

LFIR # 1471

- Project Title
 Madison County Memorial Surgical Suite

 2.
 Senate Sponsor

 Bill Montford
- 3. Date of Request 10/29/2019

4. **Project/Program Description**

Madison County Memorial Hospital (MCMH) constructed a new facility, in operation since 2014, which contained a Surgery Suite that at the time of construction was not fully equipped. This request is to help furnish the Surgical Suite with lighting, autoclave, operating table, life support monitors, instruments, and trays that are required for a Surgical Suite Sterile Environment. Construction funding is not needed, however, assistance with the Surgical Room activation is. A General Surgeon has been hired, who is already on staff and ready to perform services along with an OR Director and other support personnel. Expected surgeries include: Wound Care, Minor Amputation, Gallbladder Removal, Hernia Repair, Appendectomy, Endoscopy, Skin Infections/Cancers, and Implanted Venous Access Devices. Service lines were determined based on our existing patient panel and aligned and designed to enhance services already being provided. This program would serve 20,000 residents locally.

5. State Agency to receive requested funds

Agency for Health Care Administration

State Agency contacted? O Yes

No

6. Amount of the Nonrecurring Request for Fiscal Year 2020-2021

Type of Funding	Amount	
Operations	350,000	
Fixed Capital Outlay	000	
Total State Funds Requested	350,000	

7. Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	350000	100.0 %	
Matching Funds			
Federal	00	0 %	
State (excluding the amount of this request)	00	0 %	
Local	00	0 %	
Other	00	0 %	
Total Project Costs for Fiscal Year 2020-2021	350,000	100 %	

8. Has this project previously received state funding? \bigcirc Yes \odot No

If yes, provide the most recent instance:

Fiscal Year	Amount		Specific	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	Vetoed

9. Is future-year funding likely to be requested? O Yes O No

If yes, indicate nonrecurring amount per year.



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10. Details on how the requested state funds will be expended

Spending Category	Description	Amount			
Administrative Costs:					
Executive Director/Project Head Salary and Benefits					
Other Salary and Benefits					
Expense/Equipment/ Travel/Supplies/Other					
Consultants/Contracted Services/Study					
Operational Costs: Oth	er				
Salary and Benefits					
Expense/Equipment/ Travel/Supplies/Other	Operating Suite Surgical Equipment and Furnishings	350,000			
Consultants/Contracted Services/Study					
Fixed Capital Construction/Major Renovation:					
Construction/Renovation/ Land/Planning Engineering					
Total State Funds Requested (must equal total from question #6) 350,00					



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11. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

The purpose is higher quality of life through local healthcare services. Rural patients are older, poorer, and less mobile than metropolitan area patients. This funding allows Madison residents to access local healthcare services - in particular, minor surgeries designed to manage or heal diseases. The Community Health Improvement Plan (CHIP) states, "by 2022, Madison will be a community with access to greater health resources and a place where citizens, businesses, and the healthcare community unite to ensure resource availability...to be the healthy community we aspire to be". (Florida Department of Health, Jefferson and Madison County [CHA], 2018). An added benefit of this resource is additional job opportunities - Registered Nurses, Surgical Technicians, Sterilization Technician, Insurance Biller, Office Manager, Environmental Services Technician, and a Certified RN Anesthetist. Additional services = future sustainability since the hospital serves a high number of uncompensated.

b. What activities and services will be provided to meet the intended purpose of these funds?

A Surgical Service program for local residents will include preventive health consultations, detection laboratory testing and diagnostic services, consumer health education, and financial counseling. To date, the hospital has been providing these support activities and services yet was forced to refer out the surgical procedures designed to address the condition that was diagnosed. With the establishment of this new surgical line it will provide a more comprehensive care model to better treat patients locally and in the region. Likewise, other providers in the region are able to refer their patients locally to be able to better monitor and transition care between the various healthcare services.

c. What direct services will be provided to citizens by the appropriation project?

Direct services include a variety of elective procedures to help improve the quality of life through surgery. Expected surgeries include the following: amputations, gastrostomy feeding tube insertion, hemorrhoid removal, specialty intravenous catheters, and wound care by a dual Board Certified General Surgeon and Wound Care Specialist. Additionally, appendectomy, endoscopy, skin infections/cancers, and Implanted Venous Access Devices. Once the initial service line is launched and fully operational, the surgeon connects to local specialist in the surrounding suburban and urban neighborhoods to establish rotating surgical specialist: Orthopedics, Urology, Pacemaker Insertion, Plastic Surgery, Dermatology, and Cardiology.

d. Who is the target population served by this project? How many individuals are expected to be served?

The service area in Madison county which has a population of 19,224. Madison's population, sixty years and older, is 26.7% / 5,152 of which (47.2%) are male and 30.8% are African American, Hispanic or other minority. The percentage below 125% of the Poverty Guideline is 24.1% or 1,239 people in the >65 population including food stamp participation rate at 43.6%. Similarly, indicators for at-risk behavior, children raised by grandparents, not only creates an added financial burden, but also the social, mental, and physical aspect of an aging individual being responsible for a person ages eighteen or younger. This caries an added dimension of potential at-risk behavior of the dependent due to abandonment, abuse or neglect that cause the living arrangement in the first place. The Medically Underserved >65 population is 3,243 people. Madison is ranked one of the poorest counties in the state of Florida.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

National Rural Health Association estimates 8 jobs created for every Physician recruited to work in a community health care facility and estimates that more than 40 percent of rural patients travel 20 plus miles to receive specialty care. Beginning October 1, 2017 through May 31, 2018, MCMH saw over 6,303 patients in the Emergency Room alone. Of these 6,303 patients, 60 were diagnosed with Gallbladder issues; 13 with appendicitis; and 18 with hernias. These numbers total 93 patients that traveled 40 to 60+ miles to seek surgical care elsewhere to have these diagnoses repaired. This program results in improved health outcomes which are monitored via the Electronic Health Record (EHR) but also affect the economy by saving residents money through decreased travel time and money spent on fuel, food/other purchases, and the county tax base through local purchasing instead out-of-county which is measured by way of a ROI analysis.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?

CMS and AHCA require certain quality measures be analyzed, tracked, trended, and monitored for an operating room, i.e. surgical site infections, retained foreign body, wrong site surgery, and adverse outcomes relating to a complication caused by operating room staff, among others. The hospital has routinely demonstrated compliance with each business line currently in service. The expectation is that the surgical line will as well. If the program fails to meet deliverables or performance, ACHA imposes standard penalties and requires corrective action which the hospital will comply with if applicable.



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12. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

The governing board of Madison County Health and Hospital District (the district) is made up of seven directors appointed by the Governor of Florida. The District leases the hospital building to Madison County Memorial Hospital, Inc. (MCMH), a 501(c)(3) not-for-profit organization. The board directors that serve the district are the same people as the board directors that serve the not-for-profit corporation. A Critical Access Hospital - Special Hospital District.

13. Requestor Contact Information

	a.	First Name	Tammy	Last Name	Stevens
	b.	Organization	Madison County Memorial Hospita	I	
	c.	E-mail Address	tstevens@mcmh.us		
	d.	Phone Number	(850)253-1969	Ext.	
14.	Re	cipient Contact	Information		
	a.	Organization	Madison County Memorial Hospita	1	
	b.	Municipality and	County Madison		
	C.	Organization Typ	be		
		O For-profit E	ntity		
		Non-Profit {	501(c) (3)		
		O Non-Profit s	501(c) (4)		
		 Local Entity 	/		
		O University of	or College		
		Other (plea	se specify)		
	d.	First Name	Tammy	Last Name	Stevens
	e.	E-mail Address	tstevens@mcmh.us		
	f.	Phone Number	(850)2531969		
15.	Lo	bbyist Contact I	Information		
		Name	None		
		Firm Name	None		
	C.	E-mail Address			
	d.	Phone Number		Ext.	