

1 MINUTES OF MEETING OF NORTH LAKE COUNTY
2 HOSPITAL DISTRICT OF August 12, 2021
3

4 A meeting of the North Lake County Hospital District (NLCHD) was held on August 12,
5 2021 at 5:30 p.m. in the Lake County Commission Chambers, Administration Building,
6 315 W. Main Street, Tavares, Florida, and was also made available via teleconference due
7 to COVID-19, a novel strain of the coronavirus.
8

9 Ms. Barbara Price, Chairman, called the meeting to order and led the Pledge of Allegiance.
10 She also called for a moment of silence.
11

12 ROLL CALL

13 Ms. Meredith Kirste, attorney for the NLCHD, called the roll to ascertain the trustees
14 present for the meeting, with the following members in attendance: Ms. Susan Hooper, Ms.
15 Joyce Richey Huey, Ms. Barbara Price, Mr. Ralph Smith, and Mr. Tim Sullivan.
16

17 ADOPTION OF PROPOSED POLICY 2021-1

18 Ms. Kirste said that the Board did not have a current policy regarding trustees participating
19 via electronic media, and this policy would allow the trustees to attend, participate and vote
20 at the meetings under certain circumstances outlined in paragraphs A through D. She added
21 that at the current time, the trustees could appear via Zoom Webinar, but there was not a
22 mechanism adopted to allow them to participate and vote; additionally, this proposed
23 policy had been drafted from one that had been adopted by the local school board.
24

25 On a motion by Mr. Smith, seconded by Ms. Huey, and carried unanimously by a vote of
26 5-0, the NLCHD board approved Policy 2021-1.
27

28 Ms. Kirste then reminded the Board of their obligation under the oath administered to them,
29 noting that the Board must faithfully perform their duties consistent with the purpose of
30 the district as outlined in Chapter 2012-258, Laws of Florida. She also reminded the Board
31 that the Sunshine Law was applicable to the NLCHD, and they had been presented with
32 copies of the 2021 guide to the Sunshine Amendment and code of ethics. She noted that
33 the law was applicable to any gathering, whether formal or casual, of two or more members
34 of the same board who discuss some matter in which foreseeable action would be taken by
35 the public board.
36

37 APPROVAL OF MINUTES

38 On a motion by Ms. Huey, seconded by Mr. Smith, and carried unanimously by a vote of
39 5-0, the NLCHD board approved the Minutes of January 21, 2021.
40

41 Ms. Kirste asked to move the presentation of quarterly audits tab to later in the agenda,
42 noting that Mr. Terrance Wilson, Audit Manager with Moore Stephens Lovelace (MSL),
43 was not yet in attendance.
44
45
46
47

1 PRESENTATION OF REQUEST FOR FUNDING FROM HOSPITALS

2 Ms. Price noted in the past, a NLCHD Board member had asked that they remove this item
3 because the Board had this information. She asked that they remove the presentation part
4 of this meeting.

5
6 Ms. Hooper made a motion to remove the presentation part of the current meeting, and Ms.
7 Huey seconded the motion.

8
9 Ms. Huey asked if the hospitals would not need to make a presentation.

10
11 Ms. Price opined that the Board had the numbers and everything they needed to make their
12 decision, and said it was up to the Board to pass on the presentations.

13
14 Ms. Kirste clarified that this was at the request of the Chairman, and stated that individuals
15 had gone to great lengths to put presentations together.

16
17 Ms. Hooper noted that the presenters and the audience did not receive the emails.

18
19 Mr. Sullivan relayed that he would not support the motion, commenting that he looked
20 through the presentations and had a few questions.

21
22 Ms. Kirste asked if Ms. Anita Swan, a NLCHD Board member, was in attendance via Zoom
23 Webinar.

24
25 Ms. Elizabeth Heine, Enterprise Support Manager for the Lake County Information
26 Technology (IT) Department, read the list of attendees on Zoom Webinar; furthermore,
27 Ms. Swan was not in attendance.

28
29 On a motion by Ms. Hooper, seconded by Ms. Huey, which failed by a 1-4 vote, the
30 NLCHD board did not approve removing the presentation part of the current meeting.

31
32 Ms. Hooper, Ms. Huey, Mr. Smith and Mr. Sullivan voted no.

33
34 UF Health Leesburg Hospital

35 Mr. Ed Jimenez, Chief Executive Officer (CEO) for University of Florida (UF) Health,
36 discussed the pandemic and said that the things they were learning put additional pressures
37 on how they needed to serve their community and the people that worked there. He
38 commented that they viewed themselves as a safety net, mentioning their heart program,
39 obstetrician (OB) program, taking care of kids, and their neurosurgery program. He
40 mentioned that they dealt with these items without regard for the payor, and he remarked
41 that they had an obligation to provide the latest equipment and services, as well as
42 encouraging people to do the right thing. He said that they had invested about \$25 million
43 into the community, and that there were pressures. He displayed a chart of the current
44 payor mix, noting that Medicaid would never cover the cost for a hospital or its physicians.
45 He said that self-pay/uninsured payors were straightforward and that the hospital still had
46 those expenses; additionally, Medicare was part of their economic system and did not cover
47 its costs. He stated that they would keep serving the community, and that in the past, the

1 NLCHD had set a budget number and UF Health Leesburg Hospital had come forward
2 with what the actual costs were. He elaborated that this was they were looking for, opining
3 that they were not looking to make money from the NLCHD. He mentioned that
4 testimonials were included in the Board's packet, and he commented that the hospital
5 would do the best it could. He said that the pandemic had made their employees tired,
6 noting that they needed staff to take care of patients. He relayed that they were hiring
7 companies to find them nurses, and that they were paying three, four and five times the
8 amount so that they could keep providing care. He opined that this was probably the year
9 to leave them alone financially because they were doing their best to find staff; additionally,
10 he opined that reducing funding would make the problem larger. He stated that this would
11 allow them to continue for at least one more year as they tried to figure out what to do for
12 their community, and what the pandemic would do to their workforce and their expense
13 structure.

14

15 Mr. Sullivan asked him to explain how Medicaid was reimbursed.

16

17 Mr. Jimenez replied that the State of Florida hired consultants who came up a fee schedule;
18 furthermore, the intention was to be a discount off of Medicare. He commented that if
19 Medicare was a losing proposition, then the State's position was to be a discount off of
20 that. He stated that the Medicaid funding for UF Health Leesburg Hospital was roughly
21 63 cents on a dollar, and they had to figure out how to survive on the negative one third
22 cost, which was finding insured patients to make up that number. He opined that this
23 economic model forced hospitals to figure out how to charge paying patients more. He
24 said that it had been like this for over 20 years, and each year they spoke with their
25 legislators; however, the State could not change the funding overnight.

26

27 Mr. Sullivan inquired if low income pools (LIPs) were still around, noting that this helped
28 some things at one time. He also mentioned that the State of Florida was one of 22 states
29 that participated in the cost of Medicaid.

30

31 Mr. Jimenez responded that the LIP changed dramatically under Speaker Jose R. Oliva,
32 noting that the low income funding from the State for UF Health Leesburg Hospital also
33 changed dramatically. He elaborated that they had money taken away because of how it
34 changed, and that they had hopes to change it back; however, with how the system worked
35 currently, someone would lose in that equation. He expressed his understanding that
36 hospitals that benefitted when UF Health Leesburg Hospital lost money would fight to not
37 lose it, especially during a pandemic. He hoped that they could have a conversation about
38 this in two or three legislative sessions, but there was clarity that in the upcoming session
39 that the Florida Senate and House of Representatives were concerned about the COVID-
40 19 impact. He said that he would do what he could to convey the importance of this to
41 every member of leadership, along with the Florida Governor.

42

43 Ms. Hooper said that she admired the Community Medical Care Center in the City of
44 Leesburg, along with St. Luke's Free Medical and Dental Clinic, because they had all
45 volunteer help. She expressed that she would rather support them than doctors that had
46 funding.

47

1 Mr. Jimenez stated that when they were supporting UF Health Leesburg Hospital, they
2 were not supporting a doctor.

3
4 Ms. Hooper inquired if their staff was well paid.

5
6 Mr. Jimenez thought that their nurses were paid adequately and that their housekeepers
7 were paid okay.

8
9 Ms. Hooper asked if they had any charitable people who liked to volunteer.

10
11 Mr. Jimenez commented that they could ask, but that they had asked a lot of the staff after
12 the last 18 months. He encouraged Ms. Hooper to tour the hospital with him.

13
14 Ms. Hooper relayed that she did not have a good experience at AdventHealth Waterman.

15
16 Mr. Jimenez clarified that he could not speak for AdventHealth Waterman and that he was
17 here on behalf of UF Health Leesburg Hospital.

18
19 AdventHealth Waterman

20 Mr. Abel Biri, CEO for AdventHealth Waterman, stated that the hospitals were in this
21 together, and he said that they were here to serve and had been in the community for a long
22 time. He commented that their doors were open 24/7, 365 days per year, and they would
23 take care of anyone who walked in. He mentioned that they were a safety net and that it
24 was a large infrastructure to keep available for the community. He said that every bit of
25 profit from the work they did was reinvested into the community, whether it was facilities,
26 additional expertise, updating their equipment, adding new services, or expanding services.
27 He asked that the NLCHD continue to support them as they tried to serve the community.

28
29 LifeStream Behavioral Center, Inc.

30 Ms. Carol Dozier, Chief Financial Officer (CFO) for LifeStream Behavioral Center,
31 remarked that they were celebrating LifeStream's 50th anniversary. She shared that
32 LifeStream was currently up to over 900 staff and was in over seven counties; additionally,
33 the core of their business was in Lake County. She relayed that they provided inpatient
34 services and that they were a psychiatric hospital, and they also had primary care. She
35 added that for their payor sources, they had to be diversified to survive in the current
36 business community. She indicated that they spent time applying for grants, and they had
37 certified public accountant (CPA) audits which did not have findings or questions about
38 costs. She elaborated that this was because they were not double dipping and were
39 accounting for costs carefully, and she said that they had developed a continuum of care
40 that included inpatient, outpatient, residential, and medical services. She shared that many
41 of their consumers came to them in their time of need, but sometimes not knowing their
42 need, and she mentioned how many consumers they received from the Marchman Act and
43 Baker Act. She explained that these individuals were brought to LifeStream, possibly
44 against their will, as LifeStream tried to treat them for their behavioral healthcare needs.
45 She clarified that although they were a private business, many of their consumers were
46 brought to them by practitioners in the community, as well as law enforcement. She
47 mentioned the impact of the pandemic on behavioral health, noting that LifeStream was

1 here to serve that. She thanked the NLCHD for their funding and remarked that they had
2 served 227 patients for over 773 days, noting that the average claim was a little over \$4,000,
3 meaning they had a three to five day length of stay in their inpatient unit. She expressed
4 appreciation for the NLCHD's continued support.

5
6 Ms. Hooper commented that she had taken an individual to LifeStream and that they had
7 benefitted.

8
9 Mr. Sullivan thought that every law enforcement agency in Lake County would say that
10 without LifeStream, Baker Act admissions would not be possible.

11
12 Ms. Dozier opined that jails would also be too full of people who should be receiving care.

13
14 PRESENTATION OF REQUEST FOR FUNDING FROM CLINICS

15
16 Community Health Centers, Inc.

17 Mr. Mark Dickinson, Vice President and Chief Financial Officer (CFO) for Community
18 Health Centers, remarked that they had been around for 49 years and had grown to 15
19 service sites between Orange and Lake Counties. He commented that they always had a
20 center in the City of Leesburg, and that they had added a center in the City of Tavares in
21 2014. He relayed that the pandemic had a devastating impact on their patients and their
22 workforce of around 600; furthermore, they currently had around 90 vacancies. He stated
23 that in the previous year, between their medical, dental, behavioral health and optometry
24 services, they did 28,000 visits in the Cities of Leesburg and Tavares, furthermore, about
25 20 percent of those patients were uninsured. He commented that they were a federally
26 qualified health center and were not truly a free clinic. He elaborated that they offered a
27 sliding fee scale and that for people at 100 percent of poverty and below, they were free of
28 charge; however, the clinic asked them for a nominal fee of \$20. He said that studies had
29 indicated that financial participation in healthcare increased the participation of the patients
30 in their healthcare; furthermore, if someone did not have the \$20, this did not mean that the
31 clinic did not see them. He also indicated that the clinic did not bill them, and that nearly
32 every patient paid the \$20. He said that he was requesting the same amount of funding as
33 in the previous year, even though their numbers were starting to increase. He stated that he
34 they had provided over \$1.5 million of charity care in those two sites. He added that he
35 had also included in the packet their economic impact in the county, which was slightly
36 over \$12 million. He encouraged the Board to visit the website chcfl.org to learn more
37 about his organization.

38
39 Ms. Price remarked that she had toured the City of Tavares and City of Leesburg offices,
40 and opined that the City of Tavares office was great. She asked if the dentists who came
41 there volunteered.

42
43 Mr. Dickinson clarified that all of their provider staff were compensated and employed.

44
45 Mr. Wilson said that MSL did the testing for the clinics and the hospitals' claims each
46 quarter, and he clarified that the \$20 paid by Community Health Centers' patients was

1 taken out of their reimbursement; therefore, they were still getting the same rate as any
2 other clinic.

3
4 PRESENTATION OF QUARTERLY AUDITS

5 Mr. Wilson presented the report from the quarter ended March 31, 2021. He commented
6 that this quarter was similar to the other quarters they had seen, and they were still pretty
7 far behind what the budget was for the year. He thought that most of the locations were
8 between 55 and 60 percent of their budget going into the last quarter, and that most of the
9 locations would be behind their budget this year; however, at least one clinic was going to
10 meet their budget unless the last quarter was significantly behind. He mentioned that there
11 should be an excess when they got through the June 2021 testing, and hopefully the surplus
12 could go forward, noting that it was the Board's decision regarding what to do with it. He
13 believed that Community Health Centers would meet and probably exceed their budget,
14 commenting that they did not seem to have the same drop off as others; furthermore, they
15 had been over their budgeted amount each year that he had been involved with this. He
16 thought that COVID-19 had drastically decreased the numbers, especially early in the year,
17 and they noticed that less patients were going to hospitals, due to COVID-19 concerns,
18 unless it was for something severe.

19
20 Mr. Sullivan asked if they would have a total reconsideration before the September 2021
21 NLCHD meetings.

22
23 Mr. Wilson confirmed this and noted that their budget ran from June to June. He added
24 that the report they issued so far was only through March 2021 and that they did them
25 quarterly; furthermore, there were sometimes delays.

26
27 Ms. Patricia Sykes-Amos, accountant for the NLCHD, clarified that every government in
28 the State of Florida, except the State, had an October 1 to September 30 year; additionally,
29 the State had a July 1 to June 30 year. She elaborated that when the NLCHD provided
30 funding in January 2022, they would be writing payments for what the providers did
31 through September 30, 2021, and then they would later pay through January 2022. She
32 mentioned that the checks that she was providing on the current day were through March
33 2021, and they would have June 2021's checks in September 2021. She explained that
34 June to September was quarter one, and the NLCHD's first quarter was September to
35 December.

36
37 Mr. Sullivan asked to confirm that for Medicaid billing, etc., everyone was 60 to 90 days
38 behind as they went through the system, and Ms. Sykes-Amos confirmed this.

39
40 PRESENTATION OF REQUEST FOR FUNDING FROM CLINICS CONTINUED

41
42 Community Medical Care Center

43 Mr. Bill Jones, Executive Director for Community Medical Care Center, said that for the
44 past 25 years, his organization had provided medical care to the most medically needy
45 residents in Lake County. He stated that they currently enjoyed the volunteer partnership
46 of 50 licensed primary and specialty care physicians that allowed them to provide the most
47 patient visits of any free clinic in the county. He mentioned that in each clinic session they

1 had, there was a family practice or internal medical physician working alongside their nurse
2 practitioners to provide excellent care. He also remarked that they provided their patients
3 with in-house specialty medical care from 15 volunteer experts. He said that these
4 physicians, along with their volunteer nurses and volunteer office staff, made their clinic a
5 one stop home for primary and specialty care. He added that they also had a state of the
6 art dental wing where their volunteer retired dentists served. He recalled that in 1990, the
7 community recognized the need for indigent medical care, and the NLCHD was formed,
8 and over the past 31 years, this had helped thousands of people through free clinics. He
9 also recalled that in 2016, the community had restated that desire to fulfill this commitment
10 to the community by voting overwhelmingly to approve the NLCHD for an additional 10
11 years. He mentioned that this critical funding provided about 80 percent of his
12 organization's overall budget, and their service would be greatly reduced without it. He
13 asked the NLCHD to continue to support them for a total of \$325,125 in funding needs,
14 for an estimated 2,125 patients at a rate of \$153 per visit. He expressed appreciation for
15 the support of the Board, and he said that it was his organization's passion to carry on the
16 mission of providing the most basic needs to those in the community.

17

18 Mr. Sullivan thanked him for the recent opportunity to tour his facility.

19

20 AdventHealth Waterman Community Primary Health Clinic

21 Ms. Melissa Simmes, Director of Outpatient Centers and Community Services for
22 AdventHealth Waterman Community Primary Health Clinic, showed an image detailing
23 their patient demographic, and said that they provided a total of over 1,100 visits between
24 July 1, 2020 and June 30, 2021, noting that these were medical visits but that they did more
25 than just medical. She explained that whole person care was important to them and that
26 they wanted to ensure that patients were being served with other needs. She noted that
27 with other concerns in life, it was difficult for one to focus on their healthcare; therefore,
28 her organization conducted screenings and saw what services they could help them with
29 beyond medical care. She said that information provided to the NLCHD included social
30 service appointments and referrals, and that they saw 117 new patients in that timeframe
31 which indicated that they went to the emergency room (ER) a total of 191 times in the year
32 prior to finding the clinic. She stated that her organization's goal was to have a new
33 medical home for them rather than them going to the ER to receive medicine on a monthly
34 basis. She added that they provided patients with education, awareness, samples and small
35 gifts. She noted that the request of \$170,500 on the letter that was sent to the NLCHD was
36 the correct amount, and she thanked Ms. Hooper and Mr. Smith for touring the clinic. She
37 relayed that there were patients who wanted to thank them for their support and for the
38 services received through her clinic.

39

40 LifeStream Primary Care Clinic

41 Ms. Dozier commented that LifeStream Behavioral Center's Wellness Integration Network
42 (WIN) Clinic was their primary care clinic that they initially received a federal grant to
43 start, noting that for federal grants, the Federal Government wanted clinics to develop a
44 sustainability plan to continue after the federal money was over. She elaborated that the
45 NLCHD's funds were how LifeStream sustained the clinic, and she shared that they did
46 everything one might imagine a clinic did, but for a unique group of individuals. She
47 explained that while they took all comers, for the most part the individuals that came to

1 them were part of a health home for their behavioral healthcare and medical needs. She
2 said that individuals with behavioral healthcare difficulties often died an average of 25
3 years sooner than others, and this was because those challenges also presented difficulties
4 in seeking care. She stated that if they could put this care together with behavioral
5 healthcare, the chances were that one would receive whole person care. She mentioned
6 that the WIN clinic was co-located with an internal pharmacy, and if one had co-morbid
7 conditions, noting that 68 percent of their patients also had a chronic physical condition
8 and that one in five had a co-occurring substance use disorder, then those medications could
9 be made available to make access to care as seamless as possible. She expressed
10 appreciation for the NLCHD's funding, noting that as a result of that funding they were
11 able to serve over 300 eligible clients in their offices. She mentioned that while they had
12 a reduction during the pandemic because in-person services were limited, they were seeing
13 individuals coming back.

14

15 St. Luke's Free Medical and Dental Clinic

16 Ms. Erin Burley, Clinic Coordinator for Catholic Charities of Central Florida, said that St.
17 Luke's Free Medical and Dental Clinic opened in November 2010 and had been dedicated
18 to serving the uninsured and low income residents of Lake County. She expressed
19 appreciation for the NLCHD's funding over the years, noting that they did not charge their
20 patients any fees and relied heavily upon this funding. She commented that the majority
21 of patients they saw were suffering from diabetes, hypertension or high cholesterol;
22 furthermore, these conditions could typically be well managed and improved with routine
23 medical care. She added that people on limited incomes and no health insurance were
24 unable to receive that care, and this could lead to serious health implications. She stated
25 that the 2021 county health rankings data reports indicated that 18 percent of adults under
26 the age of 65 were uninsured in Lake County, which was over 35,000 people who needed
27 places like St. Luke's and the other clinics. She relayed information about a patient who
28 they were able to sign up for a patient's assistance program to provide them their
29 medication for free, and that they could now see a physician on a regular basis. She
30 indicated that they had also helped an individual with their cholesterol levels, and that they
31 had found a patient's cancer at a much earlier stage than if they were not coming to the
32 clinic. She said that they were a small clinic, but opined that the impact they had on their
33 patients' lives was great, and she asked that the NLCHD continue their support for the
34 clinic.

35

36 Mr. Sullivan asked where their clinic was located.

37

38 Ms. Burley responded that it was on Grove Street in the City of Eustis. She also invited
39 the Board to come and see the clinic.

40

41 PUBLIC COMMENT ON REQUESTS FOR FUNDING

42 Ms. Jane Hepting, a City of Eustis resident, thanked the NLCHD for the work they did,
43 and opined that it was important for funding to come into the community to help people
44 who could not afford medical care. She said that she was proud that the county had this
45 system of taxation to help indigent clients.

46

1 Ms. Mary Kay Rosinski, a former NLCHD Board member, stated that she had an
2 opportunity to visit the hospitals and clinics and meet the patients. She questioned where
3 patients would have gone if these services were not available, noting that uninsured and
4 underinsured patients would have to go to hospital ERs for basic healthcare, which would
5 slow down the medical response time for everyone; furthermore, she opined that residents
6 would have to pay for this through increases in their medical costs. She opined that the
7 community wanted these clinics to continue, recalling that in 2016, 59 percent of the county
8 voters reinstated the NLCHD for another 10 years. She asked the NLCHD to fully fund
9 the clinics so that their services could continue.

10
11 Ms. Christi Susewitt, a Lake County resident, thanked the Board for everything they did
12 for the community. She relayed her background and said that she had the opportunity to
13 visit the clinics and hospitals and to see the patients; furthermore, she expressed support
14 for everything the NLCHD did for residents.

15
16 Ms. Patricia Bennett, a former clinic volunteer, thanked the Board for serving the county
17 and the indigent population. She commented that through the clinics, they kept people out
18 of the ER, relaying an understanding that the average ER bill was from \$3,000 to \$5,000.
19 She urged the Board to consider that if funding was denied, those people would end up
20 somewhere eventually; furthermore, she questioned what they were going to do if the
21 hospitals became nonviable.

22
23 Ms. Heine stated that there were callers via Zoom Webinar.

24
25 Mr. Jason Carter, speaking on behalf of Representative Anthony Sabatini, said they
26 believed that the NLCHD must be shut down and that the millage rate must go to zero. He
27 opined that the NLCHD was corrupt, and he relayed his understanding that hospital
28 districts were created in the 1950s to help indigents who could not afford healthcare, and
29 to support hospitals in rural parts of the state. He opined that in the mid-1960s, Medicare,
30 Medicaid and Home Rule eliminated the need for hospital taxing districts. He opined that
31 this district had been unneeded since the late 1960s, and indicated that these taxing districts
32 did not exist elsewhere in Central Florida. He opined that currently, hospitals and
33 nonprofits were the wealthiest entities in the State of Florida, and that they did not need
34 this windfall tax subsidy anymore. He opined that the NLCHD must be eliminated, similar
35 to how the South Lake County Hospital District was eliminated four years prior. He
36 relayed his understanding that health clinics could be funded through the legislative budget
37 request process, that the millage rate must be moved to zero, and that the local legislative
38 delegation was in favor of this. He opined that the only individuals that benefited from this
39 were lobbyists.

40
41 Ms. Nancy Hurlbert, a concerned citizen, recalled that in 2016, the taxpayers of North Lake
42 voted to maintain the NLCHD for 10 years; additionally, efforts in the most recent
43 legislative session to dissolve the district had failed. She thought that this spoke to many
44 taxpayers contacting legislators and confirming the benefit that the district provided. She
45 opined that they needed to respect the feelings and votes of the taxpayers.

1 Ms. Michelle Colby, a concerned citizen, expressed support for the comments made on
2 behalf of Representative Sabatini, noting that she would like to see the millage be zero.

3
4 Ms. Pam Janelle, an attendee at the current meeting, thanked the NLCHD for the work they
5 did. She opined that the Board was very important and that this was a transparent system.
6 She expressed appreciation for going ahead with the presentations at the current meeting,
7 and she relayed her understanding that none of the funding was going to lobbyists.

8
9 Mr. David Serdar, a concerned citizen in attendance via Zoom Webinar, made various
10 comments.

11
12 OTHER MATTERS

13 Ms. Price asked the Board members if they had any questions or input.

14
15 Ms. Hooper expressed appreciation for Community Medical Care Center and St. Luke's
16 Free Medical and Dental Clinic because they were all volunteer. She expressed that she
17 was not real happy with the hospitals, and she thought they had much more funding. She
18 also expressed concerns for their price of medicine.

19
20 Ms. Huey said that having been in the medical profession for 28 years, she was supportive
21 of the NLCHD continuing their support of the hospitals and the clinics. She commented
22 that what they charged and received was a vast difference, and she opined that it was
23 challenging to compare unless one had seen the billing. She added that in order for them
24 to continue seeing indigent patients, she was in favor of all of it.

25
26 Mr. Smith opined that some of the organizations had a vested financial interest in
27 continuance of this, noting that the Board had a different constituency than just the medical
28 profession. He relayed his understanding that the vote in 2016 was gained by hospital and
29 medical interests promoting it, and that there was not a contingency that was well funded
30 to advertise the vote. He expressed appreciation for the hospital, and said that the current
31 Board members were elected in the previous year. He commented that he had toured Ms.
32 Simmes' facility and that he liked what they were doing; however, he also relayed that he
33 knew a personal anecdotal story that was less than flattering, and this type of evidence did
34 not persuade him. He said that it was philosophical for him, and he commented that in the
35 past, the amount that the NLCHD had funded had been about 18 percent of the annual
36 budget of the Lake County Board of County Commissioners' ad valorem tax, and he opined
37 that this was a large amount of money to go to one particular entity. He opined that it was
38 basically corporate welfare, and that compassion and love was when he voluntarily wrote
39 a check to the hospitals or district. He commented that the situation with indigent people
40 was not lost on him, and that these would be some items on his mind when it came time to
41 vote on this. He relayed that he was also open to discussion, and he had felt like everyone
42 who had attended had the right to speak.

43
44 Mr. Sullivan remarked that he had been on the Leesburg Regional Hospital Board for about
45 20 years and that while the system was transparent, it was complicated because government
46 was involved. He opined that for many years and because of the NLCHD, there had been
47 helpful things that happened in the hospitals which people were reimbursed for. He

1 commented that the Federal Government had set it up so that if one was participating
2 locally, then they would have more funding; however, this had gone away. He mentioned
3 that he was partial to the hospitals and that two days a week, he did volunteer work at the
4 Leesburg Food Bank; therefore, he interacted with people who used the discussed facilities.
5 He opined that having the clinics was great because it kept patients out of the ER, noting
6 that ER care was the most expensive care. He mentioned that from the economic
7 development side, quality healthcare was a significant draw to Lake County, and he opined
8 that they probably would not have this without the NLCHD. He opined that South Lake
9 was a different issue due to payor mix and other items, and that the NLCHD was
10 transparent. He elaborated that the State audited this and that the Medicare funding came
11 through the State. He added that the State of Florida was one of 22 states where local
12 governments participated in the cost of Medicaid. He relayed that this bill to Lake County
13 voters was \$4.3 million when he was a County Commissioner, and that it would be more
14 if they did not have the hospital tax. He commented that he would take all of this into
15 consideration as he moved forward, that they were not done with the process, and that he
16 looked forward to September 2021 when they would discuss the budget.

17
18 Ms. Price thanked everyone for their presentations. She said that she knew what it was like
19 to not be able to go to the hospital and receive care, and that she gave to charities. She
20 relayed that hard working young and elderly people were paying the NLCHD tax, and
21 expressed concerns that they did not have extra money; furthermore, she opined that most
22 of them did not know that they were being taxed again. She expressed respect for what
23 they did in their clinics and opined that they were a vital part of the community; however,
24 the NLCHD collected \$11 million to \$12 million each taxing year, and hospitals were
25 receiving most of that funding. She noted that COVID-19 had affected everyone, and she
26 relayed that after 18 months of COVID-19 and watching working people struggle, she
27 would be voting for zero millage.

28
29 Ms. Sykes-Amos explained that the truth in millage (TRIM) notices would show one mill
30 for the NLCHD because they did not have budget workshops starting in May 2021. She
31 elaborated that the Board would have a budget worksheet that showed the numbers with
32 one mill, with what they did in the current year, and with what it would be with a rollback
33 rate. She said that at the first meeting in September 2021, the Board would narrow this
34 down, commenting that the Lake County Property Appraiser would send her his budget,
35 which was locked. She added that the Lake County Tax Collector would receive two
36 percent and that this was also locked, and that with other insurance, the website, their fees,
37 and attorney fees, there was not much wiggle room. She commented that as a district, they
38 were obligated to stay in business and pay those; therefore, they would need to pass a
39 budget. She stated that this would be worked through at the next meeting, and that two
40 weeks later when they had the final meeting, the Board would have pretty much already
41 decided what they were going to do, and this is what she would include in the newspaper.
42 She clarified that the NLCHD did not always charge one mill and that it just showed on
43 the TRIM notice.

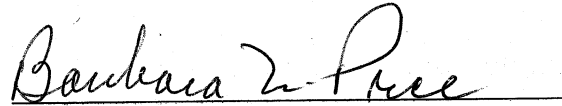
44
45 Mr. Sullivan asked if the current millage rate was 0.895 mills.
46

1 Ms. Sykes-Amos believed this was correct. She then said that as soon as Mr. Wilson
2 received all of the June 2021 submissions, she would have a better understanding of how
3 much they were going to pay out for the current year; therefore, she probably would not
4 know until the first or second week of September 2021 what she thought the carryover
5 would be.

6
7 Ms. Kirste said that the next two meeting dates were September 9 and 23, 2021, and as
8 soon as they had any information from Ms. Sykes-Amos, they would provide that to the
9 Board.

10
11 ADJOURNMENT

12 The meeting adjourned at 7:05 p.m.

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17 

18 Barbara Price, Chairman

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