

YEAR 13 TABLE DESCRIPTIONS (Proposed)

TABLE	PURPOSE OF TABLE FOR MEDIAN CALCULATION
TABLE 6	Used to determine MSA by county code.
TABLE 7	Used to determine inflation factors for each report period and the mid point of the rate year.
TABLE 23	Used to determine financial yield rate.
TABLE 37	Used to determine audited allocation percentage for NF for report periods ending 12/31/1996 and after that had one or more minor movable equipment audit adjustment reversals (see table_51). For these records, the NF allocation percent is stored in the SNF fields.
TABLE 39	Used to determine reported allowable costs for cost reporting periods ending 12/31/1996 and after if one or more minor movable equipment audit adjustment reversals were made (see table_51).
TABLE 40	Used to determine audit adjustment amounts if one or more minor movable equipment audit adjustment reversals were made (see table_51).
TABLE 41	Used to link to AdjID in table_40 to review audit adjustment descriptions.
TABLE 42	Used to determine special rehabilitation facilities, code 5, for median calculation.
TABLE 43	Used to determine hospital?based and special rehabilitation facilities for peer grouping.
TABLE 44	Used to determine all non-terminated facilities as of 4/1/2006. Used to determine the Provider ID (Internal provider ID) and county code for these facilities. Used to determine county facilities.
TABLE 45	Used to determine the Total Facility CMI and validity status of the CMI for picture dates used in the median calculation. Used to determine the MA CMI for the 02/01/2006 picture date. If the MA Count is zero, the statewide average of 1.33 is used in rates.
TABLE 46	Used to determine default CMI values.
TABLE 47	Used to determine appraisal values. If value appears as zero, no appraisal information was available.
TABLE 48	Used to determine certified and allowable bed information as of 04/01/2007.
TABLE 49	Used to determine actual and available residents days for facilities not in the median calculation and their exempt status. Used to determine real estate tax amount for facilities not in the median calculation.
TABLE 50	Used to determine certificate of need overrun amounts and scope. A=All, S=All Except Movable, N=All Except Land.
TABLE 51	Static list of Audit_ID and report end date for each audit number to be used in the median calculation. Denotes those audit reports that have one or more minor movable equipment audit adjustment reversals.
TABLE 52	Used to determine audited ending beds for report period. Used to determine audited resident and available days for report period.
TABLE 53	Used to determine audited NF costs for report periods ending 12/31/1996 and after that have not had any minor movable equipment audit adjustment reversals (see table_51). Used to determine audited NF real estate tax costs for report periods ending 12/31/1996 and after.
TABLE 54	Used to determine Issue Date for audits with minor movable equipment adjustment reversals.
TABLE 57	Used to determine the final NF Rate.
TABLE 58	NOT USED FOR 2007

YEAR 13 FIELD DESCRIPTIONS

TABLE	FIELD NUMBER	FIELD	FIELD DESCRIPTION	MEDIAN CALCULATION	RATE CALCULATION
TABLE 6	1	CODE	County code	**	**
TABLE 6	2	NAME	County name		
TABLE 6	3	MSA	Metropolitan statistical area	**	**
TABLE 7	1	DATE	Cost report end date	**	
TABLE 7	2	INDEX	DRI inflation index	**	
TABLE 7	3	FACTOR	Dormant field		
TABLE 23	1	RATEDATE	Rate effective date		**
TABLE 23	2	Y_AVG	Financial yield rate		**
TABLE 37	1	AUDIT	Audit number		
TABLE 37	2	LINENO	Audited Schedule C line number	**	**
TABLE 37	3	COSTCTR	Audited Schedule C cost center description	**	
TABLE 37	4	SNF	Audited SNF allocation percent. Audited NF allocation percent for cost report periods ending 12/31/1996 and after.	**	**
TABLE 37	5	ICF	Audited ICF allocation percent	**	**
TABLE 37	6	RESIDENT	Audited Residential allocation percent		
TABLE 37	7	AUDIT_ID	Internal audit number ID	**	**

TABLE 39	1	AUDIT	Internal cost report ID	**	
TABLE 39	2	AUDIT_ID	Internal audit number ID	**	
TABLE 39	3	LINENO	MA-11 Schedule C line number	**	
TABLE 39	4	COSTCTR	Cost center		
TABLE 39	5	REPCOST	Reported cost from MA-11 Schedule C, Column F		
TABLE 40	1	AUDIT	Audit number	**	
TABLE 40	2	ADJID	Audit adjustment number	**	
TABLE 40	3	SCHEDULE	Cost report schedule		
TABLE 40	4	LINENO	Cost report line number, Schedule C	**	
TABLE 40	5	ADJUSTMENT	Audit adjustment amount	**	
TABLE 40	6	WORKPAPER	Audit adjustment workpaper		
TABLE 40	7	AUDIT_ID	Internal audit number ID	**	
TABLE 40	8	MME_ADJUST	Minor Movable Equipment audit adjustment reversal/addition indicator	**	
TABLE 40	9	ISDELETED	Minor Movable Equipment audit adjustment reversal indicator	**	
TABLE 41	1	AUDIT	Audit number		
TABLE 41	2	ADJID	Audit adjustment number	**	
TABLE 41	3	DESCRIPT	Audit adjustment description		
TABLE 41	4	AUDIT_ID	Internal audit number ID	**	
TABLE 42	1	PROVID	Internal provider ID	**	
TABLE 42	2	CODE	05 Special Rehab	**	
TABLE 42	3	RED	Rate effective date	**	
TABLE 43	1	PROVID	Internal provider number	**	**
TABLE 43	2	PNUM	MA provider number		
TABLE 43	3	OWNERTYPE	Type of ownership	**	**
TABLE 44	1	PROVID	Internal provider ID	**	**
TABLE 44	2	RATEEFFDTE	Effective date of the rate period.Note: If this field is empty, it is because this provider was selected for Median Calculation purposes only. This Provider was <u>not</u> selected for Rate Calculation purposes because it was Terminated <u>on or after</u> April 1 and <u>before</u> July 1 of the Rate Setting Year.	**	**
TABLE 44	3	RATEENDDTE	End date of the rate period.	**	**
TABLE 44	4	PNUM	MA provider number	**	**
TABLE 44	5	PROVNAME	Provider name		**
TABLE 44	6	COUNTY	County code	**	**
TABLE 44	7	ELIGBEGIN	Eligibility begin date - Dormant field		
TABLE 44	8	FISCALYE	Reporting year		
TABLE 44	9	PROVSTAT	Provider status	**	**
TABLE 44	10	PROVTYPE	Provider type		**
TABLE 44	11	REGCLIENT	Client services region		
TABLE 44	12	REGPRVSVCS	Provider services region		
TABLE 44	13	REGRATES	Rates region		
TABLE 44	14	TYPECONTRL	Type control		
TABLE 44	15	SPECLREHAB	Special Rehabilitation indicator	**	
TABLE 44	16	HOSPBASD	Hospital-Based indicator	**	
TABLE 44	17	HOLDHARM	Hold Harmless indicator		**
TABLE 44	18	CON	Certificate of Need indicator		**
TABLE 44	19	CONREDUCT	Certificate of Need Reduction percent		**

TABLE 44	20	CONSCOPE	<p>Certificate of Need Scope.</p> <ul style="list-style-type: none"> • If 1, multiply the value of each appraisal component, Land, Land Improvements, Building, and Movable Property by (1 - the Certificate of Need Reduction Percent (CONREDUCT)). • If 2, multiply the value of each appraisal component EXCEPT Movable Property by (1 - the Certificate of Need Reduction Percent (CONREDUCT)). • If 3, multiply the value of each appraisal component EXCEPT Land by (1 - the Certificate of Need Reduction Percent (CONREDUCT)). 		**
TABLE 45	1	PICTDATE	Picture Date	**	**
TABLE 45	2	ACTPROVCM	Actual Total Facility CMI		
TABLE 45	3	ACTMACMI	Actual MA CMI		
TABLE 45	4	PAYPROVCM	Payment Total Facility CMI	**	
TABLE 45	5	PAYMACMI	Payment MA CMI		**
TABLE 45	6	POSTMARK	RVR or Cert. report postmark date		
TABLE 45	7	REPORTMA	Number of reported MA residents		
TABLE 45	8	REPORTNON	Number of reported non?MA residents		
TABLE 45	9	ACTMA	Number of actual MA residents		
TABLE 45	10	ACTNONMA	Number of actual non?MA residents		
TABLE 45	11	CMILETTER	Dormant field		
TABLE 45	12	ACCEPTED	Acceptance indicator	**	**
TABLE 45	13	PROVID	Internal provider ID	**	**
TABLE 45	14	PNUM	Provider number		
TABLE 46	1	SUBSCRIPT	Sequential RUG order		
TABLE 46	2	GROUP	Resource Utilization Group		
TABLE 46	3	CMI	Rug group CMI		
TABLE 47	1	PROVID	Internal provider ID		**
TABLE 47	2	PNUM	Provider number		
TABLE 47	3	SITE	Site number		
TABLE 47	4	INSPECTION	Inspection date		
TABLE 47	5	BEDS	Bed count		
TABLE 47	6	LAND	Land value		**
TABLE 47	7	BLDG	Building value		**
TABLE 47	8	LANDIMPR	Land improvement value		**
TABLE 47	9	SUBTOTAL	Subtotal		
TABLE 47	10	MOVE	Movable equipment value		**
TABLE 47	11	GRANDTOTAL	Grand total		
TABLE 47	12	EFFDATE	Valuation date		**
TABLE 48	1	PROVID	Internal provider ID		**
TABLE 48	2	EFFDATEB	Bed change effective date		**
TABLE 48	3	CERTIFBEDS	Certified beds		**
TABLE 48	4	MORBEDS	Allowable beds		**
TABLE 49	1	PROVID	Internal provider ID		**
TABLE 49	2	RED	Rate effective date		**
TABLE 49	3	A_RESDBAYS	Annualized resident days		**
TABLE 49	4	A_AVDBAYS	Annualized available days		**

TABLE 49	5	A_RETAX	Real estate tax		**
TABLE 49	6	EXEMPT	Exempt status		**
TABLE 50	1	PROVID	Internal provider ID		**
TABLE 50	2	PNUM	Provider number		
TABLE 50	3	REDUCTION	Reduction percent		**
TABLE 50	4	SCOPE	Identifies the subtotals to be reduced		**
TABLE 51	1	PROVID	Internal provider ID	**	
TABLE 51	2	PROVNAME	Provider name		
TABLE 51	3	PNUM	MA provider number		
TABLE 51	4	AUDIT	Audit number	**	
TABLE 51	5	BEGDATE	Report begin date		
TABLE 51	6	ENDDATE	Report end date		
TABLE 51	7	ISSUED	Audit issue date		
TABLE 51	8	AUDIT_ID	Internal audit number ID	**	
TABLE 51	9	MME_ADJUST	TRUE if one or more minor movable equipment audit adjustment reversals were made.	**	
TABLE 51	10	CR_ID	Internal cost report ID. Used to link to table_39.dbf to obtain reported allowable costs.	**	
TABLE 52	1	AUDIT	Audit number		
TABLE 52	2	PNUM	MA provider number		
TABLE 52	3	BEDBEGSNF	Audited beginning SNF beds		
TABLE 52	4	BEDBEGOTHR	Audited beginning OTHER beds		
TABLE 52	5	BEDENDSNF	Audited ending SNF or NF beds	**	
TABLE 52	6	BEDENDOTH	Audited ending OTHER beds		
TABLE 52	7	ACTPDAYSNF	Audited actual SNF or NF resident days	**	**
TABLE 52	8	ACTPDAYOTH	Audited actual OTHER resident days		
TABLE 52	9	AVAILSNF	Audited available SNF or NF resident days	**	**
TABLE 52	10	AVAILOTH	Audited available OTHER resident days		
TABLE 52	11	AUDIT_ID	Internal audit number ID	**	
TABLE 53	1	AUDIT	Audit number	**	**
TABLE 53	2	RC	Audited NF Resident Care Costs for report end dates of 12/31/1996 and after.	**	
TABLE 53	3	ORC	Audited NF Other Resident Care Costs.	**	
TABLE 53	4	ADM	Audited NF Administrative Costs.	**	
TABLE 53	5	RETAX	Audited NF Real Estate Taxes.		**
TABLE 53	6	MAJMOVPROP	Audited NF Major Movable Property for report end dates of 6/30/2001 and after.		**
TABLE 53	7	ISSUED	Audit issue date		
TABLE 53	8	AUDIT_ID	Internal audit number ID	**	
TABLE 54	1	PROVID	Internal provider ID		
TABLE 54	2	PNUM	MA provider number		
TABLE 54	3	PROVNAME	Provider name		
TABLE 54	4	AUDIT	Audit number	**	
TABLE 54	5	ISSUED	Audit issue date	**	
TABLE 54	6	AUDIT_ID	Internal audit number ID	**	
TABLE 57	1	RED	Rate effective date		
TABLE 57	2	MULTIPLIER	The multiplier applied to the NF Rate to determine the 2005 Rate.		