YEAR 9 TABLE DESCRIPTIONS (Proposed)	
TABLE	**PURPOSE OF TABLE FOR MEDIAN CALCULATION**
TABLE_1	**Replaced by Table_30** due to structure change.
TABLE_2	**Replaced by Table_31** due to structure changes.
TABLE_3	Used to determine special rehabilitation facilities, code 5, for median calculation.
TABLE_4	Used to determine hospital-based and special rehabilitation facilities for peer grouping.
TABLE_5	Used to determine all non-terminated facilities as of 4/1/2003. Used to determine the IPN (Internal provider number) and county code for these facilities. Used to determine county facilities.
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_8	**Replaced by Table_32** due to structure change.
TABLE_9	NOT USED FOR 2003 RATE YEAR.
TABLE_10	NOT USED FOR 2003 RATE YEAR.
TABLE_11	**Replaced by Table_33** due to structure changes.
TABLE_12	**Replaced by Table_34** due to structure change.
TABLE_13	**Replaced by Table_35** due to structure change.
TABLE_14	Used to determine proportion of costs on lines 13, 29, 30, 40, and 41 for report periods prior to 12/31/1996 to be allocated between the "a" and "b" portions of these lines. Source document is MA-11, Schedule C-1.
TABLE_15	**Replaced by Table_36** due to structure change.
TABLE_16	**Replaced by Table_37** due to structure change.
TABLE_17	NOT USED FOR 2003 RATE YEAR.
TABLE_18	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 02/01/2003 picture date. If the MA Count is zero, the statewide average of 1.21 is used in rates.
TABLE_19	Used to determine default CMI values.
TABLE_20	Used to determine appraisal values. If value appears as zero, no appraisal information was available.
TABLE_21	Used to determine certified and allowable bed information as of 04/01/2003.
TABLE_22	**Replaced by Table_38** due to structure change.
TABLE_23	Used to determine financial yield rate.
TABLE_24	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_25	Used to determine certificate of need overrun amounts and scope. A=All, S=All Except Movable, N=All Except Land.
TABLE_26	**Replaced by Table_39** due to structure changes.
TABLE_27	NOT USED FOR 2003 RATE YEAR.
TABLE_28	**Replaced by TABLE_40** due to structure change.
TABLE_29	**Replaced by TABLE_41** due to structure change.
TABLE_30 **New in 2003**	Static list of Audit_IDs to be used in the median calculation. Denotes those audit reports that have one or more minor movable equipment audit adjustment reversals. **Replaces Table_1** due to the following structure change: • Field number 8, AuditKey – Character (17) **changed to** Audit_ID Numeric (11, 0).

TABLE_31 **New in 2003**	Used to lookup report end dates for each audit number used in the median calculation. **Replaces Table_2** due to the following structure changes: • Field 1, CRID Character (5) **changed to** CR_ID Numeric (11, 0). • Field 2, Audit_ID Numeric (11, 0) **is new**. It was inserted <u>between</u> fields CR_ID and IPN. • Field 2, IPN Character (6) **moved to** Field 3. • Field 3, Audit Character (6), **moved to** Field 4. • Field 4, BegDate Date (8) **moved to** Field 5. • Field 5, EndDate Date (8) **moved to** Field 6.
TABLE_32 **New in 2003**	Used to determine audited ending beds for report period. Used to determine audited resident and available days for report period. Used to determine 12% administrative limit for report periods prior to 12/31/1996. **Replaces Table_8** due to the following structure change: • Field number 74, AuditKey - Character (17) **changed to** Audit_ID Numeric (11, 0).
TABLE_33 **New in 2003**	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_1). Used to determine audited NF real estate tax costs for report periods ending 12/31/1996 and after. **Replaces Table_11** due to the following structure changes: • Field 19, MajMovProp Numeric (8, 0) **is new**. It was inserted <u>between</u> fields ReTax and Issued. • Field 19, Issued - Date (8) **moved to** Field 20. • Field 20, AuditKey - Character (17) was **replaced by** what is now Field 21, Audit_ID Numeric (11, 0).
TABLE_34 **New in 2003**	Used to determine Audit_ID for report periods prior to 12/31/1996 and Issue Date for audits with minor movable equipment adjustment reversals. **Replaces Table_12** due to the following structure change: • Field 6, AuditKey - Character (17) **changed to** Audit_ID – Numeric (11, 0).
TABLE_35 **New in 2003**	Used to determine reported SNF and ICF allowable costs for report periods prior to 12/31/1996. **Replaces Table_13** due to the following structure change: • Field 21, TansType - Character (1) **is new**.
TABLE_36 **New in 2003**	Used to determine audit adjustment amounts for report periods prior to 12/31/1996. If no matching Audit_ID from TABLE_1 is found, no cost adjustments were made. **Replaces Table_15** due to the following structure change: • Field 7, AuditKey – Character (17) **changed to** Audit_ID – Numeric (11, 0).
TABLE_37 **New in 2003**	Used to determine audited allocation percentages for SNF and ICF for report periods prior to 12/31/1996. 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_1). For these records, the NF allocation percent is stored in the SNF fields. **Replaces Table_16** due to the following structure change: • Field 7, AuditKey – Character (17) **changed to** Audit_ID – Numeric (11, 0).
TABLE_38	Used to determine hold harmless rate for county facilities. **Replaces Table_22** due to the

New in 2003   following structure changes:

- Field 11, Rate2002 - Numeric (6, 2) **is new**. It was inserted <u>between</u> fields Rate2001 and SNFRate.
- Field 11, SNFRate – Numeric (6, 2) **moved to** Field 12.
- Field 12, ICFRate – Numeric (6, 2) **moved to** Field 13.
- Field 13, ICFMADay – Numeric (8, 0) **moved to** Field 14.
- Field 14, SNFMADay – Numeric (8, 0) **moved to** Field 15.
- Field 15, HHNoInflat – Numeric (6, 2) **moved to** Field 16.
- Field 16, HHRate – Numeric (6, 2) **moved to** Field 17.

TABLE_39
New in 2003   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_1). **Replaces Table_26** due to the following structure changes:

- Field 1 is now Audit – Character (5). CRID is not used.
- Field 2 is now Audit_ID – Numeric (11, 0). FieldID is not used.
- Field 3, Amount, **changed to** what is now Field 5, RepCost – Numeric (12, 0).
- Field 3, LineNo – Character (3) **is new**.
- Field 4, CostCtr – Character (70) **is new**.

TABLE_40a
TABLE_40b
New in 2003   Used to determine audit adjustment amounts if one or more minor movable equipment audit adjustment reversals were made (see table_1). **NOTE:** Due to size, TABLE_40 consists of two files. **Replaces Table_28** due to the following structure change:

- Field 7, AuditKey – Character (17) **changed to** Audit_ID – Numeric (11, 0).

TABLE_41
New in 2003   Used to link to AdjID in TABLE_40 to review audit adjustment descriptions. **Replaces Table_29** due to the following structure change:

- Field 4, AuditKey – Character (17) **changed to** Audit_ID – Numeric (11, 0).

TABLE	FIELD NUMBER	FIELD	FIELD DESCRIPTION	MEDIAN CALCULATION	RATE CALCULATION
TABLE	FIELD NUMBER	FIELD	FIELD DESCRIPTION	MEDIAN CALCULATION	RATE CALCULATION
TABLE_3	1	IPN	Internal provider number	**	
TABLE_3	2	CODE	05 Special Rehab	**	
TABLE_3	3	RED	Rate effective date	**	
TABLE_4	1	PNUM	MA provider number		
TABLE_4	2	PROVNAME	Provider name		
TABLE_4	3	OWNERTYPE	Type of ownership	**	**
TABLE_4	4	IPN	Internal provider number	**	**
TABLE_5	1	CHGEFFDATE	Effective date of the change to the summary file	**	**
TABLE_5	2	COUNTY	County code	**	**
TABLE_5	3	ELIGBEGIN	Eligibility begin date - Dormant field		
TABLE_5	4	FISCALYE	Reporting year		
TABLE_5	5	IPN	Internal provider number	**	**
TABLE_5	6	PNUM	MA provider number	**	**
TABLE_5	7	PROVNAME	Provider name		**

			column D	
TABLE_14	22	C113CE	Reported Schedule C-1, line 13c, column E	
TABLE_14	23	C113CF	Reported Schedule C-1, line 13c, column F	
TABLE_14	24	C129AC	Reported Schedule C-1, line 29a, column C	
TABLE_14	25	C129AD	Reported Schedule C-1, line 29a, column D	
TABLE_14	26	C129AE	Reported Schedule C-1, line 29a, column E	
TABLE_14	27	C129AF	Reported Schedule C-1, line 29a, column F	**
TABLE_14	28	C129BC	Reported Schedule C-1, line 29b, column C	
TABLE_14	29	C129BD	Reported Schedule C-1, line 29b, column D	
TABLE_14	30	C129BE	Reported Schedule C-1, line 29b, column E	
TABLE_14	31	C129BF	Reported Schedule C-1, line 29b, column F	**
TABLE_14	32	C129CC	Reported Schedule C-1, line 29c, column C	
TABLE_14	33	C129CD	Reported Schedule C-1, line 29c, column D	
TABLE_14	34	C129CE	Reported Schedule C-1, line 29c, column E	
TABLE_14	35	C129CF	Reported Schedule C-1, line 29c, column F	
TABLE_14	36	C130AC	Reported Schedule C-1, line 30a, column C	
TABLE_14	37	C130AD	Reported Schedule C-1, line 30a, column D	
TABLE_14	38	C130AE	Reported Schedule C-1, line 30a, column E	
TABLE_14	39	C130AF	Reported Schedule C-1, line 30a, column F	**
TABLE_14	40	C130BC	Reported Schedule C-1, line 30b, column C	
TABLE_14	41	C130BD	Reported Schedule C-1, line 30b, column D	
TABLE_14	42	C130BE	Reported Schedule C-1, line 30b, column E	
TABLE_14	43	C130BF	Reported Schedule C-1, line 30b, column F	**
TABLE_14	44	C130CC	Reported Schedule C-1, line 30c, column C	
TABLE_14	45	C130CD	Reported Schedule C-1, line 30c, column D	
TABLE_14	46	C130CE	Reported Schedule C-1, line 30c, column E	
TABLE_14	47	C130CF	Reported Schedule C-1, line 30c, column F	
TABLE_14	48	C140AC	Reported Schedule C-1, line 40a,	

column C

TABLE_14	49	C140AD	Reported Schedule C-1, line 40a, column D		
TABLE_14	50	C140AE	Reported Schedule C-1, line 40a, column E		
TABLE_14	51	C140AF	Reported Schedule C-1, line 40a, column F	**	
TABLE_14	52	C140BC	Reported Schedule C-1, line 40b, column C		
TABLE_14	53	C140BD	Reported Schedule C-1, line 40b, column D		
TABLE_14	54	C140BE	Reported Schedule C-1, line 40b, column E		
TABLE_14	55	C140BF	Reported Schedule C-1, line 40b, column F	**	
TABLE_14	56	C140CC	Reported Schedule C-1, line 40c, column C		
TABLE_14	57	C140CD	Reported Schedule C-1, line 40c, column D		
TABLE_14	58	C140CE	Reported Schedule C-1, line 40c, column E		
TABLE_14	59	C140CF	Reported Schedule C-1, line 40c, column F		
TABLE_14	60	C141AC	Reported Schedule C-1, line 41a, column C		
TABLE_14	61	C141AD	Reported Schedule C-1, line 41a, column D		
TABLE_14	62	C141AE	Reported Schedule C-1, line 41a, column E		
TABLE_14	63	C141AF	Reported Schedule C-1, line 41a, column F	**	
TABLE_14	64	C141BC	Reported Schedule C-1, line 41b, column C		
TABLE_14	65	C141BD	Reported Schedule C-1, line 41b, column D		
TABLE_14	66	C141BE	Reported Schedule C-1, line 41b, column E		
TABLE_14	67	C141BF	Reported Schedule C-1, line 41b, column F	**	
TABLE_14	68	C141CC	Reported Schedule C-1, line 41c, column C		
TABLE_14	69	C141CD	Reported Schedule C-1, line 41c, column D		
TABLE_14	70	C141CE	Reported Schedule C-1, line 41c, column E		
TABLE_14	71	C141CF	Reported Schedule C-1, line 41c, column F		
TABLE_18	1	PICTDATE	Picture Date	**	**
TABLE_18	2	ACTPROVCMI	Actual Total Facility CMI		
TABLE_18	3	ACTMACMI	Actual MA CMI		
TABLE_18	4	PAYPROVCMI	Payment Total Facility CMI	**	
TABLE_18	5	PAYMACMI	Payment MA CMI		**
TABLE_18	6	POSTMARK	RVR or Cert. report postmark date		

TABLE_30	7	ISSUED	Audit issue date	
TABLE_30	8	AUDIT_ID	Internal audit number ID	**
TABLE_30	9	MME_ADJUST	TRUE if one or more minor movable equipment audit adjustment reversals were made.	**
TABLE_31	1	CR_ID	Internal cost report ID. Used to link to table_39.dbf to obtain reported allowable costs.	**
TABLE_31	2	AUDIT_ID	Internal audit number ID	**
TABLE_31	3	IPN	Internal provider number	**
TABLE_31	4	AUDIT	Audit number	**
TABLE_31	5	BEGDATE	Report begin date	
TABLE_31	6	ENDDATE	Report period end date	**
TABLE_32	1	AUDIT	Audit number	
TABLE_32	2	PNUM	MA provider number	
TABLE_32	3	ALLCOSTSNF	Audited allowable SNF costs	
TABLE_32	4	ALLCOSTICF	Audited allowable ICF costs	
TABLE_32	5	ALLCOSTHC	Audited allowable Residential costs	
TABLE_32	6	EFFSUB1	Eff. Inc. Sub To Date 1	
TABLE_32	7	EFFSUB1SNF	SNF Eff. Inc. Sub To Date 1	
TABLE_32	8	EFFSUB1ICF	ICF Eff. Inc. Sub To Date 1	
TABLE_32	9	EFFSUB1HC	HC Eff. Inc. Sub To Date 1	
TABLE_32	10	EFFSUB2	Eff. Inc. Sub To Date 2	
TABLE_32	11	EFFSUB2SNF	SNF Eff. Inc. Sub To Date 2	
TABLE_32	12	EFFSUB2ICF	ICF Eff. Inc. Sub To Date 2	
TABLE_32	13	EFFSUB2HC	HC Eff. Inc. Sub To Date 2	
TABLE_32	14	PPSUB1	Private Pay Sub To Date 1	
TABLE_32	15	PPSUB1SNF	SNF Private Pay Sub To Date 1	
TABLE_32	16	PPSUB1ICF	ICF Private Pay Sub To Date 1	
TABLE_32	17	PPSUB1HC	HC Private Pay Sub To Date 1	
TABLE_32	18	MADAYSSNF1	MA Days SNF Sub To Date 1	
TABLE_32	19	MADAYSICF1	MA Days ICF Sub To Date 1	
TABLE_32	20	MADAYSHC1	MA Days Heavy Care Sub To Date 1	
TABLE_32	21	MEDPTBSNF1	SNF Medicare Part B Sub To Date 1	
TABLE_32	22	MEDPTBICF1	ICF Medicare Part B Sub To Date 1	
TABLE_32	23	MEDPTBHC1	HC Medicare Part B Sub To Date 1	
TABLE_32	24	PPSUB2	Private Pay Sub To Date 2	
TABLE_32	25	PPSUB2SNF	SNF Private Pay Sub To Date 2	
TABLE_32	26	PPSUB2ICF	ICF Private Pay Sub To Date 2	
TABLE_32	27	PPSUB2HC	HC Private Pay Sub To Date 2	
TABLE_32	28	MADAYSSNF2	MA Days SNF Sub To Date 2	
TABLE_32	29	MADAYSICF2	MA Days ICF Sub To Date 2	
TABLE_32	30	MADAYSHC2	MA Days Heavy Care Sub To Date 2	
TABLE_32	31	MEDPTBSNF2	SNF Medicare Part B Sub To Date 2	
TABLE_32	32	MEDPTBICF2	ICF Medicare Part B Sub To Date 2	
TABLE_32	33	MEDPTBHC2	HC Medicare Part B Sub To Date 2	
TABLE_32	34	BEDBEGSNF	Audited beginning SNF beds	

			D for report end dates of 12/31/1996 and after.		
TABLE_33	3	ADJINCR28	Audited Schedule C, line 28, column B for report end dates of 12/31/1996 and after.		
TABLE_33	4	ADJDECR28	Audited Schedule C, line 28, column C for report end dates of 12/31/1996 and after.		
TABLE_33	5	AUDTOTCO28	Audited Schedule C, line 28, column A for report end dates of 12/31/1996 and after.		
TABLE_33	6	AMTALLCN28	Audited Schedule C, line 28, column E for report end dates of 12/31/1996 and after.		
TABLE_33	7	AMTALLRE28	Audited Schedule C, line 28, column F for report end dates of 12/31/1996 and after.		
TABLE_33	8	ALLOWCST29	Audited Schedule C, line 29, column D for report end dates of 12/31/1996 and after.		
TABLE_33	9	ADJINCR29	Audited Schedule C, line 29, column B for report end dates of 12/31/1996 and after.		
TABLE_33	10	ADJDECR29	Audited Schedule C, line 29, column C for report end dates of 12/31/1996 and after.		
TABLE_33	11	AUDTOTCO29	Audited Schedule C, line 29, column A for report end dates of 12/31/1996 and after.		
TABLE_33	12	AMTALLCN29	Audited Schedule C, line 29, column E for report end dates of 12/31/1996 and after.		
TABLE_33	13	AMTALLRE29	Audited Schedule C, line 29, column F for report end dates of 12/31/1996 and after.		
TABLE_33	14	ALLOWCST36	Audited Schedule C, line 36, column A for report end dates of 12/31/1996 and after.		
TABLE_33	15	RC	Audited NF Resident Care Costs for report end dates of 12/31/1996 and after.	**	
TABLE_33	16	ORC	Audited NF Other Resident Care Costs for report end dates of 12/31/1996 and after.	**	
TABLE_33	17	ADM	Audited NF Administrative Costs for report end dates of 12/31/1996 and after.	**	
TABLE_33	18	RETAX	Audited NF Real Estate Taxes for report end dates of 12/31/1996 and after.		**
TABLE_33	19	MAJMOVPROP	Audited NF Major Movable Property for report end dates of 6/30/2001 and after.		**
TABLE_33	20	ISSUED	Audit issue date		
TABLE_33	21	AUDIT_ID	Internal audit number ID	**	
TABLE_34	1	IPN	Internal provider number		

TABLE_34	2	PNUM	MA provider number		
TABLE_34	3	PROVNAME	Provider name		
TABLE_34	4	AUDIT	Audit number	**	
TABLE_34	5	ISSUED	Audit issue date	**	
TABLE_34	6	AUDIT_ID	Internal audit number ID	**	
TABLE_35	1	AUDITNO	Audit number	**	
TABLE_35	2	LINENO	Schedule C line number	**	**
TABLE_35	3	COSTCTR	Cost center description		
TABLE_35	4	TOTEXP	Total expenses		
TABLE_35	5	ADJ1	Dormant field		
TABLE_35	6	ADJ2	Dormant field		
TABLE_35	7	SNF	Reported SNF allocation		
TABLE_35	8	ICF	Reported ICF allocation		
TABLE_35	9	RESOTHER	Reported Residential allocation		
TABLE_35	10	ALLOCBAS	Allocation basis		
TABLE_35	11	SALARIES	Reported salaries		
TABLE_35	12	FRINGEBEN	Reported fringe benefits		
TABLE_35	13	OTHER	Reported other expenses		
TABLE_35	14	ALLOWCST	Reported allowable costs	**	**
TABLE_35	15	AMTALLCSNF	Reported SNF allowable costs		
TABLE_35	16	AMTALLCICF	Reported ICF allowable costs		
TABLE_35	17	AMTALLCRES	Reported Residential allowable costs		
TABLE_35	18	SYSTIME	System time		
TABLE_35	19	SYSDATE	System date		
TABLE_35	20	CLERKID	Clerk ID		
TABLE_35	21	TRANSTYPE	Transaction type		
TABLE_36	1	AUDIT	Audit number		
TABLE_36	2	ADJID	Audit adjustment number		
TABLE_36	3	SCHEDULE	Audit schedule to be adjusted		
TABLE_36	4	LINENO	Audited Schedule C line number	**	**
TABLE_36	5	ADJUSTMENT	Audit adjustment amount	**	**
TABLE_36	6	WORKPAPER	Audit workpaper		
TABLE_36	7	AUDIT_ID	Internal audit number ID	**	**
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_38	1	IPN	Internal provider number		**
TABLE_38	2	PNUM	Provider number		
TABLE_38	3	PROVNAME	Provider name		

TABLE_38	4	RATE95	Rate year 1995 hold harmless rate		
TABLE_38	5	RATE96	Rate year 1996 hold harmless rate		
TABLE_38	6	RATE97	Rate year 1997 hold harmless rate		
TABLE_38	7	RATE98	Rate year 1998 hold harmless rate		
TABLE_38	8	RATE99	Rate year 1999 hold harmless rate		
TABLE_38	9	RATE2000	Rate year 2000 hold harmless rate		
TABLE_38	10	RATE2001	Rate year 2001 hold harmless rate		
TABLE_38	11	RATE2002	Rate year 2002 hold harmless rate		
TABLE_38	12	SNFRATE	Pre case mix SNF rate		**
TABLE_38	13	ICFRATE	Pre case mix ICF rate		**
TABLE_38	14	ICFMADAYS	ICF MA days		**
TABLE_38	15	SNFMADAYS	SNF MA days		**
TABLE_38	16	HHNOINFLAT	Blended pre case mix rate		**
TABLE_38	17	HHRATE	Rate year 2003 hold harmless rate		**
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_40a TABLE_40b	1	AUDIT	Audit number	**	
TABLE_40a TABLE_40b	2	ADJID	Audit adjustment number	**	
TABLE_40a TABLE_40b	3	SCHEDULE	Cost report schedule		
TABLE_40a TABLE_40b	4	LINENO	Cost report line number, Schedule C	**	
TABLE_40a TABLE_40b	5	ADJUSTMENT	Audit adjustment amount	**	
TABLE_40a TABLE_40b	6	WORKPAPER	Audit adjustment workpaper		
TABLE_40a TABLE_40b	7	AUDIT_ID	Internal audit number ID	**	
TABLE_40a TABLE_40b	8	MME_ADJUST	Minor Movable Equipment audit adjustment reversal/addition indicator	**	
TABLE_40a TABLE_40b	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	**	