

Explanation of FSSA Cost Build Up for the 2019-20 Rate Period

The 2019-20 rates are based on the audited costs for freestanding adult subacute facilities for fiscal periods ending 2017. The 2019-20 rates were calculated and adjusted for new state and federal mandates.

Facility Specific Identifying Information for the “2019-20 FSSA Cost Build Up.xls” includes:

I. Facilities (columns A through D): The Office of Statewide Health Planning and Development (OSHPD) ID, the National Provider Identifier (NPI) that corresponds to OSHPD ID, provider name, and fiscal period end date from the 2017 OSHPD Report.

II. Total Audit Days (Column E)

Each facility’s audited total Freestanding Subacute (adult) days is based on each facility’s fiscal period ending 2017 OSHPD Report.

III. Cost Categories

- a. **Column F** is the Direct Care Labor Per Diem. It is the amount shown on Audit Schedule 1, line 41, which includes labor costs (both permanent and temporary staff) for Skilled Nursing Personnel, Social Services Personnel, and Activities Personnel, inflated by the labor study inflation factor, and divided by the total audit days in column E.
- b. **Column G** is the Direct Care Labor Per Diem Cap (set at the 90th percentile). Each facility’s per diem amount is compared to the Direct Care Labor Per Diem Cap.
- c. **Column H** is the Lower of Direct Care Per Diem. This represents the amount in column F unless the facility has reached the Direct Care Labor Per Diem Cap. The lesser of the facility’s cost per diem or the Direct Care Labor Per Diem Cap is shown here and used in the final rate calculation.
- d. **Column I** is the Indirect Care Labor Per Diem. It is the amount shown on Audit Schedule 1, line 42 which includes labor costs for:
 - a. Plant Operations and Maintenance Personnel,
 - b. Housekeeping Personnel,
 - c. Laundry/Linen Personnel,
 - d. Dietary Personnel,
 - e. In-Service Education Personnel,

Indirect Care Labor is inflated by the labor study inflation factor, and divided by the total audit days in column E.

- e. **Column J** is the Indirect Care Labor Per Diem Cap (set at the 90th percentile). Each facility's per diem amount is compared to the peer group Indirect Care Labor Per Diem Cap.
- f. **Column K** is the Lower of Indirect Care Per Diem. This represents the amount in column I unless the facility has reached the Indirect Care Labor Per Diem Cap. The lesser of the facility's cost per diem or the Indirect Care Labor Per Diem Cap is shown here and used in the final rate calculation.
- g. **Column L** is the Non- Labor Per Diem. It is the amount shown on Audit Schedule 1, line 43 which includes non-labor costs for:
- Skilled Nursing
 - Social Services
 - Activities
 - Plant Operations and Maintenance
 - Housekeeping
 - Laundry/Linen
 - Dietary
 - In-Service Education

Non-labor is inflated by the California Consumer Price Index (CCPI) inflation factor, and divided by the total audit days in column E.

- h. **Column M** is the Non- Labor Per Diem Cap (set at the 75th percentile). Each facility's per diem amount is compared to the peer group Non- Labor Per Diem Cap.
- i. **Column N** is the Lower of Non-labor Per Diem. This represents the amount in column L unless the facility has reached the Non- Labor Per Diem Cap. The lesser of the facility's cost per diem or the Non- Labor Per Diem Cap is shown here and used in the final rate calculation.
- j. **Column O** is the Administration Per Diem. It is the amount shown on Audit Schedule 1, line 50 which includes total costs for Administration, Property Insurance, and Interest – Other. Non-labor is inflated by the CCPI inflation factor, and divided by the total audit days in column E.
- k. **Column P** is the Administration Cap (set at the 50th percentile). Each facility's per diem amount is compared to the Administration Per Diem Cap.
- l. **Column Q** is the Lower of Administration Per Diem. This represents the amount in column O unless the facility has reached the Administration Per Diem Cap. The lesser of the facility's cost per diem or the Administration Per Diem Cap is shown here and used in the final rate calculation.

- m. **Column R** is the Professional Liability Insurance (PLI) Per Diem. It is the amount shown on Audit Schedule 1, line 47. PLI is inflated by the CCPI inflation factor, and divided by the total audit days in column E.
- n. **Column S** is the PLI Cap (set at the 75th percentile). Each facility's per diem amount is compared to the PLI Per Diem Cap.
- o. **Column T** is the Lower of PLI Per Diem. This represents the amount in column R unless the facility has reached the PLI Per Diem Cap. The lesser of the facility's cost per diem or the PLI Per Diem Cap is shown here and used in the final rate calculation.
- p. **Column U** is the Fair Rental Value System (FRVS) per diem and is calculated based on parameters outlined in the State Plan Amendment. For the 2019-20 rate period, facilities submitting voluntary supplemental capital schedules that were accepted by the Department were considered in the final FRVS per diem calculation.

IV Pass-Through

- a. **Column V** is Property Tax Per Diem shown on Audit Schedule 1, line 45, inflated by a two percent per annum (0.16667% per month) inflation factor and divided by the total audit days in column E.
- b. **Column W** is License Fees Per Diem are calculated using the facility's contracted number of subacute beds shown on Audit Subacute Schedule 1, line 45, multiplied by the Department of Public Health fee per bed (\$1089.00 for LA County and \$777.00 Statewide effective 8/1/2019), and divided by the total audit days in column E.
- c. **Column X** is the Caregiver Training Per Diem shown on Audit Schedule 1, line 49, which includes costs for education that is organized to train students to enter a caregiver occupational specialty, and divided by the total audit days in column E.
- d. **Column Y** is the Quality Assurance Fee Per Diem. Each facility that is assessed the QA Fee in 2019-20 will be reimbursed for the Medi-Cal portion of this fee
- e. **Column Z** is the total for all add-ons (\$2.95) for 2019-20 mandated costs. The add-ons are the sum of:
 1. Minimum Wage (January 2020 SB 3) \$0.50
 2. Minimum Wage (January 2019 SB 3) \$0.55
 3. Minimum Wage (January 2018 SB 3) \$0.57
 4. Standards of Participation \$1.31
 5. LGBT \$0.02

V. Pre-Ratcheted Rates

- a. **Column AA** is the Ventilator Equipment Per Diem.
- b. **Column AB** is the Pre-Ratcheted Non-Ventilator Dependent Rate. For New Owners it is the Non-Ventilator Statewide weighted average. For Change of Ownership (CHOW) it is the prior owner's rate adjusted by add-ons and CCPI.
- c. **Column AC** is the Pre-Ratcheted Ventilator Dependent Rate. For New Owners it is the Ventilator Dependent Statewide weighted average including the weighted average facility. For CHOWs it is the prior owner's rate adjusted by add-ons and CCPI.

VI. 2019-20 Final Ratcheted Rates and Payments

- a. **Column AY** is the Final 2019-20 Non-Vent Rate after ratcheting (1.0218411) to increase program growth to 3.62% percent.
- b. **Column AZ** is the Final 2019-20 Vent Rate after ratcheting (1.0197783) to increase program growth to 3.62% percent.