



Oklahoma Healthcare Authority- Nursing Home Facility Cost Report-State Fiscal Year June 30, 2018

424	MCCALL'S CHAPEL SCHOOL INC # 5	ICF/MR Profound	-	4,297	-	4,297	4,380	98.11%	\$ 331,500.00	\$ 19,160.00	\$ 62,330.00	\$ 938.00	\$ 34,603.00	\$ 15,799.00	\$ 43,183.00	\$ 8,515.00	\$ 34,147.00	\$ -	\$ 99,137.00	\$ 649,312.00	\$ 151.11
423	MCCALL'S CHAPEL SCHOOL INC # 9	ICF/MR Profound	-	4,323	-	4,323	4,380	98.70%	\$ 333,827.00	\$ 21,119.00	\$ 65,058.00	\$ 941.00	\$ 32,457.00	\$ 15,916.00	\$ 49,607.00	\$ 6,168.00	\$ 34,417.00	\$ -	\$ 98,416.00	\$ 657,926.00	\$ 152.19
521	MCCALL'S CHAPEL SCHOOL INC #13	ICF/MR Profound	-	4,290	-	4,290	4,380	97.95%	\$ 331,020.00	\$ 22,063.00	\$ 64,189.00	\$ 997.00	\$ 34,911.00	\$ 15,777.00	\$ 42,768.00	\$ 6,937.00	\$ 34,104.00	\$ -	\$ 96,214.00	\$ 648,980.00	\$ 151.28
527	MCCALL'S CHAPEL SCHOOL INC #15	ICF/MR Profound	-	1,460	-	1,460	1,460	100.00%	\$ 113,818.00	\$ 9,004.00	\$ 21,230.00	\$ 197.00	\$ 10,832.00	\$ 5,446.00	\$ 28,203.00	\$ 3,442.00	\$ 11,834.00	\$ -	\$ 33,237.00	\$ 237,243.00	\$ 162.50
519	MCCALL'S CHAPEL SCHOOL INC # 3	ICF/MR Profound	-	4,327	-	4,327	4,380	98.79%	\$ 333,942.00	\$ 20,788.00	\$ 64,312.00	\$ 1,150.00	\$ 31,964.00	\$ 15,918.00	\$ 44,097.00	\$ 8,467.00	\$ 34,411.00	\$ -	\$ 100,031.00	\$ 655,080.00	\$ 151.39
516	MCCALL'S CHAPEL SCHOOL INC # 4	ICF/MR Profound	-	4,380	-	4,380	4,380	100.00%	\$ 338,194.00	\$ 19,130.00	\$ 66,634.00	\$ 589.00	\$ 32,451.00	\$ 16,123.00	\$ 51,704.00	\$ 6,595.00	\$ 34,865.00	\$ -	\$ 98,545.00	\$ 664,830.00	\$ 151.79
515	MCCALL'S CHAPEL SCHOOL INC #11	ICF/MR Profound	-	4,379	-	4,379	4,380	99.98%	\$ 337,695.00	\$ 19,431.00	\$ 66,411.00	\$ 949.00	\$ 31,879.00	\$ 16,091.00	\$ 44,849.00	\$ 7,038.00	\$ 34,773.00	\$ -	\$ 99,782.00	\$ 658,898.00	\$ 150.47
501	MCCURDY PLACE	ICF/MR Profound	-	2,896	-	2,896	2,920	99.18%	\$ 191,386.00	\$ 4,593.00	\$ 32,671.00	\$ 4,926.00	\$ 18,959.00	\$ 10,249.00	\$ 36,299.00	\$ 2,073.00	\$ 66,474.00	\$ 14,434.00	\$ 28,274.00	\$ 410,338.00	\$ 141.69
452	MEADOWBROOK ICF/MR	ICF/MR Profound	-	5,728	92	5,820	5,840	99.66%	\$ 429,201.26	\$ 27,922.79	\$ 92,597.12	\$ 7,808.50	\$ 28,144.09	\$ 7,976.66	\$ 55,088.63	\$ 16,949.82	\$ 31,500.00	\$ -	\$ 50,289.50	\$ 747,478.37	\$ 128.43
523	MEADOWBROOK ICF/MR #2	ICF/MR Profound	-	5,271	453	5,724	5,840	98.01%	\$ 389,889.21	\$ 19,599.25	\$ 98,145.32	\$ 8,791.80	\$ 32,664.13	\$ 2,487.00	\$ 56,081.49	\$ 15,266.70	\$ 38,500.00	\$ -	\$ 50,291.94	\$ 711,716.84	\$ 124.34
411	NOVA CENTRE	ICF/MR Profound	-	5,266	-	5,266	5,840	90.17%	\$ 522,983.00	\$ 53,930.00	\$ 91,875.00	\$ 2,214.00	\$ 27,796.00	\$ 15,447.00	\$ 64,769.00	\$ 21,750.00	\$ 39,698.00	\$ -	\$ 274,575.00	\$ 1,115,037.00	\$ 211.74
472	OAK PLACE LIVING CENTER	ICF/MR Profound	-	2,920	-	2,920	2,920	100.00%	\$ 228,321.00	\$ 7,146.00	\$ 35,444.00	\$ 2,701.00	\$ 19,566.00	\$ 5,283.00	\$ 63,312.00	\$ 6,930.00	\$ 11,488.00	\$ 36,000.00	\$ 27,774.00	\$ 443,965.00	\$ 152.04
490	ONEIDA PLACE	ICF/MR Profound	-	2,553	-	2,553	2,920	87.43%	\$ 198,127.00	\$ 4,593.00	\$ 40,497.00	\$ 1,930.00	\$ 19,052.00	\$ 9,158.00	\$ 31,838.00	\$ 2,221.00	\$ 63,370.00	\$ 14,434.00	\$ 25,765.00	\$ 410,985.00	\$ 160.98
483	PROVIDENCE HOUSE	ICF/MR Profound	-	5,740	-	5,740	5,840	98.29%	\$ 411,308.00	\$ 88,349.00	\$ 102,241.00	\$ 7,561.00	\$ 47,297.00	\$ 19,760.00	\$ 53,276.00	\$ 5,076.00	\$ 81,367.11	\$ -	\$ 65,369.00	\$ 881,604.11	\$ 153.59
481	REDWOOD PLACE	ICF/MR Profound	-	5,775	-	5,775	5,840	98.89%	\$ 447,900.00	\$ 13,677.00	\$ 68,435.00	\$ 5,438.00	\$ 36,425.00	\$ 9,892.00	\$ 152,881.00	\$ 11,200.00	\$ 21,610.00	\$ 52,876.00	\$ 53,259.00	\$ 873,593.00	\$ 151.27
396	RELIANT LIVING CENTER OF DEL CITY	ICF/MR Profound	-	5,439	-	5,439	5,840	93.13%	\$ 576,020.01	\$ 27,999.01	\$ 72,375.11	\$ -	\$ 22,755.02	\$ 16,443.59	\$ 62,276.36	\$ 12,193.70	\$ 18,161.15	\$ -	\$ 61,699.37	\$ 869,923.32	\$ 159.94
491	RIDGEVIEW PLACE	ICF/MR Profound	-	2,112	-	2,112	2,190	96.44%	\$ 182,852.00	\$ 4,429.00	\$ 35,362.00	\$ 1,558.00	\$ 15,732.00	\$ 7,869.00	\$ 25,691.00	\$ 2,034.00	\$ 47,541.00	\$ 10,832.00	\$ 21,129.00	\$ 355,029.00	\$ 168.10
542	SAINT ANDRE BESSETTE	ICF/MR Profound	-	5,736	-	5,736	5,840	98.22%	\$ 426,765.00	\$ 15,253.00	\$ 85,566.00	\$ 557.00	\$ 26,702.00	\$ 13,846.00	\$ 77,211.00	\$ 19,471.00	\$ 55,890.00	\$ -	\$ 170,071.00	\$ 891,332.00	\$ 155.39
533	SALATKA HALL	ICF/MR Profound	-	5,772	-	5,772	5,840	98.84%	\$ 487,158.00	\$ 13,926.00	\$ 97,256.00	\$ 497.00	\$ 27,539.00	\$ 13,846.00	\$ 76,764.00	\$ 13,694.00	\$ 94,537.00	\$ -	\$ 185,252.00	\$ 1,010,469.00	\$ 175.06
522	SANTA FE CHEYENNE HOUSE	ICF/MR Profound	-	5,612	-	5,612	5,840	96.10%	\$ 377,013.27	\$ 14,274.00	\$ 74,551.00	\$ 12,780.50	\$ 33,900.00	\$ 17,160.50	\$ 82,871.50	\$ 2,111.00	\$ 65,754.00	\$ 60,583.00	\$ 54,410.00	\$ 795,408.77	\$ 141.73
520	SANTA FE SIERRA HOUSE	ICF/MR Profound	-	5,429	-	5,429	5,840	92.96%	\$ 377,013.27	\$ 14,035.00	\$ 74,551.00	\$ 12,780.50	\$ 33,900.00	\$ 17,160.50	\$ 82,871.50	\$ 2,061.00	\$ 65,754.00	\$ 70,583.00	\$ 54,040.00	\$ 804,749.77	\$ 148.23
480	SEMINOLE PLACE	ICF/MR Profound	-	2,432	-	2,432	2,920	83.29%	\$ 184,969.00	\$ 4,676.00	\$ 30,223.00	\$ 2,170.00	\$ 15,729.00	\$ 9,110.00	\$ 31,491.00	\$ 2,500.00	\$ 64,477.00	\$ 14,434.00	\$ 24,714.00	\$ 384,493.00	\$ 158.10
499	TAFT PLACE	ICF/MR Profound	-	1,940	-	1,940	2,190	88.58%	\$ 177,757.00	\$ 4,429.00	\$ 38,779.00	\$ 2,635.00	\$ 14,180.00	\$ 7,848.00	\$ 29,621.00	\$ 1,639.00	\$ 49,869.00	\$ 10,832.00	\$ 19,235.00	\$ 356,824.00	\$ 183.93
476	THIRD PLACE	ICF/MR Profound	-	2,553	-	2,553	2,920	87.43%	\$ 186,006.00	\$ 4,858.00	\$ 29,420.00	\$ 2,088.00	\$ 17,591.00	\$ 8,871.00	\$ 35,129.00	\$ 2,221.00	\$ 63,617.00	\$ 14,434.00	\$ 26,024.00	\$ 390,259.00	\$ 152.86
509	UNIVERSITY PLACE	ICF/MR Profound	-	2,671	-	2,671	2,920	91.47%	\$ 194,174.00	\$ 4,518.00	\$ 33,494.00	\$ 3,705.00	\$ 18,854.00	\$ 11,935.00	\$ 34,658.00	\$ 1,875.00	\$ 66,474.00	\$ 14,434.00	\$ 26,361.00	\$ 410,482.00	\$ 153.68
503	WILLOW PLACE	ICF/MR Profound	-	5,746	-	5,746	5,840	98.39%	\$ 463,292.00	\$ 13,677.00	\$ 72,215.00	\$ 6,332.00	\$ 32,804.00	\$ 9,628.00	\$ 152,744.00	\$ 11,530.00	\$ 19,528.00	\$ 64,448.00	\$ 42,892.00	\$ 889,090.00	\$ 154.73
	<b>ACUTE ICF/IID TOTAL'S</b>		-	<b>278,794</b>	<b>637</b>	<b>279,431</b>	<b>294,206</b>	<b>94.98%</b>	<b>\$ 23,204,369.94</b>	<b>\$ 1,229,611.03</b>	<b>\$ 4,394,913.67</b>	<b>\$ 191,245.07</b>	<b>\$ 1,766,998.72</b>	<b>\$ 745,317.99</b>	<b>\$ 3,857,865.21</b>	<b>\$ 468,139.01</b>	<b>\$ 3,329,185.68</b>	<b>\$ 762,003.35</b>	<b>\$ 4,932,241.84</b>	<b>\$ 44,881,891.51</b>	<b>\$ 160.62</b>

**State of Oklahoma**  
**Oklahoma Health Care Authority**  
**Nursing Home Facility Cost Report Summary**  
**Acute Care (16 Bed or Less) ICF/IID Facilities SFY 08 thru SFY 18 Cost Comparison**

<b>1/18/2019</b>	<b>SFY 2018</b>	<b>SFY 2017</b>	<b>SFY 2016</b>	<b>SFY 2015</b>	<b>SFY 2014</b>	<b>SFY 2013</b>	<b>SFY 2012</b>	<b>SFY 2011</b>	<b>SFY 2010</b>	<b>SFY 2009</b>	<b>SFY 2008</b>
<b>Available Patient Days:</b>	294,206	282,526	284,776	279,898	274,971	272,275	263,134	262,443	258,996	240,568	235,059
<b>Total Patient Days:</b>	279,431	271,478	271,307	265,991	263,925	264,395	253,881	251,784	244,157	229,671	225,979
<b>Medicaid Days:</b>	278,794	270,894	268,723	264,911	263,074	262,693	251,928	249,422	241,347	226,963	222,383
<b>Medicare Days:</b>	-	-	-	-	-	-	-	-	-	-	-
<b>Other Days:</b>	637	584	2,584	1,080	851	1,702	1,953	2,362	2,810	2,708	3,596
<b>Occupancy %:</b>	94.98%	96.09%	95.27%	95.03%	95.98%	97.11%	96.48%	95.94%	94.27%	95.47%	96.14%
<b>% of Medicaid:</b>	99.77%	99.78%	99.05%	99.59%	99.68%	99.36%	99.23%	99.06%	98.85%	98.82%	98.41%
<b>Description:</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>	<b>Total Per Day</b>
<b>Salaries &amp; Wages:</b>	\$ 83.04	\$ 83.99	\$ 83.39	\$ 80.34	\$ 79.02	\$ 80.49	\$ 75.91	\$ 75.41	\$ 77.04	\$ 76.08	\$ 71.50
<b>Outside Professional Fees:</b>	\$ 4.40	\$ 4.02	\$ 3.88	\$ 3.47	\$ 3.63	\$ 3.98	\$ 13.68	\$ 11.20	\$ 12.13	\$ 15.91	\$ 12.91
<b>Employee Expenses:</b>	\$ 15.73	\$ 16.29	\$ 16.70	\$ 16.56	\$ 16.71	\$ 16.72	\$ 15.25	\$ 15.26	\$ 15.54	\$ 14.08	\$ 14.03
<b>Taxes (Non-Payroll):</b>	\$ 0.68	\$ 0.69	\$ 0.59	\$ 0.48	\$ 0.51	\$ 0.52	\$ 0.54	\$ 0.62	\$ 1.02	\$ 1.08	\$ 0.96
<b>Office Expenses:</b>	\$ 6.32	\$ 6.25	\$ 6.29	\$ 6.37	\$ 6.65	\$ 5.89	\$ 6.16	\$ 5.99	\$ 5.90	\$ 6.09	\$ 5.91
<b>Insurance:</b>	\$ 2.67	\$ 2.74	\$ 2.60	\$ 2.67	\$ 2.68	\$ 2.48	\$ 2.56	\$ 2.83	\$ 3.05	\$ 2.87	\$ 2.82
<b>General Expenses:</b>	\$ 13.81	\$ 13.89	\$ 14.63	\$ 15.70	\$ 14.95	\$ 14.42	\$ 15.20	\$ 13.32	\$ 13.50	\$ 13.23	\$ 12.53
<b>Drugs &amp; Medical Supplies:</b>	\$ 1.68	\$ 1.61	\$ 1.59	\$ 1.69	\$ 1.56	\$ 1.71	\$ 1.83	\$ 1.54	\$ 1.57	\$ 1.58	\$ 1.34
<b>Capital Related Cost:</b>	\$ 11.91	\$ 11.81	\$ 10.77	\$ 11.86	\$ 11.47	\$ 11.23	\$ 12.74	\$ 12.88	\$ 12.34	\$ 10.96	\$ 10.66
<b>Administrative Services:</b>	\$ 2.73	\$ 3.44	\$ 2.97	\$ 2.95	\$ 3.31	\$ 2.97	\$ 2.36	\$ 3.09	\$ 1.46	\$ 1.75	\$ 1.77
<b>Other Expenses:</b>	\$ 17.65	\$ 16.24	\$ 17.14	\$ 18.21	\$ 17.70	\$ 15.24	\$ 13.55	\$ 13.61	\$ 14.14	\$ 14.88	\$ 14.49
<b>Total:</b>	\$ 160.62	\$ 160.96	\$ 160.55	\$ 160.28	\$ 158.18	\$ 155.65	\$ 159.78	\$ 155.75	\$ 157.69	\$ 158.51	\$ 148.93

**State of Oklahoma  
Oklahoma Health Care Authority**

1/18/2019

**Nursing Home Facility Cost Report Summary**

Acute Care ICF/IID (16 bed or less) State Fiscal Year June 30, 2018

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Summary

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637
 Occupancy %:	 94.98%
% of Medicaid:	99.77%

<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Salaries & Wages:	\$ 23,204,369.94	\$ 83.04
Outside Professional Fees:	\$ 1,229,611.03	\$ 4.40
Employee Expenses:	\$ 4,394,913.67	\$ 15.73
Taxes (Non-Payroll):	\$ 191,245.07	\$ 0.68
Office Expenses:	\$ 1,766,998.72	\$ 6.32
Insurance:	\$ 745,317.99	\$ 2.67
General Expenses:	\$ 3,857,865.21	\$ 13.81
Drugs & Medical Supplies:	\$ 468,139.01	\$ 1.68
Capital Related Cost:	\$ 3,329,185.68	\$ 11.91
Administrative Services:	\$ 762,003.35	\$ 2.73
Other Expenses:	\$ 4,932,241.84	\$ 17.65
<b>Total:</b>	<b>\$ 44,881,891.51</b>	<b>\$ 160.62</b>

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Acute ICF/IID Facilities

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Salaries and Wages

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637

Occupancy %:	94.98%
% of Medicaid:	99.77%

<u>Description:</u>	<u>Total Cost</u>	<u>Total Hours</u>	<u>Cost Per Day</u>	<u>Hrs Per Day</u>	<u>Cost Per Hr</u>
Registered Nurses:	\$ 97,885.89	4,053	\$ 0.35	0.01	\$ 24.15
Licensed Practical Nurses:	\$ 2,062,912.33	109,608	\$ 7.38	0.39	\$ 18.82
Director of Nursing:	\$ 616,590.47	25,648	\$ 2.21	0.09	\$ 24.04
Nurse Aides:	\$ 10,618,140.20	1,022,887	\$ 38.00	3.66	\$ 10.38
CMA Aides:	\$ 4,648,180.86	420,983	\$ 16.63	1.51	\$ 11.04
QMRP'S (ICF-MR Only):	\$ 1,129,535.36	61,053	\$ 4.04	0.22	\$ 18.50
Medical Director:	\$ -	-	\$ -	-	\$ -
Physical Therapist:	\$ 1,555.64	21	\$ 0.01	0.00	\$ 74.08
Occupational Therapist:	\$ -	-	\$ -	-	\$ -
Respiratory Therapist:	\$ -	-	\$ -	-	\$ -
Speech Therapist:	\$ -	-	\$ -	-	\$ -
Therapy Aide/Assistant:	\$ -	-	\$ -	-	\$ -
Administrator:	\$ 1,174,667.43	46,407	\$ 4.20	0.17	\$ 25.31
Assistant Administrator:	\$ 279,484.80	10,965	\$ 1.00	0.04	\$ 25.49
Accountant/Bookkeeper:	\$ 412,745.68	26,431	\$ 1.48	0.09	\$ 15.62
Other Office Staff:	\$ 891,537.29	46,155	\$ 3.19	0.17	\$ 19.32
Soc Serv Dir/Soc Worker:	\$ 57,140.16	4,611	\$ 0.20	0.02	\$ 12.39
Other Soc Serv Staff:	\$ 27,729.00	2,055	\$ 0.10	0.01	\$ 13.49
Activities Director:	\$ 101,504.00	9,669	\$ 0.36	0.03	\$ 10.50
Other Activities Staff:	\$ 76,146.30	7,336	\$ 0.27	0.03	\$ 10.38
Comb Soc Serv/Activities:	\$ 30,084.00	2,132	\$ 0.11	0.01	\$ -
Dietician:	\$ 28,900.00	2,139	\$ 0.10	0.01	\$ 13.51
Other Dietary Staff:	\$ 249,056.95	18,576	\$ 0.89	0.07	\$ 13.41

1/18/2019

Acute ICF/IID Facilities

State of Oklahoma  
Oklahoma Health Care Authority  
Nursing Home Facility Cost Report Summary  
State Fiscal Year June 30, 2018

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**Salaries and Wages**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637

Occupancy %:	94.98%
% of Medicaid:	99.77%

<u>Description:</u>	<u>Total Cost</u>	<u>Total Hours</u>	<u>Cost Per Day</u>	<u>Hrs Per Day</u>	<u>Cost Per Hr</u>
Housekeeping Supervisor:	\$ -	-	\$ -	-	\$ -
Housekeeping Staff:	\$ 177,124.36	16,216	\$ 0.63	0.06	\$ 10.92
Maintenance Supervisor:	\$ 69,438.08	4,124	\$ 0.25	0.01	\$ 16.84
Maintenance Staff:	\$ 295,871.73	24,564	\$ 1.06	0.09	\$ 12.04
Laundry Supervisor:	\$ -	-	\$ -	-	\$ -
Other Laundry Staff:	\$ -	-	\$ -	-	\$ -
Medical Records:	\$ -	-	\$ -	-	\$ -
Other:	\$ 158,139.41	9,220	\$ 0.57	0.03	\$ 17.15
<b>Total Salaries &amp; Wages:</b>	<b>\$ 23,204,369.94</b>	<b>1,874,853</b>	<b>\$ 83.04</b>	<b>6.71</b>	<b>\$ 12.38</b>

**State of Oklahoma**  
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Acute Care ICF/IID (16 bed or less)

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**Outside Professional Fees**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637
 Occupancy %:	 94.98%
% of Medicaid:	99.77%

<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Contract Registered Nurse:	\$ 88,561.00	\$ 0.32
Contract Lic. Practical Nurse:	\$ 946.00	\$ 0.00
Contract Nurse Aides:	\$ -	\$ -
Medical Director:	\$ 99,476.00	\$ 0.36
Therapists:	\$ 107,239.88	\$ 0.38
Consulting Social Worker:	\$ 8,651.00	\$ 0.03
Dietician:	\$ 86,168.00	\$ 0.31
Pharmacist:	\$ 66,083.79	\$ 0.24
Dentist:	\$ 13,962.00	\$ 0.05
Accountants:	\$ 398,772.02	\$ 1.43
Legal:	\$ 11,202.00	\$ 0.04
Housekeeping:	\$ -	\$ -
Maintenance:	\$ 94,761.00	\$ 0.34
Other:	\$ 163,779.69	\$ 0.59
Computer Programmer:	\$ 90,008.65	\$ 0.32
<b>Total O/S Professional:</b>	<b>\$ 1,229,611.03</b>	<b>\$ 4.40</b>

**State of Oklahoma  
Oklahoma Health Care Authority**

**Nursing Home Facility Cost Report Summary**

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Acute Care ICF/IID (16 bed or less) State Fiscal Year June 30, 2018

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**Employee Expenses**

SFY18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637

Occupancy %: 94.98%

% of Medicaid: 99.77%

<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
<u>Employee Benefits and Payroll Related Expenses</u>		
Fica:	\$ 1,704,464.50	\$ 6.10
Unemployment Compensation Tax:	\$ 101,830.36	\$ 0.36
Workman's Compensation Insurance:	\$ 706,199.24	\$ 2.53
Group Health Dental Insurance:	\$ 1,357,639.77	\$ 4.86
Life Insurance:	\$ 30,904.08	\$ 0.11
Retirement and Pension:	\$ 129,901.74	\$ 0.46
Other Employee Benefits:	\$ 232,917.00	\$ 0.83
<u>Staff Development and Training</u>		
Nurse Aide Competency Evaluation:	\$ 19,002.00	\$ 0.07
Other Licensed Direct Care Training:	\$ 25,186.46	\$ 0.09
Other:	\$ 86,868.52	\$ 0.31
<b>Total</b>	<b>\$ 4,394,913.67</b>	<b>\$ 15.73</b>



**State of Oklahoma  
Oklahoma Health Care Authority**

**Nursing Home Facility Cost Report Summary**

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Acute Care ICF/IID (16 bed or less) State Fiscal Year June 30, 2018

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**Taxes Non-Payroll Related**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637

Occupancy %: 94.98%

% of Medicaid: 99.77%

<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Excise Tax:	\$ -	\$ -
Corporation License:	\$ 34,594.78	\$ 0.12
Ad Valorem:	\$ 85,883.00	\$ 0.31
Auto Tag/Registration:	\$ 7,430.99	\$ 0.03
Other:	\$ 63,336.30	\$ 0.23
<b>Total Taxes Non-Payroll</b>	<b>\$ 191,245.07</b>	<b>\$ 0.68</b>

**State of Oklahoma**  
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**Nursing Home Facility Cost Report Summary**

1/18/2019

Acute Care ICF/IID (16 bed or less) State Fiscal Year June 30, 2018

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**Office Expense**

SFY18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637

Occupancy %:	94.98%
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% of Medicaid:	99.77%
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<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Office Supplies:	\$ 279,833.70	\$ 1.00
Office Phone:	\$ 298,273.98	\$ 1.07
Office Utilities:	\$ 1,188,891.04	\$ 4.25
<b>Total Office Expense:</b>	<b>\$ 1,766,998.72</b>	<b>\$ 6.32</b>

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**Insurance Non-Payroll**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637

Occupancy %:	94.98%
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% of Medicaid:	99.77%
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<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Building Insurance:	\$ 283,075.54	\$ 1.01
Automobile Insurance:	\$ 136,972.45	\$ 0.49
Other Insurance:	\$ 325,270.00	\$ 1.16
<b>Total Insurance Expense:</b>	<b>\$ 745,317.99</b>	<b>\$ 2.67</b>

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**General Expenses**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637
 Occupancy %:	 94.98%
% of Medicaid:	99.77%

<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Dues and Publications:	\$ 16,084.71	\$ 0.06
Public Relations:	\$ 34,126.74	\$ 0.12
Automobile Expense:	\$ 396,530.04	\$ 1.42
Maintenance:	\$ 772,116.90	\$ 2.76
Laundry and Linen:	\$ 61,728.23	\$ 0.22
Housekeeping Supplies:	\$ 284,468.33	\$ 1.02
Food and Kitchen Supplies:	\$ 1,913,741.75	\$ 6.85
Social Services Supplies:	\$ 379,068.51	\$ 1.36
<b>Total General Expenses:</b>	<b>\$ 3,857,865.21</b>	<b>\$ 13.81</b>

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**Drugs & Medical Supplies**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637
Occupancy %:	94.98%
% of Medicaid:	99.77%

<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Drugs and Medical Supplies:	\$ 300,098.85	\$ 1.07
Over-the-Counter Medication:	\$ 161,887.95	\$ 0.58
Special Adaptive Medical Equip:	\$ 6,152.21	\$ 0.02
<b>Total Drugs &amp; Medical:</b>	<b>\$ 468,139.01</b>	<b>\$ 1.68</b>

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**Capital Related Cost**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637

Occupancy %:	94.98%
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% of Medicaid:	99.77%
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<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Equipment Rent/Lease:	\$ 17,877.79	\$ 0.06
Facility Rent/Lease:	\$ 1,911,902.11	\$ 6.84
Interest Expense:	\$ 210,287.69	\$ 0.75
 <u>Depreciation Summary</u>		
Building & Improvements:	\$ 552,899.94	\$ 1.98
Local Improvements:	\$ 215,656.00	\$ 0.77
Leasehold & Improvements:	\$ 1,410.00	\$ 0.01
Equipment:	\$ 419,152.15	\$ 1.50
Total Depreciation:	\$ 1,189,118.09	\$ 4.26
<b>Total Capital Related Costs:</b>	<b>\$ 3,329,185.68</b>	<b>\$ 11.91</b>

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**Administrative Services**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637
 Occupancy %:	 94.98%
% of Medicaid:	99.77%

<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Home Office Expense:	\$ 97,400.35	\$ 0.35
Owner's Non-Salary Compensation:	\$ -	\$ -
Owner's Salaries Paid:	\$ 30,000.00	\$ 0.11
Benefits on Owner's Salaries:	\$ -	\$ -
Director's Fees:	\$ -	\$ -
Management Fees Paid:	\$ 634,603.00	\$ 2.27
<b>Total Administrative Services:</b>	<b>\$ 762,003.35</b>	<b>\$ 2.73</b>

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**Other Expenses**

SFY 18

Available Patient Days:	294,206
Total Patient Days:	279,431
Medicaid Days:	278,794
Medicare Days:	-
Other Days:	637
 Occupancy %:	 94.98%
% of Medicaid:	99.77%

<u>Description:</u>	<u>Totals</u>	<u>Cost Per Day</u>
Hepatitis Vaccination Costs:	\$ 1,242.68	\$ 0.00
Provider Fees:	\$ 2,605,948.35	\$ 9.33
Other Costs:	\$ 2,325,050.81	\$ 8.32
<b>Total Other Costs:</b>	<b>\$ 4,932,241.84</b>	<b>\$ 17.65</b>