

ANALYSIS OF SNF - BASED HOSPICE GENERAL INPATIENT CARE

PROVIDER CCN: _____
 HOSPICE CCN: _____

PERIOD:
 FROM: _____
 TO: _____

WORKSHEET K-4

	SALARIES	OTHER	SUBTOTAL	RECLASS- IFICATIONS	SUBTOTAL	ADJUST- MENTS	TOTAL	
	1	2	3	4	5	6	7	
DIRECT PATIENT CARE SERVICES COST CENTERS								
25	INPATIENT CARE - CONTRACTED							25
26	PHYSICIAN SERVICES							26
27	NURSE PRACTITIONER							27
28	REGISTERED NURSE							28
29	LICENSED PRACTICAL NURSE							29
30	PHYSICAL THERAPY							30
31	OCCUPATIONAL THERAPY							31
32	SPEECH-LANGUAGE PATHOLOGY							32
33	MEDICAL SOCIAL SERVICES							33
34	SPIRITUAL COUNSELING							34
35	DIETARY COUNSELING							35
36	COUNSELING - OTHER							36
37	HOSPICE AIDE & HOME MAKER SERVICES							37
38	DURABLE MEDICAL EQUIPMENT/OXYGEN							38
39	PATIENT TRANSPORTATION							39
40	IMAGING SERVICES							40
41	LABS & DIAGNOSTICS							41
42	MEDICAL SUPPLIES-NON-ROUTINE							42
43	DRUGS CHARGED TO PATIENTS							43
44	OUTPATIENT SERVICES							44
45	PALLIATIVE RADIATION THERAPY							45
46	PALLIATIVE CHEMOTHERAPY							46
47	OTHER DIRECT PATIENT CARE SERVICE COST CENTER							47
100	TOTAL							100