, LLC d/b/a Palms of Pasadena Hospita	ı	West Florida Regional Medical Center, Inc. d/b/a West Florida Hospital		Combined Total
Revenues	\$ 76,49	,167 \$	337,189,907	\$	10,385,741,416
Salaries and benefits	36,586	,116	103,706,501		3,563,446,813
Supplies	10,089	,085	52,268,903		1,677,249,058
Other operating expenses	22,48	,577	71,345,080		2,487,748,285
Depreciation	4,29	,992	13,469,755		483,846,224
Interest expense	9,02	,962	34,617		41,625,831
Management fees	 2,583	,704	11,117,149		338,760,806
	85,05	,436	251,942,005		8,592,677,017
Income (loss) before nonoperating gains (losses) and income taxes	(8,56)	,269)	85,247,902		1,793,064,399
Nonoperating gains (losses)	(99)	,675)	13,154,862		509,667,852
Income (loss) before income taxes	(9,553	,944)	98,402,764		2,302,732,251
Provision for income taxes (benefit)	(2,22)	,107)	22,860,751		523,638,769
Net income (loss)	(7,32	,837)	75,542,013		1,779,093,482
Net income attributable to noncontrolling interests					714,562
Net income (loss) attributable to HCA Florida Hospitals	\$ (7,32	,837) \$	75,542,013	S	1,778,378,920

ATTACHMENT IV

State Certified Paramedics Attestation Equipment List



Crystal Ford, Compliance Officer Orange County EMS 2002-A E. Michigan Street Orlando, FL 32806 June 25, 2021

RE: Letter of Attestation

Dear Ms. Ford:

I, David Lane, MD, Chief of Emergency Department at Osceola Regional Medical Center and the Medical Center's Medical Director for the new interfacility patient ambulance transport service, attest that all hired and utilized Paramedics will be certified and authorized to perform Basic and Advance Life Support in the State of Florida.

Sincerely,

David Lane, MD

Chief of Emergency Department



Osceola Regional Medical Center: Emergency Medical Services ALS Medical Equipment & Supplies

ITEM

EM	L Control of the Cont
	2 3 4 4 5 6
	o Adhesive, silk, or plastic tape – assorted sizes
	o Sterile 4 x 4 inch gauze pads
	o Triangular bandages
	o Roller gauze
	o ABD (minimum 5 x 9 inch) pads
	Bandage shears
	,
	1
	Short spine board and two straps or equivalent
	Adult and pediatric cervical immobilization devices (CID)
	Padding for lateral lower spine immobilization of pediatric patients or equivalent
	Portable oxygen tanks, "D" or "E" cylinders, with one regulator and gauge. Each tank must have a minimum pressure of 1000 psi and liter flow at 15 liters per minute
	Transparent oxygen masks with tubing: adult, child, and infant sizes
	Sets of pediatric and adult nasal cannulae with tubing
	Hand operated bag-valve mask resuscitators, adult and pediatric accumulator, including adult, child, and infant transparent masks capable of use with supplemental oxygen
	Portable suction, electric or gas-powered, with wide-bore tubing and tips which meet the minimum standards as published by the GSA in KKK-A 1822E specifications
	Flashlight with batteries
	Nasopharyngeal airways: pediatric and adult

☐ Approved biohazardous waste plastic bag or impervious container per Chapter 64E-16, F.A.C.



	Safety goggles or equivalent meeting A.N.S.I.Z87.1 standard
	Bulb syringe separate from obstetrical kit
	Thermal absorbent reflective blanket
	Multitrauma dressings
	Pediatric length-based measurement device for equipment selection and drug dosage
MEDI	CATION
	Atropine Sulfate
	Dextrose, 50%
	Epinephrine HCL, 1:1,000 & 1:10,000
	Ventricular dysrhythmic
	Benzodiazepine sedative/anticonvulsant
	Naloxone (Narcan)
	Nitroglycerin, 0.4 mg.
	Inhalant beta adrenergic agent with nebulizer apparatus, as approved by medical director
I.V. SC	OLUTION
	Lactate Ringers or Normal Saline
_	PMENT
_	
	Laryngoscope handle with batteries
	Laryngoscope blades: adult, child, and infant sizes
	Pediatric I.V. arm board or splint appropriate for I.V. stabilization
	Disposable endotracheal tubes: adult, child, and infant sizes. Those below 5.5 mm shall be uncuffed. $2.5 \text{ mm} - 5.0 \text{ mm}$ uncuffed; $5.5 \text{ mm} - 7.0 \text{ mm}$; $7.5 \text{ mm} - 9.0 \text{ mm}$)
	Endotracheal tube stylets: adult and pediatric
	Magill forceps: adult and pediatric
	Device for intratracheal meconium suctioning in newborns
	Tourniquets
	I.V. cannulae: 14 through 24 gauge
	Micro drip sets
	Macro drip sets
	I.V. pressure infuser
	Needles: 18 through 25 gauge
	Intraosseous needles and three way stop cocks
	Syringes: 1 ml. to 20 ml.
	D.C. battery-powered portable monitor with defibrillation and pacing capabilities, ECG printout, and spare battery. The unit shall be capable of delivering pediatric defibrillation (energy below 25 watts/sec and appropriate equipment)
	Monitoring electrodes: adult and pediatric
	Pacing electrodes: adult and pediatric
	Glucometer
	Approved sharps container per Chapter 64E-16, F.A.C
	Flexible suction catheters
	Electronic waveform capnography capable of real-time monitoring and printing record of the intubated patient

ATTACHMENT IV

Proof of Insurance



Health Care Indemnity, Inc. 1100 Dr. Martin L. King Jr. Blvd., Suite 500 Nashville, TN 37203

Phone: 615/344-5193 Fax: 855/775-0393

Email: corp.insurance@hcahealthcare.com

Certificate of Insurance

DATE: 1/1/2021

COI#: 40

This is to certify to:

OSCEOLA REGIONAL MEDICAL CENTER

(Name of Certificate Holder)

700 W. OAK STREET

KISSIMMEE

FL 34741

that the described insurance coverages as provided by the indicated policy has been issued to:

Named Insured:

Address:

HCA HEALTHCARE, INC. AND SUBSIDIARY ORGANIZATIONS EXISTING NOW OR HEREAFTER CREATED OR ACQUIRED

ONE PARK PLAZA

NASHVILLE, TN 37202-0550

The Policy identified below by a policy number is in force on the date of Certificate issuance. Insurance is afforded only with respect to those coverages for which a specific limit of liability has been entered and is subject to all the terms of the Policy having reference thereto. This Certificate of Insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded under any policy identified herein.

	POLICY NO. HCI-10121	POLICY PER Eff. 1-1-20 Exp. 1-1-20	21
TYPE OF	INSURANCE	LIMI	TS OF LIABILITY
Comprehensive Ger Occurrence Form	nage	\$5,000,000 NONE	Each and Every Occurrence Aggregate
Health Care Profess Occurrence Form	sional Liability -	\$5,000,000 NONE	Each and Every Occurrence Aggregate .

SPECIAL CONDITIONS/OTHER

COID: 30902

THE NAMED INSURED INCLUDES

OSCEOLA REGIONAL MEDICAL CENTER

Cancellation: Should any of the above described policies be canceled before the expiration date thereof, the issuing company will endeavor to mail ninety days written notice to the above named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company.

Counters Igned Authorized Signatur

Authorized Bign ature

ATTACHMENT D

FCC Radio License



Federal Communications Commission Wireless Telecommunications Bureau

RADIO STATION AUTHORIZATION

LICENSEE: OSCEOLA REGIONAL MEDICAL CENTER

ATTN: ANDREW YEE OSCEOLA REGIONAL MEDICAL CENTER 700 WEST OAK STREET, TOWER A 1ST FLOOR KISSIMMEE, FL 34741

WRCK597	File Number
	Service ness Pool, Conventional
Regulat PM	ory Status RS
Frequency Coo	rdination Number

FCC Registration Number (FRN): 0009598160

Grant Date	Effective Date	Expiration Date	Print Date
10-25-2018	10-25-2018	10-25-2028	
10-25-2018	10-25-2018	10-25-2028	

STATION TECHNICAL SPECIFICATIONS

Fixed Location Address or Mobile Area of Operation

Loc. 1 Address: 700 West Oak Street, Tower A, 1st Floor

City: Kissimmee County: OSCEOLA State: FL

Lat (NAD83): 28-17-58.1 N Long (NAD83): 081-24-34.3 W ASR No.: Ground Elev: 19.0

Loc. 2 Area of operation

Operating within a 32.0 km radius around fixed location I

Loc. 3 Area of operation

Operating within a 32.0 km radius around 28-17-58.1 N, 081-24-34.3 W,

Kissimmee, OSCEOLA county, FL

Antennas

		Frequencies (MHz)	Sta. Cls.		No. Pagers	Emission Designator	Power	(watts)	Ht./Tp		Construct Deadline
ı	1	000464.73750000	FB2	1		7K60FXE	(watts) 40.000	40.000	meters 25.9	meter \$23.8	Date 10-25-2019
1	1	000462.13750000	FB2	1		7K60FXE	40.000	40.000	25.9	23.8	10-25-2019
2	1	000462.13750000	МО	250		7K60FXE	4.000	4.000			10-25-2019

Conditions:

Pursuant to §309(h) of the Communications Act of 1934, as amended, 47 U.S.C. §309(h), this license is subject to the following conditions: This license shall not vest in the licensee any right to operate the station nor any right in the use of the frequencies designated in the license beyond the term thereof nor in any other manner than authorized herein. Neither the license nor the right granted thereunder shall be assigned or otherwise transferred in violation of the Communications Act of 1934, as amended. See 47 U.S.C. § 310(d). This license is subject in terms to the right of use or control conferred by §706 of the Communications Act of 1934, as amended. See 47 U.S.C. §606.

Licensee Name: OSCEOLA REGIONAL MEDICAL CENTER

Call Sign: WRCK597 File Number: Print Date:

A	m	ŧ	ρ	n	n	2	C

		Frequencies (MHz)		Sta. Cls.	No. Units	No. Pagers	Emission Designator	Output Power (watts)	ERP (watts)	Ant. Ht./Tp meters		Construct Deadline Date
2	1	000464.73750000		MO	250		7K60FXE	4.000	4.000		S	10-25-2019
2	1	000467.13750000		МО	250		7K60FXE	4.000	4.000			10-25-2019
2	1	000469.73750000		МО	250		7K60FXE	4.000	4.000			10-25-2019
3	ı	000456.96250000		МО	250		7K60FXE	4.000	4.000			10-25-2019
3	ı	000466.76250000		МО	250		7K60FXE	4.000	4.000			10-25-2019
3	1	000467.06250000	and a	МО	250		7K60FXE	4.000	4.000			10-25-2019
3	1	000468.61250000		МО	250		7K60FXE	4.000	4.000			10-25-2019
3	ı	000468.86250000		МО	250	.7	7K60FXE	4.000	4.000			10-25-2019
						4 44.						

Control Points

Control Pt. No. 1

Address: 700 W Oak Street, Tower A, 1st Floor

City: Kissimmee County: OSCEOLA State: FL Telephone Number: (407)518-3617

Associated Call Signs

Waivers/Conditions:

NONE

From:

Cc:

Pintozzi Keri Zuver, Christian C Beatty, Crystal

Subject:

Re:COPCN Application

Date:

Friday, August 27, 2021 9:43:47 AM

Good Morning- Yes, approved to change the request to: Osceola Regional Hospital, Inc. d/b/a Osceola Regional Medical Center

Thank you, **Keri Pintozzi** P 407.518.3520 | M 407.433.9219

From: Christian.Zuver@ocfl.net < Christian.Zuver@ocfl.net>

Sent: Friday, August 27, 2021 9:37 AM

To: Pintozzi Keri < Keri. Pintozzi@hcahealthcare.com>

Cc: Crystal.Beatty@ocfl.net

Subject: {EXTERNAL} COPCN Application

CAUTION! This email originated from outside of our organization. **DO NOT CLICK** links or open attachments unless you recognize the sender and know the content is safe.

Ms. Pintozzi

Good Morning. I am completing the review of Osceola Regional Medical Center Inter-facility Transport's application for a COPCN to provide BLS and ALS Interfacility Transport. Before we can process the application any further, I need clarification on the name the COPCN may be issued to. In communications after the application was received, it was requested that the COPCN be issued to Osceola Regional Medical Center. According to the Florida Department of State, this is a fictitious name registered to Osceola Regional Hospital, Inc. Thus, a COPCN could be issued to Osceola Regional Hospital, Inc. d/b/a Osceola Regional Medical Center. If this is satisfactory, please email me a response changing the request to:

Osceola Regional Hospital, Inc. d/b/a Osceola Regional Medical Center

Thank you,



Christian C. Zuver MD, FACEP Medical Director Orange County EMS System 2002-A East Michigan Street Orlando, Florida 32806 P(407) 836-7606 | F(407) 836-7625 Christian.zuver@ocfl.net PLEASE NOTE: Florida has a very broad public records law (F. S. 119). All e-mails to and from County Officials are kept as a public record. Your e-mail communications, including your e-mail address may be disclosed to the public and media at any time.

Zuver, Christian C

From:

Beatty, Crystal

Sent:

Tuesday, July 13, 2021 1:32 PM

To:

Zuver, Christian C

Subject:

FW: Osceola Regional COPCN

See her answer regarding the vehicles.

From: Pintozzi Keri < Keri. Pintozzi@hcahealthcare.com>

Sent: Tuesday, July 13, 2021 1:31 PM

To: Beatty, Crystal < Crystal. Beatty@ocfl.net>

Subject: Re:Osceola Regional COPCN

Sure. We haven't purchased any vehicles yet, as we are waiting for the approval of the COPCNs first. Osceola County already approved our COPCN. Seminole County has it on their BoCC meeting 8/10. The vehicles we plan on buying will be Type III Ambulances. We will be purchasing 2 Type III for any volume increases or if one of the ambulances break down. We will be staffed 24/7 for both vehicles.

Keri Pintozzi

P 407.518.3520 | M 407.433.9219

From: Crystal.Beatty@ocfl.net < Crystal.Beatty@ocfl.net>

Sent: Tuesday, July 13, 2021 1:25 PM

To: Pintozzi Keri < Keri. Pintozzi@hcahealthcare.com>

Cc: Crystal.Beatty@ocfl.net

Subject: {EXTERNAL} RE: Osceola Regional COPCN

CAUTION! This email originated from outside of our organization. **DO NOT CLICK** links or open attachments unless you recognize the sender and know the content is safe.

Also, can you supply the following:

"A description of each vehicle to be used in the applicant's operations, including the make, model, mileage, all vehicle identification and registration numbers." In the application you only said "purchase of 2 Wheeled Coach Citymedic Type III ambulances".

Crystal

From: Beatty, Crystal

Sent: Tuesday, July 13, 2021 1:22 PM

To: 'Pintozzi Keri' < Keri. Pintozzi@hcahealthcare.com>

Cc: Beatty, Crystal < Crystal.Beatty@ocfl.net>

Subject: RE: Osceola Regional COPCN

Keri,

What name should go on the COPCN (if approved) as there are several in the application.

HCA

Osceola Regional Medical Center
Osceola Regional Medical Center Inter-facility Transportation

Thanks

From: Beatty, Crystal

Sent: Tuesday, July 13, 2021 10:27 AM

To: 'Pintozzi Keri' < Keri. Pintozzi@hcahealthcare.com>

Subject: RE: Osceola Regional COPCN

Your application was submitted to my Medical Director, he and the County Attorney are reviewing it.

From: Pintozzi Keri < Keri, Pintozzi@hcahealthcare.com>

Sent: Tuesday, July 13, 2021 10:22 AM
To: Beatty, Crystal < Crystal.Beatty@ocfl.net>

Subject: Re:Osceola Regional COPCN

Good Morning Crystal- Hope all is well. Any updates on Osceola's COPCN? I remember you mentioning that there is a process of posting in Orlando Sentinel, Medical Director review and then on the Board of County Commissioners agenda. Just wondering where it is in the process.

Thank you, Keri Pintozzi P 407.518.3520 | M 407.433.9219

From: Crystal.Beatty@ocfl.net < Crystal.Beatty@ocfl.net>

Sent: Wednesday, June 30, 2021 12:51 PM

To: Pintozzi Keri < Keri. Pintozzi@hcahealthcare.com >

Subject: {EXTERNAL} RE: Millenia ER

CAUTION! This email originated from outside of our organization. **DO NOT CLICK** links or open attachments unless you recognize the sender and know the content is safe.

Hello Keri,

Just emailing you to let you know I received your COPCN application today. 3

Crystal

PLEASE NOTE: Florida has a very broad public records law (F. S. 119). All e-mails to and from County Officials are kept as a public record. Your e-mail communications, including your e-mail address may be disclosed to the public and media at any time.



October 11, 2021

RE: Application for Orange County COPCN

Dear Dr. Christian Zuver:

Osceola Regional Medical Center purchased two ambulances for Interfacility transport services. Descriptions of each ambulance below:

2019 Ford E350 Type III Medix VIN 1FDWE3FS2KDC42575

2019 Ford E350 Type III Medix VIN 1FDWE3FS2KDC43144

Both vehicles are en route from manufacturer in Pennsylvania and will be registered locally once at the facility.

Thank you,

Jason Cunningham Chief Operating Officer



Telephone: 813-229-3500

Facsimile: 813-229-3502

www.mpdlegal.com

100 North Tampa Street Suite 3700 Tampa, Florida 33602

September 30, 2021

Via FedEx and Electronic Mail

Dr. Christian C. Zuver Christian.Zuver@ocfl.net Emergency Medical Services Office 2002-A East Michigan Street Orlando, Florida 32806

Re: Objection to Application of Osceola Regional Hospital, Inc. for COPCN

MPD File No. 120316

Dear Dr. Zuver,

Our firm represents Lifefleet Southeast, Inc., d/b/a American Medical Response ("AMR") as an existing holder of a Certificate of Public Convenience and Necessity ("COPCN") to operate Advanced Life Support ("ALS") and Basic Life Support ("BLS") interfacility services in Orange County. Pursuant to Section 20-92(b)(2) of the Orange County Code of Ordinances, AMR hereby files this objection (the "Objection") to the Application of Osceola Regional Hospital, Inc. (the "Applicant") for a COPCN to operate ALS/BLS interfacility service within Orange County. This Objection is timely under Section 20-92(b)(2) because it has been served within 30 days of the County's notice of the Application.

Applicable Standards and Grounds for Objection

In reviewing an application for a COPCN, Section 20-92(b)(1) of the Code requires the Emergency Medical Services Office (the "EMSO") to "investigate the public need for the proposed service". Further, in reviewing the EMSO's recommendation on the application, Section 20-93(b) of the Code requires "the board of county commissioners shall determine that the proposed service, to the extent to be authorized by the certificate, is or will be required by the present or future public convenience or necessity..."

Here, the Applicant has failed to demonstrate that granting it a COPCN will be in the public convenience and necessity. Section 20-92(a)(6) of the County Code requires verification of staffing requirements and "certification of personnel to be employed." The Application completely fails to adequately describe how its transport or operations will be staffed. Rather, on p. 2, the Application merely states "Start-up operations- hiring process has not begun." A

Dr. Christian C. Zuver September 30, 2021 Page 2 of 3

complete lack of staff description is problematic not only because it does not comply with the County Code, but, as you are aware from the application filed concurrently by First 2 Aid EMS, there is a lack of qualified EMS and paramedics in Orange County and throughout Florida. The question must be asked: where is the Applicant here (along with First 2 Aid) going to find employees? The answer is that they will have to attempt to raid existing providers. Such activity will not advance the public convenience and necessity and the net result (if they are successful in poaching employees) would simply be a reshuffling of employees with no capacity added to service or benefit to the County. Further demonstrating the Applicant's lack of experience in the transportation industry, is the fact that it does not have any ambulances and must purchase them as set forth on p. 2 of the Application. Again, this is a "start up" (in the Applicant's owner words) operation and the Application demonstrates no unmet need for additional service in Orange County. Rather, the Applicant is an existing hospital that is seeking a COPCN for its own private interests instead of demonstrating how public convenience and necessity requires the issuance of new ALS and BLS permits for trips that AMR and the other existing providers can easily accommodate.

Finally, at the August 6, 2019, Board of County Commissioners Meeting the Board considered the application of Affordable Transport, Inc. ("ATI") for an ALS interfacility COPCN. The Board granted ATI a limited COPCN to service a specific facility only. However, during the public hearing, the Board recognized that the Code provisions regarding review and adjudication of COPCN applications needed to be revised to "perfect the process regarding determination of need going forward." See Public Hearing Report details available on the County's website. The Board recognized that COPCN applicants, like the Applicant here, should have to meet a more precise process and specific evidentiary standard of proving that an unmet need exists before being granted a COPCN and the Code should be revised accordingly. The Code, however, remains unchanged since August 6, 2019. As such, consideration of the current application should be postponed (if it is not outright rejected due to lack of proof of need) until the Code can be revised in accordance with the Board's directives

For all of the foregoing reasons, American Medical Response, as an existing provider of ALS/BLS interfacility service in Orange County, respectfully requests that the Application of Osceola Regional Medical Center be denied.

Should you have any questions, please do not hesitate to contact me at (813) 229-3500.

Best regards,

MILLS PASKERT DIVERS

/s/ S. Jordan Miller

Mills Paskert Divers

100 North Tampa Street • Suite 3700 • Tampa, Florida 33602

Dr. Christian C. Zuver September 30, 2021 Page 3 of 3

Jordan Miller



407-843-8880

301 EAST PINE STREET
SUITE 1400
POST OFFICE BOX 3068 (32802-3068)
ORLANDO, FLORIDA 32801

TEL 407-843-8880 FAX 407-244-5690 gray-robinson.com BOCA RATON

FORT LAUDERDALE

FORT MYERS

GAINESVILLE

JACKSONVILLE

KEY WEST

LAKELAND

MELBOURNE

MIAMI

NAPLES

ORLANDO

TALLAHASSEE

TAMPA

WASHINGTON, DC

WEST PALM BEACH

CHRIS.CARMODY@GRAY-ROBINSON.COM

September 29, 2021

VIA HAND DELIVER and E-MAIL

Dr. Christian Zuver Medical Director Orange County Emergency Medical Services 2002 E. Michigan Street Orlando, FL 32806 christian.zuver@ocfl.net

Re:

Objection to Osceola Regional Medical Center COPCN Application

Dr. Zuver:

Our firm represents RG Ambulance Service, Inc. d/b/a American Ambulance, an existing holder of a Certificate of Public Convenience and Necessity ("COPCN") to operate Advance Life Support ("ALS") and Basic Life Support (BLS) interfacility services in Orange County. Pursuant to Section 20-92 (b)(2) of the Orange County Code of Ordinances, RG Ambulance hereby files this objection to the Application of Osceola Regional Medical Center Inter-Facility Transport (hereinafter "Osceola Regional" or the "Applicant") for COPCN to operate ALS / BLS interfacility service within Orange County. This objection is timely under Section 20-92(b)(2) because it has been served within 30 days of the County's notice of the Application.

Applicable Standards and Grounds for Objection

In reviewing an application for a COPCN, Section 20-92(b)(1) of the Code requires the Emergency Medical Office (the "EMSO") to "investigate the public need for the proposed service". Further, in reviewing the EMSO's recommendation on the application, Section 20-93(b) of the Code requires "the board of county commissioners shall determine that the proposed service, to the extent to be authorized by the certificate, is or will be required by the present and future public convenience or necessity..." In fact, Section 20-92(a)(4) requires a "statement of facts showing the demand or need for the proposed service" in the application. In other words, the Orange County Code requires that the applicant demonstrate that there is a need for additional interfacility service in the County and that the existing service is not adequate to meet the public need in the service category.

Florida law also requires that applicants seeking a certificate of public convenience and necessity for transportation services carry the burden of providing that existing service is inadequate. See: Surf Coast Tours, Inc. v Florida Public Service Commission, 385 So. 2d 1353, 1355 (Fla. 1980) (recognizing that an evaluation of "the adequacy of the existing services" must be measured by evaluating existing service providers' performance and the applicant has the burden of proving substandard performance); Stewart Bonded Warehouse, Inc v Bevis, 294 SO. 2d 315 (Fla. 1974) (holding that an applicant shall not receive a certificate of public convenience and necessity if it fails to demonstrate that existing service is

INCLUDE DELIVERY PHRASES IN HEADER

Dr. Christian Zuver September 29, 2021 Page 2

inadequate). See also: Great Southern Trucking Co. v Mack, 54 So. 2d 153, 156 (Fla. 1951) in which the Court acknowledged that:

Statutes in this connection (public transportation) generally contemplate and frequently expressly require that additional new service from a different source shall not be permitted to supersede or vitally impair the present transportation service, where that is or may become adequate to the public needs. Existing investment should be conserved, and present service protected, where adequate and satisfactory, in the interest of justice and public welfare.

Here the Applicant, while known in the community as an excellent provider of healthcare, has completely failed to demonstrate public necessity for additional ALS/BLS interfacility service as required by Florida law and the Orange County Code. In fact, p.2 of the Application section 9 requires "STATEMENT OF FACTS SHOWING DEMAND OR NEED FOR THE PROPOSED SERVICE". The Applicant's statement:

The service would provide inter-facility transportation (Advanced Life Support and Basic Life Support Services) of emergency room patients and patients to be admitted from Hunters Creek and Millenia Free-standing ER' to main hospital, Osceola Regional Medical Center. Eventually to transport to and from other HCA facilities.

The applicant's statement of need and necessity is inadequate, lacks supporting documentation of FACT and does not meet the requirements of Section 20-92. This generic statement of need puts the entire burden on the EMSO team to determine need, despite there being no demand or calls for reform of the current COPCN holders. Without an applicant putting forward any data even suggesting a real, identifiable need, the application fails to meet the basic requirements of the County's code.

Additionally, Section 20-92 (a)(6) of the County Code requires verification of staffing requirements and "certification of personnel to be employed". The Applicant admits:

Start-up operations- hiring has not begun. Will hire to staff both ambulances 24/7.

The applicant admits they currently do not have staff in place to begin this operation. Based on the past eighteen months (18) months of a world pandemic, there is a significant shortage of licensed EMTs and Paramedics available in the hiring pool. This shortage has been felt not only on a local level but on a statewide and national level. Local colleges were forced to cease, curtail and suspend the training required to certify EMT and Paramedics which further eroded the pool of applicants. Approval of this Applicant will only exasperate this critical level of employees. Additionally, the net result would simply be a reshuffling of employees with no capacity added to the service or benefit to the County. In fact, approval of this Applicant will cause a negative effect on the remaining health care institutions in Orange County as the service level to the remainder of the County will become diminished due to a reduction in available staff.

Conclusion

INCLUDE DELIVERY PHRASES IN HEADER

Dr. Christian Zuver September 29, 2021 Page 3

There is a significant defect with the Application that merits its denial. RG Ambulance Service, Inc. d/b/a American Ambulance would be able to further demonstrate that it and other providers within Orange County have the capacity serve the ALS/BLS interfacility market. Should this application for interfacility be granted, without any demonstrated need for the service in Orange County, the intent behind Florida's certificate of need statute and the County Code implementing the statute would be completely disregarded. RG Ambulance Service, Inc. d/b/a American Ambulance has an outstanding reputation in Orange County and the surrounding communities. To date we have not received one single complaint of service or violation from the EMSO in almost two decades.

For the reasons identified, RG Ambulance Service, as an existing provider of ALS/BLS interfacility service provider within Orange County, respectfully request that the Application of Osceola Regional Medical Center Inter-facility Transport, be denied.

Sincerely.

Chris Carmody

MEMORANDUM

TO:

Mayor Jerry L. Demings

County Commissioners

THRU:

Yolanda G. Martinez, EdPh.D, PhD., Director JM

Health Services Department

FROM:

Christian C. Zuver, MD, Medical Director

Office of the Medical Director/EMS Division

Contact: (407) 836-7320

DATE:

October 15, 2021

RE:

EMS's Recommendation on Osceola Regional Hospital Inc. d/b/a Osceola Regional Medical Center's Application for a Certificate of Public Convenience and

Necessity to Provide Interfacility Basic and Advanced Life Support Transport

Services in Orange County

Chapter 20, Article III, Division 2, Subdivision II of the Orange County Code delineates the process for obtaining a Certificate of Public Convenience and Necessity ("COPCN") as required to provide emergency medical care or transportation services in Orange County. Applications for a COPCN must be made on forms provided by Orange County's Emergency Medical Services Office ("EMSO") and must contain, among other things, a statement of facts showing the demand or need for the proposed service, verification that staffing requirements will be met, and such other reasonable information as may be required by Orange County's Health Services Department ("Department"). Upon receiving an application for a COPCN, EMSO makes an investigation into the application and the public need for the proposed service. After concluding its investigation, EMSO makes a recommendation to the Orange County Board of County Commissioners (the "Board" or "BCC") to either grant or deny the application, or grant the application with such conditions of approval as the Department feels are necessary. The purpose of this Memorandum is to provide the BCC with a recommendation on Osceola Regional Hospital Inc. d/b/a Osceola Regional Medical Center's (the "Applicant" or "Osceola Regional") application for a COPCN in accordance with Section 20-92(b)(3), Orange County Code.

On July 13, 2021, Osceola Regional submitted its amended application and attachments for a COPCN to EMSO seeking to provide interfacility Basic Life Support ("BLS") and Advanced Life Support ("ALS") Transport Services within the geographical areas of and primarily transporting from Hunter's Creek Freestanding ER (12100 S. John Young Pkwy., Orlando, FL 32837) and Millenia Free-standing ER (4056 Millenia Blvd., Orlando, FL 32839) to Osceola Regional Medical Center (700 West Oak Street, Kissimmee, FL 34741). (the "Application"). In response to EMSO's request for an employee roster in Section 1, Subsection 12 of the Application, the Applicant stated that it was in start-up operations and that the hiring process had not begun, but that it will hire to staff both ambulances 24/7. Additionally, in response to EMSO's request for a State of Florida October 16, 2021

Re: EMS's Recommendation on Osceola Regional's Application for a COPCN Page 2

ALS License Number in Attachment III of the Application, the Applicant stated that it was in the process of filing an application for an ALS License the State of Florida. Finally, in response to EMSO's request for a vehicle roster with registration numbers in Attachment V of the Application, the Applicant stated that it had not purchased any vehicles yet as it was waiting for the approval of the COPCNs first but that it planned on buying two Type III ambulances.

EMSO investigated Osceola Regional's Application and the public need for BLS and ALS interfacility transport services within Orange County. This is a unique Application because the Applicant is a hospital system that operates facilities in Orange County and currently utilizes the services of existing COPCN holders for its interfacility transport. As such, the Applicant is requesting a COPCN on its own behalf primarily to transport patients between its own facilities. Accordingly, a business agreement is not required to initiate transport. Despite the absence of a business agreement, EMSO has concluded that the Applicant has demonstrated a need or demand for such services in this case.

However, as of the date of this Memorandum, the Applicant has not provided EMSO with an employee roster or a State of Florida ALS License Number. The Applicant states it will commence hiring at a later date, that all paramedics will be State certified and that it will provide an attestation of this fact to EMSO upon onboarding, and that it will have staffing coverage 24/7/365. The Applicant states that it is in the process of filing an application for an ALS License with the State of Florida and that its ALS License is pending. On October 11, 2021, the Applicant informed EMSO that it had purchased two Type III ambulances and provided EMSO with limited descriptions of the vehicles.

EMSO recommends that the Board grant Osceola Regional's Application for a COPCN to provide BLS and ALS transport services in Orange County with the following conditions of approval as believed to be necessary by the Department and EMSO. Prior to providing any BLS or ALS interfacility transport services under this Orange County COPCN, Osceola Regional shall provide the following information to EMSO which shall be deemed sufficient at EMSO's discretion:

- (1) A current State of Florida ALS License Number;
- (2) A current employee roster and verification that all staffing requirements have been met;
- (3) A vehicle roster including the registration numbers of each vehicle to be used during operations.

RECOMMENDATION:

Grant Osceola Regional Hospital Inc. d/b/a Osceola Regional Medical Center's Application for a Certificate of Public Convenience and Necessity to Provide Interfacility Basic and Advanced Life Support Transport Services in Orange County on the condition that Osceola Regional Hospital Inc. d/b/a Osceola Regional Medical Center provide the following information to EMSO prior to providing any BLS or ALS interfacility transport services in Orange County which shall be deemed sufficient at

October 16, 2021

Re: EMS's Recommendation on Osceola Regional's Application for a COPCN

Page 3

EMSO's discretion: (1) a current State of Florida ALS License Number; (2) a current employee roster and verification that all staffing requirements have been met; and (3) a vehicle roster including the registration numbers of each vehicle to be used during operations.

Attachments

cc: Byron W. Brooks, AICP, County Administrator Danny Banks, Deputy County Administrator