

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|--|--|-------------------------------|--------------------------|-------------------|-------------------|
| HOSPICE OF PALM BEACH COUNTY INC. | | WEST PALM BEACH, FL 33 | | 10/01/2007 | 09/30/2008 |
| A00 | Wkst A Reclassification and Adjustment of Trial Balance of Expenses | | | | |
| 00100 | Capital Related Cost - Building & Fixtures | 0500 | Other Cost | 1,534,306. | |
| 00100 | Capital Related Cost - Building & Fixtures | 0600 | Total (Col 1 to 5) | 1,534,306. | |
| 00100 | Capital Related Cost - Building & Fixtures | 0800 | Sub Total (Column 6 & 7) | 1,534,306. | |
| 00100 | Capital Related Cost - Building & Fixtures | 1000 | Total (Col 8 and 9) | 1,534,306. | |
| 00200 | Capital Related Cost - Moveable Equipment | 0500 | Other Cost | 29,979. | |
| 00200 | Capital Related Cost - Moveable Equipment | 0600 | Total (Col 1 to 5) | 29,979. | |
| 00200 | Capital Related Cost - Moveable Equipment | 0800 | Sub Total (Column 6 & 7) | 29,979. | |
| 00200 | Capital Related Cost - Moveable Equipment | 1000 | Total (Col 8 and 9) | 29,979. | |
| 00300 | Plant Operation and Maintenance | 0100 | Salaries | 386,503. | |
| 00300 | Plant Operation and Maintenance | 0200 | Employee Benefits | 70,723. | |
| 00300 | Plant Operation and Maintenance | 0300 | Transporation | 2,886. | |
| 00300 | Plant Operation and Maintenance | 0400 | Contracted Services | 2,596. | |
| 00300 | Plant Operation and Maintenance | 0500 | Other Cost | 2,734,820. | |
| 00300 | Plant Operation and Maintenance | 0600 | Total (Col 1 to 5) | 3,197,528. | |
| 00300 | Plant Operation and Maintenance | 0800 | Sub Total (Column 6 & 7) | 3,197,528. | |
| 00300 | Plant Operation and Maintenance | 1000 | Total (Col 8 and 9) | 3,197,528. | |
| 00500 | Volunteer Service Coordination | 0100 | Salaries | 170,430. | |
| 00500 | Volunteer Service Coordination | 0200 | Employee Benefits | 31,186. | |
| 00500 | Volunteer Service Coordination | 0600 | Total (Col 1 to 5) | 201,616. | |
| 00500 | Volunteer Service Coordination | 0800 | Sub Total (Column 6 & 7) | 201,616. | |
| 00500 | Volunteer Service Coordination | 1000 | Total (Col 8 and 9) | 201,616. | |
| 00600 | Administrative and General | 0100 | Salaries | 11,223,104. | |
| 00600 | Administrative and General | 0200 | Employee Benefits | 2,053,625. | |
| 00600 | Administrative and General | 0300 | Transporation | 220,035. | |
| 00600 | Administrative and General | 0400 | Contracted Services | 544,618. | |
| 00600 | Administrative and General | 0500 | Other Cost | 6,133,789. | |
| 00600 | Administrative and General | 0600 | Total (Col 1 to 5) | 20,175,171. | |
| 00600 | Administrative and General | 0700 | Reclassification | -1,092. | |
| 00600 | Administrative and General | 0800 | Sub Total (Column 6 & 7) | 20,174,079. | |
| 00600 | Administrative and General | 1000 | Total (Col 8 and 9) | 20,174,079. | |
| 01000 | Inpatient - General Care | 0100 | Salaries | 7,468,252. | |
| 01000 | Inpatient - General Care | 0200 | Employee Benefits | 1,366,555. | |
| 01000 | Inpatient - General Care | 0300 | Transporation | 8,980. | |
| 01000 | Inpatient - General Care | 0400 | Contracted Services | 5,012,205. | |
| 01000 | Inpatient - General Care | 0500 | Other Cost | 4,565,673. | |
| 01000 | Inpatient - General Care | 0600 | Total (Col 1 to 5) | 18,421,665. | |
| 01000 | Inpatient - General Care | 0800 | Sub Total (Column 6 & 7) | 18,421,665. | |
| 01000 | Inpatient - General Care | 1000 | Total (Col 8 and 9) | 18,421,665. | |
| 01100 | Inpatient - Respite Care | 0400 | Contracted Services | 93,748. | |
| 01100 | Inpatient - Respite Care | 0600 | Total (Col 1 to 5) | 93,748. | |
| 01100 | Inpatient - Respite Care | 0800 | Sub Total (Column 6 & 7) | 93,748. | |
| 01100 | Inpatient - Respite Care | 1000 | Total (Col 8 and 9) | 93,748. | |
| 01500 | Visiting - Physician Services | 0400 | Contracted Services | 3,231,760. | |
| 01500 | Visiting - Physician Services | 0600 | Total (Col 1 to 5) | 3,231,760. | |
| 01500 | Visiting - Physician Services | 0800 | Sub Total (Column 6 & 7) | 3,231,760. | |
| 01500 | Visiting - Physician Services | 1000 | Total (Col 8 and 9) | 3,231,760. | |

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| Line | Line Description | Col | Column Description | Value | Type |
|------------|--|------|--------------------------|-------------|------|
| A00 | Wkst A Reclassification and Adjustment of Trial Balance of Expenses | | | | |
| 01600 | Visiting Services - Nursing Care | 0100 | Salaries | 12,965,576. | |
| 01600 | Visiting Services - Nursing Care | 0200 | Employee Benefits | 2,372,466. | |
| 01600 | Visiting Services - Nursing Care | 0300 | Transporation | 384,935. | |
| 01600 | Visiting Services - Nursing Care | 0400 | Contracted Services | 952,256. | |
| 01600 | Visiting Services - Nursing Care | 0600 | Total (Col 1 to 5) | 16,675,233. | |
| 01600 | Visiting Services - Nursing Care | 0800 | Sub Total (Column 6 & 7) | 16,675,233. | |
| 01600 | Visiting Services - Nursing Care | 1000 | Total (Col 8 and 9) | 16,675,233. | |
| 01700 | Visiting Services - Physical Therapy | 0400 | Contracted Services | 42,301. | |
| 01700 | Visiting Services - Physical Therapy | 0600 | Total (Col 1 to 5) | 42,301. | |
| 01700 | Visiting Services - Physical Therapy | 0800 | Sub Total (Column 6 & 7) | 42,301. | |
| 01700 | Visiting Services - Physical Therapy | 1000 | Total (Col 8 and 9) | 42,301. | |
| 01800 | Visiting Services - Occupational Therapy | 0400 | Contracted Services | 6,523. | |
| 01800 | Visiting Services - Occupational Therapy | 0600 | Total (Col 1 to 5) | 6,523. | |
| 01800 | Visiting Services - Occupational Therapy | 0800 | Sub Total (Column 6 & 7) | 6,523. | |
| 01800 | Visiting Services - Occupational Therapy | 1000 | Total (Col 8 and 9) | 6,523. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0400 | Contracted Services | 3,600. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0600 | Total (Col 1 to 5) | 3,600. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0800 | Sub Total (Column 6 & 7) | 3,600. | |
| 01900 | Visiting Services - Speech/Language Pathology | 1000 | Total (Col 8 and 9) | 3,600. | |
| 02000 | Visting Services - Medical Social Services | 0100 | Salaries | 1,072,481. | |
| 02000 | Visting Services - Medical Social Services | 0200 | Employee Benefits | 196,245. | |
| 02000 | Visting Services - Medical Social Services | 0300 | Transporation | 58,029. | |
| 02000 | Visting Services - Medical Social Services | 0600 | Total (Col 1 to 5) | 1,326,755. | |
| 02000 | Visting Services - Medical Social Services | 0800 | Sub Total (Column 6 & 7) | 1,326,755. | |
| 02000 | Visting Services - Medical Social Services | 1000 | Total (Col 8 and 9) | 1,326,755. | |
| 02100 | Visting Services - Spiritual Counseling | 0100 | Salaries | 904,742. | |
| 02100 | Visting Services - Spiritual Counseling | 0200 | Employee Benefits | 165,552. | |
| 02100 | Visting Services - Spiritual Counseling | 0300 | Transporation | 62,543. | |
| 02100 | Visting Services - Spiritual Counseling | 0600 | Total (Col 1 to 5) | 1,132,837. | |
| 02100 | Visting Services - Spiritual Counseling | 0800 | Sub Total (Column 6 & 7) | 1,132,837. | |
| 02100 | Visting Services - Spiritual Counseling | 1000 | Total (Col 8 and 9) | 1,132,837. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0100 | Salaries | 2,926,625. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0200 | Employee Benefits | 535,520. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0300 | Transporation | 266,227. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0400 | Contracted Services | 87,433. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0600 | Total (Col 1 to 5) | 3,815,805. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0800 | Sub Total (Column 6 & 7) | 3,815,805. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 1000 | Total (Col 8 and 9) | 3,815,805. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0100 | Salaries | 1,139,220. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0200 | Employee Benefits | 208,457. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0400 | Contracted Services | 2,494,248. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0500 | Other Cost | 206,902. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0600 | Total (Col 1 to 5) | 4,048,827. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0800 | Sub Total (Column 6 & 7) | 4,048,827. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 1000 | Total (Col 8 and 9) | 4,048,827. | |
| 03100 | Durable Medical Equipment | 0400 | Contracted Services | 2,113,309. | |
| 03100 | Durable Medical Equipment | 0600 | Total (Col 1 to 5) | 2,113,309. | |

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| Line | Line Description | Col | Column Description | Value | Type |
|------------|--|------|--------------------------|------------|------|
| A00 | Wkst A Reclassification and Adjustment of Trial Balance of Expenses | | | | |
| 03100 | Durable Medical Equipment | 0800 | Sub Total (Column 6 & 7) | 2,113,309. | |
| 03100 | Durable Medical Equipment | 1000 | Total (Col 8 and 9) | 2,113,309. | |
| 03200 | Patient Tranporation | 0400 | Contracted Services | 237,904. | |
| 03200 | Patient Tranporation | 0600 | Total (Col 1 to 5) | 237,904. | |
| 03200 | Patient Tranporation | 0800 | Sub Total (Column 6 & 7) | 237,904. | |
| 03200 | Patient Tranporation | 1000 | Total (Col 8 and 9) | 237,904. | |
| 03300 | Imaging Services | 0400 | Contracted Services | 44,381. | |
| 03300 | Imaging Services | 0600 | Total (Col 1 to 5) | 44,381. | |
| 03300 | Imaging Services | 0800 | Sub Total (Column 6 & 7) | 44,381. | |
| 03300 | Imaging Services | 1000 | Total (Col 8 and 9) | 44,381. | |
| 03400 | Labs and Diagnostics | 0400 | Contracted Services | 32,844. | |
| 03400 | Labs and Diagnostics | 0600 | Total (Col 1 to 5) | 32,844. | |
| 03400 | Labs and Diagnostics | 0800 | Sub Total (Column 6 & 7) | 32,844. | |
| 03400 | Labs and Diagnostics | 1000 | Total (Col 8 and 9) | 32,844. | |
| 03500 | Medical Supplies | 0400 | Contracted Services | 983,305. | |
| 03500 | Medical Supplies | 0600 | Total (Col 1 to 5) | 983,305. | |
| 03500 | Medical Supplies | 0800 | Sub Total (Column 6 & 7) | 983,305. | |
| 03500 | Medical Supplies | 1000 | Total (Col 8 and 9) | 983,305. | |
| 03700 | Radiation Therapy | 0400 | Contracted Services | 5,495. | |
| 03700 | Radiation Therapy | 0600 | Total (Col 1 to 5) | 5,495. | |
| 03700 | Radiation Therapy | 0800 | Sub Total (Column 6 & 7) | 5,495. | |
| 03700 | Radiation Therapy | 1000 | Total (Col 8 and 9) | 5,495. | |
| 03900 | Other | 0400 | Contracted Services | 4,109. | |
| 03900 | Other | 0600 | Total (Col 1 to 5) | 4,109. | |
| 03900 | Other | 0800 | Sub Total (Column 6 & 7) | 4,109. | |
| 03900 | Other | 1000 | Total (Col 8 and 9) | 4,109. | |
| 05000 | Bereavement Program Costs | 0100 | Salaries | 1,537,165. | |
| 05000 | Bereavement Program Costs | 0200 | Employee Benefits | 281,273. | |
| 05000 | Bereavement Program Costs | 0300 | Transporation | 90,807. | |
| 05000 | Bereavement Program Costs | 0400 | Contracted Services | 24,300. | |
| 05000 | Bereavement Program Costs | 0500 | Other Cost | 107,055. | |
| 05000 | Bereavement Program Costs | 0600 | Total (Col 1 to 5) | 2,040,600. | |
| 05000 | Bereavement Program Costs | 0800 | Sub Total (Column 6 & 7) | 2,040,600. | |
| 05000 | Bereavement Program Costs | 1000 | Total (Col 8 and 9) | 2,040,600. | |
| 05100 | Volunteer Program Costs | 0300 | Transporation | 510. | |
| 05100 | Volunteer Program Costs | 0500 | Other Cost | 79,131. | |
| 05100 | Volunteer Program Costs | 0600 | Total (Col 1 to 5) | 79,641. | |
| 05100 | Volunteer Program Costs | 0800 | Sub Total (Column 6 & 7) | 79,641. | |
| 05100 | Volunteer Program Costs | 1000 | Total (Col 8 and 9) | 79,641. | |
| 05200 | Fundraising | 0100 | Salaries | 1,623. | |
| 05200 | Fundraising | 0200 | Employee Benefits | 297. | |
| 05200 | Fundraising | 0500 | Other Cost | 107,078. | |
| 05200 | Fundraising | 0600 | Total (Col 1 to 5) | 108,998. | |
| 05200 | Fundraising | 0800 | Sub Total (Column 6 & 7) | 108,998. | |
| 05200 | Fundraising | 1000 | Total (Col 8 and 9) | 108,998. | |
| 05300 | Other Program Cost | 0100 | Salaries | 1,465,410. | |
| 05300 | Other Program Cost | 0200 | Employee Benefits | 268,144. | |

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| Line | Line Description | Col | Column Description | Value | Type |
|------------|--|------|---------------------------|--------------|------|
| A00 | Wkst A Reclassification and Adjustment of Trial Balance of Expenses | | | | |
| 05300 | Other Program Cost | 0300 | Transporation | 48,860. | |
| 05300 | Other Program Cost | 0400 | Contracted Services | 17,240,392. | |
| 05300 | Other Program Cost | 0500 | Other Cost | 751,924. | |
| 05300 | Other Program Cost | 0600 | Total (Col 1 to 5) | 19,774,730. | |
| 05300 | Other Program Cost | 0700 | Reclassification | 1,092. | |
| 05300 | Other Program Cost | 0800 | Sub Total (Column 6 & 7) | 19,775,822. | |
| 05300 | Other Program Cost | 0900 | Adjustments (A-8 & A-8-1) | -15,786,612. | |
| 05300 | Other Program Cost | 1000 | Total (Col 8 and 9) | 3,989,210. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 0100 | Salaries | 41,261,131. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 0200 | Employee Benefits | 7,550,043. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 0300 | Transporation | 1,143,812. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 0400 | Contracted Services | 33,157,327. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 0500 | Other Cost | 16,250,657. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 0600 | Total (Col 1 to 5) | 99,362,970. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 0800 | Sub Total (Column 6 & 7) | 99,362,970. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 0900 | Adjustments (A-8 & A-8-1) | -15,786,612. | |
| 10000 | Worksheet A Total Program Cost (Line 1 to 53) | 1000 | Total (Col 8 and 9) | 83,576,358. | |
| A10 | Wkst A-1 Compensation Analysis - Salaries and Wages | | | | |
| 00300 | Plant Operation and Maintenance | 0800 | All Other | 386,503. | |
| 00300 | Plant Operation and Maintenance | 0900 | Total (Column 1 to 8) | 386,503. | |
| 00500 | Volunteer Service Coordination | 0800 | All Other | 170,430. | |
| 00500 | Volunteer Service Coordination | 0900 | Total (Column 1 to 8) | 170,430. | |
| 00600 | Administrative and General | 0100 | Administrator | 867,000. | |
| 00600 | Administrative and General | 0800 | All Other | 10,356,104. | |
| 00600 | Administrative and General | 0900 | Total (Column 1 to 8) | 11,223,104. | |
| 01000 | Inpatient - General Care | 0300 | Social Services | 425,769. | |
| 01000 | Inpatient - General Care | 0500 | Nurses | 4,250,029. | |
| 01000 | Inpatient - General Care | 0700 | Aides | 1,042,208. | |
| 01000 | Inpatient - General Care | 0800 | All Other | 1,750,246. | |
| 01000 | Inpatient - General Care | 0900 | Total (Column 1 to 8) | 7,468,252. | |
| 01600 | Visiting Services - Nursing Care | 0500 | Nurses | 12,965,576. | |
| 01600 | Visiting Services - Nursing Care | 0900 | Total (Column 1 to 8) | 12,965,576. | |
| 02000 | Visting Services - Medical Social Services | 0300 | Social Services | 1,072,481. | |
| 02000 | Visting Services - Medical Social Services | 0900 | Total (Column 1 to 8) | 1,072,481. | |
| 02100 | Visting Services - Spiritual Counseling | 0800 | All Other | 904,742. | |
| 02100 | Visting Services - Spiritual Counseling | 0900 | Total (Column 1 to 8) | 904,742. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0700 | Aides | 2,926,625. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0900 | Total (Column 1 to 8) | 2,926,625. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0800 | All Other | 1,139,220. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0900 | Total (Column 1 to 8) | 1,139,220. | |
| 05000 | Bereavement Program Costs | 0800 | All Other | 1,537,165. | |
| 05000 | Bereavement Program Costs | 0900 | Total (Column 1 to 8) | 1,537,165. | |
| 05200 | Fundrasing | 0800 | All Other | 1,623. | |
| 05200 | Fundrasing | 0900 | Total (Column 1 to 8) | 1,623. | |
| 05300 | Other Program Cost | 0800 | All Other | 1,465,410. | |
| 05300 | Other Program Cost | 0900 | Total (Column 1 to 8) | 1,465,410. | |

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| Line | Line Description | Col | Column Description | Value | Type |
|------------|--|------|-----------------------|-------------|------|
| A10 | Wkst A-1 Compensation Analysis - Salaries and Wages | | | | |
| 10000 | Worksheet A-1 Total Program Cost (Line 1 to 53) | 0100 | Administrator | 867,000. | |
| 10000 | Worksheet A-1 Total Program Cost (Line 1 to 53) | 0300 | Social Services | 1,498,250. | |
| 10000 | Worksheet A-1 Total Program Cost (Line 1 to 53) | 0500 | Nurses | 17,215,605. | |
| 10000 | Worksheet A-1 Total Program Cost (Line 1 to 53) | 0700 | Aides | 3,968,833. | |
| 10000 | Worksheet A-1 Total Program Cost (Line 1 to 53) | 0800 | All Other | 17,711,443. | |
| 10000 | Worksheet A-1 Total Program Cost (Line 1 to 53) | 0900 | Total (Column 1 to 8) | 41,261,131. | |
| A20 | Wkst A-2 Compensation Analysis - Employee Benefits (Payroll Related) | | | | |
| 00300 | Plant Operation and Maintenance | 0800 | All Other | 70,723. | |
| 00300 | Plant Operation and Maintenance | 0900 | Total (Column 1 to 8) | 70,723. | |
| 00500 | Volunteer Service Coordination | 0800 | All Other | 31,186. | |
| 00500 | Volunteer Service Coordination | 0900 | Total (Column 1 to 8) | 31,186. | |
| 00600 | Administrative and General | 0100 | Administrator | 158,645. | |
| 00600 | Administrative and General | 0800 | All Other | 1,894,980. | |
| 00600 | Administrative and General | 0900 | Total (Column 1 to 8) | 2,053,625. | |
| 01000 | Inpatient - General Care | 0300 | Social Services | 77,908. | |
| 01000 | Inpatient - General Care | 0500 | Nurses | 777,679. | |
| 01000 | Inpatient - General Care | 0700 | Aides | 190,705. | |
| 01000 | Inpatient - General Care | 0800 | All Other | 320,263. | |
| 01000 | Inpatient - General Care | 0900 | Total (Column 1 to 8) | 1,366,555. | |
| 01600 | Visiting Services - Nursing Care | 0500 | Nurses | 2,372,466. | |
| 01600 | Visiting Services - Nursing Care | 0900 | Total (Column 1 to 8) | 2,372,466. | |
| 02000 | Visting Services - Medical Social Services | 0300 | Social Services | 196,245. | |
| 02000 | Visting Services - Medical Social Services | 0900 | Total (Column 1 to 8) | 196,245. | |
| 02100 | Visting Services - Spiritual Counseling | 0800 | All Other | 165,552. | |
| 02100 | Visting Services - Spiritual Counseling | 0900 | Total (Column 1 to 8) | 165,552. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0700 | Aides | 535,520. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0900 | Total (Column 1 to 8) | 535,520. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0800 | All Other | 208,457. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0900 | Total (Column 1 to 8) | 208,457. | |
| 05000 | Bereavement Program Costs | 0800 | All Other | 281,273. | |
| 05000 | Bereavement Program Costs | 0900 | Total (Column 1 to 8) | 281,273. | |
| 05200 | Fundraising | 0800 | All Other | 297. | |
| 05200 | Fundraising | 0900 | Total (Column 1 to 8) | 297. | |
| 05300 | Other Program Cost | 0800 | All Other | 268,144. | |
| 05300 | Other Program Cost | 0900 | Total (Column 1 to 8) | 268,144. | |
| 10000 | Worksheet A-2 Total Program Cost (Line 1 to 53) | 0100 | Administrator | 158,645. | |
| 10000 | Worksheet A-2 Total Program Cost (Line 1 to 53) | 0300 | Social Services | 274,153. | |
| 10000 | Worksheet A-2 Total Program Cost (Line 1 to 53) | 0500 | Nurses | 3,150,145. | |
| 10000 | Worksheet A-2 Total Program Cost (Line 1 to 53) | 0700 | Aides | 726,225. | |
| 10000 | Worksheet A-2 Total Program Cost (Line 1 to 53) | 0800 | All Other | 3,240,875. | |
| 10000 | Worksheet A-2 Total Program Cost (Line 1 to 53) | 0900 | Total (Column 1 to 8) | 7,550,043. | |
| A30 | Wkst A-3 Compensation Analysis - Contracted Services/Purchases Services | | | | |
| 00300 | Plant Operation and Maintenance | 0800 | All Other | 2,596. | |
| 00300 | Plant Operation and Maintenance | 0900 | Total (Column 1 to 8) | 2,596. | |
| 00600 | Administrative and General | 0800 | All Other | 544,618. | |
| 00600 | Administrative and General | 0900 | Total (Column 1 to 8) | 544,618. | |

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|------------|--|------|-----------------------|-------------|------|
| A30 | Wkst A-3 Compensation Analysis - Contracted Services/Purchases Services | | | | |
| 01000 | Inpatient - General Care | 0500 | Nurses | 353,682. | |
| 01000 | Inpatient - General Care | 0600 | Total Therapist | 26,560. | |
| 01000 | Inpatient - General Care | 0700 | Aides | 26,234. | |
| 01000 | Inpatient - General Care | 0800 | All Other | 4,605,729. | |
| 01000 | Inpatient - General Care | 0900 | Total (Column 1 to 8) | 5,012,205. | |
| 01100 | Inpatient - Respite Care | 0800 | All Other | 93,748. | |
| 01100 | Inpatient - Respite Care | 0900 | Total (Column 1 to 8) | 93,748. | |
| 01500 | Visiting - Physician Services | 0800 | All Other | 3,231,760. | |
| 01500 | Visiting - Physician Services | 0900 | Total (Column 1 to 8) | 3,231,760. | |
| 01600 | Visiting Services - Nursing Care | 0500 | Nurses | 952,256. | |
| 01600 | Visiting Services - Nursing Care | 0900 | Total (Column 1 to 8) | 952,256. | |
| 01700 | Visiting Services - Physical Therapy | 0600 | Total Therapist | 42,301. | |
| 01700 | Visiting Services - Physical Therapy | 0900 | Total (Column 1 to 8) | 42,301. | |
| 01800 | Visiting Services - Occupational Therapy | 0600 | Total Therapist | 6,523. | |
| 01800 | Visiting Services - Occupational Therapy | 0900 | Total (Column 1 to 8) | 6,523. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0600 | Total Therapist | 3,600. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0900 | Total (Column 1 to 8) | 3,600. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0700 | Aides | 87,433. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0900 | Total (Column 1 to 8) | 87,433. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0800 | All Other | 2,494,248. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0900 | Total (Column 1 to 8) | 2,494,248. | |
| 03100 | Durable Medical Equipment | 0800 | All Other | 2,113,309. | |
| 03100 | Durable Medical Equipment | 0900 | Total (Column 1 to 8) | 2,113,309. | |
| 03200 | Patient Transportation | 0800 | All Other | 237,904. | |
| 03200 | Patient Transportation | 0900 | Total (Column 1 to 8) | 237,904. | |
| 03300 | Imaging Services | 0800 | All Other | 44,381. | |
| 03300 | Imaging Services | 0900 | Total (Column 1 to 8) | 44,381. | |
| 03400 | Labs and Diagnostics | 0800 | All Other | 32,844. | |
| 03400 | Labs and Diagnostics | 0900 | Total (Column 1 to 8) | 32,844. | |
| 03500 | Medical Supplies | 0800 | All Other | 983,305. | |
| 03500 | Medical Supplies | 0900 | Total (Column 1 to 8) | 983,305. | |
| 03700 | Radiation Therapy | 0800 | All Other | 5,495. | |
| 03700 | Radiation Therapy | 0900 | Total (Column 1 to 8) | 5,495. | |
| 03900 | Other | 0800 | All Other | 4,109. | |
| 03900 | Other | 0900 | Total (Column 1 to 8) | 4,109. | |
| 05000 | Bereavement Program Costs | 0800 | All Other | 24,300. | |
| 05000 | Bereavement Program Costs | 0900 | Total (Column 1 to 8) | 24,300. | |
| 05300 | Other Program Cost | 0800 | All Other | 17,240,392. | |
| 05300 | Other Program Cost | 0900 | Total (Column 1 to 8) | 17,240,392. | |
| 10000 | Worksheet A-3 Total Program Cost (Line 1 to 53) | 0500 | Nurses | 1,305,938. | |
| 10000 | Worksheet A-3 Total Program Cost (Line 1 to 53) | 0600 | Total Therapist | 78,984. | |
| 10000 | Worksheet A-3 Total Program Cost (Line 1 to 53) | 0700 | Aides | 113,667. | |
| 10000 | Worksheet A-3 Total Program Cost (Line 1 to 53) | 0800 | All Other | 31,658,738. | |
| 10000 | Worksheet A-3 Total Program Cost (Line 1 to 53) | 0900 | Total (Column 1 to 8) | 33,157,327. | |
| A60 | Wkst A-6 Reclassifications Adjustments to Expenses | | | | |
| 001 | Work Type 001 | | | | |

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|--|------|---------------------------|---------------|------|
| A60 | Wkst A-6 Reclassifications Adjustments to Expenses | | | | |
| 001 | Work Type 001 | | | | |
| 00100 | Reclassification Adjustment Line Item | 0000 | Unknown Column | DUES TO OTHE | |
| 00100 | Reclassification Adjustment Line Item | 0100 | Adjustment Code | | A |
| 00100 | Reclassification Adjustment Line Item | 0200 | Increases - Cost Center | ONREIMBURSA | |
| 00100 | Reclassification Adjustment Line Item | 0300 | Increases - Line | 53. | |
| 00100 | Reclassification Adjustment Line Item | 0500 | Increases - Other | 1,092. | |
| 00100 | Reclassification Adjustment Line Item | 0600 | Decreases - Cost Center | ISTRATIVE AND | |
| 00100 | Reclassification Adjustment Line Item | 0700 | Decreases - Line | 6. | |
| 00100 | Reclassification Adjustment Line Item | 0900 | Decreases - Other | 1,092. | |
| 10000 | Total Reclassification Adjustments | 0500 | Increases - Other | 1,092. | |
| 10000 | Total Reclassification Adjustments | 0900 | Decreases - Other | 1,092. | |
| A70 | Wkst A-7 Analysis of Changes During Cost Reporting Period in Capital Asset Balances | | | | |
| 00100 | Land | 0100 | Beginning Balances | 990,354. | |
| 00100 | Land | 0600 | Ending Balance | 990,354. | |
| 00200 | Land Improvements | 0100 | Beginning Balances | 201,561. | |
| 00200 | Land Improvements | 0600 | Ending Balance | 201,561. | |
| 00300 | Building and Fixtures | 0100 | Beginning Balances | 16,511,167. | |
| 00300 | Building and Fixtures | 0200 | Purchases | 156,854. | |
| 00300 | Building and Fixtures | 0400 | Total Acquisitions (Col 3 | 156,854. | |
| 00300 | Building and Fixtures | 0600 | Ending Balance | 16,668,021. | |
| 00400 | Building Improvements | 0100 | Beginning Balances | 1,451,815. | |
| 00400 | Building Improvements | 0200 | Purchases | 13,954. | |
| 00400 | Building Improvements | 0400 | Total Acquisitions (Col 3 | 13,954. | |
| 00400 | Building Improvements | 0600 | Ending Balance | 1,465,769. | |
| 00600 | Movable Equipment | 0100 | Beginning Balances | 8,695,762. | |
| 00600 | Movable Equipment | 0200 | Purchases | 3,423,062. | |
| 00600 | Movable Equipment | 0400 | Total Acquisitions (Col 3 | 3,423,062. | |
| 00600 | Movable Equipment | 0500 | Disposals and Retirements | 367,776. | |
| 00600 | Movable Equipment | 0600 | Ending Balance | 11,751,048. | |
| 00700 | Sub Total (sum of lines 1-6) | 0100 | Beginning Balances | 27,850,659. | |
| 00700 | Sub Total (sum of lines 1-6) | 0200 | Purchases | 3,593,870. | |
| 00700 | Sub Total (sum of lines 1-6) | 0400 | Total Acquisitions (Col 3 | 3,593,870. | |
| 00700 | Sub Total (sum of lines 1-6) | 0500 | Disposals and Retirements | 367,776. | |
| 00700 | Sub Total (sum of lines 1-6) | 0600 | Ending Balance | 31,076,753. | |
| 00900 | Worksheet A-7 Total Capital Assets (Line 7 minus 8) | 0100 | Beginning Balances | 27,850,659. | |
| 00900 | Worksheet A-7 Total Capital Assets (Line 7 minus 8) | 0200 | Purchases | 3,593,870. | |
| 00900 | Worksheet A-7 Total Capital Assets (Line 7 minus 8) | 0400 | Total Acquisitions (Col 3 | 3,593,870. | |
| 00900 | Worksheet A-7 Total Capital Assets (Line 7 minus 8) | 0500 | Disposals and Retirements | 367,776. | |
| 00900 | Worksheet A-7 Total Capital Assets (Line 7 minus 8) | 0600 | Ending Balance | 31,076,753. | |
| A80 | Wkst A-8 Adjustment to Expenses | | | | |
| 00800 | MEDICAID ROOM & BOARD EXPENSE | 0000 | Information | | |
| 00800 | Miscellaneous Adjustments | 0100 | Basis for Adjustment | | A |
| 00800 | Miscellaneous Adjustments | 0200 | Amount | -15,786,612. | |
| 00800 | OTHER NONREIMBURSABLE COSTS | 0300 | Cost Center | | |
| 00800 | Miscellaneous Adjustments | 0400 | Wkst A Line Number | | 53. |

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|---|------|---------------------------|--------------|------|
| A80 | Wkst A-8 Adjustment to Expenses | | | | |
| 01100 | Worksheet A-8 Total Adjustments of Expenses (sum lines 1 to 10) | 0200 | Amount | -15,786,612. | |
| B00 | Wkst B Cost Allocation based on Service Cost Centers | | | | |
| 00100 | Capital Related Cost - Building & Fixtures | 0000 | Net Expenses Wkst A | 1,534,306. | |
| 00100 | Capital Related Cost - Building & Fixtures | 0100 | Capital-Buildings/Fixture | 1,534,306. | |
| 00200 | Capital Related Cost - Moveable Equipment | 0000 | Net Expenses Wkst A | 29,979. | |
| 00200 | Capital Related Cost - Moveable Equipment | 0200 | Capital-Movable Equipment | 29,979. | |
| 00300 | Plant Operation and Maintenance | 0000 | Net Expenses Wkst A | 3,197,528. | |
| 00300 | Plant Operation and Maintenance | 0300 | Plant Operation & Maint | 3,197,528. | |
| 00500 | Volunteer Service Coordination | 0000 | Net Expenses Wkst A | 201,616. | |
| 00500 | Volunteer Service Coordination | 0500 | Volunteer Service Coordin | 201,616. | |
| 00600 | Administrative and General | 0000 | Net Expenses Wkst A | 20,174,079. | |
| 00600 | Administrative and General | 0100 | Capital-Buildings/Fixture | 870,354. | |
| 00600 | Administrative and General | 0200 | Capital-Movable Equipment | 17,006. | |
| 00600 | Administrative and General | 0300 | Plant Operation & Maint | 1,813,833. | |
| 00600 | Administrative and General | 0500 | Volunteer Service Coordin | 201,616. | |
| 00600 | Administrative and General | 0600 | Admin & General | 23,076,888. | |
| 00600 | Administrative and General | 5A00 | Sub Total (col 1-5) | 23,076,888. | |
| 01000 | Inpatient - General Care | 0000 | Net Expenses Wkst A | 18,421,665. | |
| 01000 | Inpatient - General Care | 0100 | Capital-Buildings/Fixture | 386,825. | |
| 01000 | Inpatient - General Care | 0200 | Capital-Movable Equipment | 7,558. | |
| 01000 | Inpatient - General Care | 0300 | Plant Operation & Maint | 806,153. | |
| 01000 | Inpatient - General Care | 0600 | Admin & General | 7,484,664. | |
| 01000 | Inpatient - General Care | 0700 | Total | 27,106,865. | |
| 01000 | Inpatient - General Care | 5A00 | Sub Total (col 1-5) | 19,622,201. | |
| 01100 | Inpatient - Respite Care | 0000 | Net Expenses Wkst A | 93,748. | |
| 01100 | Inpatient - Respite Care | 0600 | Admin & General | 35,759. | |
| 01100 | Inpatient - Respite Care | 0700 | Total | 129,507. | |
| 01100 | Inpatient - Respite Care | 5A00 | Sub Total (col 1-5) | 93,748. | |
| 01500 | Visiting - Physician Services | 0000 | Net Expenses Wkst A | 3,231,760. | |
| 01500 | Visiting - Physician Services | 0100 | Capital-Buildings/Fixture | 19,065. | |
| 01500 | Visiting - Physician Services | 0200 | Capital-Movable Equipment | 373. | |
| 01500 | Visiting - Physician Services | 0300 | Plant Operation & Maint | 39,733. | |
| 01500 | Visiting - Physician Services | 0600 | Admin & General | 1,255,293. | |
| 01500 | Visiting - Physician Services | 0700 | Total | 4,546,224. | |
| 01500 | Visiting - Physician Services | 5A00 | Sub Total (col 1-5) | 3,290,931. | |
| 01600 | Visiting Services - Nursing Care | 0000 | Net Expenses Wkst A | 16,675,233. | |
| 01600 | Visiting Services - Nursing Care | 0100 | Capital-Buildings/Fixture | 106,964. | |
| 01600 | Visiting Services - Nursing Care | 0200 | Capital-Movable Equipment | 2,090. | |
| 01600 | Visiting Services - Nursing Care | 0300 | Plant Operation & Maint | 222,916. | |
| 01600 | Visiting Services - Nursing Care | 0600 | Admin & General | 6,487,228. | |
| 01600 | Visiting Services - Nursing Care | 0700 | Total | 23,494,431. | |
| 01600 | Visiting Services - Nursing Care | 5A00 | Sub Total (col 1-5) | 17,007,203. | |
| 01700 | Visiting Services - Physical Therapy | 0000 | Net Expenses Wkst A | 42,301. | |
| 01700 | Visiting Services - Physical Therapy | 0600 | Admin & General | 16,135. | |
| 01700 | Visiting Services - Physical Therapy | 0700 | Total | 58,436. | |
| 01700 | Visiting Services - Physical Therapy | 5A00 | Sub Total (col 1-5) | 42,301. | |

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|---|------|---------------------------|------------|------|
| B00 | Wkst B Cost Allocation based on Service Cost Centers | | | | |
| 01800 | Visiting Services - Occupational Therapy | 0000 | Net Expenses Wkst A | 6,523. | |
| 01800 | Visiting Services - Occupational Therapy | 0600 | Admin & General | 2,488. | |
| 01800 | Visiting Services - Occupational Therapy | 0700 | Total | 9,011. | |
| 01800 | Visiting Services - Occupational Therapy | 5A00 | Sub Total (col 1-5) | 6,523. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0000 | Net Expenses Wkst A | 3,600. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0600 | Admin & General | 1,373. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0700 | Total | 4,973. | |
| 01900 | Visiting Services - Speech/Language Pathology | 5A00 | Sub Total (col 1-5) | 3,600. | |
| 02000 | Visting Services - Medical Social Services | 0000 | Net Expenses Wkst A | 1,326,755. | |
| 02000 | Visting Services - Medical Social Services | 0600 | Admin & General | 506,077. | |
| 02000 | Visting Services - Medical Social Services | 0700 | Total | 1,832,832. | |
| 02000 | Visting Services - Medical Social Services | 5A00 | Sub Total (col 1-5) | 1,326,755. | |
| 02100 | Visting Services - Spiritual Counseling | 0000 | Net Expenses Wkst A | 1,132,837. | |
| 02100 | Visting Services - Spiritual Counseling | 0600 | Admin & General | 432,109. | |
| 02100 | Visting Services - Spiritual Counseling | 0700 | Total | 1,564,946. | |
| 02100 | Visting Services - Spiritual Counseling | 5A00 | Sub Total (col 1-5) | 1,132,837. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0000 | Net Expenses Wkst A | 3,815,805. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0600 | Admin & General | 1,455,501. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0700 | Total | 5,271,306. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 5A00 | Sub Total (col 1-5) | 3,815,805. | |
| 02500 | Visting Services - Other | 0100 | Capital-Buildings/Fixture | 24,280. | |
| 02500 | Visting Services - Other | 0200 | Capital-Movable Equipment | 474. | |
| 02500 | Visting Services - Other | 0300 | Plant Operation & Maint | 50,601. | |
| 02500 | Visting Services - Other | 0600 | Admin & General | 28,743. | |
| 02500 | Visting Services - Other | 0700 | Total | 104,098. | |
| 02500 | Visting Services - Other | 5A00 | Sub Total (col 1-5) | 75,355. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0000 | Net Expenses Wkst A | 4,048,827. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0100 | Capital-Buildings/Fixture | 27,651. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0200 | Capital-Movable Equipment | 540. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0300 | Plant Operation & Maint | 57,625. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0600 | Admin & General | 1,577,118. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0700 | Total | 5,711,761. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 5A00 | Sub Total (col 1-5) | 4,134,643. | |
| 03100 | Durable Medical Equipment | 0000 | Net Expenses Wkst A | 2,113,309. | |
| 03100 | Durable Medical Equipment | 0600 | Admin & General | 806,101. | |
| 03100 | Durable Medical Equipment | 0700 | Total | 2,919,410. | |
| 03100 | Durable Medical Equipment | 5A00 | Sub Total (col 1-5) | 2,113,309. | |
| 03200 | Patient Tranporation | 0000 | Net Expenses Wkst A | 237,904. | |
| 03200 | Patient Tranporation | 0600 | Admin & General | 90,746. | |
| 03200 | Patient Tranporation | 0700 | Total | 328,650. | |
| 03200 | Patient Tranporation | 5A00 | Sub Total (col 1-5) | 237,904. | |
| 03300 | Imaging Services | 0000 | Net Expenses Wkst A | 44,381. | |
| 03300 | Imaging Services | 0600 | Admin & General | 16,929. | |
| 03300 | Imaging Services | 0700 | Total | 61,310. | |
| 03300 | Imaging Services | 5A00 | Sub Total (col 1-5) | 44,381. | |
| 03400 | Labs and Diagnostics | 0000 | Net Expenses Wkst A | 32,844. | |
| 03400 | Labs and Diagnostics | 0600 | Admin & General | 12,528. | |

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|---|------|---------------------------|-------------|------|
| B00 | Wkst B Cost Allocation based on Service Cost Centers | | | | |
| 03400 | Labs and Diagnostics | 0700 | Total | 45,372. | |
| 03400 | Labs and Diagnostics | 5A00 | Sub Total (col 1-5) | 32,844. | |
| 03500 | Medical Supplies | 0000 | Net Expenses Wkst A | 983,305. | |
| 03500 | Medical Supplies | 0100 | Capital-Buildings/Fixture | 29,864. | |
| 03500 | Medical Supplies | 0200 | Capital-Movable Equipment | 584. | |
| 03500 | Medical Supplies | 0300 | Plant Operation & Maint | 62,238. | |
| 03500 | Medical Supplies | 0600 | Admin & General | 410,426. | |
| 03500 | Medical Supplies | 0700 | Total | 1,486,417. | |
| 03500 | Medical Supplies | 5A00 | Sub Total (col 1-5) | 1,075,991. | |
| 03700 | Radiation Therapy | 0000 | Net Expenses Wkst A | 5,495. | |
| 03700 | Radiation Therapy | 0600 | Admin & General | 2,096. | |
| 03700 | Radiation Therapy | 0700 | Total | 7,591. | |
| 03700 | Radiation Therapy | 5A00 | Sub Total (col 1-5) | 5,495. | |
| 03900 | Other | 0000 | Net Expenses Wkst A | 4,109. | |
| 03900 | Other | 0600 | Admin & General | 1,567. | |
| 03900 | Other | 0700 | Total | 5,676. | |
| 03900 | Other | 5A00 | Sub Total (col 1-5) | 4,109. | |
| 05000 | Bereavement Program Costs | 0000 | Net Expenses Wkst A | 2,040,600. | |
| 05000 | Bereavement Program Costs | 0600 | Admin & General | 778,366. | |
| 05000 | Bereavement Program Costs | 0700 | Total | 2,818,966. | |
| 05000 | Bereavement Program Costs | 5A00 | Sub Total (col 1-5) | 2,040,600. | |
| 05100 | Volunteer Program Costs | 0000 | Net Expenses Wkst A | 79,641. | |
| 05100 | Volunteer Program Costs | 0100 | Capital-Buildings/Fixture | 17,674. | |
| 05100 | Volunteer Program Costs | 0200 | Capital-Movable Equipment | 345. | |
| 05100 | Volunteer Program Costs | 0300 | Plant Operation & Maint | 36,832. | |
| 05100 | Volunteer Program Costs | 0600 | Admin & General | 51,301. | |
| 05100 | Volunteer Program Costs | 0700 | Total | 185,793. | |
| 05100 | Volunteer Program Costs | 5A00 | Sub Total (col 1-5) | 134,492. | |
| 05200 | Fundraising | 0000 | Net Expenses Wkst A | 108,998. | |
| 05200 | Fundraising | 0100 | Capital-Buildings/Fixture | 51,629. | |
| 05200 | Fundraising | 0200 | Capital-Movable Equipment | 1,009. | |
| 05200 | Fundraising | 0300 | Plant Operation & Maint | 107,597. | |
| 05200 | Fundraising | 0600 | Admin & General | 102,696. | |
| 05200 | Fundraising | 0700 | Total | 371,929. | |
| 05200 | Fundraising | 5A00 | Sub Total (col 1-5) | 269,233. | |
| 05300 | Other Program Cost | 0000 | Net Expenses Wkst A | 3,989,210. | |
| 05300 | Other Program Cost | 0600 | Admin & General | 1,521,644. | |
| 05300 | Other Program Cost | 0700 | Total | 5,510,854. | |
| 05300 | Other Program Cost | 5A00 | Sub Total (col 1-5) | 3,989,210. | |
| 10000 | Worksheet B Total Program Cost (Line 1 to 53) | 0000 | Net Expenses Wkst A | 83,576,358. | |
| 10000 | Worksheet B Total Program Cost (Line 1 to 53) | 0100 | Capital-Buildings/Fixture | 1,534,306. | |
| 10000 | Worksheet B Total Program Cost (Line 1 to 53) | 0200 | Capital-Movable Equipment | 29,979. | |
| 10000 | Worksheet B Total Program Cost (Line 1 to 53) | 0300 | Plant Operation & Maint | 3,197,528. | |
| 10000 | Worksheet B Total Program Cost (Line 1 to 53) | 0500 | Volunteer Service Coordin | 201,616. | |
| 10000 | Worksheet B Total Program Cost (Line 1 to 53) | 0600 | Admin & General | 23,076,888. | |
| 10000 | Worksheet B Total Program Cost (Line 1 to 53) | 0700 | Total | 83,576,358. | |
| 10000 | Worksheet B Total Program Cost (Line 1 to 53) | 5A00 | Sub Total (col 1-5) | 83,576,358. | |

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| Line | Line Description | Col | Column Description | Value | Type |
|------------|---|------|---------------------------|--------------|------|
| B10 | Wkst B-1 Cost Allocation - Statistical Basis | | | | |
| 00100 | Capital Related Cost - Building & Fixtures | 0100 | Capital-Buildings/Fixture | 91,501. | |
| 00200 | Capital Related Cost - Moveable Equipment | 0200 | Capital-Movable Equipment | 91,501. | |
| 00300 | Plant Operation and Maintenance | 0300 | Plant Operation & Maint | 91,501. | |
| 00500 | Volunteer Service Coordination | 0500 | Volunteer Service Coordin | 2,080. | |
| 00600 | Administrative and General | 0100 | Capital-Buildings/Fixture | 51,905. | |
| 00600 | Administrative and General | 0200 | Capital-Movable Equipment | 51,905. | |
| 00600 | Administrative and General | 0300 | Plant Operation & Maint | 51,905. | |
| 00600 | Administrative and General | 0500 | Volunteer Service Coordin | 2,080. | |
| 00600 | Administrative and General | 0600 | Unknown Column | 60,499,470. | |
| 00600 | Administrative and General | 6A00 | Unknown Column | -23,076,888. | |
| 01000 | Inpatient - General Care | 0100 | Capital-Buildings/Fixture | 23,069. | |
| 01000 | Inpatient - General Care | 0200 | Capital-Movable Equipment | 23,069. | |
| 01000 | Inpatient - General Care | 0300 | Plant Operation & Maint | 23,069. | |
| 01000 | Inpatient - General Care | 0600 | Unknown Column | 19,622,201. | |
| 01100 | Inpatient - Respite Care | 0600 | Unknown Column | 93,748. | |
| 01500 | Visiting - Physical Services | 0100 | Capital-Buildings/Fixture | 1,137. | |
| 01500 | Visiting - Physical Services | 0200 | Capital-Movable Equipment | 1,137. | |
| 01500 | Visiting - Physical Services | 0300 | Plant Operation & Maint | 1,137. | |
| 01500 | Visiting - Physical Services | 0600 | Unknown Column | 3,290,931. | |
| 01600 | Visiting Services - Nursing Care | 0100 | Capital-Buildings/Fixture | 6,379. | |
| 01600 | Visiting Services - Nursing Care | 0200 | Capital-Movable Equipment | 6,379. | |
| 01600 | Visiting Services - Nursing Care | 0300 | Plant Operation & Maint | 6,379. | |
| 01600 | Visiting Services - Nursing Care | 0600 | Unknown Column | 17,007,203. | |
| 01700 | Visiting Services - Physical Therapy | 0600 | Unknown Column | 42,301. | |
| 01800 | Visiting Services - Occupational Therapy | 0600 | Unknown Column | 6,523. | |
| 01900 | Visiting Services - Speech/Language Pathology | 0600 | Unknown Column | 3,600. | |
| 02000 | Visting Services - Medical Social Services | 0600 | Unknown Column | 1,326,755. | |
| 02100 | Visting Services - Spiritual Counseling | 0600 | Unknown Column | 1,132,837. | |
| 02400 | Visiting Services - Home Health Aide and Homemaker | 0600 | Unknown Column | 3,815,805. | |
| 02500 | Visting Services - Other | 0100 | Capital-Buildings/Fixture | 1,448. | |
| 02500 | Visting Services - Other | 0200 | Capital-Movable Equipment | 1,448. | |
| 02500 | Visting Services - Other | 0300 | Plant Operation & Maint | 1,448. | |
| 02500 | Visting Services - Other | 0600 | Unknown Column | 75,355. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0100 | Capital-Buildings/Fixture | 1,649. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0200 | Capital-Movable Equipment | 1,649. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0300 | Plant Operation & Maint | 1,649. | |
| 03000 | Drugs, Biologicals and Infusion Therapy | 0600 | Unknown Column | 4,134,643. | |
| 03100 | Durable Medical Equipment | 0600 | Unknown Column | 2,113,309. | |
| 03200 | Patient Tranporation | 0600 | Unknown Column | 237,904. | |
| 03300 | Imaging Services | 0600 | Unknown Column | 44,381. | |
| 03400 | Labs and Diagnostics | 0600 | Unknown Column | 32,844. | |
| 03500 | Medical Supplies | 0100 | Capital-Buildings/Fixture | 1,781. | |
| 03500 | Medical Supplies | 0200 | Capital-Movable Equipment | 1,781. | |
| 03500 | Medical Supplies | 0300 | Plant Operation & Maint | 1,781. | |
| 03500 | Medical Supplies | 0600 | Unknown Column | 1,075,991. | |
| 03700 | Radiation Therapy | 0600 | Unknown Column | 5,495. | |

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A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|---|------|---------------------------|-------------|-----------|
| B10 | Wkst B-1 Cost Allocation - Statistical Basis | | | | |
| 03900 | Other | 0600 | Unknown Column | 4,109. | |
| 05000 | Bereavement Program Costs | 0600 | Unknown Column | 2,040,600. | |
| 05100 | Volunteer Program Costs | 0100 | Capital-Buildings/Fixture | 1,054. | |
| 05100 | Volunteer Program Costs | 0200 | Capital-Movable Equipment | 1,054. | |
| 05100 | Volunteer Program Costs | 0300 | Plant Operation & Maint | 1,054. | |
| 05100 | Volunteer Program Costs | 0600 | Unknown Column | 134,492. | |
| 05200 | Fundraising | 0100 | Capital-Buildings/Fixture | 3,079. | |
| 05200 | Fundraising | 0200 | Capital-Movable Equipment | 3,079. | |
| 05200 | Fundraising | 0300 | Plant Operation & Maint | 3,079. | |
| 05200 | Fundraising | 0600 | Unknown Column | 269,233. | |
| 05300 | Other Program Cost | 0600 | Unknown Column | 3,989,210. | |
| 10000 | Worksheet B-1 Total Program Cost (Line 1 to 53) | 0100 | Capital-Buildings/Fixture | 1,534,306. | |
| 10000 | Worksheet B-1 Total Program Cost (Line 1 to 53) | 0200 | Capital-Movable Equipment | 29,979. | |
| 10000 | Worksheet B-1 Total Program Cost (Line 1 to 53) | 0300 | Plant Operation & Maint | 3,197,528. | |
| 10000 | Worksheet B-1 Total Program Cost (Line 1 to 53) | 0500 | Volunteer Service Coordin | 201,616. | |
| 10100 | Unit Cost Multplier | 0100 | Capital-Buildings/Fixture | 16.768188 | Multplier |
| 10100 | Unit Cost Multplier | 0200 | Capital-Movable Equipment | 0.327636 | Multplier |
| 10100 | Unit Cost Multplier | 0300 | Plant Operation & Maint | 34.945279 | Multplier |
| 10100 | Unit Cost Multplier | 0500 | Volunteer Service Coordin | 96.930769 | Multplier |
| 10100 | Unit Cost Multplier | 0600 | Unknown Column | 0.381440 | Multplier |
| D00 | Wkst D Calculation of Per Diem Cost | | | | |
| 00100 | Total Cost (Worksheet B, Line 100, Col 7) | 0400 | Total | 78,065,504. | |
| 00200 | Total Unduplicated Days | 0400 | Total | 402,160. | Days |
| 00300 | Average cost per diem (line 1 divided by line 2) | 0400 | Total | 194.12 | Per Diem |
| 00400 | Unduplicated Medicare Days | 0100 | Title 18 - Medicare | 366,691. | Days |
| 00500 | Average Medicare Cost (Line 3 times Line 4) | 0100 | Title 18 - Medicare | 71,182,057. | |
| 00600 | Unduplicated Medicaid Days | 0200 | Title 19 - Medicaid | 18,500. | Days |
| 00700 | Average Medicaid Cost (Line 3 times Line 6) | 0200 | Title 19 - Medicaid | 3,591,220. | |
| 00800 | Unduplicated SNF Days | 0100 | Title 18 - Medicare | 118,141. | Days |
| 00900 | Average SNF Cost (Line 3 times Line 8) | 0100 | Title 18 - Medicare | 22,933,531. | |
| 01000 | Unduplicated NF Days | 0200 | Title 19 - Medicaid | 5,444. | Days |
| 01100 | Average NF cost (Line 3 Times Line 10) | 0200 | Title 19 - Medicaid | 1,056,789. | |
| 01200 | Other Unduplicated Days | 0300 | Cost | 16,969. | Days |
| 01300 | Average Cost of Other Days | 0300 | Cost | 3,294,022. | |
| G00 | Wkst G Balance Sheet | | | | |
| 00100 | Cash on Hand and in Banks | 0100 | General Fund | 1,417,275. | |
| 00200 | Tempory Investments | 0100 | General Fund | 2,500,000. | |
| 00400 | Accounts Receivable | 0100 | General Fund | 7,618,760. | |
| 00500 | Other Receivables | 0100 | General Fund | 23,250. | |
| 00600 | Less: Allowance for Uncollectible notes and Receivables | 0100 | General Fund | 766,090. | |
| 00700 | Inventory | 0100 | General Fund | 301,081. | |
| 00800 | Prepaid Expenses | 0100 | General Fund | 594,092. | |
| 01000 | Due From Other Funds | 0100 | General Fund | -1,594,214. | |
| 01000 | Due From Other Funds | 0200 | Specific Purpose Fund | 2,029,336. | |
| 01100 | Worksheet G Total Current Assets | 0100 | General Fund | 10,094,154. | |

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|--|------|-----------------------|-------------|---------------|
| G00 | Wkst G Balance Sheet | | | | |
| 01100 | Worksheet G Total Current Assets | 0200 | Specific Purpose Fund | 2,029,336. | |
| 01200 | Land | 0100 | General Fund | 990,354. | |
| 01300 | Land Improvements | 0100 | General Fund | 201,561. | |
| 01400 | Less - Accumulated Depeciation | 0100 | General Fund | 103,805. | |
| 01500 | Buildings | 0100 | General Fund | 16,668,021. | |
| 01600 | Less - Accumulated Depeciation | 0100 | General Fund | 5,186,624. | |
| 01700 | Leasehold Improvements | 0100 | General Fund | 1,465,769. | |
| 01800 | Less - Accumulated Depeciation | 0100 | General Fund | 966,146. | |
| 01900 | Fixed Equipment | 0100 | General Fund | 3,885,875. | |
| 02000 | Less - Accumulated Depeciation | 0100 | General Fund | 2,504,227. | |
| 02100 | Automobiles and Trucks | 0100 | General Fund | 115,425. | |
| 02200 | Less - Accumulated Depeciation | 0100 | General Fund | 76,540. | |
| 02300 | Major Movable Equipment | 0100 | General Fund | 5,472,771. | |
| 02400 | Less - Accumulated Depeciation | 0100 | General Fund | 2,549,113. | |
| 02700 | Worksheet G Total Fixed Assets | 0100 | General Fund | 17,413,321. | |
| 02900 | Deposits on leases | 0100 | General Fund | 219,100. | |
| 03100 | Other - description not available | 0100 | General Fund | 2,493,002. | |
| 03100 | Other - description not available | 0200 | Specific Purpose Fund | 16,296,695. | |
| 03200 | Worksheet G Total Other Assets | 0100 | General Fund | 2,712,102. | |
| 03200 | Worksheet G Total Other Assets | 0200 | Specific Purpose Fund | 16,296,695. | |
| 03300 | Worksheet G Total Assets | 0100 | General Fund | 30,219,577. | |
| 03300 | Worksheet G Total Assets | 0200 | Specific Purpose Fund | 18,326,031. | |
| 03400 | Accounts Payable | 0100 | General Fund | 3,247,850. | |
| 03500 | Salaries, Wages & Fees Payable | 0100 | General Fund | 3,279,752. | |
| 03600 | Payroll Taxes Payable | 0100 | General Fund | 113,052. | |
| 03800 | Deferred Income | 0100 | General Fund | 14,870. | |
| 04100 | Other - Description not available | 0100 | General Fund | 11,979,000. | |
| 04200 | Worksheet G Total Current Liabilities | 0100 | General Fund | 18,634,524. | |
| 05000 | Worksheet G Total Liabilities | 0100 | General Fund | 18,634,524. | |
| 05100 | General Fund Balance | 0100 | General Fund | 11,585,053. | |
| 05200 | Specific Purpose Fund | 0200 | Specific Purpose Fund | 18,326,031. | |
| 05800 | Worksheet G Total Fund Balance | 0100 | General Fund | 11,585,053. | |
| 05800 | Worksheet G Total Fund Balance | 0200 | Specific Purpose Fund | 18,326,031. | |
| 05900 | Worksheet G Total Liabilities and Fund Balance | 0100 | General Fund | 30,219,577. | |
| 05900 | Worksheet G Total Liabilities and Fund Balance | 0200 | Specific Purpose Fund | 18,326,031. | |
| G10 | Wkst G-1 Statement of Changes in Fund Balance | | | | |
| 00100 | | 0100 | General Fund | 8,862,611. | |
| 00100 | | 0200 | Specific Purpose Fund | 20,929,545. | |
| 00200 | | 0100 | General Fund | 118,930. | |
| 00300 | | 0100 | General Fund | 8,981,541. | |
| 00300 | | 0200 | Specific Purpose Fund | 20,929,545. | |
| 00500 | Fund Statement Line Item | 0000 | Unknown Column | | ; AND CONTRIB |
| 00500 | Fund Statement Line Item | 0100 | General Fund | -335,381. | |
| 00500 | Fund Statement Line Item | 0200 | Specific Purpose Fund | 335,381. | |
| 00600 | Fund Statement Line Item | 0000 | Unknown Column | | \SE IN FOUNDA |
| 00600 | Fund Statement Line Item | 0100 | General Fund | 2,604,437. | |

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|--|------|-----------------------|---------------|------------|
| G10 | Wkst G-1 Statement of Changes in Fund Balance | | | | |
| 00600 | Fund Statement Line Item | 0200 | Specific Purpose Fund | -2,604,437. | |
| 00800 | Fund Statement Line Item | 0000 | Unknown Column | ROUNDING | |
| 00800 | Fund Statement Line Item | 0100 | General Fund | -6. | |
| 00800 | Fund Statement Line Item | 0200 | Specific Purpose Fund | 4. | |
| 01000 | | 0100 | General Fund | 2,269,050. | |
| 01000 | | 0200 | Specific Purpose Fund | -2,269,052. | |
| 01100 | | 0100 | General Fund | 11,250,591. | |
| 01100 | | 0200 | Specific Purpose Fund | 18,660,493. | |
| 01300 | Fund Statement Line Item | 0000 | Unknown Column | SE OF FUNDS F | |
| 01300 | Fund Statement Line Item | 0100 | General Fund | -334,462. | |
| 01300 | Fund Statement Line Item | 0200 | Specific Purpose Fund | 334,462. | |
| 01800 | | 0100 | General Fund | -334,462. | |
| 01800 | | 0200 | Specific Purpose Fund | 334,462. | |
| 01900 | | 0100 | General Fund | 11,585,053. | |
| 01900 | | 0200 | Specific Purpose Fund | 18,326,031. | |
| G20 | Wkst G-2 Statement of Patient Revenues and Net Income | | | | |
| 1 | Part 1 Patient Revenues | | | | |
| 00100 | Skilled Nursing Facility Based Revenues | 0100 | Amount | 16,282,193. | |
| 00200 | Nursing Facility Based Revenues | 0100 | Amount | 751,272. | |
| 00300 | Home Care Based Revenue | 0100 | Amount | 40,818,089. | |
| 00400 | Other Revenues | 0100 | Amount | 20,112,024. | |
| 00500 | State Medicaid Room and Board | 0100 | Amount | 14,975,874. | |
| 00600 | Worksheet G-2 Total General Inpatient Revenues | 0100 | Amount | 77,963,578. | |
| 2 | Part 2 Operating Expenses | | | | |
| 00100 | Worksheet G-2 Operating Expenses (Wkst A, Col 6, Line 100) | 0200 | Amount | 99,362,970. | |
| 00400 | ROUNDING | 0000 | Information | | |
| 00400 | Additional Expenses | 0100 | Amount | -1. | |
| 00700 | STATE MEDICAID ROOM & BOARD | 0000 | Information | | |
| 00700 | Additional Expenses | 0100 | Amount | -14,975,874. | |
| 00800 | Worksheet G-2 Total Additional Expenses | 0200 | Amount | -14,975,875. | |
| 01000 | COMMUNITY SUPPORT | 0000 | Information | | |
| 01000 | Deduct Expenses | 0100 | Amount | 5,726,190. | |
| 01100 | INTEREST AND INVESTMENT INCOME | 0000 | Information | | |
| 01100 | Deduct Expenses | 0100 | Amount | -698,321. | |
| 01200 | OTHER PROGRAM INCOME | 0000 | Information | | |
| 01200 | Deduct Expenses | 0100 | Amount | 67,377. | |
| 01300 | MISC. INCOME | 0000 | Information | | |
| 01300 | Deduct Expenses | 0100 | Amount | 1,447,201. | |
| 01400 | Worksheet G-2 Total Deduct Expenses | 0200 | Amount | 6,542,447. | |
| 01500 | Worksheet G-2 Total Operating Expenses | 0200 | Amount | 77,844,648. | |
| 01600 | Worksheet G-2 Net Income for the Period | 0200 | Amount | 118,930. | |
| S00 | Wkst S Hospice Cost and Data Report | | | | |
| 00100 | Cost Report Status Information | 0100 | Cost Report Status | | 1 Code |
| 00100 | Cost Report Status Information | 0200 | Cost Report Received | 03/02/2009 | Date |
| 00100 | Cost Report Status Information | 0300 | Cost Report Question | | N Question |
| 00200 | Fiscal Intermediary Information | 0200 | Information | 00380 | Code |

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|--|------|--------------------|------------|----------|
| S10 | Wkst S-1 Hospice Identification Data | | | | |
| 00300 | Hospice Began Operation | 0100 | Began Operation | 02/27/1978 | Date |
| 00400 | Certification Date | 0100 | Medicare | 06/20/1984 | Date |
| 00400 | Certification Date | 0200 | Medicaid | 01/01/1987 | Date |
| 00500 | Cost Reporting Period | 0100 | Fiscal Year Begin | 10/01/2007 | Date |
| 00500 | Cost Reporting Period | 0200 | Fiscal Year End | 09/30/2008 | Date |
| 00600 | Provider Identification Number | 0100 | Provider Number | 101512 | Code |
| 00700 | Type of Control | 0100 | Type of Control | 2. | Code |
| 00800 | Continuous Home Care | 0100 | Medicare | 8,055. | Days |
| 00800 | Continuous Home Care | 0200 | Medicaid | 335. | Days |
| 00800 | Continuous Home Care | 0300 | Skilled Nursing | 1,332. | Days |
| 00800 | Continuous Home Care | 0400 | Nursing Facility | 79. | Days |
| 00800 | Continuous Home Care | 0500 | Other | 781. | Days |
| 00800 | Continuous Home Care | 0600 | Total | 9,171. | Days |
| 00900 | Routine Home Care | 0100 | Medicare | 330,386. | Days |
| 00900 | Routine Home Care | 0200 | Medicaid | 15,342. | Days |
| 00900 | Routine Home Care | 0300 | Skilled Nursing | 112,248. | Days |
| 00900 | Routine Home Care | 0400 | Nursing Facility | 5,174. | Days |
| 00900 | Routine Home Care | 0500 | Other | 13,194. | Days |
| 00900 | Routine Home Care | 0600 | Total | 358,922. | Days |
| 01000 | Inpatient Respite Care | 0100 | Medicare | 661. | Days |
| 01000 | Inpatient Respite Care | 0300 | Skilled Nursing | 487. | Days |
| 01000 | Inpatient Respite Care | 0500 | Other | 19. | Days |
| 01000 | Inpatient Respite Care | 0600 | Total | 680. | Days |
| 01100 | General Inpatient Care | 0100 | Medicare | 27,589. | Days |
| 01100 | General Inpatient Care | 0200 | Medicaid | 2,823. | Days |
| 01100 | General Inpatient Care | 0300 | Skilled Nursing | 4,074. | Days |
| 01100 | General Inpatient Care | 0400 | Nursing Facility | 191. | Days |
| 01100 | General Inpatient Care | 0500 | Other | 2,975. | Days |
| 01100 | General Inpatient Care | 0600 | Total | 33,387. | Days |
| 01200 | Total Hospice Care | 0100 | Medicare | 366,691. | Days |
| 01200 | Total Hospice Care | 0200 | Medicaid | 18,500. | Days |
| 01200 | Total Hospice Care | 0300 | Skilled Nursing | 118,141. | Days |
| 01200 | Total Hospice Care | 0400 | Nursing Facility | 5,444. | Days |
| 01200 | Total Hospice Care | 0500 | Other | 16,969. | Days |
| 01200 | Total Hospice Care | 0600 | Total | 402,160. | Days |
| 01300 | Number of Patients Receiving Hospice Care | 0100 | Medicare | 6,428. | Patients |
| 01300 | Number of Patients Receiving Hospice Care | 0200 | Medicaid | 302. | Patients |
| 01300 | Number of Patients Receiving Hospice Care | 0300 | Skilled Nursing | 1,371. | Patients |
| 01300 | Number of Patients Receiving Hospice Care | 0400 | Nursing Facility | 61. | Patients |
| 01300 | Number of Patients Receiving Hospice Care | 0500 | Other | 583. | Patients |
| 01300 | Number of Patients Receiving Hospice Care | 0600 | Total | 7,313. | Patients |
| 01400 | Total Number of Unduplicated Continuous Care Hours Billable to Medicare | 0100 | Medicare | 156203.00 | Hours |
| 01400 | Total Number of Unduplicated Continuous Care Hours Billable to Medicare | 0300 | Skilled Nursing | 23479.00 | Hours |
| 01500 | Average Length of Stay | 0100 | Medicare | 57.05 | Avg LOS |
| 01500 | Average Length of Stay | 0200 | Medicaid | 61.26 | Avg LOS |

CR Hospice Reference Report

A sample cost report of Palm Beach County Hospice in West Palm Beach, FL with all the worksheets.

| Line | Line Description | Col | Column Description | Value | Type |
|------------|---|------|--------------------|--------|----------|
| S10 | Wkst S-1 Hospice Identification Data | | | | |
| 01500 | Average Length of Stay | 0300 | Skilled Nursing | 86.17 | Avg LOS |
| 01500 | Average Length of Stay | 0400 | Nursing Facility | 89.25 | Avg LOS |
| 01500 | Average Length of Stay | 0500 | Other | 29.11 | Avg LOS |
| 01500 | Average Length of Stay | 0600 | Total | 54.99 | Avg LOS |
| 01600 | Unduplicated Census Count | 0100 | Medicare | 5,548. | Census |
| 01600 | Unduplicated Census Count | 0200 | Medicaid | 255. | Census |
| 01600 | Unduplicated Census Count | 0300 | Skilled Nursing | 736. | Census |
| 01600 | Unduplicated Census Count | 0400 | Nursing Facility | 21. | Census |
| 01600 | Unduplicated Census Count | 0500 | Other | 553. | Census |
| 01600 | Unduplicated Census Count | 0600 | Total | 6,356. | Census |
| 01800 | Are there any related organization or home office cost as defined in CMS Pub. 15-1. Enter answer an | 0100 | Question | | N Answer |