

State of Washington
 Review of Nursing Facility Medicaid Payment Rates and Costs
Summary

	<u>Payment-to-Cost Ratios</u>	
	<u>SFY 2016</u>	<u>SFY 2017</u>
<i>STANDARD NURSING FACILITIES</i>		
TOTAL - Median	94.2%	92.6%
TOTAL - Weighted Average	92.4%	91.0%
<i>HOSPITAL-BASED NURSING FACILITIES</i>		
TOTAL - Median	60.7%	59.7%
TOTAL - Weighted Average	69.5%	68.0%
<i>VETERANS & TRIBAL NURSING FACILITIES</i>		
TOTAL - Median	56.0%	55.2%
TOTAL - Weighted Average	50.2%	49.4%
<i>ALL NURSING FACILITIES</i>		
TOTAL - Median	93.8%	92.2%
TOTAL - Weighted Average	90.1%	88.6%

State of Washington
Review of Nursing Facility Medicaid Payment Rates and Costs
Summary - Grouped by Type of Facility and
Payment-to-Cost Quartile

Payment-to-Cost Ratios				Nursing Facility Characteristics																
Number of Nursing Facilities		Weighted Average		Number of Nursing Facilities				Number of Days and Beds						Estimated Payments and Costs FYE 2016				Median Case Mix Indices		
				For Profit / Non Profit	MSA / Non MSA	Total Nursing Facility			Medicaid			Total Rate for SFY 2016	Total Cost Per Day Adj. for Facility CMI=1.0	Estimated Payments	Avg CY 2013 Total Facility CMI	April 2014 - Sep 2014 Medicaid CMI				
Median	Average	For Profit	Non Profit	MSA	Non MSA	Adjusted Days	Adjusted Beds	Adjusted Available Bed Days	Occupancy (Median)	Occupancy (Wtd Avg)	Adjusted Days	Percentage (Median)	Percentage (Wtd Avg)	(Median)	(Median)	(Median)	(Median)			
STANDARD NURSING FACILITIES																				
Quartile 1 (Lowest Cost)	49	106.5%	108.1%	48	1	41	8	1,481,970	4,916	1,794,340	85.2%	82.6%	898,846	59.6%	60.7%	215.15	139.26	195,149,008	2.7170	2.5040
Quartile 2	49	96.9%	97.4%	44	5	41	8	1,449,808	5,085	1,856,025	81.4%	78.1%	874,351	60.7%	60.3%	207.47	149.29	189,061,680	2.5930	2.4114
Quartile 3	49	89.1%	89.2%	41	8	43	6	1,449,021	5,171	1,887,415	79.2%	76.8%	898,091	61.9%	62.0%	203.20	157.53	178,461,442	2.5870	2.3674
Quartile 4 (Highest Cost)	48	75.4%	74.9%	21	27	41	7	1,290,055	4,584	1,673,160	79.0%	77.1%	685,685	52.6%	53.2%	195.69	185.78	133,253,082	2.6470	2.3897
TOTAL	195	94.2%	92.4%	154	41	166	29	5,670,854	19,756	7,210,940	81.8%	78.6%	3,356,973	59.6%	59.2%	206.01	152.11	690,985,076	2.6330	2.4114
HOSPITAL-BASED NURSING FACILITIES																				
TOTAL	9	60.7%	69.5%	3	6	3	6	100,686	326	118,990	81.2%	84.6%	69,786	78.6%	69.3%	185.06	213.84	16,545,425	2.2420	2.2734
VETERANS & TRIBAL NURSING FACILITIES																				
TOTAL	4	56.0%	50.2%	1	3	3	1	161,480	445	162,425	96.0%	99.4%	105,594	66.2%	65.4%	158.79	209.11	16,137,894	1.9125	1.9275
ALL NURSING FACILITIES																				
TOTAL	208	93.8%	90.1%	158	50	172	36	5,933,020	20,527	7,492,355	81.9%	79.2%	3,532,353	60.1%	59.5%	205.71	153.58	723,668,395	2.6175	2.4002

Note: All Costs, Days, and Beds are based on 2013 Adjusted Amounts. Case Mix Indices used were 2013 Average Facility CMIs and Semi-Annual 2013 Average Medicaid CMIs. Estimated payments based on estimated FYE 2016 rate x 2013 adjusted Medicaid days.

State of Washington
Review of Nursing Facility Medicaid Payment Rates and Costs
Summary - Grouped by Type of Facility and
Payment-to-Cost Quartile

Table with columns: Location, Vendor, Nursing Facility Name, Ownership Type, County, Peer Group, and various financial metrics (Total Rate SFY 2016, Total Cost Per Day, Rate in Excess of Cost, etc.). Rows are grouped under 'STANDARD NURSING FACILITIES (Quartile 1)' and 'STANDARD NURSING FACILITIES (Quartile 2)'.

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Review of Nursing Facility Medicaid Payment Rates and Costs
Summary - Grouped by Type of Facility and
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Location	Vendor	Nursing Facility Name	Ownership Type	County	Peer Group	Estimated FYE 2016 Rates and Costs Per Day					Estimated FYE 2016 Total Payments and Costs				Occupancy					%		Case Mix Indices	
						Total Rate SFY 2016	Total Cost Per Day Adj. for Facility CMI=1.0	Total Cost Per Day Adj. for Medicaid CMI	Rate in Excess of Cost	Payment-to-Cost Ratio	2013 Adjusted Medicaid Days	Estimated Payments	Estimated Costs	Payments In Excess of Cost	Payment-to-Cost Ratio	2013 Adjusted Total Days	2013 Adjusted Total Beds	Days in Cost Report Time Period	2013 Adjusted Available Days	Occupancy	Medicaid Percentage	Avg CY 2013 Total Facility CMI	April 2014 - Sep 2014 Medicaid CMI
			D	E	F	G	H	I	J=G-I	K=G/I	L	M=G*L	N=*L	O=M-N	P=M/N	Q	R	S	T=R*S	U=Q/T	V=L/Q	W	X
HOSPITAL-BASED NURSING FACILITIES																							
31500	4210704	NORTH VALLEY HOSPITAL	Profit	OKANOGAN	Non_MSA	174.69	132.44	195.34	(20.65)	89.4%	15,530	2,712,936	3,033,630	(320,694)	89.4%	19,638	58	365	21,170	92.8%	79.1%	2.3340	2.1294
40260	4111068	BAILEY-BOUSHAY HOUSE	Non Profit	KING	MSA	552.40	409.50	685.68	(133.28)	80.6%	11,950	6,601,180	8,193,876	(1,592,696)	80.6%	12,071	35	365	12,775	94.5%	99.0%	2.3450	2.3106
25900	4202115	NEWPORT COMMUNITY HOSPITAL - LTC UNIT	Non Profit	PEND OREILLE	Non_MSA	158.51	174.81	249.81	(91.30)	63.5%	9,896	1,568,615	2,472,120	(903,505)	63.5%	14,187	50	365	18,250	77.7%	69.8%	2.1840	2.0942
30800	4204509	COLUMBIA BASIN HOSPITAL	Non Profit	GRANT	Non_MSA	209.45	213.84	331.25	(121.80)	63.2%	6,136	1,285,185	2,032,550	(747,365)	63.2%	8,231	29	365	10,585	77.8%	74.5%	2.2420	2.5627
40010	4210001	BOOKER REST HOME ANNEX	Non Profit	COLUMBIA	Non_MSA	141.11	181.14	232.50	(91.39)	60.7%	7,926	1,118,438	1,842,795	(724,357)	60.7%	10,082	34	365	12,410	81.2%	78.6%	1.8140	1.7860
39990	4219408	PROVIDENCE ST JOSEPH HOSPITAL	Non Profit	STEVENS	Non_MSA	166.22	191.34	293.67	(127.45)	56.6%	11,006	1,829,417	3,232,132	(1,402,715)	56.6%	13,778	40	365	14,600	94.4%	79.9%	1.9830	2.1461
41000	4114476	KINDRED SEATTLE - FIRST HILL	Profit	KING	MSA	237.44	274.87	481.05	(243.61)	49.4%	935	222,006	449,782	(227,776)	49.4%	7,159	30	365	10,950	65.4%	13.1%	3.4170	2.9366
40980	4114450	KINDRED SEATTLE - NORTHGATE	Profit	KING	MSA	222.55	255.88	466.13	(243.58)	47.7%	586	130,414	273,152	(142,738)	47.7%	8,394	30	365	10,950	76.7%	7.0%	3.4210	2.9449
31590	4205407	FORKS COMMUNITY HOSPITAL LTC UNIT	Non Profit	CLALLAM	Non_MSA	185.06	244.43	393.88	(208.82)	47.0%	5,821	1,077,234	2,292,775	(1,215,541)	47.0%	7,146	20	365	7,300	97.9%	81.5%	2.1960	2.2734
SUMMARY - HOSPITAL-BASED NURSING FACILITIES			Profit Count		MSA Count																		
9 COUNT OF FACILITIES			3		3						69,786	16,545,425	23,822,812	(7,277,387)		100,686	326		118,990				
			Non Profit Count		NON MSA Count	185.06	213.84	331.25	(127.45)	60.7%	7,926	1,285,185	2,292,775	(747,365.00)	60.7%	10,082.00	34	365	12,410	81.2%	78.6%	2.2420	2.2734
			6		6									69.5%						84.6%	69.3%		
			9		9																		
ALL NURSING FACILITIES - SUMMARY			Profit Count		MSA Count																		
208 COUNT OF FACILITIES			158		172						3,532,353	723,668,395	803,515,769	(79,847,374)		5,933,020	20,527		7,492,355				
			Non Profit Count		NON MSA Count	205.71	153.58	222.30	(13.93)	93.8%	16,744	3,464,049	3,700,051	(186,071.00)	93.8%	28,377.00	99	365	35,953	81.9%	60.1%	2.6175	2.4002
			50		36									90.1%						79.2%	59.5%		
			208		208																		

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Payment-to-Cost Ratios				Nursing Facility Characteristics																
Number of Nursing Facilities	Median	Weighted Average	Number of Nursing Facilities				Number of Days and Beds						Estimated Payments and Costs FYE 2017				Median Case Mix Indices			
			For Profit / Non Profit		MSA / Non MSA		Total Nursing Facility			Medicaid			Total Rate for SFY 2017 (Median)	Total Cost Per Day Adj. for Facility CMI=1.0 (Median)	Estimated Payments	Avg CY 2013 Total Facility CMI	April 2014 - Sep 2014 Medicaid CMI			
			For Profit	Non Profit	MSA	Non MSA	Adjusted Beds	Adjusted Available Bed Days	Occupancy (Median)	Occupancy (Wtd Avg)	Adjusted Days	Percentage (Median)						Percentage (Wtd Avg)		
STANDARD NURSING FACILITIES																				
Quartile 1 (Lowest Cost)	49	104.8%	106.4%	48	1	41	8	1,481,970	4,878	1,780,470	85.5%	83.2%	898,846	59.6%	60.7%	217.40	143.22	197,466,133	2.7170	2.5040
Quartile 2	49	95.3%	95.8%	44	5	41	8	1,449,808	5,028	1,835,220	82.5%	79.0%	874,351	60.7%	60.3%	209.93	153.54	186,277,504	2.5930	2.4114
Quartile 3	49	87.7%	87.8%	41	8	43	6	1,449,021	5,016	1,830,840	82.4%	79.1%	898,091	61.9%	62.0%	205.61	162.01	180,552,506	2.5870	2.3674
Quartile 4 (Highest Cost)	48	74.1%	73.7%	21	27	41	7	1,290,055	4,526	1,651,990	79.4%	78.1%	685,685	52.6%	53.2%	198.03	191.06	134,903,431	2.6470	2.3897
TOTAL	195	92.6%	91.0%	154	41	166	29	5,670,854	19,448	7,098,520	82.5%	79.9%	3,356,973	59.6%	59.2%	208.27	156.43	699,199,574	2.6330	2.4114
HOSPITAL-BASED NURSING FACILITIES																				
TOTAL	9	59.7%	68.0%	3	6	3	6	100,686	326	118,990	81.2%	84.6%	69,786	78.6%	69.3%	187.27	219.92	16,667,068	2.2420	2.2734
VETERANS & TRIBAL NURSING FACILITIES																				
TOTAL	4	55.2%	49.4%	1	3	3	1	161,480	441	160,965	96.0%	100.3%	105,594	66.2%	65.4%	160.68	215.06	16,326,322	1.9125	1.9275
ALL NURSING FACILITIES																				
TOTAL	208	92.2%	88.6%	158	50	172	36	5,933,020	20,215	7,378,475	82.6%	80.4%	3,532,353	60.1%	59.5%	208.12	157.94	732,192,964	2.6175	2.4002

Note: All Costs, Days, and Beds are based on 2013 Adjusted Amounts. Case Mix Indices used were 2013 Average Facility CMIs and Semi-Annual 2014 Average Medicaid CMIs. Estimated payments based on estimated FYE 2017 rate x 2013 adjusted Medicaid days.

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Table with 25 columns: Location, Vendor, FACILITY NAME, Ownership Type, County, Peer, Total Rate SFY 2017, Total Cost Per Day Adj. for Facility CMI=1.0, Total Cost Per Day Adj. for Medicaid CMI, Rate in Excess of Cost, Payment-to-Cost Ratio, 2013 Adjusted Medicaid Days, Estimated Payments, Estimated Costs, Payments In Excess of Cost, Payment-to-Cost Ratio, 2013 Adjusted Total Days, 2013 Adjusted Total Beds, Days in Cost Report Time, 2013 Adjusted Available Days, Occupancy, Medicaid Percentage, Avg CY 2013 Total Facility CMI, April 2014 - Sep 2014 Medicaid CMI.

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Location	Vendor	FACILITY NAME	Ownership Type	County	Peer	Estimated FYE 2017 Rates and Costs Per Day					2013 Adjusted Medicaid Days	Estimated FYE 2017 Total Payments and Costs				Occupancy				Medicaid Percentage	Case Mix Indices																						
						Total Rate SFY 2017	Total Cost Per Day Adj. for Facility CMI=1.0	Total Cost Per Day Adj. for Medicaid CMI	Rate in Excess of Cost	Payment-to-Cost Ratio		Estimated Payments	Estimated Costs	Payments In Excess of Cost	Payment-to-Cost Ratio	2013 Adjusted Total Days	2013 Adjusted Total Beds	Days in Cost Report Time Period	2013 Adjusted Available Days		Occupancy	Avg CY 2013 Total Facility CMI	April 2014 - Sep 2014 Medicaid CMI																				
A	B	C	D	E	F	G	H	I	J=G-I	K=G/I	L	M=G*L	N=I*L	O=M-N	P=M/N	Q	R	S	T=R*S	U=Q/T	V=L/Q	W	X																				
SUMMARY - VETERANS & TRIBAL NURSING FACILITIES																																											
4 COUNT OF FACILITIES			Profit Count																																								
			1																																								
			Non Profit Count			NON MSA Count		160.68		215.06		294.50		(132.09)		55.2%		19,582		3,147,863		5,467,816		(2,319,952.50)		55.2%		34,491.00		99		365		35,953		96.0%		66.2%		1.9125		1.9275	
			3																																								
			4																																								
HOSPITAL-BASED NURSING FACILITIES																																											
31500	4210704	NORTH VALLEY HOSPITAL	Profit	OKANOGAN	Non_MSA	176.74	136.21	200.89	(24.15)	88.0%	15,530	2,744,772	3,119,822	(375,050)	88.0%	19,638	58	365	21,170	92.8%	79.1%	2.3340	2.1294																				
40260	4111068	BAILEY-BOUSHAY HOUSE	Non Profit	KING	MSA	552.40	421.14	705.17	(152.77)	78.3%	11,950	6,601,180	8,426,782	(1,825,602)	78.3%	12,071	35	365	12,775	94.5%	99.0%	2.3450	2.3106																				
25900	4202115	NEWPORT COMMUNITY HOSPITAL - LTC UNIT	Non Profit	PEND OREILLE	Non_MSA	160.51	179.78	256.91	(96.40)	62.5%	9,896	1,588,407	2,542,381	(953,974)	62.5%	14,187	50	365	18,250	77.7%	69.8%	2.1840	2.0942																				
30800	4204509	COLUMBIA BASIN HOSPITAL	Non Profit	GRANT	Non_MSA	211.99	219.92	340.66	(128.67)	62.2%	6,136	1,300,771	2,090,290	(789,519)	62.2%	8,231	29	365	10,585	77.8%	74.5%	2.2420	2.5627																				
40010	4210001	BOOKER REST HOME ANNEX	Non Profit	COLUMBIA	Non_MSA	142.84	186.29	239.10	(96.26)	59.7%	7,926	1,132,150	1,895,107	(762,957)	59.7%	10,082	34	365	12,410	81.2%	78.6%	1.8140	1.7860																				
39990	4219408	PROVIDENCE ST JOSEPH HOSPITAL	Non Profit	STEVENS	Non_MSA	168.33	196.79	302.02	(133.69)	55.7%	11,006	1,852,640	3,324,032	(1,471,392)	55.7%	13,778	40	365	14,600	94.4%	79.9%	1.9830	2.1461																				
41000	4114476	KINDRED SEATTLE - FIRST HILL	Profit	KING	MSA	240.51	282.67	494.71	(254.20)	48.6%	935	224,877	462,554	(237,677)	48.6%	7,159	30	365	10,950	65.4%	13.1%	3.4170	2.9366																				
40980	4114450	KINDRED SEATTLE - NORTHGATE	Profit	KING	MSA	225.55	263.15	479.38	(253.83)	47.1%	586	132,172	280,917	(148,745)	47.1%	8,394	30	365	10,950	76.7%	7.0%	3.4210	2.9449																				
31590	4205407	FORKS COMMUNITY HOSPITAL LTC UNIT	Non Profit	CLALLAM	Non_MSA	187.27	251.37	405.06	(217.79)	46.2%	5,821	1,090,099	2,357,854	(1,267,755)	46.2%	7,146	20	365	7,300	97.9%	81.5%	2.1960	2.2734																				
SUMMARY - HOSPITAL-BASED NURSING FACILITIES																																											
9 COUNT OF FACILITIES			Profit Count																																								
			3																																								
			Non Profit Count			NON MSA Count		187.27		219.92		340.66		(133.69)		59.7%		7,926		1,300,771		2,357,854		(789,519.00)		59.7%		10,082.00		34		365		12,410		81.2%		78.6%		2.2420		2.2734	
			6																																								
			9																																								
SUMMARY - ALL FACILITIES																																											
			Profit Count																																								
			158																																								
			Non Profit Count			NON MSA Count		208.12		157.94		228.61		(17.79)		92.2%		16,744		3,503,637		3,805,116		(246,340.00)		92.2%		28,377.00		96		365		35,040		82.6%		60.1%		2.6175		2.4002	
			50																																								
			208																																								
			117	0.56																																							
			77	0.37																																							
			47	0.22																																							
			Facilities Receiving 90 Percent or More																																								
			Facilities Receiving 95 Percent or More																																								
			Facilities Receiving 100 Percent or More																																								