

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

	Nursing Home	Total payment	Total IGT
1	Amara Healthcare & Rehab	4,590,962	1,225,901
2	Appling Nursing and Rehabilitation	606,164	161,861
3	Azalea Trace Nursing Center	3,272,938	873,956
4	Calhoun Nursing Home	2,342,736	625,569
5	Chatuge Regional Nursing Home	2,243,432	599,052
6	Coastal Manor	3,155,805	842,679
7	Southwell Health and Rehabilitation	2,618,988	699,335
8	Cordele Health & Rehab Center	1,606,199	428,896
9	Crestview Nursing Facility	10,274,857	2,743,643
10	Crisp Regional Nursing and Rehabilitation	2,018,378	538,958
11	Early Memorial Nursing Facility	2,658,288	709,830
12	Effingham County Extended Care	1,549,671	413,801
13	Emanuel County Nursing Home	1,342,099	358,374
14	Florence Hand Home	1,867,776	498,743
15	Habersham Home	1,655,872	442,160
16	Joe-Anne Burgin Nursing Home	1,647,856	440,018
17	Kentwood Nursing Facility	1,934,279	516,501
18	Laurel Park at Henry Medical Center	1,528,106	408,042
19	Magnolia Manor Columbus Center - East	3,427,696	915,281
20	Magnolia Manor Columbus Centre - West	4,078,517	1,089,066
21	Magnolia Manor Marion County	2,163,467	577,700
22	Magnolia Manor Methodist Nursing Center	5,805,205	1,550,135
23	Memorial Manor Nursing Home	2,164,938	578,092
24	Meriwether Healthcare	3,142,554	839,140
25	Miller Nursing Home	12,486,546	3,334,220
26	Mitchell Convalescent Center	1,327,782	354,551
27	Muscogee Manor	2,661,340	710,645
28	New Horizons Lanier Park	2,473,680	660,534
29	New Horizons Limestone	2,497,957	667,017
30	Northside Gwinnett Extended Care Center	1,675,842	447,492
31	Orchard View	3,824,791	1,021,314
32	Palemon Gaskins Nursing Home	419,641	112,054
33	Pelham Parkway Nursing Home	3,026,136	808,054
34	Pinewood Manor Nursing Home & Rehabilitation	4,344,656	1,160,131
35	Senior Care Center - Brunswick	4,833,698	1,290,719
36	Senior Care Center - St. Marys	1,189,849	317,719
37	SGMC Lakeland Villa	806,338	215,312
38	The Retreat	1,427,787	381,255
39	Townsend Park Health & Rehabilitation	4,613,681	1,231,968
40	Treutlen County Nursing Home	1,742,439	465,275
41	Twin Fountains Home	1,719,573	459,169
42	Twin Oaks Convalescent Center	2,056,559	549,153
43	Union County Nursing Home	2,464,252	658,017
44	University Extended Care - Westwood	3,753,376	1,002,245
45	Washington County Extended Care Facility	1,220,267	325,842
46	Wellstar Paulding Nursing Center	5,009,731	1,337,724
	TOTAL	133,272,704	35,587,143

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Amara Healthcare & Rehab

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	317.89	331.25
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	148.46	154.69
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	165.56	171.79

Medicare UPL rate minus Medicaid UPL rate

Line 5		152.34	159.46
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	27,974	27,974
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		28,790

Facility-Specific UPL calculation

Line 10		4,590,962
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		4,590,962
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		4,590,962

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Appling Nursing and Rehabilitation

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	231.06	240.77
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	197.76	206.06
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	214.86	223.16

Medicare UPL rate minus Medicaid UPL rate

Line 5		16.20	17.61
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	33,446	33,446
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		34,421

Facility-Specific UPL calculation

Line 10		606,164
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		606,164
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		606,164

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Azalea Trace Nursing Center

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	301.57	314.25
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	185.85	193.66
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	202.95	210.76

Medicare UPL rate minus Medicaid UPL rate

Line 5		98.62	103.49
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	30,729	30,729
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		31,625

Facility-Specific UPL calculation

Line 10		3,272,938
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		3,272,938
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		3,272,938

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Calhoun Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	319.62	333.06
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	190.34	198.33
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	207.44	215.43

Medicare UPL rate minus Medicaid UPL rate

Line 5		112.18	117.62
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	19,353	19,353
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		19,917

Facility-Specific UPL calculation

Line 10		2,342,736
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,342,736
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,342,736

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Chatuge Regional Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	275.55	287.13
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	182.53	190.19
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	199.63	207.29

Medicare UPL rate minus Medicaid UPL rate

Line 5		75.92	79.84
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	27,303	27,303
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		28,099

Facility-Specific UPL calculation

Line 10		2,243,432
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,243,432
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,243,432

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Coastal Manor

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	319.22	332.64
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	209.10	217.88
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	226.20	234.98

Medicare UPL rate minus Medicaid UPL rate

Line 5		93.02	97.66
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	31,400	31,400
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		32,315

Facility-Specific UPL calculation

Line 10		3,155,805
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		3,155,805
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		3,155,805

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Southwell Health & Rehab

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	276.3	287.92
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	169.54	176.66
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	186.64	193.76

Medicare UPL rate minus Medicaid UPL rate

Line 5		89.66	94.16
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	27,027	27,027
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		27,815

Facility-Specific UPL calculation

Line 10		2,618,988
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,618,988
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,618,988

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Cordele Health & Rehab Center

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	309.15	322.15
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	191.27	199.31
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	208.37	216.41

Medicare UPL rate minus Medicaid UPL rate

Line 5		100.78	105.74
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	14,760	14,760
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		15,190

Facility-Specific UPL calculation

Line 10		1,606,199
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,606,199
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,606,199

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Crestview Nursing Facility

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	304.66	317.47
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	171.68	178.89
Line 3	Provider Fee adjustment	0.00	0.00
Line 4	Adjusted Medicaid rate for UPL	171.68	178.89

Medicare UPL rate minus Medicaid UPL rate

Line 5		132.98	138.58
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	72,044	72,044
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		74,144

Facility-Specific UPL calculation

Line 10		10,274,857
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		10,274,857
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		10,274,857

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Crisp Regional Nursing and Rehab

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	300.31	312.93
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	179.99	187.55
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	197.09	204.65

Medicare UPL rate minus Medicaid UPL rate

Line 5		103.22	108.29
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	18,111	18,111
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		18,639

Facility-Specific UPL calculation

Line 10		2,018,378
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,018,378
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,018,378

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Early Memorial Nursing Facility

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	257.15	267.96
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	155.96	162.51
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	173.06	179.61

Medicare UPL rate minus Medicaid UPL rate

Line 5		84.09	88.35
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	29,237	29,237
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		30,089

Facility-Specific UPL calculation

Line 10		2,658,288
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,658,288
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,658,288

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Effingham County Extended Care

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	279.11	290.84
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	204.81	213.41
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	221.91	230.51

Medicare UPL rate minus Medicaid UPL rate

Line 5		57.20	60.33
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	24,959	24,959
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		25,687

Facility-Specific UPL calculation

Line 10		1,549,671
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,549,671
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,549,671

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Emanuel County Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	302.29	315.00
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	204.58	213.17
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	221.68	230.27

Medicare UPL rate minus Medicaid UPL rate

Line 5		80.61	84.72
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	15,392	15,392
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		15,841

Facility-Specific UPL calculation

Line 10		1,342,099
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,342,099
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,342,099

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Florence Hand Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	254.17	264.86
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	193.65	201.79
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	210.75	218.89

Medicare UPL rate minus Medicaid UPL rate

Line 5		43.42	45.97
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	39,480	39,480
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		40,631

Facility-Specific UPL calculation

Line 10		1,867,776
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,867,776
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,867,776

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Habersham Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	275.6	287.19
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	181.56	189.19
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	198.66	206.29

Medicare UPL rate minus Medicaid UPL rate

Line 5		76.94	80.90
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	19,888	19,888
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		20,468

Facility-Specific UPL calculation

Line 10		1,655,872
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,655,872
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,655,872

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Joe-Anne Burgin Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	254.29	264.98
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	163.99	170.88
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	181.09	187.98

Medicare UPL rate minus Medicaid UPL rate

Line 5		73.20	77.00
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	20,794	20,794
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		21,400

Facility-Specific UPL calculation

Line 10		1,647,856
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,647,856
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,647,856

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Kentwood Nursing Facility

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	319.38	332.81
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	197.43	205.72
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	214.53	222.82

Medicare UPL rate minus Medicaid UPL rate

Line 5		104.86	109.99
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	17,088	17,088
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		17,586

Facility-Specific UPL calculation

Line 10		1,934,279
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,934,279
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,934,279

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Laurel Park at Henry Medical Center

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	360.55	375.71
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	214.87	223.89
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	231.97	240.99

Medicare UPL rate minus Medicaid UPL rate

Line 5		128.59	134.72
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	11,022	11,022
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		11,343

Facility-Specific UPL calculation

Line 10		1,528,106
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,528,106
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,528,106

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Magnolia Manor Columbus - East

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	294.78	307.17
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	189.25	197.20
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	206.35	214.30

Medicare UPL rate minus Medicaid UPL rate

Line 5		88.43	92.87
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	35,862	35,862
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		36,907

Facility-Specific UPL calculation

Line 10		3,427,696
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		3,427,696
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		3,427,696

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Magnolia Manor Columbus - West

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	319.42	332.85
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	175.96	183.35
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	193.06	200.45

Medicare UPL rate minus Medicaid UPL rate

Line 5		126.36	132.40
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	29,932	29,932
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		30,805

Facility-Specific UPL calculation

Line 10		4,078,517
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		4,078,517
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		4,078,517

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Magnolia Manor Marion County

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	320.47	333.94
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	191.21	199.24
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	208.31	216.34

Medicare UPL rate minus Medicaid UPL rate

Line 5		112.16	117.60
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	17,876	17,876
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		18,397

Facility-Specific UPL calculation

Line 10		2,163,467
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,163,467
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,163,467

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Magnolia Manor Methodist Nursing Ctr

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	298.89	311.46
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	175.93	183.32
Line 3	Provider Fee adjustment	0.00	0.00
Line 4	Adjusted Medicaid rate for UPL	175.93	183.32

Medicare UPL rate minus Medicaid UPL rate

Line 5		122.96	128.14
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	44,022	44,022
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		45,305

Facility-Specific UPL calculation

Line 10		5,805,205
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		5,805,205
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		5,805,205

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Memorial Manor Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	256.35	267.13
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	171.73	178.94
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	188.83	196.04

Medicare UPL rate minus Medicaid UPL rate

Line 5		67.52	71.08
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	29,593	29,593
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		30,456

Facility-Specific UPL calculation

Line 10		2,164,938
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,164,938
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,164,938

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Meriwether Healthcare

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	298.09	310.62
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	156.76	163.35
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	173.86	180.45

Medicare UPL rate minus Medicaid UPL rate

Line 5		124.23	130.17
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	23,457	23,457
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		24,141

Facility-Specific UPL calculation

Line 10		3,142,554
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		3,142,554
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		3,142,554

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Miller Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	496.13	516.99
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	198.38	206.71
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	215.48	223.81

Medicare UPL rate minus Medicaid UPL rate

Line 5		280.66	293.18
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	41,384	41,384
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		42,590

Facility-Specific UPL calculation

Line 10		12,486,546
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		12,486,546
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		12,486,546

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Mitchell Convalescent Center

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	296.03	308.47
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	186.33	194.16
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	203.43	211.26

Medicare UPL rate minus Medicaid UPL rate

Line 5		92.60	97.22
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	13,271	13,271
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		13,658

Facility-Specific UPL calculation

Line 10		1,327,782
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,327,782
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,327,782

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Muscogee Manor

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	303.45	316.21
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	216.62	225.71
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	233.72	242.81

Medicare UPL rate minus Medicaid UPL rate

Line 5		69.74	73.39
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	35,234	35,234
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		36,261

Facility-Specific UPL calculation

Line 10		2,661,340
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,661,340
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,661,340

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: New Horizons Lanier Park

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	304.59	317.39
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	198.16	206.48
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	215.26	223.58

Medicare UPL rate minus Medicaid UPL rate

Line 5		89.34	93.82
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	25,620	25,620
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		26,367

Facility-Specific UPL calculation

Line 10		2,473,680
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,473,680
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,473,680

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: New Horizons Limestone

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	304.02	316.80
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	190.14	198.12
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	207.24	215.22

Medicare UPL rate minus Medicaid UPL rate

Line 5		96.79	101.58
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	23,894	23,894
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		24,591

Facility-Specific UPL calculation

Line 10		2,497,957
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,497,957
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,497,957

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Northside Gwinnett Extended Care Ctr

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	343.11	357.53
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	211.93	220.83
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	229.03	237.93

Medicare UPL rate minus Medicaid UPL rate

Line 5		114.08	119.60
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	13,615	13,615
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		14,012

Facility-Specific UPL calculation

Line 10		1,675,842
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,675,842
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,675,842

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Orchard View

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	292.45	304.74
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	209.66	218.47
Line 3	Provider Fee adjustment	0.00	0.00
Line 4	Adjusted Medicaid rate for UPL	209.66	218.47

Medicare UPL rate minus Medicaid UPL rate

Line 5		82.79	86.28
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	43,076	43,076
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		44,332

Facility-Specific UPL calculation

Line 10		3,824,791
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		3,824,791
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		3,824,791

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Palemon Gaskins Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	266.55	277.76
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	198.12	206.44
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	215.22	223.54

Medicare UPL rate minus Medicaid UPL rate

Line 5		51.33	54.22
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	7,521	7,521
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		7,740

Facility-Specific UPL calculation

Line 10		419,641
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		419,641
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		419,641

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Pelham Parkway Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	264.65	275.78
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	163.30	170.15
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	180.40	187.25

Medicare UPL rate minus Medicaid UPL rate

Line 5		84.26	88.52
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	33,217	33,217
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		34,185

Facility-Specific UPL calculation

Line 10		3,026,136
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		3,026,136
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		3,026,136

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Pinewood Manor Nursing Home & Rehab

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	265.72	276.89
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	115.07	119.90
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	132.17	137.00

Medicare UPL rate minus Medicaid UPL rate

Line 5		133.56	139.89
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	30,177	30,177
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		31,057

Facility-Specific UPL calculation

Line 10		4,344,656
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		4,344,656
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		4,344,656

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Senior Care Center - Brunswick

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	285.42	297.42
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	191.21	199.24
Line 3	Provider Fee adjustment	0.00	0.00
Line 4	Adjusted Medicaid rate for UPL	191.21	199.24

Medicare UPL rate minus Medicaid UPL rate

Line 5		94.21	98.18
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	47,839	47,839
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		49,234

Facility-Specific UPL calculation

Line 10		4,833,698
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		4,833,698
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		4,833,698

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Senior Care Center - St. Marys

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	267.48	278.72
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	186.16	193.97
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	203.26	211.07

Medicare UPL rate minus Medicaid UPL rate

Line 5		64.23	67.65
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	17,090	17,090
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		17,588

Facility-Specific UPL calculation

Line 10		1,189,849
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,189,849
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,189,849

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: SGMCLakeland Villa

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	257.98	268.83
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	203.01	211.54
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	220.11	228.64

Medicare UPL rate minus Medicaid UPL rate

Line 5		37.87	40.19
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	19,497	19,497
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		20,065

Facility-Specific UPL calculation

Line 10		806,338
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		806,338
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		806,338

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: The Retreat

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	297.16	309.65
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	185.00	192.77
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	202.10	209.87

Medicare UPL rate minus Medicaid UPL rate

Line 5		95.06	99.78
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	13,904	13,904
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		14,309

Facility-Specific UPL calculation

Line 10		1,427,787	
	Facility-Specific UPL calculation for 07-01-20 to 06-30-21	1,427,787	
	Allocation of UPL aggregate limit	0	
	UPL calculation subject to aggregate limit	1,427,787	

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Townsend Park Health & Rehab

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	345.85	360.39
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	184.59	192.34
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	201.69	209.44

Medicare UPL rate minus Medicaid UPL rate

Line 5		144.16	150.95
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	29,699	29,699
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		30,565

Facility-Specific UPL calculation

Line 10		4,613,681
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		4,613,681
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		4,613,681

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Treutlen County Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	301.13	313.79
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	172.75	180.01
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	189.85	197.11

Medicare UPL rate minus Medicaid UPL rate

Line 5		111.28	116.68
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	14,510	14,510
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		14,933

Facility-Specific UPL calculation

Line 10		1,742,439
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,742,439
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,742,439

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Twin Fountains Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	233.96	243.80
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	162.86	169.70
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	179.96	186.80

Medicare UPL rate minus Medicaid UPL rate

Line 5		54.00	57.00
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	29,314	29,314
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		30,169

Facility-Specific UPL calculation

Line 10		1,719,573
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,719,573
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,719,573

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Twin Oaks Convalescent Center

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	282.74	294.63
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	194.15	202.30
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	211.25	219.40

Medicare UPL rate minus Medicaid UPL rate

Line 5		71.50	75.23
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	26,564	26,564
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		27,338

Facility-Specific UPL calculation

Line 10		2,056,559
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,056,559
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,056,559

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Union County Nursing Home

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	258.82	269.70
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	187.34	195.21
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	204.44	212.31

Medicare UPL rate minus Medicaid UPL rate

Line 5		54.38	57.39
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	41,719	41,719
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		42,935

Facility-Specific UPL calculation

Line 10		2,464,252
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		2,464,252
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		2,464,252

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: University Extended Care - Westwood

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	319.39	332.82
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	189.87	197.84
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	206.97	214.94

Medicare UPL rate minus Medicaid UPL rate

Line 5		112.42	117.88
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	30,940	30,940
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		31,842

Facility-Specific UPL calculation

Line 10		3,753,376
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		3,753,376
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		3,753,376

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Washington County Extended Care

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	260.51	271.46
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	176.27	183.67
Line 3	Provider Fee adjustment	17.10	17.10
Line 4	Adjusted Medicaid rate for UPL	193.37	200.77

Medicare UPL rate minus Medicaid UPL rate

Line 5		67.14	70.69
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	16,773	16,773
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		17,262

Facility-Specific UPL calculation

Line 10		1,220,267
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		1,220,267
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		1,220,267

Georgia Department of Community Health
SFY 2021 Nursing Home UPL

Provider Name: Wellstar Paulding Nursing Center

Average Base Year (10/1/2018 - 9/30/2019)	Rate Year - SFY2021
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Medicare UPL Rate

Line 1	PPS rate based on Medicaid patients for each quarter	276.53	288.16
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Medicaid UPL Rate

Line 2	Medicaid rate without provider fee	174.98	182.32
Line 3	Provider Fee adjustment	0.00	0.00
Line 4	Adjusted Medicaid rate for UPL	174.98	182.32

Medicare UPL rate minus Medicaid UPL rate

Line 5		101.56	105.83
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Medicaid Patient Days

Line 6	Medicaid days reported from quarterly provider fee report (base year)	45,996	45,996
Line 7	Estimated change in patient days for SFY2021		2.92%
Line 8	Portion of year		100%
Line 9	Adjusted Medicaid patient days for UPL		47,337

Facility-Specific UPL calculation

Line 10		5,009,731
Facility-Specific UPL calculation for 07-01-20 to 06-30-21		5,009,731
Allocation of UPL aggregate limit		0
UPL calculation subject to aggregate limit		5,009,731
		137,936,145