

**SCHEDULE 9 - FINAL SETTLEMENT CALCULATION**Fire Department / Agency: Alachua County Fire Rescue  
National Provider Identification: 1780610287Fiscal Year Ended: June 30, 2022

Average Cost per EMT Service																													
1. Cost of MTS Services (from Sch 2)		\$ 31,635,453																											
2. Indirect Cost Factor Based on MTS Services? (please use drop-down box to select Yes or No) (A)																													
3. If no, please enter the total cost to be used for calculating the Indirect Cost	\$ -																												
4. Indirect Cost Factor Percentage (please see notes below)	0.00%																												
5. Administration & General Allocation from Sch 5 (B)	\$ 4,800,471																												
6. Administration & General to be included		4,800,471																											
7. Grand Total of MTS Expense (Sum lines 1 thru 4)		\$ 36,435,924																											
8. Number of MTS Transports	<table border="1"> <thead> <tr> <th colspan="2">FL Medicaid</th> <th>Other</th> </tr> <tr> <th>Managed Care</th> <th>Fee for Service</th> <th></th> </tr> </thead> <tbody> <tr> <td>Qtr 1 July 1 through September 30</td> <td>1,299</td> <td>127</td> </tr> <tr> <td>Qtr 2 October 1 through December 31</td> <td>1,137</td> <td>88</td> </tr> <tr> <td>Qtr 3 January 1 through March 31</td> <td>1,170</td> <td>90</td> </tr> <tr> <td>Qtr 4 April 1 through June 30</td> <td>1,328</td> <td>106</td> </tr> <tr> <td></td> <td>4,934</td> <td>411</td> </tr> </tbody> </table>	FL Medicaid		Other	Managed Care	Fee for Service		Qtr 1 July 1 through September 30	1,299	127	Qtr 2 October 1 through December 31	1,137	88	Qtr 3 January 1 through March 31	1,170	90	Qtr 4 April 1 through June 30	1,328	106		4,934	411	<table border="1"> <tbody> <tr> <td>8,208</td> </tr> <tr> <td>7,436</td> </tr> <tr> <td>7,595</td> </tr> <tr> <td>7,710</td> </tr> <tr> <td>30,949</td> </tr> <tr> <td>36,294</td> </tr> </tbody> </table>	8,208	7,436	7,595	7,710	30,949	36,294
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9. Average Cost per MTS Transports (Line 7/Line 8)		\$ 1,004																											

Average Cost per EMT Service						
	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Totals	
	July 1 through September 30	October 1 through December 31	January 1 through March 31	April 1 through June 30		
10. Total No. of Medicaid Fee for Service EMT Transports	127	88	90	106		411
11. Total Cost of Medicaid EMT Transports (Line 9 x Line 10)	\$ 127,496.62	\$ 88,344.12	\$ 90,351.94	\$ 106,414.50	\$	412,607
12. Less Total Medicaid Revenue from Transports (Fr Sch 8)	\$ 21,132.00	\$ 14,726.00	\$ 14,606.00	\$ 18,152.00	\$	68,616.00
13. Net Cost of Transports	\$ 106,365	\$ 73,618	\$ 75,746	\$ 88,263	\$	343,991
14. Non Federal Share Reduction	\$ 42,492.67	\$ 29,410.44	\$ 30,260.50	\$ 35,260.87	\$	137,424.47
15. Net Federal Participation Amount (FMAP = 60.05%)	\$ 63,871.96	\$ 44,207.68	\$ 45,485.43	\$ 53,001.63	\$	206,566.70

(A) If the percentage-based indirect cost factor is elected, review SPA 15-014, Section C, Paragraph 1.b. and submit supporting documentation with the cost report submission.

(B) In most cases, when an Indirect Cost Factor is being applied, there should be no Administration &amp; General cost allocated.