

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	3	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	3
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	3	Ventilator Dependent	3
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	6
		Endocrine/Metabolic	22
		Blood Disorders	7
		Nervous System Non Alzheimer	24
		Alzheimer Disease	15
		Mental Illness	7
		Developmental Disability	1
		Circulatory System	48
		Respiratory System	24
		Digestive System	15
		Genitourinary System Disorders	16
		Skin Disorders	5
		Musculo-skeletal Disorders	45
		Injuries and Poisonings	1
		Other Medical Conditions	19
		Non-Medical Conditions	0
		TOTALS	255
		Total Residents Diagnosed as Mentally Ill	7

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	279	279	260	260	255	24	199	279	233	
Skilled Under 22	0	0	0	0	0	0		0	Total Admissions 2010	594
Intermediate DD	0	0	0	0	0	0		0	Total Discharges 2010	572
Sheltered Care	0	0	0	0	0	0			Residents on 12/31/2010	255
TOTAL BEDS	279	279	260	260	255	24	199	279	Identified Offenders	0

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	10,867	15.0%	49,846	48.9%	6,693	1,403	19,457	0	88,266	86.7%	86.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,867	15.0%	49,846	48.9%	6,693	1,403	19,457	0	88,266	86.7%	86.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	1	0	0	0	0	0	0	1	1	2
45 to 59	0	4	0	0	0	0	0	0	0	4	4
60 to 64	2	5	0	0	0	0	0	0	2	5	7
65 to 74	11	26	0	0	0	0	0	0	11	26	37
75 to 84	20	58	0	0	0	0	0	0	20	58	78
85+	23	104	0	0	0	0	0	0	23	104	127
TOTALS	57	198	0	0	0	0	0	0	57	198	255

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	30	150	19	11	45	0	255
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	30	150	19	11	45	0	255

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	207	179
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	1	0	0	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	253	0	0	0	253
Race Unknown	0	0	0	0	0
Total	255	0	0	0	255

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	2	0	0	0	2
Non-Hispanic	253	0	0	0	253
Ethnicity Unknown	0	0	0	0	0
Total	255	0	0	0	255

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.00
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	36.00
LPN's	27.00
Certified Aides	122.00
Other Health Staff	6.00
Non-Health Staff	92.00
Totals	289.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
30.2%	48.4%	0.0%	5.6%	15.8%	100.0%		0.0%
4,898,734	7,862,388	0	912,602	2,572,602	16,246,326	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	2
FREE STANDING FACILITIES	4	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	3	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	2
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	2
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	5
		Endocrine/Metabolic	25
		Blood Disorders	2
		Nervous System Non Alzheimer	10
		Alzheimer Disease	32
		Mental Illness	4
		Developmental Disability	16
		Circulatory System	40
		Respiratory System	8
		Digestive System	0
		Genitourinary System Disorders	2
		Skin Disorders	1
		Musculo-skeletal Disorders	11
		Injuries and Poisonings	11
		Other Medical Conditions	14
		Non-Medical Conditions	0
		TOTALS	181
		Total Residents Diagnosed as Mentally Ill	72

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	242	242	201	242	165	77	144	242	Total Admissions 2010	168
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	201
Intermediate DD	16	16	16	16	16	0		16	Residents on 12/31/2010	181
Sheltered Care	0	0	0	0	0	0			Identified Offenders	2
TOTAL BEDS	258	258	217	258	181	77	144	258		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	3,400	6.5%	36,727	41.6%	0	276	25,225	0	65,628	74.3%	74.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,400	6.5%	42,567	45.2%	0	276	25,225	0	71,468	75.9%	75.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	2	4	0	0	2	4	6
45 to 59	4	1	0	0	2	4	0	0	6	5	11
60 to 64	0	0	0	0	0	0	0	0	0	0	0
65 to 74	6	8	0	0	2	2	0	0	8	10	18
75 to 84	14	21	0	0	0	0	0	0	14	21	35
85+	28	83	0	0	0	0	0	0	28	83	111
TOTALS	52	113	0	0	6	10	0	0	58	123	181

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	7	99	0	0	59	0	165
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	7	115	0	0	59	0	181

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	177	170
Skilled Under 22	0	0
Intermediate DD	0	126
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	4	0	1	0	5
Hawaiian/Pac. Isl.	0	0	0	0	0
White	161	0	15	0	176
Race Unknown	0	0	0	0	0
Total	165	0	16	0	181

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	164	0	16	0	180
Ethnicity Unknown	0	0	0	0	0
Total	165	0	16	0	181

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.25
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	14.10
LPN's	15.39
Certified Aides	76.34
Other Health Staff	6.17
Non-Health Staff	73.42
Totals	191.67

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
14.1%	51.3%	0.0%	1.9%	32.8%	100.0%		0.0%
1,340,059	4,884,874	0	178,233	3,119,500	9,522,667	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	8	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	8	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	6	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	3
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	2
NON-PROFIT OWNERSHIP	2	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	5	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	8
	1	Infectious Disease w/ Isolation	1
		Other Restrictions	2
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	8
		Endocrine/Metabolic	61
		Blood Disorders	6
		Nervous System Non Alzheimer	51
		Alzheimer Disease	125
		Mental Illness	41
		Developmental Disability	17
		Circulatory System	111
		Respiratory System	50
		Digestive System	19
		Genitourinary System Disorders	17
		Skin Disorders	13
		Musculo-skeletal Disorders	62
		Injuries and Poisonings	11
		Other Medical Conditions	36
		Non-Medical Conditions	30
		TOTALS	658
Total Residents Diagnosed as Mentally Ill			166

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	742	734	683	734	620	122	450	657	684	
Skilled Under 22	0	0	0	0	0	0		0	1,126	
Intermediate DD	16	16	15	15	13	3		16	1,152	
Sheltered Care	49	49	49	49	25	24			658	
TOTAL BEDS	807	799	747	798	658	149	450	673	Identified Offenders	1

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.	
Nursing Care	30,300	18.4%	111,285	46.4%	1,101	1,595	86,254	0	230,535	85.1%	86.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,386	92.2%	0	0	0	0	5,386	92.2%	92.2%
Sheltered Care					0	0	9,872	0	9,872	55.2%	55.2%
TOTALS	30,300	18.4%	116,671	47.5%	1,101	1,595	96,126	0	245,793	83.4%	84.3%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	3	2	0	0	0	0	0	0	3	2	5
45 to 59	8	13	0	0	4	5	0	0	12	18	30
60 to 64	8	9	0	0	0	1	0	0	8	10	18
65 to 74	25	37	0	0	2	1	0	0	27	38	65
75 to 84	70	126	0	0	0	0	1	4	71	130	201
85+	65	254	0	0	0	0	3	17	68	271	339
TOTALS	179	441	0	0	6	7	4	21	189	469	658

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	85	294	0	8	233	0	620
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		13	0	0	0	0	13
Sheltered Care			0	0	25	0	25
TOTALS	85	307	0	8	258	0	658

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	176	154
Skilled Under 22	0	0
Intermediate DD	144	0
Shelter	112	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	8	0	0	0	8
Hawaiian/Pac. Isl.	0	0	0	0	0
White	605	0	13	25	643
Race Unknown	7	0	0	0	7
Total	620	0	13	25	658

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	7	0	0	0	7
Non-Hispanic	606	0	13	25	644
Ethnicity Unknown	7	0	0	0	7
Total	620	0	13	25	658

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	8.00
Physicians	0.00
Director of Nursing	7.00
Registered Nurses	95.50
LPN's	40.50
Certified Aides	290.20
Other Health Staff	18.00
Non-Health Staff	312.00
Totals	771.20

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
31.1%	28.4%	0.3%	1.6%	38.6%	100.0%		0.0%
14,194,273	12,947,820	130,829	740,822	17,605,476	45,619,221	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	4	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	4
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
			DIAGNOSIS
			Neoplasms
			Endocrine/Metabolic
			Blood Disorders
			Nervous System Non Alzheimer
			Alzheimer Disease
			Mental Illness
			Developmental Disability
			Circulatory System
			Respiratory System
			Digestive System
			Genitourinary System Disorders
			Skin Disorders
			Musculo-skeletal Disorders
			Injuries and Poisonings
			Other Medical Conditions
			Non-Medical Conditions
			TOTALS
			131
			8

Total Residents Diagnosed as Mentally Ill

8

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	155	155	128	155	116	39	57	155	Total Admissions 2010	96
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	97
Intermediate DD	15	15	15	15	15	0		15	Residents on 12/31/2010	131
Sheltered Care	0	0	0	0	0	0			Identified Offenders	1
TOTAL BEDS	170	170	143	170	131	39	57	170		

FACILITY UTILIZATION - 2010

BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE

LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		TOTAL	Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	368	1.8%	21,934	38.8%	0	0	19,571	0	41,873	74.0%	74.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,445	99.5%	0	0	0	0	5,445	99.5%	99.5%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	368	1.8%	27,379	44.1%	0	0	19,571	0	47,318	76.3%	76.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010

AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	5	5	0	0	5	5	10
45 to 59	1	0	0	0	2	1	0	0	3	1	4
60 to 64	1	1	0	0	0	0	0	0	1	1	2
65 to 74	4	5	0	0	0	0	0	0	4	5	9
75 to 84	10	23	0	0	1	1	0	0	11	24	35
85+	20	51	0	0	0	0	0	0	20	51	71
TOTALS	36	80	0	0	8	7	0	0	44	87	131

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	5	61	0	0	50	0	116
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	5	76	0	0	50	0	131

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	158	147
Skilled Under 22	0	0
Intermediate DD	118	112
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	1	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	116	0	14	0	130
Race Unknown	0	0	0	0	0
Total	116	0	15	0	131

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	116	0	15	0	131
Ethnicity Unknown	0	0	0	0	0
Total	116	0	15	0	131

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.25
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	9.25
LPN's	10.00
Certified Aides	48.50
Other Health Staff	17.00
Non-Health Staff	13.25
Totals	104.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
44.5%	13.1%	2.6%	21.1%	18.7%	100.0%		0.0%
8,077,443	2,375,851	479,734	3,825,700	3,390,459	18,149,187	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	15	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	0	Chronic Alcoholism	14
FREE STANDING FACILITIES	15	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	14
NURSING CARE BEDS ONLY	3	Medicaid Recipient	2
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	2
DD CARE BEDS ONLY	11	Mental Illness	3
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	4
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	4
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	2
NON-PROFIT OWNERSHIP	12	Under 65 Years Old	2
FOR PROFIT OWNERSHIP	3	Unable to Self-Medicare	2
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	14
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		TOTALS	392
		Total Residents Diagnosed as Mentally Ill	47

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	342	342	312	342	243	99	264	340	Total Admissions 2010	286
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	271
Intermediate DD	105	105	105	105	104	1		105	Residents on 12/31/2010	392
Sheltered Care	49	45	45	45	45	4			Identified Offenders	1
TOTAL BEDS	496	492	462	492	392	104	264	445		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	9,568	9.9%	45,653	36.8%	0	0	33,353	62	88,636	71.0%	71.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			37,330	97.4%	0	0	0	0	37,330	97.4%	97.4%
Sheltered Care					0	0	15,699	426	16,125	90.2%	98.2%
TOTALS	9,568	9.9%	82,983	51.1%	0	0	49,052	488	142,091	78.5%	79.1%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	1	0	0	0	1	0	1
18 to 44	0	0	0	0	12	10	0	0	12	10	22
45 to 59	4	3	0	0	22	26	0	0	26	29	55
60 to 64	3	6	0	0	6	3	0	0	9	9	18
65 to 74	7	33	0	0	7	4	0	0	14	37	51
75 to 84	18	67	0	0	3	5	2	5	23	77	100
85+	27	75	0	0	1	4	7	31	35	110	145
TOTALS	59	184	0	0	52	52	9	36	120	272	392

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	26	125	0	0	90	2	243
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		104	0	0	0	0	104
Sheltered Care			0	0	42	3	45
TOTALS	26	229	0	0	132	5	392

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	168	148
Skilled Under 22	0	0
Intermediate DD	182	173
Shelter	85	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	2	0	14	0	16
Hawaiian/Pac. Isl.	0	0	0	0	0
White	241	0	87	45	373
Race Unknown	0	0	3	0	3
Total	243	0	104	45	392

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	2	0	3	0	5
Non-Hispanic	241	0	84	45	370
Ethnicity Unknown	0	0	17	0	17
Total	243	0	104	45	392

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	6.75
Physicians	1.00
Director of Nursing	5.00
Registered Nurses	16.75
LPN's	39.25
Certified Aides	196.00
Other Health Staff	9.50
Non-Health Staff	118.00
Totals	392.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
18.8%	26.4%	23.4%	0.7%	30.8%	100.0%		0.1%
4,249,731	5,972,934	5,290,492	159,282	6,962,964	22,635,405	18,860	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	7	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	6	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	5	Ventilator Dependent	7
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	3
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	12
		Endocrine/Metabolic	42
		Blood Disorders	8
		Nervous System Non Alzheimer	16
		Alzheimer Disease	99
		Mental Illness	5
		Developmental Disability	16
		Circulatory System	64
		Respiratory System	21
		Digestive System	3
		Genitourinary System Disorders	13
		Skin Disorders	1
		Musculo-skeletal Disorders	16
		Injuries and Poisonings	7
		Other Medical Conditions	44
		Non-Medical Conditions	0
		TOTALS	367
		Total Residents Diagnosed as Mentally Ill	27

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	551	539	421	539	352	199	323	549	392	Total Admissions 2010
Skilled Under 22	0	0	0	0	0	0		0	555	Total Discharges 2010
Intermediate DD	16	16	16	16	15	1		16	580	Residents on 12/31/2010
Sheltered Care	0	0	0	0	0	0			367	Identified Offenders
TOTAL BEDS	567	555	437	555	367	200	323	565	2	

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL Pat. days	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days		Occ. Pct.	Occ. Pct.
Nursing Care	12,474	10.6%	73,633	36.7%	4,738	1,078	41,547	0	133,470	66.4%	67.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,650	96.7%	0	0	0	0	5,650	96.7%	96.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	12,474	10.6%	79,283	38.4%	4,738	1,078	41,547	0	139,120	67.2%	68.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	2	1	0	0	2	1	3
45 to 59	4	5	0	0	4	0	0	0	8	5	13
60 to 64	2	1	0	0	1	2	0	0	3	3	6
65 to 74	17	25	0	0	0	3	0	0	17	28	45
75 to 84	28	85	0	0	0	1	0	0	28	86	114
85+	42	143	0	0	0	1	0	0	42	144	186
TOTALS	93	259	0	0	7	8	0	0	100	267	367

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	38	190	14	4	106	0	352
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	38	205	14	4	106	0	367

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	169	158
Skilled Under 22	0	0
Intermediate DD	0	116
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	1	0	0	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	350	0	15	0	365
Race Unknown	0	0	0	0	0
Total	352	0	15	0	367

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	3	0	0	0	3
Non-Hispanic	349	0	15	0	364
Ethnicity Unknown	0	0	0	0	0
Total	352	0	15	0	367

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	7.25
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	24.25
LPN's	38.00
Certified Aides	132.00
Other Health Staff	45.00
Non-Health Staff	138.00
Totals	390.50

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
26.4%	38.2%	0.8%	1.2%	33.4%	100.0%	0	0.0%
5,954,605	8,621,758	191,053	277,935	7,531,905	22,577,257		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	9	Aggressive/Anti-Social	6 DIAGNOSIS
HOSPITAL BASED UNITS	1	Chronic Alcoholism	6 Neoplasms
FREE STANDING FACILITIES	8	Developmentally Disabled	3 Endocrine/Metabolic
FACILITIES LICENSED FOR:		Drug Addiction	6 Blood Disorders
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0 Nervous System Non Alzheimer
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	2 Alzheimer Disease
DD CARE BEDS ONLY	2	Mental Illness	6 Mental Illness
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	0 Developmental Disability
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0 Circulatory System
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	0 Respiratory System
NON-PROFIT OWNERSHIP	7	Under 65 Years Old	0 Digestive System
FOR PROFIT OWNERSHIP	1	Unable to Self-Medicare	0 Genitourinary System Disorders
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	2	Ventilator Dependent	9 Skin Disorders
	1	Infectious Disease w/ Isolation	3 Musculo-skeletal Disorders
		Other Restrictions	1 Injuries and Poisonings
		No Restrictions	0 Other Medical Conditions
		<i>Note: Reported restrictions denoted by 'I'</i>	Non-Medical Conditions
			TOTALS
			580
			Total Residents Diagnosed as Mentally Ill
			45

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	663	614	556	614	509	154	579	607	530	Total Admissions 2010
Skilled Under 22	0	0	0	0	0	0		0	1,244	Total Discharges 2010
Intermediate DD	32	32	32	32	31	1		32	1,194	Residents on 12/31/2010
Sheltered Care	55	40	40	40	40	15			580	Identified Offenders
TOTAL BEDS	750	686	628	686	580	170	579	639		1

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.	
Nursing Care	23,029	10.9%	86,947	39.2%	3,279	5,779	64,022	1,438	184,494	76.2%	82.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,381	97.4%	0	0	0	0	11,381	97.4%	97.4%
Sheltered Care					0	0	12,624	365	12,989	64.7%	89.0%
TOTALS	23,029	10.9%	98,328	42.2%	3,279	5,779	76,646	1,803	208,864	76.3%	83.4%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	8	7	0	0	9	7	16
45 to 59	4	5	0	0	6	5	0	0	10	10	20
60 to 64	7	11	0	0	0	0	0	0	7	11	18
65 to 74	9	29	0	0	1	3	0	0	10	32	42
75 to 84	48	112	0	0	0	1	2	7	50	120	170
85+	55	228	0	0	0	0	7	24	62	252	314
TOTALS	124	385	0	0	15	16	9	31	148	432	580

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	64	236	10	12	182	5	509
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		31	0	0	0	0	31
Sheltered Care			0	0	39	1	40
TOTALS	64	267	10	12	221	6	580

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	218	184
Skilled Under 22	0	0
Intermediate DD	126	125
Shelter	131	165

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	19	0	4	0	23
Hawaiian/Pac. Isl.	0	0	0	0	0
White	488	0	27	40	555
Race Unknown	2	0	0	0	2
Total	509	0	31	40	580

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	506	0	31	40	577
Ethnicity Unknown	2	0	0	0	2
Total	509	0	31	40	580

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	7.50
Physicians	0.00
Director of Nursing	7.00
Registered Nurses	67.80
LPN's	60.20
Certified Aides	270.95
Other Health Staff	21.00
Non-Health Staff	227.40
Totals	661.85

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
20.3%	31.4%	1.3%	4.2%	42.7%	100.0%		0.8%
6,440,629	9,955,523	406,925	1,324,403	13,531,322	31,658,804	244,640	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	16	Aggressive/Anti-Social	10
HOSPITAL BASED UNITS	0	Chronic Alcoholism	9
FREE STANDING FACILITIES	16	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	7
NURSING CARE BEDS ONLY	9	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	3
DD CARE BEDS ONLY	4	Mental Illness	2
MULTI-LICENSED FACILITIES	3	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	9	Under 65 Years Old	1
FOR PROFIT OWNERSHIP	6	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	13
	1	Infectious Disease w/ Isolation	4
		Other Restrictions	3
		No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	13
		Endocrine/Metabolic	26
		Blood Disorders	7
		Nervous System Non Alzheimer	41
		Alzheimer Disease	96
		Mental Illness	89
		Developmental Disability	151
		Circulatory System	96
		Respiratory System	47
		Digestive System	11
		Genitourinary System Disorders	9
		Skin Disorders	6
		Musculo-skeletal Disorders	87
		Injuries and Poisonings	61
		Other Medical Conditions	29
		Non-Medical Conditions	0
		TOTALS	769
		Total Residents Diagnosed as Mentally Ill	138

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	822	804	669	799	601	221	374	822	Total Admissions 2010	553
Skilled Under 22	85	85	84	0	83	2		79	Total Discharges 2010	594
Intermediate DD	64	64	64	64	63	1		64	Residents on 12/31/2010	769
Sheltered Care	31	31	25	27	22	9			Identified Offenders	10
TOTAL BEDS	1,002	984	842	890	769	233	374	965		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	17,003	12.5%	145,432	48.5%	2,464	528	61,283	0	226,710	75.6%	77.3%
Skilled Under 22			30,299	105.1%	0	0	0	0	30,299	97.7%	97.7%
Intermediate DD			22,204	95.1%	0	0	0	0	22,204	95.1%	95.1%
Sheltered Care					0	0	8,409	0	8,409	74.3%	74.3%
TOTALS	17,003	12.5%	197,935	56.2%	2,464	528	69,692	0	287,622	78.6%	80.1%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	37	11	29	19	14	17	0	0	80	47	127
45 to 59	61	32	15	17	5	13	0	0	81	62	143
60 to 64	22	20	2	0	3	6	0	0	27	26	53
65 to 74	23	54	1	0	1	2	0	0	25	56	81
75 to 84	34	106	0	0	0	2	0	2	34	110	144
85+	38	163	0	0	0	0	3	17	41	180	221
TOTALS	215	386	47	36	23	40	3	19	288	481	769

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	40	394	1	4	162	0	601
Skilled Under 22	0	83	0	0	0	0	83
ICF/DD		47	16	0	0	0	63
Sheltered Care			0	0	22	0	22
TOTALS	40	524	17	4	184	0	769

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	168	143
Skilled Under 22	200	174
Intermediate DD	0	138
Shelter	123	130

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	1	0	0	0	1
Black	18	9	6	0	33
Hawaiian/Pac. Isl.	1	0	0	0	1
White	574	73	57	22	726
Race Unknown	6	1	0	0	7
Total	601	83	63	22	769

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	15	4	5	0	24
Non-Hispanic	586	79	58	22	745
Ethnicity Unknown	0	0	0	0	0
Total	601	83	63	22	769

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	13.75
Physicians	1.00
Director of Nursing	13.00
Registered Nurses	40.52
LPN's	80.98
Certified Aides	336.92
Other Health Staff	29.93
Non-Health Staff	261.08
Totals	777.18

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
15.6%	53.9%	3.9%	2.2%	24.5%	100.0%	0	0.0%
7,107,584	24,545,637	1,767,799	984,292	11,135,401	45,540,717		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	001	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	28	Aggressive/Anti-Social	16
HOSPITAL BASED UNITS	0	Chronic Alcoholism	18
FREE STANDING FACILITIES	28	Developmentally Disabled	11
FACILITIES LICENSED FOR:		Drug Addiction	21
NURSING CARE BEDS ONLY	12	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	7
DD CARE BEDS ONLY	10	Mental Illness	9
MULTI-LICENSED FACILITIES	6	Non-Ambulatory	1
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	16	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	11	Ventilator Dependent	24
		Infectious Disease w/ Isolation	6
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	2	Other Restrictions	4
	3	No Restrictions	2
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	58
		Endocrine/Metabolic	173
		Blood Disorders	11
		Nervous System Non Alzheimer	112
		Alzheimer Disease	284
		Mental Illness	249
		Developmental Disability	291
		Circulatory System	356
		Respiratory System	145
		Digestive System	61
		Genitourinary System Disorders	65
		Skin Disorders	22
		Musculo-skeletal Disorders	199
		Injuries and Poisonings	122
		Other Medical Conditions	269
		Non-Medical Conditions	0
		TOTALS	2,417
		Total Residents Diagnosed as Mentally Ill	421

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	2,338	2,229	2,004	2,142	1,812	526	1386	2030	2,384	
Skilled Under 22	99	99	97	32	97	2		93	6,032	
Intermediate DD	180	180	180	180	176	4		180	5,999	
Sheltered Care	452	440	339	438	332	120			2,417	
TOTAL BEDS	3,069	2,948	2,620	2,792	2,417	652	1386	2303		Identified Offenders 55

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	93,639	18.5%	400,032	54.0%	14,575	25,065	138,008	0	671,319	78.7%	82.5%
Skilled Under 22			34,070	100.4%	0	0	0	0	34,070	94.3%	94.3%
Intermediate DD			63,226	96.2%	0	0	365	0	63,591	96.8%	96.8%
Sheltered Care					0	0	112,971	477	113,448	68.8%	70.6%
TOTALS	93,639	18.5%	497,328	59.2%	14,575	25,065	251,344	477	882,428	78.8%	82.0%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	32	14	0	0	0	0	32	14	46
18 to 44	32	23	31	19	45	46	0	0	108	88	196
45 to 59	94	84	0	1	29	29	0	1	123	115	238
60 to 64	63	71	0	0	8	5	0	0	71	76	147
65 to 74	121	149	0	0	9	4	3	5	133	158	291
75 to 84	165	312	0	0	0	1	25	61	190	374	564
85+	131	567	0	0	0	0	69	168	200	735	935
TOTALS	606	1,206	63	34	91	85	97	235	857	1,560	2,417

HEALTH SERVICE AREA

001

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	273	1,054	35	67	383	0	1,812
Skilled Under 22	0	97	0	0	0	0	97
ICF/DD		175	0	0	1	0	176
Sheltered Care			0	0	332	0	332
TOTALS	273	1,326	35	67	716	0	2,417

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	227	190
Skilled Under 22	215	179
Intermediate DD	181	159
Shelter	138	101

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	8	1	2	0	11
Amer. Indian	0	0	1	0	1
Black	166	16	29	3	214
Hawaiian/Pac. Isl.	0	0	0	1	1
White	1,630	65	144	328	2,167
Race Unknown	8	15	0	0	23
Total	1,812	97	176	333	2,417

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	25	6	8	2	41
Non-Hispanic	1,780	91	168	330	2,369
Ethnicity Unknown	7	0	0	0	7
Total	1,812	97	176	332	2,417

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	23.75
Physicians	0.20
Director of Nursing	19.25
Registered Nurses	192.35
LPN's	247.30
Certified Aides	1026.80
Other Health Staff	97.80
Non-Health Staff	852.56
Totals	2460.02

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
25.3%	36.5%	2.4%	6.4%	29.4%	100.0%		0.2%
41,134,805	59,214,702	3,890,604	10,456,079	47,683,553	162,379,747	362,136	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	5	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	5	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	1
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	4	Ventilator Dependent	5
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	1	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	5
		Endocrine/Metabolic	24
		Blood Disorders	1
		Nervous System Non Alzheimer	15
		Alzheimer Disease	68
		Mental Illness	16
		Developmental Disability	3
		Circulatory System	58
		Respiratory System	33
		Digestive System	7
		Genitourinary System Disorders	15
		Skin Disorders	4
		Musculo-skeletal Disorders	31
		Injuries and Poisonings	28
		Other Medical Conditions	36
		Non-Medical Conditions	0
		TOTALS	344
		Total Residents Diagnosed as Mentally Ill	20

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	447	413	359	413	329	118	218	436	Total Admissions 2010	566
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	557
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	344
Sheltered Care	22	22	20	22	15	7			Identified Offenders	1
TOTAL BEDS	469	435	379	435	344	125	218	436		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	15,609	19.6%	66,931	42.1%	722	914	31,994	0	116,170	71.2%	77.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	6,213	0	6,213	77.4%	77.4%
TOTALS	15,609	19.6%	66,931	42.1%	722	914	38,207	0	122,383	71.5%	77.1%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	0	0	0	0	1	0	1
45 to 59	5	6	0	0	0	0	0	0	5	6	11
60 to 64	5	7	0	0	0	0	0	0	5	7	12
65 to 74	13	26	0	0	0	0	0	0	13	26	39
75 to 84	29	63	0	0	0	0	1	5	30	68	98
85+	31	143	0	0	0	0	1	8	32	151	183
TOTALS	84	245	0	0	0	0	2	13	86	258	344

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	44	179	0	4	102	0	329
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	15	0	15
TOTALS	44	179	0	4	117	0	344

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	184	154
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	185	110

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	2	0	0	0	2
Amer. Indian	0	0	0	0	0
Black	1	0	0	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	325	0	0	15	340
Race Unknown	1	0	0	0	1
Total	329	0	0	15	344

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	327	0	0	15	342
Ethnicity Unknown	1	0	0	0	1
Total	329	0	0	15	344

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	5.00
Physicians	0.00
Director of Nursing	5.00
Registered Nurses	25.00
LPN's	35.00
Certified Aides	129.00
Other Health Staff	50.00
Non-Health Staff	91.00
Totals	340.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
30.9%	35.4%	0.2%	1.9%	31.5%	100.0%		0.0%
6,560,229	7,514,287	42,267	410,138	6,672,637	21,199,560	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	10	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	1	Chronic Alcoholism	4
FREE STANDING FACILITIES	9	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	4
NURSING CARE BEDS ONLY	8	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	2
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	1
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	1
NON-PROFIT OWNERSHIP	2	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	7	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	10
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	2
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	11
		Endocrine/Metabolic	20
		Blood Disorders	3
		Nervous System Non Alzheimer	35
		Alzheimer Disease	88
		Mental Illness	58
		Developmental Disability	88
		Circulatory System	99
		Respiratory System	31
		Digestive System	16
		Genitourinary System Disorders	19
		Skin Disorders	6
		Musculo-skeletal Disorders	30
		Injuries and Poisonings	27
		Other Medical Conditions	20
		Non-Medical Conditions	0
		TOTALS	551
Total Residents Diagnosed as Mentally Ill			184

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	651	643	526	579	471	180	466	581	559	
Skilled Under 22	67	67	64	2	64	3		50	979	
Intermediate DD	16	16	16	16	16	0		16	987	
Sheltered Care	0	0	0	0	0	0			551	
TOTAL BEDS	734	726	606	597	551	183	466	647		Identified Offenders 2

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	20,512	12.1%	101,135	47.7%	1,235	5,670	42,892	0	171,444	72.2%	73.0%
Skilled Under 22			22,276	122.1%	0	0	0	0	22,276	91.1%	91.1%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	20,512	12.1%	129,251	54.7%	1,235	5,670	42,892	0	199,560	74.5%	75.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	2	7	0	0	0	0	2	7	9
18 to 44	5	2	21	26	3	3	0	0	29	31	60
45 to 59	18	16	4	1	4	4	0	0	26	21	47
60 to 64	10	12	0	0	1	1	0	0	11	13	24
65 to 74	28	40	2	1	0	0	0	0	30	41	71
75 to 84	28	90	0	0	0	0	0	0	28	90	118
85+	44	178	0	0	0	0	0	0	44	178	222
TOTALS	133	338	29	35	8	8	0	0	170	381	551

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	54	292	0	17	108	0	471
Skilled Under 22	0	64	0	0	0	0	64
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	54	372	0	17	108	0	551

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	183	151
Skilled Under 22	195	195
Intermediate DD	0	107
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	1	0	0	1
Amer. Indian	0	0	0	0	0
Black	4	29	0	0	33
Hawaiian/Pac. Isl.	0	0	0	0	0
White	467	33	16	0	516
Race Unknown	0	1	0	0	1
Total	471	64	16	0	551

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	2	0	0	3
Non-Hispanic	470	62	16	0	548
Ethnicity Unknown	0	0	0	0	0
Total	471	64	16	0	551

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	10.00
Physicians	0.00
Director of Nursing	10.00
Registered Nurses	35.00
LPN's	86.40
Certified Aides	230.50
Other Health Staff	112.90
Non-Health Staff	120.90
Totals	605.70

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
20.7%	36.4%	16.2%	3.8%	22.9%	100.0%	0	0.0%
5,976,623	10,517,692	4,685,391	1,107,986	6,618,875	28,906,570		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	0
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	3	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	0
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	1	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	3
	0	Infectious Disease w/ Isolation	0
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		TOTALS	156
		Total Residents Diagnosed as Mentally III	9

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	217	210	175	208	156	61	158	217	Total Admissions 2010	167
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	168
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	156
Sheltered Care	0	0	0	0	0	0			Identified Offenders	4
TOTAL BEDS	217	210	175	208	156	61	158	217		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	4,330	7.5%	29,289	37.0%	2,934	60	19,901	0	56,514	71.4%	73.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,330	7.5%	29,289	37.0%	2,934	60	19,901	0	56,514	71.4%	73.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	1	2	0	0	0	0	0	0	1	2	3
60 to 64	4	4	0	0	0	0	0	0	4	4	8
65 to 74	6	7	0	0	0	0	0	0	6	7	13
75 to 84	12	35	0	0	0	0	0	0	12	35	47
85+	19	66	0	0	0	0	0	0	19	66	85
TOTALS	42	114	0	0	0	0	0	0	42	114	156

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	13	85	5	3	50	0	156
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	13	85	5	3	50	0	156

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	163	135
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	0	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	154	0	0	0	154
Race Unknown	1	0	0	0	1
Total	156	0	0	0	156

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	155	0	0	0	155
Ethnicity Unknown	0	0	0	0	0
Total	156	0	0	0	156

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.00
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	7.00
LPN's	28.00
Certified Aides	61.00
Other Health Staff	8.00
Non-Health Staff	33.00
Totals	143.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
25.2%	39.5%	1.3%	0.2%	33.8%	100.0%		0.0%
2,124,472	3,331,376	111,963	19,295	2,846,519	8,433,626	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	16	Aggressive/Anti-Social	8
HOSPITAL BASED UNITS	1	Chronic Alcoholism	7
FREE STANDING FACILITIES	15	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	8
NURSING CARE BEDS ONLY	9	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	7
DD CARE BEDS ONLY	7	Mental Illness	3
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	8	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	7	Ventilator Dependent	15
		Infectious Disease w/ Isolation	6
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	1
	0	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	8
		Endocrine/Metabolic	54
		Blood Disorders	26
		Nervous System Non Alzheimer	34
		Alzheimer Disease	72
		Mental Illness	14
		Developmental Disability	316
		Circulatory System	137
		Respiratory System	83
		Digestive System	26
		Genitourinary System Disorders	31
		Skin Disorders	6
		Musculo-skeletal Disorders	81
		Injuries and Poisonings	31
		Other Medical Conditions	61
		Non-Medical Conditions	0
		TOTALS	980
		Total Residents Diagnosed as Mentally Ill	148

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	965	915	760	904	668	297	855	869	975	2,011
Skilled Under 22	0	0	0	0	0	0		0		2,006
Intermediate DD	351	321	320	321	312	39		351		980
Sheltered Care	0	0	0	0	0	0				Identified Offenders 19
TOTAL BEDS	1,316	1,236	1,080	1,225	980	336	855	1220		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	40,011	12.8%	132,271	41.7%	7,649	3,950	52,699	8	236,588	67.2%	70.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			114,717	89.5%	0	0	157	0	114,874	89.7%	98.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	40,011	12.8%	246,988	55.5%	7,649	3,950	52,856	8	351,462	73.2%	77.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	10	4	0	0	43	45	0	0	53	49	102
45 to 59	20	21	0	0	65	56	0	0	85	77	162
60 to 64	14	18	0	0	19	13	0	0	33	31	64
65 to 74	39	48	0	0	30	21	0	0	69	69	138
75 to 84	73	125	0	0	9	7	0	0	82	132	214
85+	77	219	0	0	2	2	0	0	79	221	300
TOTALS	233	435	0	0	168	144	0	0	401	579	980

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	116	375	14	12	151	0	668
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		312	0	0	0	0	312
Sheltered Care			0	0	0	0	0
TOTALS	116	687	14	12	151	0	980

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	200	171
Skilled Under 22	0	0
Intermediate DD	125	119
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	2	0	3
Amer. Indian	1	0	1	0	2
Black	26	0	39	0	65
Hawaiian/Pac. Isl.	1	0	14	0	15
White	638	0	255	0	893
Race Unknown	1	0	1	0	2
Total	668	0	312	0	980

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	6	0	3	0	9
Non-Hispanic	662	0	308	0	970
Ethnicity Unknown	0	0	1	0	1
Total	668	0	312	0	980

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	11.50
Physicians	0.00
Director of Nursing	11.00
Registered Nurses	56.25
LPN's	135.75
Certified Aides	478.75
Other Health Staff	123.00
Non-Health Staff	280.75
Totals	1097.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
39.3%	34.2%	3.2%	3.7%	19.5%	100.0%		0.0%
20,933,426	18,224,750	1,716,264	1,989,609	10,415,606	53,279,661	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	17	Aggressive/Anti-Social	12
HOSPITAL BASED UNITS	1	Chronic Alcoholism	10
FREE STANDING FACILITIES	16	Developmentally Disabled	8
FACILITIES LICENSED FOR:		Drug Addiction	13
NURSING CARE BEDS ONLY	11	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	4	Mental Illness	10
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	3
GOVERNMENTAL OWNERSHIP	2	Public Aid Recipient	3
NON-PROFIT OWNERSHIP	6	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	9	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	16
	0	Infectious Disease w/ Isolation	4
		Other Restrictions	2
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	36
		Endocrine/Metabolic	71
		Blood Disorders	19
		Nervous System Non Alzheimer	69
		Alzheimer Disease	160
		Mental Illness	27
		Developmental Disability	69
		Circulatory System	266
		Respiratory System	96
		Digestive System	30
		Genitourinary System Disorders	52
		Skin Disorders	11
		Musculo-skeletal Disorders	114
		Injuries and Poisonings	43
		Other Medical Conditions	114
		Non-Medical Conditions	1
		TOTALS	1,178
		Total Residents Diagnosed as Mentally Ill	126

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,442	1,412	1,217	1,243	1,071	371	1048	1033	1,209	2,308
Skilled Under 22	0	0	0	0	0	0		0		2,339
Intermediate DD	64	64	63	64	62	2		63		1,178
Sheltered Care	59	55	50	55	45	14				Identified Offenders 3
TOTAL BEDS	1,565	1,531	1,330	1,362	1,178	387	1048	1096		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	58,675	15.3%	188,949	50.1%	56,123	2,934	91,816	15	398,512	75.7%	77.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			22,272	96.9%	0	0	0	0	22,272	95.3%	95.3%
Sheltered Care					0	0	16,503	0	16,503	76.6%	82.2%
TOTALS	58,675	15.3%	211,221	52.8%	56,123	2,934	108,319	15	437,287	76.6%	78.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	1	0	0	21	20	0	0	22	21	43
45 to 59	11	11	0	0	9	4	0	0	20	15	35
60 to 64	16	13	0	0	2	4	0	0	18	17	35
65 to 74	52	41	0	0	1	1	0	0	53	42	95
75 to 84	109	162	0	0	0	0	4	8	113	170	283
85+	178	476	0	0	0	0	6	27	184	503	687
TOTALS	367	704	0	0	33	29	10	35	410	768	1,178

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	134	521	164	5	247	0	1,071
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		62	0	0	0	0	62
Sheltered Care			0	0	45	0	45
TOTALS	134	583	164	5	292	0	1,178

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	191	165
Skilled Under 22	0	0
Intermediate DD	0	127
Shelter	127	106

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	4	0	4	0	8
Hawaiian/Pac. Isl.	0	0	0	0	0
White	1,065	0	58	45	1,168
Race Unknown	1	0	0	0	1
Total	1,071	0	62	45	1,178
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	5	0	1	0	6
Non-Hispanic	1,066	0	61	45	1,172
Ethnicity Unknown	0	0	0	0	0
Total	1,071	0	62	45	1,178

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	16.75
Physicians	1.00
Director of Nursing	12.90
Registered Nurses	119.20
LPN's	113.50
Certified Aides	508.50
Other Health Staff	92.25
Non-Health Staff	428.80
Totals	1292.90

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
31.5%	31.1%	6.2%	1.0%	30.1%	100.0%	0	0.0%
21,823,155	21,529,694	4,315,586	674,915	20,830,965	69,174,319		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	6	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	1	Chronic Alcoholism	1
FREE STANDING FACILITIES	5	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	6	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	3	Ventilator Dependent	3
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	3
	1	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	4
		Endocrine/Metabolic	17
		Blood Disorders	2
		Nervous System Non Alzheimer	18
		Alzheimer Disease	27
		Mental Illness	15
		Developmental Disability	22
		Circulatory System	69
		Respiratory System	25
		Digestive System	3
		Genitourinary System Disorders	9
		Skin Disorders	0
		Musculo-skeletal Disorders	34
		Injuries and Poisonings	12
		Other Medical Conditions	31
		Non-Medical Conditions	0
		TOTALS	288
		Total Residents Diagnosed as Mentally III	71

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	376	361	325	361	288	88	131	332	302	Total Admissions 2010
Skilled Under 22	0	0	0	0	0	0		0	728	Total Discharges 2010
Intermediate DD	0	0	0	0	0	0		0	742	Residents on 12/31/2010
Sheltered Care	0	0	0	0	0	0			288	Identified Offenders
TOTAL BEDS	376	361	325	361	288	88	131	332		5

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	13,526	28.3%	51,135	42.2%	619	1,051	41,290	1	107,622	78.4%	81.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	13,526	28.3%	51,135	42.2%	619	1,051	41,290	1	107,622	78.4%	81.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	2	4	0	0	0	0	0	0	2	4	6
60 to 64	3	8	0	0	0	0	0	0	3	8	11
65 to 74	11	16	0	0	0	0	0	0	11	16	27
75 to 84	28	46	0	0	0	0	0	0	28	46	74
85+	26	144	0	0	0	0	0	0	26	144	170
TOTALS	70	218	0	0	0	0	0	0	70	218	288

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	44	133	3	6	102	0	288
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	44	133	3	6	102	0	288

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	259	236
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	6	0	0	0	6
Hawaiian/Pac. Isl.	0	0	0	0	0
White	281	0	0	0	281
Race Unknown	1	0	0	0	1
Total	288	0	0	0	288

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	287	0	0	0	287
Ethnicity Unknown	0	0	0	0	0
Total	288	0	0	0	288

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	5.83
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	31.07
LPN's	43.04
Certified Aides	113.16
Other Health Staff	19.16
Non-Health Staff	109.91
Totals	328.17

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
28.9%	35.6%	0.4%	12.5%	22.7%	100.0%		0.0%
4,821,403	5,940,659	61,708	2,093,727	3,791,670	16,709,167	152	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	4	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	3	Ventilator Dependent	4
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	5
		Endocrine/Metabolic	16
		Blood Disorders	0
		Nervous System Non Alzheimer	45
		Alzheimer Disease	117
		Mental Illness	31
		Developmental Disability	5
		Circulatory System	38
		Respiratory System	13
		Digestive System	5
		Genitourinary System Disorders	6
		Skin Disorders	7
		Musculo-skeletal Disorders	39
		Injuries and Poisonings	4
		Other Medical Conditions	6
		Non-Medical Conditions	0
		TOTALS	337
Total Residents Diagnosed as Mentally Ill			87

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	427	415	352	408	337	90	306	314	335	
Skilled Under 22	0	0	0	0	0	0		0	423	
Intermediate DD	0	0	0	0	0	0		0	421	
Sheltered Care	0	0	0	0	0	0			337	
TOTAL BEDS	427	415	352	408	337	90	306	314		Identified Offenders 12

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	14,058	12.6%	63,641	55.5%	4,513	1,736	35,949	0	119,897	76.9%	79.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	14,058	12.6%	63,641	55.5%	4,513	1,736	35,949	0	119,897	76.9%	79.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	7	2	0	0	0	0	0	0	7	2	9
45 to 59	12	20	0	0	0	0	0	0	12	20	32
60 to 64	9	9	0	0	0	0	0	0	9	9	18
65 to 74	15	17	0	0	0	0	0	0	15	17	32
75 to 84	43	68	0	0	0	0	0	0	43	68	111
85+	31	104	0	0	0	0	0	0	31	104	135
TOTALS	117	220	0	0	0	0	0	0	117	220	337

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	38	182	6	5	106	0	337
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	38	182	6	5	106	0	337

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	171	161
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	7	0	0	0	7
Hawaiian/Pac. Isl.	0	0	0	0	0
White	326	0	0	0	326
Race Unknown	4	0	0	0	4
Total	337	0	0	0	337

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	5	0	0	0	5
Non-Hispanic	332	0	0	0	332
Ethnicity Unknown	0	0	0	0	0
Total	337	0	0	0	337

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.00
Physicians	0.00
Director of Nursing	4.00
Registered Nurses	29.97
LPN's	39.70
Certified Aides	112.91
Other Health Staff	25.23
Non-Health Staff	145.98
Totals	361.79

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
30.1%	35.8%	0.3%	3.3%	30.4%	100.0%		0.0%
6,680,434	7,958,977	67,401	743,558	6,757,126	22,207,496	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	23	Aggressive/Anti-Social	10
HOSPITAL BASED UNITS	1	Chronic Alcoholism	12
FREE STANDING FACILITIES	22	Developmentally Disabled	9
FACILITIES LICENSED FOR:		Drug Addiction	15
NURSING CARE BEDS ONLY	14	Medicaid Recipient	2
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	2
DD CARE BEDS ONLY	7	Mental Illness	11
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	4
		Non-Mobile	4
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	7
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	2
NON-PROFIT OWNERSHIP	14	Unable to Self-Medicare	4
FOR PROFIT OWNERSHIP	8	Ventilator Dependent	21
		Infectious Disease w/ Isolation	9
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	5	Other Restrictions	3
	3	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	22
		Endocrine/Metabolic	72
		Blood Disorders	12
		Nervous System Non Alzheimer	61
		Alzheimer Disease	155
		Mental Illness	251
		Developmental Disability	53
		Circulatory System	217
		Respiratory System	121
		Digestive System	32
		Genitourinary System Disorders	68
		Skin Disorders	14
		Musculo-skeletal Disorders	139
		Injuries and Poisonings	105
		Other Medical Conditions	246
		Non-Medical Conditions	2
		TOTALS	1,570
Total Residents Diagnosed as Mentally Ill			355

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,822	1,806	1,667	1,655	1,494	328	668	1352	1,582	2,800
Skilled Under 22	0	0	0	0	0	0		0		2,812
Intermediate DD	61	61	53	61	48	13		61		1,570
Sheltered Care	33	30	29	30	28	5			Identified Offenders	101
TOTAL BEDS	1,916	1,897	1,749	1,746	1,570	346	668	1413		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	54,288	22.3%	345,113	69.9%	1,351	16,666	134,583	6	552,007	83.0%	83.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			18,042	81.0%	0	0	0	0	18,042	81.0%	81.0%
Sheltered Care					122	0	9,369	245	9,736	80.8%	88.9%
TOTALS	54,288	22.3%	363,155	70.4%	1,473	16,666	143,952	251	579,785	82.9%	83.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	78	43	0	0	9	6	0	0	87	49	136
45 to 59	164	109	0	0	14	10	0	1	178	120	298
60 to 64	57	49	0	0	2	4	0	0	59	53	112
65 to 74	69	99	0	0	1	0	0	1	70	100	170
75 to 84	96	206	0	0	1	0	2	6	99	212	311
85+	92	432	0	0	0	1	2	16	94	449	543
TOTALS	556	938	0	0	27	21	4	24	587	983	1,570

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	140	949	1	38	366	0	1,494
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		48	0	0	0	0	48
Sheltered Care			1	0	26	1	28
TOTALS	140	997	2	38	392	1	1,570

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	243	165
Skilled Under 22	0	0
Intermediate DD	184	113
Shelter	111	104

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	1	0	2	0	3
Black	144	0	4	0	148
Hawaiian/Pac. Isl.	0	0	0	0	0
White	1,343	0	42	28	1,413
Race Unknown	5	0	0	0	5
Total	1,494	0	48	28	1,570
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	10	0	1	0	11
Non-Hispanic	1,483	0	47	28	1,558
Ethnicity Unknown	1	0	0	0	1
Total	1,494	0	48	28	1,570

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	24.00
Physicians	0.00
Director of Nursing	18.00
Registered Nurses	93.00
LPN's	196.60
Certified Aides	582.20
Other Health Staff	134.50
Non-Health Staff	488.70
Totals	1537.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
25.0%	42.0%	2.2%	4.2%	26.7%	100.0%		0.0%
23,496,897	39,435,015	2,049,252	3,945,902	25,072,516	93,999,586	19,527	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	19	Aggressive/Anti-Social	11
HOSPITAL BASED UNITS	1	Chronic Alcoholism	10
FREE STANDING FACILITIES	18	Developmentally Disabled	6
FACILITIES LICENSED FOR:		Drug Addiction	10
NURSING CARE BEDS ONLY	11	Medicaid Recipient	2
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	2
DD CARE BEDS ONLY	7	Mental Illness	7
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	3
		Non-Mobile	2
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	9	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	10	Ventilator Dependent	18
		Infectious Disease w/ Isolation	7
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	2
	1	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	21
		Endocrine/Metabolic	47
		Blood Disorders	10
		Nervous System Non Alzheimer	60
		Alzheimer Disease	203
		Mental Illness	45
		Developmental Disability	171
		Circulatory System	194
		Respiratory System	54
		Digestive System	24
		Genitourinary System Disorders	41
		Skin Disorders	10
		Musculo-skeletal Disorders	79
		Injuries and Poisonings	47
		Other Medical Conditions	125
		Non-Medical Conditions	3
		TOTALS	1,134
		Total Residents Diagnosed as Mentally Ill	158

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,293	1,195	1,042	1,186	960	333	934	891	1,119	2,254
Skilled Under 22	0	0	0	0	0	0		0		2,239
Intermediate DD	194	194	172	194	164	30		194		1,134
Sheltered Care	12	12	10	12	10	2				Identified Offenders
TOTAL BEDS	1,499	1,401	1,224	1,392	1,134	365	934	1085		2

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	56,321	16.5%	156,670	48.2%	3,778	16,426	112,924	1,337	347,456	73.6%	79.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			59,846	84.5%	0	0	59	0	59,905	84.6%	84.6%
Sheltered Care					0	0	3,321	0	3,321	75.8%	75.8%
TOTALS	56,321	16.5%	216,516	54.7%	3,778	16,426	116,304	1,337	410,682	75.1%	80.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	1	0	0	41	37	0	0	43	38	81
45 to 59	19	18	0	0	19	33	0	0	38	51	89
60 to 64	13	15	0	0	7	11	0	0	20	26	46
65 to 74	37	88	0	0	3	11	0	0	40	99	139
75 to 84	101	192	0	0	2	0	1	0	104	192	296
85+	96	378	0	0	0	0	2	7	98	385	483
TOTALS	268	692	0	0	72	92	3	7	343	791	1,134

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	147	441	19	35	308	10	960
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		164	0	0	0	0	164
Sheltered Care			0	0	10	0	10
TOTALS	147	605	19	35	318	10	1,134

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	227	198
Skilled Under 22	0	0
Intermediate DD	161	126
Shelter	150	131

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	1	0	0	0	1
Black	11	0	4	0	15
Hawaiian/Pac. Isl.	1	0	0	0	1
White	946	0	160	10	1,116
Race Unknown	1	0	0	0	1
Total	960	0	164	10	1,134
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	4	0	0	0	4
Non-Hispanic	853	0	164	10	1,027
Ethnicity Unknown	103	0	0	0	103
Total	960	0	164	10	1,134

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	15.75
Physicians	0.00
Director of Nursing	13.50
Registered Nurses	100.55
LPN's	164.25
Certified Aides	627.81
Other Health Staff	106.88
Non-Health Staff	419.64
Totals	1448.38

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
29.5%	32.4%	0.6%	6.5%	31.0%	100.0%		0.6%
21,517,116	23,579,619	443,172	4,734,872	22,575,288	72,850,071	440,965	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	002	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	0	Chronic Alcoholism	4
FREE STANDING FACILITIES	7	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	4
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	5
MULTI-LICENSED FACILITIES	3	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	4	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	3	Ventilator Dependent	4
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	3	Other Restrictions	1
	1	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		TOTALS	551
Total Residents Diagnosed as Mentally III			96

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	594	591	574	588	521	73	376	601	559	
Skilled Under 22	0	0	0	0	0	0		0	446	
Intermediate DD	0	0	0	0	0	0		0	454	
Sheltered Care	51	51	47	50	30	21			551	
TOTAL BEDS	645	642	621	638	551	94	376	601		Identified Offenders 2

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	12,615	9.2%	91,217	41.6%	1,636	3,941	79,502	68	188,979	87.2%	87.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	12,185	7	12,192	65.5%	65.5%
TOTALS	12,615	9.2%	91,217	41.6%	1,636	3,941	91,687	75	201,171	85.5%	85.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	8	5	0	0	0	0	0	0	8	5	13
45 to 59	26	18	0	0	0	0	0	0	26	18	44
60 to 64	6	8	0	0	0	0	0	0	6	8	14
65 to 74	23	13	0	0	0	0	0	0	23	13	36
75 to 84	44	97	0	0	0	0	1	9	45	106	151
85+	64	209	0	0	0	0	3	17	67	226	293
TOTALS	171	350	0	0	0	0	4	26	175	376	551

HEALTH SERVICE AREA

002

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	31	243	12	4	230	1	521
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	29	1	30
TOTALS	31	243	12	4	259	2	551

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	191	176
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	121	108

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	2	0	0	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	519	0	0	30	549
Race Unknown	0	0	0	0	0
Total	521	0	0	30	551

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	521	0	0	30	551
Ethnicity Unknown	0	0	0	0	0
Total	521	0	0	30	551

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	8.00
Physicians	0.00
Director of Nursing	7.00
Registered Nurses	50.00
LPN's	51.00
Certified Aides	224.00
Other Health Staff	12.00
Non-Health Staff	232.00
Totals	584.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
14.1%	27.8%	0.9%	4.2%	53.0%	100.0%		0.0%
4,919,837	9,675,926	313,597	1,459,196	18,458,653	34,827,212	12,584	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	11	Aggressive/Anti-Social	8 DIAGNOSIS
HOSPITAL BASED UNITS	1	Chronic Alcoholism	8 Neoplasms 17
FREE STANDING FACILITIES	10	Developmentally Disabled	4 Endocrine/Metabolic 92
FACILITIES LICENSED FOR:		Drug Addiction	9 Blood Disorders 5
NURSING CARE BEDS ONLY	7	Medicaid Recipient	2 Nervous System Non Alzheimer 72
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1 Alzheimer Disease 155
DD CARE BEDS ONLY	2	Mental Illness	6 Mental Illness 125
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	0 Developmental Disability 38
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0 Circulatory System 340
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	0 Respiratory System 63
NON-PROFIT OWNERSHIP	7	Under 65 Years Old	1 Digestive System 13
FOR PROFIT OWNERSHIP	3	Unable to Self-Medicare	0 Genitourinary System Disorders 36
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	2	Ventilator Dependent	10 Skin Disorders 3
	0	Infectious Disease w/ Isolation	2 Musculo-skeletal Disorders 90
		Other Restrictions	0 Injuries and Poisonings 23
		No Restrictions	0 Other Medical Conditions 73
		<i>Note: Reported restrictions denoted by 'I'</i>	Non-Medical Conditions 47
			TOTALS 1,192
			Total Residents Diagnosed as Mentally Ill 460

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,495	1,476	1,131	1,386	1,072	423	411	834	Total Admissions 2010	1,256
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	1,267
Intermediate DD	32	32	32	32	32	0		32	Residents on 12/31/2010	1,192
Sheltered Care	186	186	88	182	88	98			Identified Offenders	4
TOTAL BEDS	1,713	1,694	1,251	1,600	1,192	521	411	866		

LEVEL OF CARE	FACILITY UTILIZATION - 2010										Licensed Beds	Peak Beds Set Up		
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE												TOTAL	Occ. Pct.
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	Pat. days	Occ. Pct.				
Nursing Care	28,527	19.0%	126,683	41.6%	58	2,660	237,594	67	395,589	72.5%	73.4%			
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%			
Intermediate DD			10,923	93.5%	0	0	0	0	10,923	93.5%	93.5%			
Sheltered Care					0	0	31,865	0	31,865	46.9%	46.9%			
TOTALS	28,527	19.0%	137,606	43.5%	58	2,660	269,459	67	438,377	70.1%	70.9%			

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	2	0	0	6	4	0	0	8	6	14
45 to 59	24	12	0	0	5	6	0	0	29	18	47
60 to 64	29	14	0	0	1	2	2	1	32	17	49
65 to 74	65	37	0	0	4	2	10	8	79	47	126
75 to 84	166	148	0	0	1	0	9	19	176	167	343
85+	201	372	0	0	1	0	9	30	211	402	613
TOTALS	487	585	0	0	18	14	30	58	535	657	1,192

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	67	343	0	36	626	0	1,072
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		32	0	0	0	0	32
Sheltered Care			0	0	88	0	88
TOTALS	67	375	0	36	714	0	1,192

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	243	223
Skilled Under 22	0	0
Intermediate DD	0	117
Shelter	130	88

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	23	0	1	1	25
Hawaiian/Pac. Isl.	0	0	0	0	0
White	1,047	0	30	87	1,164
Race Unknown	1	0	1	0	2
Total	1,072	0	32	88	1,192

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	1,072	0	32	88	1,192
Ethnicity Unknown	0	0	0	0	0
Total	1,072	0	32	88	1,192

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	10.50
Physicians	2.00
Director of Nursing	10.00
Registered Nurses	114.20
LPN's	200.50
Certified Aides	486.70
Other Health Staff	57.00
Non-Health Staff	596.00
Totals	1476.90

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
13.4%	25.1%	19.9%	1.7%	39.8%	100.0%		0.0%
7,475,211	13,976,725	11,086,475	946,144	22,094,556	55,579,115	10,362	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	1	Chronic Alcoholism	2
FREE STANDING FACILITIES	2	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	3	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	0	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	2
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	12
		Blood Disorders	0
		Nervous System Non Alzheimer	7
		Alzheimer Disease	20
		Mental Illness	31
		Developmental Disability	0
		Circulatory System	27
		Respiratory System	9
		Digestive System	3
		Genitourinary System Disorders	3
		Skin Disorders	0
		Musculo-skeletal Disorders	13
		Injuries and Poisonings	4
		Other Medical Conditions	13
		Non-Medical Conditions	0
		TOTALS	145
		Total Residents Diagnosed as Mentally Ill	33

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	215	195	157	195	145	70	104	186	Total Admissions 2010	125
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	119
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	145
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	215	195	157	195	145	70	104	186		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	2,960	7.8%	26,117	38.5%	0	0	18,921	0	47,998	61.2%	67.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	2,960	7.8%	26,117	38.5%	0	0	18,921	0	47,998	61.2%	67.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	4	1	0	0	0	0	0	0	4	1	5
60 to 64	2	1	0	0	0	0	0	0	2	1	3
65 to 74	4	9	0	0	0	0	0	0	4	9	13
75 to 84	14	29	0	0	0	0	0	0	14	29	43
85+	20	61	0	0	0	0	0	0	20	61	81
TOTALS	44	101	0	0	0	0	0	0	44	101	145

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	9	71	0	0	65	0	145
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	9	71	0	0	65	0	145

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	140	125
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	1	0	0	0	1
White	144	0	0	0	144
Race Unknown	0	0	0	0	0
Total	145	0	0	0	145

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	145	0	0	0	145
Ethnicity Unknown	0	0	0	0	0
Total	145	0	0	0	145

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.00
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	4.00
LPN's	20.50
Certified Aides	53.25
Other Health Staff	3.00
Non-Health Staff	41.00
Totals	127.75

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
27.5%	43.8%	0.0%	0.0%	28.7%	100.0%	0	0.0%
1,611,998	2,565,955	0	0	1,678,667	5,856,622	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	5	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	5	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	4	Ventilator Dependent	4
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	12
		Blood Disorders	2
		Nervous System Non Alzheimer	14
		Alzheimer Disease	63
		Mental Illness	17
		Developmental Disability	16
		Circulatory System	39
		Respiratory System	20
		Digestive System	2
		Genitourinary System Disorders	12
		Skin Disorders	3
		Musculo-skeletal Disorders	27
		Injuries and Poisonings	24
		Other Medical Conditions	27
		Non-Medical Conditions	0
		TOTALS	281
		Total Residents Diagnosed as Mentally Ill	84

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	337	337	297	328	266	71	337	337	292	Total Admissions 2010
Skilled Under 22	0	0	0	0	0	0		0	357	Total Discharges 2010
Intermediate DD	16	16	16	16	15	1		16	368	Residents on 12/31/2010
Sheltered Care	0	0	0	0	0	0			281	Identified Offenders
TOTAL BEDS	353	353	313	344	281	72	337	353	0	

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	11,259	9.2%	52,148	42.4%	20	267	31,808	0	95,502	77.6%	77.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,408	92.6%	0	0	0	0	5,408	92.6%	92.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	11,259	9.2%	57,556	44.7%	20	267	31,808	0	100,910	78.3%	78.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	7	0	0	0	7	7
45 to 59	4	1	0	0	1	5	0	0	5	6	11
60 to 64	4	9	0	0	0	1	0	0	4	10	14
65 to 74	9	12	0	0	0	1	0	0	9	13	22
75 to 84	18	59	0	0	0	0	0	0	18	59	77
85+	33	117	0	0	0	0	0	0	33	117	150
TOTALS	68	198	0	0	1	14	0	0	69	212	281

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	34	139	0	0	93	0	266
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	34	154	0	0	93	0	281

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	157	134
Skilled Under 22	0	0
Intermediate DD	0	118
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	265	0	15	0	280
Race Unknown	0	0	0	0	0
Total	266	0	15	0	281

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	266	0	15	0	281
Ethnicity Unknown	0	0	0	0	0
Total	266	0	15	0	281

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.25
Physicians	0.00
Director of Nursing	4.00
Registered Nurses	16.50
LPN's	36.00
Certified Aides	127.00
Other Health Staff	28.00
Non-Health Staff	60.50
Totals	276.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
44.4%	30.1%	0.2%	0.5%	24.8%	100.0%	0	0.0%
8,539,275	5,802,444	38,125	88,086	4,777,750	19,245,680		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	1
HOSPITAL BASED UNITS	0	Chronic Alcoholism	2
FREE STANDING FACILITIES	3	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	3
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	0
		Endocrine/Metabolic	12
		Blood Disorders	1
		Nervous System Non Alzheimer	9
		Alzheimer Disease	18
		Mental Illness	0
		Developmental Disability	16
		Circulatory System	4
		Respiratory System	10
		Digestive System	0
		Genitourinary System Disorders	5
		Skin Disorders	1
		Musculo-skeletal Disorders	6
		Injuries and Poisonings	5
		Other Medical Conditions	0
		Non-Medical Conditions	39
		TOTALS	126
		Total Residents Diagnosed as Mentally Ill	2

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	150	139	127	134	110	40	150	150	Total Admissions 2010	179
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	180
Intermediate DD	16	16	16	16	16	0		16	Residents on 12/31/2010	126
Sheltered Care	0	0	0	0	0	0			Identified Offenders	1
TOTAL BEDS	166	155	143	150	126	40	150	166		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	4,571	8.3%	25,109	45.9%	0	1,095	6,930	0	37,705	68.9%	74.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,571	8.3%	30,949	51.1%	0	1,095	6,930	0	43,545	71.9%	77.0%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	4	5	0	0	4	5	9
45 to 59	1	1	0	0	6	1	0	0	7	2	9
60 to 64	1	3	0	0	0	0	0	0	1	3	4
65 to 74	6	6	0	0	0	0	0	0	6	6	12
75 to 84	13	27	0	0	0	0	0	0	13	27	40
85+	6	46	0	0	0	0	0	0	6	46	52
TOTALS	27	83	0	0	10	6	0	0	37	89	126

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	13	69	0	3	20	5	110
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	13	85	0	3	20	5	126

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	172	143
Skilled Under 22	0	0
Intermediate DD	0	114
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	0	0	2	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	109	0	14	0	123
Race Unknown	0	0	0	0	0
Total	110	0	16	0	126

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	1	0	2
Non-Hispanic	71	0	15	0	86
Ethnicity Unknown	38	0	0	0	38
Total	110	0	16	0	126

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.25
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	6.00
LPN's	17.00
Certified Aides	55.00
Other Health Staff	17.00
Non-Health Staff	50.00
Totals	151.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
25.1%	45.4%	0.0%	2.3%	27.2%	100.0%	0	0.0%
1,809,984	3,274,736	0	164,229	1,956,445	7,205,396		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	8	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	1	Chronic Alcoholism	4
FREE STANDING FACILITIES	7	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	5
NURSING CARE BEDS ONLY	5	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	3	Mental Illness	3
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	1
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	1
NON-PROFIT OWNERSHIP	4	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	4	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	7
	0	Infectious Disease w/ Isolation	3
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	1
		Endocrine/Metabolic	44
		Blood Disorders	1
		Nervous System Non Alzheimer	6
		Alzheimer Disease	80
		Mental Illness	9
		Developmental Disability	57
		Circulatory System	56
		Respiratory System	26
		Digestive System	3
		Genitourinary System Disorders	13
		Skin Disorders	1
		Musculo-skeletal Disorders	21
		Injuries and Poisonings	64
		Other Medical Conditions	20
		Non-Medical Conditions	0
		TOTALS	402
		Total Residents Diagnosed as Mentally Ill	43

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	472	448	398	445	359	113	348	450	Total Admissions 2010	551
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	560
Intermediate DD	48	48	46	48	43	5		48	Residents on 12/31/2010	402
Sheltered Care	0	0	0	0	0	0			Identified Offenders	2
TOTAL BEDS	520	496	444	493	402	118	348	498		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	18,588	14.6%	79,953	48.7%	0	348	31,591	0	130,480	75.7%	79.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			15,887	90.7%	0	0	0	0	15,887	90.7%	90.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	18,588	14.6%	95,840	52.7%	0	348	31,591	0	146,367	77.1%	80.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	2	0	0	12	11	0	0	13	13	26
45 to 59	9	8	0	0	4	9	0	0	13	17	30
60 to 64	2	5	0	0	1	2	0	0	3	7	10
65 to 74	12	26	0	0	2	0	0	0	14	26	40
75 to 84	27	66	0	0	1	1	0	0	28	67	95
85+	40	161	0	0	0	0	0	0	40	161	201
TOTALS	91	268	0	0	20	23	0	0	111	291	402

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	62	216	0	28	53	0	359
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		43	0	0	0	0	43
Sheltered Care			0	0	0	0	0
TOTALS	62	259	0	28	53	0	402

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	166	145
Skilled Under 22	0	0
Intermediate DD	198	119
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	1	0	1
Black	3	0	4	0	7
Hawaiian/Pac. Isl.	1	0	0	0	1
White	355	0	38	0	393
Race Unknown	0	0	0	0	0
Total	359	0	43	0	402

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	359	0	43	0	402
Ethnicity Unknown	0	0	0	0	0
Total	359	0	43	0	402

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	5.60
Physicians	0.00
Director of Nursing	5.00
Registered Nurses	15.28
LPN's	56.08
Certified Aides	179.52
Other Health Staff	20.75
Non-Health Staff	99.93
Totals	382.16

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
31.9%	47.7%	0.0%	0.0%	20.5%	100.0%		0.0%
7,026,538	10,513,093	0	0	4,511,836	22,051,468	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	7	58	0	1	9	0	75
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	7	58	0	1	9	0	75

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	127	115
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	74	0	0	0	74
Race Unknown	0	0	0	0	0
Total	75	0	0	0	75

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	75	0	0	0	75
Ethnicity Unknown	0	0	0	0	0
Total	75	0	0	0	75

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	1.00
Physicians	0.00
Director of Nursing	1.00
Registered Nurses	5.00
LPN's	11.00
Certified Aides	27.00
Other Health Staff	15.00
Non-Health Staff	17.00
Totals	77.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
38.5%	50.2%	0.7%	1.2%	9.4%	100.0%	0	0.0%
1,427,620	1,857,974	24,860	43,485	349,610	3,703,549		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	1
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	4	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	3	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	2
DD CARE BEDS ONLY	1	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	1
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	1
NON-PROFIT OWNERSHIP	2	Under 65 Years Old	1
FOR PROFIT OWNERSHIP	2	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	3
	0	Infectious Disease w/ Isolation	2
		Other Restrictions	2
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	9
		Endocrine/Metabolic	15
		Blood Disorders	0
		Nervous System Non Alzheimer	6
		Alzheimer Disease	27
		Mental Illness	0
		Developmental Disability	16
		Circulatory System	34
		Respiratory System	11
		Digestive System	0
		Genitourinary System Disorders	3
		Skin Disorders	0
		Musculo-skeletal Disorders	12
		Injuries and Poisonings	12
		Other Medical Conditions	7
		Non-Medical Conditions	0
		TOTALS	152
		Total Residents Diagnosed as Mentally III	1

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	241	158	146	158	136	105	184	241	Total Admissions 2010	174
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	173
Intermediate DD	16	16	16	16	16	0		16	Residents on 12/31/2010	152
Sheltered Care	0	0	0	0	0	0			Identified Offenders	2
TOTAL BEDS	257	174	162	174	152	105	184	257		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	5,013	7.5%	28,298	32.2%	1,059	145	13,618	0	48,133	54.7%	83.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	5,013	7.5%	34,138	36.4%	1,059	145	13,618	0	53,973	57.5%	85.0%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	2	2	0	0	2	2	4
45 to 59	1	2	0	0	6	1	0	0	7	3	10
60 to 64	3	0	0	0	1	2	0	0	4	2	6
65 to 74	6	12	0	0	1	1	0	0	7	13	20
75 to 84	9	26	0	0	0	0	0	0	9	26	35
85+	16	61	0	0	0	0	0	0	16	61	77
TOTALS	35	101	0	0	10	6	0	0	45	107	152

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	15	76	2	0	43	0	136
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	15	92	2	0	43	0	152

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	166	151
Skilled Under 22	0	0
Intermediate DD	0	112
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	3	0	0	0	3
Hawaiian/Pac. Isl.	0	0	0	0	0
White	132	0	16	0	148
Race Unknown	0	0	0	0	0
Total	136	0	16	0	152

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	136	0	16	0	152
Ethnicity Unknown	0	0	0	0	0
Total	136	0	16	0	152

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.25
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	9.80
LPN's	15.40
Certified Aides	51.20
Other Health Staff	1.00
Non-Health Staff	44.08
Totals	127.73

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
28.8%	40.9%	1.2%	0.6%	28.5%	100.0%	0	0.0%
2,244,947	3,184,549	92,170	44,016	2,218,335	7,784,017		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	1
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	4	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	1	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	3	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	4
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	12
		Blood Disorders	2
		Nervous System Non Alzheimer	7
		Alzheimer Disease	52
		Mental Illness	1
		Developmental Disability	16
		Circulatory System	90
		Respiratory System	28
		Digestive System	5
		Genitourinary System Disorders	13
		Skin Disorders	0
		Musculo-skeletal Disorders	22
		Injuries and Poisonings	25
		Other Medical Conditions	26
		Non-Medical Conditions	0
		TOTALS	302
		Total Residents Diagnosed as Mentally Ill	3

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	369	369	332	369	287	82	369	369	Total Admissions 2010	333
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	330
Intermediate DD	16	16	16	16	15	1		16	Residents on 12/31/2010	302
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	385	385	348	385	302	83	369	385		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	13,445	10.0%	52,640	39.1%	620	201	37,638	0	104,544	77.6%	77.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,581	95.6%	0	0	0	0	5,581	95.6%	95.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	13,445	10.0%	58,221	41.4%	620	201	37,638	0	110,125	78.4%	78.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	2	1	0	0	2	1	3
45 to 59	3	4	0	0	5	1	0	0	8	5	13
60 to 64	3	5	0	0	4	1	0	0	7	6	13
65 to 74	13	23	0	0	1	0	0	0	14	23	37
75 to 84	44	72	0	0	0	0	0	0	44	72	116
85+	22	98	0	0	0	0	0	0	22	98	120
TOTALS	85	202	0	0	12	3	0	0	97	205	302

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	32	149	1	0	105	0	287
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	32	164	1	0	105	0	302

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	158	130
Skilled Under 22	0	0
Intermediate DD	0	114
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	1	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	287	0	14	0	301
Race Unknown	0	0	0	0	0
Total	287	0	15	0	302

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	287	0	15	0	302
Ethnicity Unknown	0	0	0	0	0
Total	287	0	15	0	302

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.25
Physicians	0.00
Director of Nursing	4.00
Registered Nurses	20.00
LPN's	25.00
Certified Aides	144.00
Other Health Staff	12.00
Non-Health Staff	123.00
Totals	331.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
44.8%	29.1%	0.3%	0.7%	25.2%	100.0%	0	0.0%
8,127,777	5,287,143	54,383	120,680	4,568,730	18,158,713		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	8	Aggressive/Anti-Social	5
HOSPITAL BASED UNITS	0	Chronic Alcoholism	7
FREE STANDING FACILITIES	8	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	7
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	3
DD CARE BEDS ONLY	4	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	2
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	2
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	4	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	4	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	7
	1	Infectious Disease w/ Isolation	4
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	18
		Blood Disorders	1
		Nervous System Non Alzheimer	24
		Alzheimer Disease	36
		Mental Illness	48
		Developmental Disability	64
		Circulatory System	82
		Respiratory System	28
		Digestive System	19
		Genitourinary System Disorders	8
		Skin Disorders	1
		Musculo-skeletal Disorders	32
		Injuries and Poisonings	11
		Other Medical Conditions	74
		Non-Medical Conditions	0
		TOTALS	449
		Total Residents Diagnosed as Mentally Ill	150

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	468	459	406	360	387	81	292	461	451	
Skilled Under 22	0	0	0	0	0	0		0	490	
Intermediate DD	63	63	63	63	62	1		63	492	
Sheltered Care	0	0	0	0	0	0			449	
TOTAL BEDS	531	522	469	423	449	82	292	524		Identified Offenders 5

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	15,412	14.5%	69,774	41.5%	4,547	2,117	46,772	0	138,622	81.2%	82.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			22,846	99.4%	0	0	0	0	22,846	99.4%	99.4%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	15,412	14.5%	92,620	48.4%	4,547	2,117	46,772	0	161,468	83.3%	84.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	7	4	0	0	11	9	0	0	18	13	31
45 to 59	9	14	0	0	11	11	0	0	20	25	45
60 to 64	6	5	0	0	5	3	0	0	11	8	19
65 to 74	13	16	0	0	5	5	0	0	18	21	39
75 to 84	24	80	0	0	0	2	0	0	24	82	106
85+	45	164	0	0	0	0	0	0	45	164	209
TOTALS	104	283	0	0	32	30	0	0	136	313	449

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	39	200	2	9	137	0	387
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		62	0	0	0	0	62
Sheltered Care			0	0	0	0	0
TOTALS	39	262	2	9	137	0	449

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	166	149
Skilled Under 22	0	0
Intermediate DD	180	115
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	12	0	0	0	12
Hawaiian/Pac. Isl.	0	0	0	0	0
White	374	0	62	0	436
Race Unknown	0	0	0	0	0
Total	387	0	62	0	449

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	387	0	62	0	449
Ethnicity Unknown	0	0	0	0	0
Total	387	0	62	0	449

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	6.67
Physicians	0.00
Director of Nursing	4.75
Registered Nurses	18.75
LPN's	61.50
Certified Aides	165.28
Other Health Staff	21.00
Non-Health Staff	149.20
Totals	427.15

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
28.6%	41.2%	0.9%	1.5%	27.7%	100.0%	0	0.0%
7,965,414	11,475,516	243,871	430,165	7,712,984	27,827,956		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	9	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	9	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	5
NURSING CARE BEDS ONLY	8	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	1
FOR PROFIT OWNERSHIP	8	Ventilator Dependent	9
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	8
		Endocrine/Metabolic	26
		Blood Disorders	2
		Nervous System Non Alzheimer	37
		Alzheimer Disease	89
		Mental Illness	34
		Developmental Disability	21
		Circulatory System	67
		Respiratory System	27
		Digestive System	11
		Genitourinary System Disorders	16
		Skin Disorders	5
		Musculo-skeletal Disorders	42
		Injuries and Poisonings	13
		Other Medical Conditions	145
		Non-Medical Conditions	7
		TOTALS	550
		Total Residents Diagnosed as Mentally Ill	82

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	744	702	564	666	534	210	533	739	Total Admissions 2010	660
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	619
Intermediate DD	16	16	16	16	16	0		16	Residents on 12/31/2010	550
Sheltered Care	0	0	0	0	0	0			Identified Offenders	4
TOTAL BEDS	760	718	580	682	550	210	533	755		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	22,883	11.8%	103,154	38.2%	27	1,311	61,597	0	188,972	69.6%	73.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	22,883	11.8%	108,994	39.6%	27	1,311	61,597	0	194,812	70.2%	74.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	5	0	0	0	6	0	6
45 to 59	12	6	0	0	3	4	0	0	15	10	25
60 to 64	8	11	0	0	0	2	0	0	8	13	21
65 to 74	16	27	0	0	0	2	0	0	16	29	45
75 to 84	53	101	0	0	0	0	0	0	53	101	154
85+	50	249	0	0	0	0	0	0	50	249	299
TOTALS	140	394	0	0	8	8	0	0	148	402	550

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	45	314	0	5	170	0	534
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	45	330	0	5	170	0	550

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	160	126
Skilled Under 22	0	0
Intermediate DD	0	116
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	5	0	0	0	5
Hawaiian/Pac. Isl.	0	0	0	0	0
White	529	0	16	0	545
Race Unknown	0	0	0	0	0
Total	534	0	16	0	550

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	533	0	16	0	549
Ethnicity Unknown	0	0	0	0	0
Total	534	0	16	0	550

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	9.00
Physicians	0.00
Director of Nursing	8.00
Registered Nurses	27.25
LPN's	71.50
Certified Aides	232.00
Other Health Staff	25.00
Non-Health Staff	201.00
Totals	573.75

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
33.7%	37.1%	0.1%	0.3%	28.9%	100.0%	0	0.0%
10,081,075	11,069,143	24,820	76,623	8,621,130	29,872,793		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	2	Aggressive/Anti-Social	1
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	2	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	1	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	1
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	1	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	2
	0	Infectious Disease w/ Isolation	0
	0	Other Restrictions	1
	0	No Restrictions	0
	0	<i>Note: Reported restrictions denoted by 'I'</i>	0
		DIAGNOSIS	
		Neoplasms	1
		Endocrine/Metabolic	12
		Blood Disorders	0
		Nervous System Non Alzheimer	9
		Alzheimer Disease	20
		Mental Illness	6
		Developmental Disability	1
		Circulatory System	11
		Respiratory System	8
		Digestive System	0
		Genitourinary System Disorders	3
		Skin Disorders	0
		Musculo-skeletal Disorders	27
		Injuries and Poisonings	0
		Other Medical Conditions	42
		Non-Medical Conditions	0
		TOTALS	140
		Total Residents Diagnosed as Mentally Ill	61

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010			
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	Total Admissions 2010	Total Discharges 2010
Nursing Care	164	160	143	160	126	38	84	164	130	200	190
Skilled Under 22	0	0	0	0	0	0		0			140
Intermediate DD	0	0	0	0	0	0		0			
Sheltered Care	31	31	31	31	14	17					Identified Offenders
TOTAL BEDS	195	191	174	191	140	55	84	164			0

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	4,447	14.5%	24,864	41.5%	1,566	188	15,094	0	46,159	77.1%	79.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	4,730	0	4,730	41.8%	41.8%
TOTALS	4,447	14.5%	24,864	41.5%	1,566	188	19,824	0	50,889	71.5%	73.0%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	2	4	0	0	0	0	0	0	2	4	6
60 to 64	2	1	0	0	0	0	0	0	2	1	3
65 to 74	3	5	0	0	0	0	0	0	3	5	8
75 to 84	9	22	0	0	0	0	0	5	9	27	36
85+	22	56	0	0	0	0	0	9	22	65	87
TOTALS	38	88	0	0	0	0	0	14	38	102	140

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	10	73	0	1	42	0	126
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	14	0	14
TOTALS	10	73	0	1	56	0	140

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	168	119
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	95	77

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	126	0	0	14	140
Race Unknown	0	0	0	0	0
Total	126	0	0	14	140

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	125	0	0	14	139
Ethnicity Unknown	0	0	0	0	0
Total	126	0	0	14	140

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	8.00
LPN's	19.00
Certified Aides	39.00
Other Health Staff	7.00
Non-Health Staff	36.00
Totals	113.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
23.2%	37.9%	0.0%	0.8%	38.0%	100.0%	0	0.0%
1,653,422	2,695,656	0	59,443	2,707,513	7,116,036		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	2	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	2	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	0
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	1	Ventilator Dependent	2
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Infectious Disease w/ Isolation	0
	0	Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	2
		Endocrine/Metabolic	4
		Blood Disorders	0
		Nervous System Non Alzheimer	6
		Alzheimer Disease	38
		Mental Illness	31
		Developmental Disability	1
		Circulatory System	21
		Respiratory System	9
		Digestive System	2
		Genitourinary System Disorders	7
		Skin Disorders	1
		Musculo-skeletal Disorders	6
		Injuries and Poisonings	6
		Other Medical Conditions	3
		Non-Medical Conditions	0
		TOTALS	137
		Total Residents Diagnosed as Mentally III	31

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	192	178	150	178	137	55	51	180	Total Admissions 2010	268
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	272
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	137
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	192	178	150	178	137	55	51	180		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	6,157	33.1%	30,180	45.9%	0	69	15,025	0	51,431	73.4%	79.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	6,157	33.1%	30,180	45.9%	0	69	15,025	0	51,431	73.4%	79.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	0	0	0	0	1	0	1
45 to 59	2	4	0	0	0	0	0	0	2	4	6
60 to 64	1	6	0	0	0	0	0	0	1	6	7
65 to 74	6	7	0	0	0	0	0	0	6	7	13
75 to 84	10	35	0	0	0	0	0	0	10	35	45
85+	17	48	0	0	0	0	0	0	17	48	65
TOTALS	37	100	0	0	0	0	0	0	37	100	137

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	17	80	0	0	40	0	137
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	17	80	0	0	40	0	137

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	145	132
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	2	0	0	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	135	0	0	0	135
Race Unknown	0	0	0	0	0
Total	137	0	0	0	137

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	137	0	0	0	137
Ethnicity Unknown	0	0	0	0	0
Total	137	0	0	0	137

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	7.00
LPN's	24.00
Certified Aides	61.00
Other Health Staff	6.00
Non-Health Staff	54.00
Totals	156.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
35.5%	39.1%	0.0%	0.4%	25.0%	100.0%	0	0.0%
2,914,306	3,215,945	0	32,130	2,056,283	8,218,664	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	5
HOSPITAL BASED UNITS	1	Chronic Alcoholism	2
FREE STANDING FACILITIES	6	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	6	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	4
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	1
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	1	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	6	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	7
	0	Infectious Disease w/ Isolation	2
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	9
		Endocrine/Metabolic	50
		Blood Disorders	2
		Nervous System Non Alzheimer	28
		Alzheimer Disease	71
		Mental Illness	48
		Developmental Disability	20
		Circulatory System	75
		Respiratory System	19
		Digestive System	4
		Genitourinary System Disorders	15
		Skin Disorders	1
		Musculo-skeletal Disorders	38
		Injuries and Poisonings	15
		Other Medical Conditions	23
		Non-Medical Conditions	0
		TOTALS	418
		Total Residents Diagnosed as Mentally Ill	126

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	501	467	419	424	402	99	266	481	366	
Skilled Under 22	0	0	0	0	0	0		0	470	
Intermediate DD	16	16	16	16	16	0		16	418	
Sheltered Care	0	0	0	0	0	0			418	
TOTAL BEDS	517	483	435	440	418	99	266	497		6

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	11,260	11.6%	82,370	46.9%	930	215	38,243	0	133,018	72.7%	78.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	11,260	11.6%	88,210	48.6%	930	215	38,243	0	138,858	73.6%	78.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	5	4	0	0	6	3	0	0	11	7	18
45 to 59	23	20	0	0	2	4	0	0	25	24	49
60 to 64	11	12	0	0	0	1	0	0	11	13	24
65 to 74	21	24	0	0	0	0	0	0	21	24	45
75 to 84	40	53	0	0	0	0	0	0	40	53	93
85+	37	152	0	0	0	0	0	0	37	152	189
TOTALS	137	265	0	0	8	8	0	0	145	273	418

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	35	252	0	1	114	0	402
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	35	268	0	1	114	0	418

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	148	116
Skilled Under 22	0	0
Intermediate DD	107	107
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	7	0	0	0	7
Hawaiian/Pac. Isl.	0	0	0	0	0
White	395	0	16	0	411
Race Unknown	0	0	0	0	0
Total	402	0	16	0	418

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	402	0	16	0	418
Ethnicity Unknown	0	0	0	0	0
Total	402	0	16	0	418

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	5.23
Physicians	0.00
Director of Nursing	5.00
Registered Nurses	14.00
LPN's	45.00
Certified Aides	142.81
Other Health Staff	8.80
Non-Health Staff	83.24
Totals	304.08

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
29.0%	43.6%	0.0%	0.1%	27.3%	100.0%	0	0.0%
5,164,060	7,758,906	1,567	26,133	4,865,097	17,815,765		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	12	Aggressive/Anti-Social	10
HOSPITAL BASED UNITS	0	Chronic Alcoholism	9
FREE STANDING FACILITIES	12	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	9
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	5
DD CARE BEDS ONLY	6	Mental Illness	2
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	1
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	6	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	5	Ventilator Dependent	10
		Infectious Disease w/ Isolation	5
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	10
		Endocrine/Metabolic	46
		Blood Disorders	2
		Nervous System Non Alzheimer	29
		Alzheimer Disease	64
		Mental Illness	37
		Developmental Disability	63
		Circulatory System	102
		Respiratory System	38
		Digestive System	12
		Genitourinary System Disorders	19
		Skin Disorders	4
		Musculo-skeletal Disorders	71
		Injuries and Poisonings	6
		Other Medical Conditions	31
		Non-Medical Conditions	11
		TOTALS	545
Total Residents Diagnosed as Mentally Ill			149

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	654	561	488	555	468	186	288	654	Total Admissions 2010	464
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	443
Intermediate DD	64	64	63	64	63	1		64	Residents on 12/31/2010	545
Sheltered Care	24	24	14	24	14	10			Identified Offenders	13
TOTAL BEDS	742	649	565	643	545	197	288	718		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	15,781	15.0%	111,647	46.8%	139	270	39,570	0	167,407	70.1%	81.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			22,919	98.1%	0	0	0	0	22,919	98.1%	98.1%
Sheltered Care					0	0	3,644	0	3,644	41.6%	41.6%
TOTALS	15,781	15.0%	134,566	51.3%	139	270	43,214	0	193,970	71.6%	81.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	5	4	0	0	27	6	0	0	32	10	42
45 to 59	31	25	0	0	15	6	0	0	46	31	77
60 to 64	10	22	0	0	3	3	0	0	13	25	38
65 to 74	32	42	0	0	1	0	0	1	33	43	76
75 to 84	40	79	0	0	0	0	0	1	40	80	120
85+	33	145	0	0	1	1	3	9	37	155	192
TOTALS	151	317	0	0	47	16	3	11	201	344	545

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	46	305	3	1	113	0	468
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		63	0	0	0	0	63
Sheltered Care			0	0	14	0	14
TOTALS	46	368	3	1	127	0	545

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	141	131
Skilled Under 22	0	0
Intermediate DD	0	154
Shelter	105	85

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	26	0	8	0	34
Hawaiian/Pac. Isl.	2	0	0	0	2
White	440	0	55	14	509
Race Unknown	0	0	0	0	0
Total	468	0	63	14	545

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	5	0	5
Non-Hispanic	468	0	58	14	540
Ethnicity Unknown	0	0	0	0	0
Total	468	0	63	14	545

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	8.25
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	16.90
LPN's	72.70
Certified Aides	224.45
Other Health Staff	17.70
Non-Health Staff	140.30
Totals	486.30

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
25.6%	45.2%	0.5%	0.1%	28.6%	100.0%		0.0%
6,369,172	11,225,221	114,783	30,144	7,095,409	24,834,731	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	003	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	17	Aggressive/Anti-Social	12
HOSPITAL BASED UNITS	1	Chronic Alcoholism	10
FREE STANDING FACILITIES	16	Developmentally Disabled	9
FACILITIES LICENSED FOR:		Drug Addiction	11
NURSING CARE BEDS ONLY	7	Medicaid Recipient	4
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	8
DD CARE BEDS ONLY	6	Mental Illness	4
MULTI-LICENSED FACILITIES	4	Non-Ambulatory	1
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	4
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	2
NON-PROFIT OWNERSHIP	11	Unable to Self-Medicare	1
FOR PROFIT OWNERSHIP	6	Ventilator Dependent	17
		Infectious Disease w/ Isolation	8
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	1
	1	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	32
		Endocrine/Metabolic	51
		Blood Disorders	13
		Nervous System Non Alzheimer	55
		Alzheimer Disease	86
		Mental Illness	78
		Developmental Disability	171
		Circulatory System	215
		Respiratory System	68
		Digestive System	28
		Genitourinary System Disorders	37
		Skin Disorders	23
		Musculo-skeletal Disorders	125
		Injuries and Poisonings	20
		Other Medical Conditions	145
		Non-Medical Conditions	14
		TOTALS	1,161
		Total Residents Diagnosed as Mentally Ill	129

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,115	1,057	997	1,051	905	210	742	849	1,153	
Skilled Under 22	0	0	0	0	0	0		0	2,934	
Intermediate DD	179	178	172	178	169	10		179	2,926	
Sheltered Care	138	114	104	111	87	51			1,161	
TOTAL BEDS	1,432	1,349	1,273	1,340	1,161	271	742	1028		Identified Offenders 9

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	65,785	24.3%	148,023	47.8%	15	4,057	109,541	2,357	329,778	81.0%	85.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			61,326	93.9%	365	0	720	0	62,411	95.5%	96.1%
Sheltered Care					22	0	27,363	6,070	33,455	66.4%	80.4%
TOTALS	65,785	24.3%	209,349	55.8%	402	4,057	137,624	8,427	425,644	81.4%	86.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	5	0	0	0	33	15	0	0	38	15	53
45 to 59	31	21	0	0	65	20	0	0	96	41	137
60 to 64	14	20	0	0	14	3	0	1	28	24	52
65 to 74	33	71	0	0	14	2	0	2	47	75	122
75 to 84	79	169	0	0	3	0	2	8	84	177	261
85+	97	365	0	0	0	0	11	63	108	428	536
TOTALS	259	646	0	0	129	40	13	74	401	760	1,161

HEALTH SERVICE AREA

003

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	174	403	0	14	306	8	905
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		166	1	0	2	0	169
Sheltered Care			0	0	83	4	87
TOTALS	174	569	1	14	391	12	1,161

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	227	196
Skilled Under 22	0	0
Intermediate DD	212	123
Shelter	129	98

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	2	0	2	0	4
Amer. Indian	0	0	0	0	0
Black	63	0	13	0	76
Hawaiian/Pac. Isl.	0	0	0	0	0
White	840	0	154	87	1,081
Race Unknown	0	0	0	0	0
Total	905	0	169	87	1,161

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	2	0	2
Non-Hispanic	905	0	167	87	1,159
Ethnicity Unknown	0	0	0	0	0
Total	905	0	169	87	1,161

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	13.83
Physicians	0.00
Director of Nursing	15.25
Registered Nurses	79.80
LPN's	174.10
Certified Aides	525.70
Other Health Staff	39.50
Non-Health Staff	419.80
Totals	1267.98

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
33.7%	30.7%	0.5%	2.2%	32.9%	100.0%		0.6%
23,185,673	21,095,992	320,322	1,524,922	22,629,516	68,756,430	445,931	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	10	Aggressive/Anti-Social	5
HOSPITAL BASED UNITS	0	Chronic Alcoholism	5
FREE STANDING FACILITIES	10	Developmentally Disabled	4
FACILITIES LICENSED FOR:		Drug Addiction	5
NURSING CARE BEDS ONLY	6	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	7
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	3	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	6	Ventilator Dependent	10
		Infectious Disease w/ Isolation	2
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	2
	1	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	22
		Endocrine/Metabolic	27
		Blood Disorders	3
		Nervous System Non Alzheimer	55
		Alzheimer Disease	156
		Mental Illness	55
		Developmental Disability	154
		Circulatory System	173
		Respiratory System	45
		Digestive System	18
		Genitourinary System Disorders	31
		Skin Disorders	6
		Musculo-skeletal Disorders	58
		Injuries and Poisonings	31
		Other Medical Conditions	48
		Non-Medical Conditions	1
		TOTALS	883
		Total Residents Diagnosed as Mentally Ill	88

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	908	902	796	884	713	195	789	653	867	
Skilled Under 22	123	123	122	9	122	1		123	1,792	
Intermediate DD	32	32	32	32	32	0		32	1,776	
Sheltered Care	19	40	26	19	16	3			883	
TOTAL BEDS	1,082	1,097	976	944	883	199	789	808		Identified Offenders 13

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	35,552	12.3%	122,996	51.6%	1,078	11,149	89,180	1,460	261,415	78.9%	79.4%
Skilled Under 22			38,924	86.7%	0	365	365	0	39,654	88.3%	88.3%
Intermediate DD			11,267	96.5%	0	0	0	0	11,267	96.5%	96.5%
Sheltered Care					0	0	7,889	365	8,254	119.0%	56.5%
TOTALS	35,552	12.3%	173,187	58.7%	1,078	11,514	97,434	1,825	320,590	81.2%	80.1%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	9	6	0	0	0	0	9	6	15
18 to 44	3	0	49	33	10	5	0	0	62	38	100
45 to 59	16	22	6	10	7	4	0	0	29	36	65
60 to 64	12	16	2	0	1	2	0	0	15	18	33
65 to 74	19	45	4	2	0	2	0	0	23	49	72
75 to 84	59	147	0	0	0	1	0	4	59	152	211
85+	80	294	0	1	0	0	5	7	85	302	387
TOTALS	189	524	70	52	18	14	5	11	282	601	883

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	102	337	1	26	243	4	713
Skilled Under 22	0	120	0	1	1	0	122
ICF/DD		32	0	0	0	0	32
Sheltered Care			0	0	15	1	16
TOTALS	102	489	1	27	259	5	883

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	207	164
Skilled Under 22	0	234
Intermediate DD	145	145
Shelter	187	152

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	3	1	1	0	5
Amer. Indian	0	0	0	0	0
Black	82	28	4	0	114
Hawaiian/Pac. Isl.	0	0	0	0	0
White	627	93	27	16	763
Race Unknown	1	0	0	0	1
Total	713	122	32	16	883

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	3	4	1	0	8
Non-Hispanic	710	118	31	16	875
Ethnicity Unknown	0	0	0	0	0
Total	713	122	32	16	883

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	8.00
Physicians	0.00
Director of Nursing	8.00
Registered Nurses	65.00
LPN's	82.70
Certified Aides	361.20
Other Health Staff	215.40
Non-Health Staff	213.75
Totals	954.05

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
26.2%	33.9%	5.1%	6.4%	28.4%	100.0%		0.3%
14,571,327	18,878,865	2,845,670	3,579,248	15,797,145	55,672,259	186,348	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	0
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	3	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	0
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	2	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	3
	0	Infectious Disease w/ Isolation	0
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	5
		Endocrine/Metabolic	9
		Blood Disorders	0
		Nervous System Non Alzheimer	13
		Alzheimer Disease	36
		Mental Illness	10
		Developmental Disability	0
		Circulatory System	24
		Respiratory System	7
		Digestive System	7
		Genitourinary System Disorders	10
		Skin Disorders	2
		Musculo-skeletal Disorders	9
		Injuries and Poisonings	8
		Other Medical Conditions	48
		Non-Medical Conditions	0
		TOTALS	188
		Total Residents Diagnosed as Mentally Ill	12

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	255	255	221	255	188	67	140	245	Total Admissions 2010	212
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	239
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	188
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	255	255	221	255	188	67	140	245		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	5,731	11.2%	40,668	45.5%	232	1,634	25,778	0	74,043	79.6%	79.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	5,731	11.2%	40,668	45.5%	232	1,634	25,778	0	74,043	79.6%	79.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	4	3	0	0	0	0	0	0	4	3	7
60 to 64	0	2	0	0	0	0	0	0	0	2	2
65 to 74	8	14	0	0	0	0	0	0	8	14	22
75 to 84	24	43	0	0	0	0	0	0	24	43	67
85+	15	75	0	0	0	0	0	0	15	75	90
TOTALS	51	137	0	0	0	0	0	0	51	137	188

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	11	98	2	1	76	0	188
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	11	98	2	1	76	0	188

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	149	121
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	188	0	0	0	188
Race Unknown	0	0	0	0	0
Total	188	0	0	0	188
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	188	0	0	0	188
Ethnicity Unknown	0	0	0	0	0
Total	188	0	0	0	188

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.00
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	13.00
LPN's	29.00
Certified Aides	102.00
Other Health Staff	0.00
Non-Health Staff	73.00
Totals	223.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
24.1%	42.8%	0.0%	2.5%	30.6%	100.0%	0	0.0%
2,663,173	4,722,704	0	271,467	3,378,808	11,036,152		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	10	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	10	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	7	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	3	Mental Illness	6
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	9	Ventilator Dependent	10
		Infectious Disease w/ Isolation	3
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	3
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	11
		Endocrine/Metabolic	49
		Blood Disorders	18
		Nervous System Non Alzheimer	43
		Alzheimer Disease	75
		Mental Illness	61
		Developmental Disability	61
		Circulatory System	118
		Respiratory System	32
		Digestive System	4
		Genitourinary System Disorders	20
		Skin Disorders	5
		Musculo-skeletal Disorders	28
		Injuries and Poisonings	13
		Other Medical Conditions	43
		Non-Medical Conditions	0
		TOTALS	581
		Total Residents Diagnosed as Mentally Ill	211

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	868	766	600	621	534	334	739	868	Total Admissions 2010	770
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	769
Intermediate DD	47	47	47	47	47	0		47	Residents on 12/31/2010	581
Sheltered Care	0	0	0	0	0	0			Identified Offenders	21
TOTAL BEDS	915	813	647	668	581	334	739	915		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	26,305	9.8%	128,800	40.7%	348	627	40,237	0	196,317	62.0%	70.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			16,596	96.7%	0	0	0	0	16,596	96.7%	96.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	26,305	9.8%	145,396	43.5%	348	627	40,237	0	212,913	63.8%	71.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	9	8	0	0	12	5	0	0	21	13	34
45 to 59	30	30	0	0	8	8	0	0	38	38	76
60 to 64	10	11	0	0	5	2	0	0	15	13	28
65 to 74	28	45	0	0	2	3	0	0	30	48	78
75 to 84	51	97	0	0	0	1	0	0	51	98	149
85+	32	183	0	0	0	1	0	0	32	184	216
TOTALS	160	374	0	0	27	20	0	0	187	394	581

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	70	348	0	3	113	0	534
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		47	0	0	0	0	47
Sheltered Care			0	0	0	0	0
TOTALS	70	395	0	3	113	0	581

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	149	124
Skilled Under 22	0	0
Intermediate DD	145	145
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	14	0	3	0	17
Hawaiian/Pac. Isl.	0	0	0	0	0
White	520	0	44	0	564
Race Unknown	0	0	0	0	0
Total	534	0	47	0	581

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	534	0	47	0	581
Ethnicity Unknown	0	0	0	0	0
Total	534	0	47	0	581

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	8.00
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	27.00
LPN's	78.00
Certified Aides	212.00
Other Health Staff	4.00
Non-Health Staff	166.75
Totals	501.75

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
29.3%	50.4%	1.8%	1.2%	17.3%	100.0%	0	0.0%
9,228,754	15,861,656	556,765	367,558	5,429,775	31,444,512		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	2
FREE STANDING FACILITIES	3	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	3
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Infectious Disease w/ Isolation	1
	0	Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	5
		Blood Disorders	5
		Nervous System Non Alzheimer	13
		Alzheimer Disease	16
		Mental Illness	2
		Developmental Disability	17
		Circulatory System	37
		Respiratory System	15
		Digestive System	5
		Genitourinary System Disorders	4
		Skin Disorders	0
		Musculo-skeletal Disorders	18
		Injuries and Poisonings	5
		Other Medical Conditions	16
		Non-Medical Conditions	0
		TOTALS	161
		Total Residents Diagnosed as Mentally Ill	7

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	190	187	157	187	145	45	134	185	Total Admissions 2010	201
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	202
Intermediate DD	16	16	16	16	16	0		16	Residents on 12/31/2010	161
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	206	203	173	203	161	45	134	201		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	8,097	16.6%	27,082	40.1%	74	356	17,649	0	53,258	76.8%	78.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,747	98.4%	0	0	0	0	5,747	98.4%	98.4%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	8,097	16.6%	32,829	44.7%	74	356	17,649	0	59,005	78.5%	79.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	1	0	0	2	3	0	0	3	4	7
45 to 59	0	0	0	0	1	3	0	0	1	3	4
60 to 64	1	1	0	0	1	1	0	0	2	2	4
65 to 74	7	7	0	0	3	1	0	0	10	8	18
75 to 84	7	34	0	0	1	0	0	0	8	34	42
85+	25	61	0	0	0	0	0	0	25	61	86
TOTALS	41	104	0	0	8	8	0	0	49	112	161

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	15	70	0	0	60	0	145
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	15	86	0	0	60	0	161

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	174	134
Skilled Under 22	0	0
Intermediate DD	0	115
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	2	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	145	0	14	0	159
Race Unknown	0	0	0	0	0
Total	145	0	16	0	161

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	145	0	16	0	161
Ethnicity Unknown	0	0	0	0	0
Total	145	0	16	0	161

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.25
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	8.25
LPN's	15.00
Certified Aides	64.00
Other Health Staff	1.00
Non-Health Staff	60.00
Totals	153.50

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
29.9%	30.2%	0.4%	3.0%	36.4%	100.0%		0.0%
2,969,467	3,005,300	42,267	301,027	3,619,585	9,937,647	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	0
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	4	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	0
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	4	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	4
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	3
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		TOTALS	193
		Total Residents Diagnosed as Mentally Ill	96

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	233	225	194	225	177	56	110	233	Total Admissions 2010	143
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	141
Intermediate DD	16	16	16	16	16	0		16	Residents on 12/31/2010	193
Sheltered Care	0	0	0	0	0	0			Identified Offenders	4
TOTAL BEDS	249	241	210	241	193	56	110	249		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	3,753	9.3%	46,949	55.2%	0	771	14,497	0	65,970	77.6%	80.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,825	99.7%	0	0	0	0	5,825	99.7%	99.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,753	9.3%	52,774	58.1%	0	771	14,497	0	71,795	79.0%	81.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	0	0	0	5	1	0	0	7	1	8
45 to 59	15	5	0	0	1	4	0	0	16	9	25
60 to 64	4	8	0	0	0	0	0	0	4	8	12
65 to 74	16	16	0	0	2	2	0	0	18	18	36
75 to 84	10	33	0	0	0	1	0	0	10	34	44
85+	13	55	0	0	0	0	0	0	13	55	68
TOTALS	60	117	0	0	8	8	0	0	68	125	193

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	9	124	0	5	39	0	177
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	9	140	0	5	39	0	193

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	137	121
Skilled Under 22	0	0
Intermediate DD	147	147
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	1	0	1
Amer. Indian	0	0	0	0	0
Black	2	0	3	0	5
Hawaiian/Pac. Isl.	0	0	0	0	0
White	175	0	12	0	187
Race Unknown	0	0	0	0	0
Total	177	0	16	0	193

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	176	0	16	0	192
Ethnicity Unknown	0	0	0	0	0
Total	177	0	16	0	193

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.00
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	7.00
LPN's	21.00
Certified Aides	57.00
Other Health Staff	63.00
Non-Health Staff	24.25
Totals	178.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
18.0%	57.0%	0.8%	3.5%	20.6%	100.0%		0.0%
1,614,095	5,118,174	75,825	314,783	1,848,872	8,971,750	9	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	6	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	0	Chronic Alcoholism	4
FREE STANDING FACILITIES	6	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	5
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	2
DD CARE BEDS ONLY	2	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	4	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	6
	0	Infectious Disease w/ Isolation	3
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	0
		Endocrine/Metabolic	13
		Blood Disorders	4
		Nervous System Non Alzheimer	10
		Alzheimer Disease	56
		Mental Illness	8
		Developmental Disability	35
		Circulatory System	74
		Respiratory System	30
		Digestive System	2
		Genitourinary System Disorders	10
		Skin Disorders	4
		Musculo-skeletal Disorders	18
		Injuries and Poisonings	6
		Other Medical Conditions	34
		Non-Medical Conditions	0
		TOTALS	304
		Total Residents Diagnosed as Mentally Ill	82

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	Total Admissions 2010	Total Discharges 2010
Nursing Care	370	363	291	363	272	98	326	348	294	444	434
Skilled Under 22	0	0	0	0	0	0		0	304		
Intermediate DD	32	32	32	32	32	0		32			
Sheltered Care	0	0	0	0	0	0					
TOTAL BEDS	402	395	323	395	304	98	326	380	Identified Offenders	0	

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	13,016	10.9%	49,745	39.2%	412	2,194	30,712	0	96,079	71.1%	72.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,675	100.0%	0	0	0	0	11,675	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	13,016	10.9%	61,420	44.3%	412	2,194	30,712	0	107,754	73.4%	74.7%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	12	8	0	0	12	8	20
45 to 59	4	1	0	0	6	4	0	0	10	5	15
60 to 64	2	7	0	0	0	0	0	0	2	7	9
65 to 74	17	20	0	0	0	1	0	0	17	21	38
75 to 84	24	68	0	0	0	1	0	0	24	69	93
85+	27	102	0	0	0	0	0	0	27	102	129
TOTALS	74	198	0	0	18	14	0	0	92	212	304

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	47	146	1	6	72	0	272
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		32	0	0	0	0	32
Sheltered Care			0	0	0	0	0
TOTALS	47	178	1	6	72	0	304

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	162	142
Skilled Under 22	0	0
Intermediate DD	0	109
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	272	0	32	0	304
Race Unknown	0	0	0	0	0
Total	272	0	32	0	304
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	272	0	32	0	304
Ethnicity Unknown	0	0	0	0	0
Total	272	0	32	0	304

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.50
Physicians	0.00
Director of Nursing	4.00
Registered Nurses	22.00
LPN's	50.00
Certified Aides	158.00
Other Health Staff	8.00
Non-Health Staff	118.00
Totals	364.50

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
29.6%	40.4%	0.6%	3.4%	26.0%	100.0%		0.0%
4,988,312	6,796,642	98,679	571,302	4,373,339	16,828,280	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	0
HOSPITAL BASED UNITS	1	Chronic Alcoholism	3
FREE STANDING FACILITIES	6	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	7	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	3	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	4	Ventilator Dependent	5
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	2
	0	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	1
		Endocrine/Metabolic	26
		Blood Disorders	0
		Nervous System Non Alzheimer	35
		Alzheimer Disease	69
		Mental Illness	23
		Developmental Disability	1
		Circulatory System	78
		Respiratory System	23
		Digestive System	11
		Genitourinary System Disorders	7
		Skin Disorders	4
		Musculo-skeletal Disorders	36
		Injuries and Poisonings	26
		Other Medical Conditions	25
		Non-Medical Conditions	7
		TOTALS	372
		Total Residents Diagnosed as Mentally Ill	43

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	427	415	408	371	372	55	377	286	Total Admissions 2010	691
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	684
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	372
Sheltered Care	0	0	0	0	0	0			Identified Offenders	1
TOTAL BEDS	427	415	408	371	372	55	377	286		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	16,648	12.1%	63,402	60.7%	0	4,392	50,052	0	134,494	86.3%	88.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	16,648	12.1%	63,402	60.7%	0	4,392	50,052	0	134,494	86.3%	88.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	2	0	0	0	0	0	0	2	2	4
45 to 59	8	15	0	0	0	0	0	0	8	15	23
60 to 64	5	5	0	0	0	0	0	0	5	5	10
65 to 74	12	21	0	0	0	0	0	0	12	21	33
75 to 84	42	62	0	0	0	0	0	0	42	62	104
85+	44	154	0	0	0	0	0	0	44	154	198
TOTALS	113	259	0	0	0	0	0	0	113	259	372

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	46	166	1	10	149	0	372
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	46	166	1	10	149	0	372

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	166	151
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	4	0	0	0	4
Hawaiian/Pac. Isl.	0	0	0	0	0
White	368	0	0	0	368
Race Unknown	0	0	0	0	0
Total	372	0	0	0	372
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	372	0	0	0	372
Ethnicity Unknown	0	0	0	0	0
Total	372	0	0	0	372

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	7.00
Physicians	0.00
Director of Nursing	7.00
Registered Nurses	28.00
LPN's	57.00
Certified Aides	165.00
Other Health Staff	26.00
Non-Health Staff	154.00
Totals	444.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
33.3%	28.5%	0.0%	6.0%	32.1%	100.0%		0.0%
8,658,656	7,395,746	6,848	1,569,486	8,345,541	25,976,278	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	1 DIAGNOSIS
HOSPITAL BASED UNITS	0	Chronic Alcoholism	2 Neoplasms 5
FREE STANDING FACILITIES	7	Developmentally Disabled	3 Endocrine/Metabolic 22
FACILITIES LICENSED FOR:		Drug Addiction	1 Blood Disorders 1
NURSING CARE BEDS ONLY	6	Medicaid Recipient	1 Nervous System Non Alzheimer 26
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0 Alzheimer Disease 97
DD CARE BEDS ONLY	1	Mental Illness	5 Mental Illness 16
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0 Developmental Disability 22
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0 Circulatory System 71
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	2 Respiratory System 19
NON-PROFIT OWNERSHIP	3	Under 65 Years Old	0 Digestive System 8
FOR PROFIT OWNERSHIP	4	Unable to Self-Medicare	0 Genitourinary System Disorders 22
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	6 Skin Disorders 3
		Infectious Disease w/ Isolation	1 Musculo-skeletal Disorders 22
		Other Restrictions	2 Injuries and Poisonings 6
		No Restrictions	0 Other Medical Conditions 17
		<i>Note: Reported restrictions denoted by 'I'</i>	Non-Medical Conditions 8
			TOTALS 365
			Total Residents Diagnosed as Mentally Ill 76

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	486	474	381	474	349	137	276	377	366	Total Admissions 2010 400
Skilled Under 22	0	0	0	0	0	0		0	401	Total Discharges 2010 401
Intermediate DD	16	16	16	16	16	0		16	365	Residents on 12/31/2010 365
Sheltered Care	0	0	0	0	0	0			Identified Offenders 4	
TOTAL BEDS	502	490	397	490	365	137	276	393		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	12,035	11.9%	60,970	44.3%	299	345	53,562	0	127,211	71.7%	73.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	12,035	11.9%	66,810	46.6%	299	345	53,562	0	133,051	72.6%	74.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	3	0	0	4	0	0	0	6	3	9
45 to 59	10	4	0	0	3	6	0	0	13	10	23
60 to 64	10	7	0	0	0	2	0	0	10	9	19
65 to 74	16	18	0	0	1	0	0	0	17	18	35
75 to 84	35	72	0	0	0	0	0	0	35	72	107
85+	31	141	0	0	0	0	0	0	31	141	172
TOTALS	104	245	0	0	8	8	0	0	112	253	365

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	27	182	0	2	138	0	349
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	27	198	0	2	138	0	365

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	160	152
Skilled Under 22	0	0
Intermediate DD	134	134
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	0	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	348	0	16	0	364
Race Unknown	0	0	0	0	0
Total	349	0	16	0	365

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	3	0	0	0	3
Non-Hispanic	346	0	16	0	362
Ethnicity Unknown	0	0	0	0	0
Total	349	0	16	0	365

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	5.00
Physicians	0.10
Director of Nursing	7.00
Registered Nurses	24.72
LPN's	57.86
Certified Aides	148.49
Other Health Staff	7.98
Non-Health Staff	156.84
Totals	407.99

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
24.5%	32.1%	0.8%	1.2%	41.4%	100.0%		0.0%
5,573,964	7,301,768	172,307	266,918	9,398,525	22,713,483	976	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	5
HOSPITAL BASED UNITS	0	Chronic Alcoholism	5
FREE STANDING FACILITIES	7	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	6
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	3
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	4	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	3	Ventilator Dependent	7
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	11
		Endocrine/Metabolic	34
		Blood Disorders	5
		Nervous System Non Alzheimer	35
		Alzheimer Disease	52
		Mental Illness	16
		Developmental Disability	1
		Circulatory System	121
		Respiratory System	26
		Digestive System	15
		Genitourinary System Disorders	15
		Skin Disorders	4
		Musculo-skeletal Disorders	91
		Injuries and Poisonings	22
		Other Medical Conditions	33
		Non-Medical Conditions	0
		TOTALS	481
		Total Residents Diagnosed as Mentally Ill	101

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	541	541	453	540	413	128	170	488	Total Admissions 2010	601
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	612
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	481
Sheltered Care	173	165	85	165	68	105			Identified Offenders	1
TOTAL BEDS	714	706	538	705	481	233	170	488		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	18,233	29.4%	74,683	41.9%	1,790	2,270	54,039	0	151,015	76.5%	76.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	24,060	0	24,060	38.1%	40.0%
TOTALS	18,233	29.4%	74,683	41.9%	1,790	2,270	78,099	0	175,075	67.2%	67.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	0	0	0	0	1	0	1
45 to 59	5	7	0	0	0	0	0	1	5	8	13
60 to 64	3	8	0	0	0	0	0	0	3	8	11
65 to 74	17	29	0	0	0	0	0	3	17	32	49
75 to 84	31	74	0	0	0	0	1	13	32	87	119
85+	59	179	0	0	0	0	18	32	77	211	288
TOTALS	116	297	0	0	0	0	19	49	135	346	481

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	48	197	3	5	160	0	413
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	68	0	68
TOTALS	48	197	3	5	228	0	481

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	182	158
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	90	64

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	0	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	411	0	0	68	479
Race Unknown	1	0	0	0	1
Total	413	0	0	68	481

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	2	0	0	0	2
Non-Hispanic	411	0	0	68	479
Ethnicity Unknown	0	0	0	0	0
Total	413	0	0	68	481

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	7.00
Physicians	0.00
Director of Nursing	7.00
Registered Nurses	30.12
LPN's	52.81
Certified Aides	208.36
Other Health Staff	5.50
Non-Health Staff	227.72
Totals	538.51

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
28.0%	28.5%	0.6%	2.3%	40.6%	100.0%		0.0%
8,453,616	8,598,244	168,982	697,294	12,234,152	30,152,290	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	11	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	1	Chronic Alcoholism	7
FREE STANDING FACILITIES	10	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	7
NURSING CARE BEDS ONLY	10	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	6
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	2
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	8	Ventilator Dependent	10
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	4	Other Restrictions	1
	1	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	21
		Endocrine/Metabolic	33
		Blood Disorders	2
		Nervous System Non Alzheimer	62
		Alzheimer Disease	147
		Mental Illness	10
		Developmental Disability	3
		Circulatory System	135
		Respiratory System	72
		Digestive System	8
		Genitourinary System Disorders	18
		Skin Disorders	16
		Musculo-skeletal Disorders	62
		Injuries and Poisonings	75
		Other Medical Conditions	143
		Non-Medical Conditions	0
		TOTALS	807
		Total Residents Diagnosed as Mentally Ill	23

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,112	1,058	922	1,051	807	305	783	942	830	
Skilled Under 22	0	0	0	0	0	0		0	1,622	
Intermediate DD	0	0	0	0	0	0		0	1,645	
Sheltered Care	29	4	0	4	0	29			807	
TOTAL BEDS	1,141	1,062	922	1,055	807	334	783	942	Identified Offenders	9

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	37,407	13.1%	153,598	44.7%	702	10,526	103,447	34	305,714	75.3%	79.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	37,407	13.1%	153,598	44.7%	702	10,526	103,447	34	305,714	73.4%	78.9%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	2	0	0	0	0	0	0	1	2	3
45 to 59	14	13	0	0	0	0	0	0	14	13	27
60 to 64	14	16	0	0	0	0	0	0	14	16	30
65 to 74	37	57	0	0	0	0	0	0	37	57	94
75 to 84	65	169	0	0	0	0	0	0	65	169	234
85+	101	318	0	0	0	0	0	0	101	318	419
TOTALS	232	575	0	0	0	0	0	0	232	575	807

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	93	422	1	11	280	0	807
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	93	422	1	11	280	0	807

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	211	192
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	115	109

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	1	0	0	0	1
Black	28	0	0	0	28
Hawaiian/Pac. Isl.	0	0	0	0	0
White	778	0	0	0	778
Race Unknown	0	0	0	0	0
Total	807	0	0	0	807

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	770	0	0	0	770
Ethnicity Unknown	36	0	0	0	36
Total	807	0	0	0	807

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	10.25
Physicians	0.05
Director of Nursing	10.50
Registered Nurses	85.20
LPN's	107.60
Certified Aides	355.30
Other Health Staff	43.60
Non-Health Staff	308.40
Totals	920.90

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
30.5%	29.9%	0.2%	4.3%	35.1%	100.0%		0.0%
17,836,931	17,523,551	112,932	2,546,580	20,553,057	58,573,055	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	20	Aggressive/Anti-Social	6
HOSPITAL BASED UNITS	2	Chronic Alcoholism	9
FREE STANDING FACILITIES	18	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	12
NURSING CARE BEDS ONLY	11	Medicaid Recipient	2
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	4
DD CARE BEDS ONLY	8	Mental Illness	6
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	6
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	7
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	5	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	15	Unable to Self-Medicare	6
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	20
	2	Infectious Disease w/ Isolation	8
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	23
		Endocrine/Metabolic	51
		Blood Disorders	8
		Nervous System Non Alzheimer	54
		Alzheimer Disease	43
		Mental Illness	202
		Developmental Disability	97
		Circulatory System	261
		Respiratory System	58
		Digestive System	21
		Genitourinary System Disorders	28
		Skin Disorders	10
		Musculo-skeletal Disorders	60
		Injuries and Poisonings	39
		Other Medical Conditions	180
		Non-Medical Conditions	0
		TOTALS	1,135
Total Residents Diagnosed as Mentally Ill			377

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,245	1,201	1,126	1,197	1,039	206	849	1030	1,158	
Skilled Under 22	0	0	0	0	0	0		0	2,394	
Intermediate DD	95	94	94	94	93	2		95	2,417	
Sheltered Care	20	20	3	20	3	17			1,135	
TOTAL BEDS	1,360	1,315	1,223	1,311	1,135	225	849	1125		Identified Offenders 34

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	62,652	20.2%	226,758	60.3%	1,905	4,270	89,632	51	385,268	84.8%	87.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			33,617	96.9%	0	0	365	0	33,982	98.0%	99.0%
Sheltered Care					0	0	1,095	0	1,095	15.0%	15.0%
TOTALS	62,652	20.2%	260,375	63.4%	1,905	4,270	91,092	51	420,345	84.7%	87.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	28	11	0	0	23	18	0	0	51	29	80
45 to 59	53	50	0	0	15	15	0	0	68	65	133
60 to 64	20	18	0	0	7	6	0	1	27	25	52
65 to 74	52	52	0	0	5	4	0	0	57	56	113
75 to 84	79	208	0	0	0	0	0	0	79	208	287
85+	71	397	0	0	0	0	0	2	71	399	470
TOTALS	303	736	0	0	50	43	0	3	353	782	1,135

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	145	624	1	20	249	0	1,039
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		92	0	0	1	0	93
Sheltered Care			0	0	3	0	3
TOTALS	145	716	1	20	253	0	1,135

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	174	146
Skilled Under 22	0	0
Intermediate DD	183	139
Shelter	100	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	88	0	9	0	97
Hawaiian/Pac. Isl.	1	0	0	0	1
White	949	0	84	3	1,036
Race Unknown	1	0	0	0	1
Total	1,039	0	93	3	1,135
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	2	0	0	0	2
Non-Hispanic	1,036	0	93	3	1,132
Ethnicity Unknown	1	0	0	0	1
Total	1,039	0	93	3	1,135

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	14.34
Physicians	1.00
Director of Nursing	11.00
Registered Nurses	73.66
LPN's	129.02
Certified Aides	448.07
Other Health Staff	65.18
Non-Health Staff	309.34
Totals	1051.59

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
31.1%	40.9%	0.7%	2.1%	25.3%	100.0%	0	0.0%
22,275,662	29,309,107	476,562	1,477,298	18,110,810	71,649,443		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	6	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	6	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	1
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	2
		Non-Mobile	2
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	2
FOR PROFIT OWNERSHIP	5	Ventilator Dependent	5
		Infectious Disease w/ Isolation	2
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	4
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	1
		Endocrine/Metabolic	18
		Blood Disorders	1
		Nervous System Non Alzheimer	16
		Alzheimer Disease	26
		Mental Illness	32
		Developmental Disability	30
		Circulatory System	60
		Respiratory System	23
		Digestive System	2
		Genitourinary System Disorders	12
		Skin Disorders	3
		Musculo-skeletal Disorders	15
		Injuries and Poisonings	3
		Other Medical Conditions	46
		Non-Medical Conditions	0
		TOTALS	288
		Total Residents Diagnosed as Mentally Ill	80

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	369	327	275	327	248	121	256	319	Total Admissions 2010	263
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	259
Intermediate DD	32	32	30	32	29	3		32	Residents on 12/31/2010	288
Sheltered Care	48	22	13	22	11	37			Identified Offenders	1
TOTAL BEDS	449	381	318	381	288	161	256	351		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	9,673	10.4%	46,053	39.6%	199	995	35,351	0	92,271	68.5%	77.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			10,903	93.3%	0	0	0	0	10,903	93.3%	93.3%
Sheltered Care					0	0	4,311	0	4,311	24.6%	53.7%
TOTALS	9,673	10.4%	56,956	44.5%	199	995	39,662	0	107,485	65.6%	77.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	4	0	0	9	7	0	0	9	11	20
45 to 59	3	10	0	0	1	9	1	0	5	19	24
60 to 64	2	8	0	0	0	0	1	0	3	8	11
65 to 74	11	17	0	0	1	2	1	1	13	20	33
75 to 84	21	31	0	0	0	0	0	1	21	32	53
85+	23	118	0	0	0	0	1	5	24	123	147
TOTALS	60	188	0	0	11	18	4	7	75	213	288

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	17	136	0	0	95	0	248
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		29	0	0	0	0	29
Sheltered Care			0	0	11	0	11
TOTALS	17	165	0	0	106	0	288

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	151	129
Skilled Under 22	0	0
Intermediate DD	121	124
Shelter	94	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	4	0	1	0	5
Hawaiian/Pac. Isl.	1	0	0	0	1
White	243	0	28	11	282
Race Unknown	0	0	0	0	0
Total	248	0	29	11	288

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	247	0	29	11	287
Ethnicity Unknown	0	0	0	0	0
Total	248	0	29	11	288

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	5.25
Physicians	0.00
Director of Nursing	4.00
Registered Nurses	11.25
LPN's	33.25
Certified Aides	106.50
Other Health Staff	20.00
Non-Health Staff	60.25
Totals	240.50

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
21.6%	34.0%	0.0%	3.9%	40.4%	100.0%	0	0.0%
3,595,906	5,662,931	4,722	657,301	6,722,654	16,643,514		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	0
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	3	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	0
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	3
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	6
		Blood Disorders	2
		Nervous System Non Alzheimer	9
		Alzheimer Disease	33
		Mental Illness	1
		Developmental Disability	24
		Circulatory System	40
		Respiratory System	8
		Digestive System	1
		Genitourinary System Disorders	5
		Skin Disorders	1
		Musculo-skeletal Disorders	7
		Injuries and Poisonings	7
		Other Medical Conditions	3
		Non-Medical Conditions	0
		TOTALS	150
		Total Residents Diagnosed as Mentally Ill	14

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	160	160	146	160	135	25	108	160	Total Admissions 2010	106
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	101
Intermediate DD	16	16	16	16	15	1		16	Residents on 12/31/2010	150
Sheltered Care	0	0	0	0	0	0			Identified Offenders	1
TOTAL BEDS	176	176	162	176	150	26	108	176		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	3,082	7.8%	26,103	44.7%	54	38	20,674	0	49,951	85.5%	85.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,793	99.2%	0	0	0	0	5,793	99.2%	99.2%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,082	7.8%	31,896	49.7%	54	38	20,674	0	55,744	86.8%	86.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	0	0	0	0	5	0	0	2	5	7
45 to 59	2	2	0	0	6	1	0	0	8	3	11
60 to 64	0	3	0	0	1	0	0	0	1	3	4
65 to 74	4	7	0	0	0	1	0	0	4	8	12
75 to 84	8	23	0	0	1	0	0	0	9	23	32
85+	16	68	0	0	0	0	0	0	16	68	84
TOTALS	32	103	0	0	8	7	0	0	40	110	150

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	10	71	0	0	54	0	135
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	10	86	0	0	54	0	150

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	165	143
Skilled Under 22	0	0
Intermediate DD	138	138
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	1	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	135	0	14	0	149
Race Unknown	0	0	0	0	0
Total	135	0	15	0	150

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	135	0	15	0	150
Ethnicity Unknown	0	0	0	0	0
Total	135	0	15	0	150

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	10.00
LPN's	13.00
Certified Aides	55.00
Other Health Staff	0.00
Non-Health Staff	69.75
Totals	151.75

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
10.3%	45.8%	1.3%	1.2%	41.5%	100.0%		0.1%
746,867	3,329,579	92,674	85,097	3,012,390	7,266,608	5,795	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	4	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	1
FOR PROFIT OWNERSHIP	4	Ventilator Dependent	3
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	4
		Endocrine/Metabolic	8
		Blood Disorders	1
		Nervous System Non Alzheimer	12
		Alzheimer Disease	9
		Mental Illness	0
		Developmental Disability	16
		Circulatory System	39
		Respiratory System	19
		Digestive System	5
		Genitourinary System Disorders	2
		Skin Disorders	0
		Musculo-skeletal Disorders	4
		Injuries and Poisonings	7
		Other Medical Conditions	36
		Non-Medical Conditions	4
		TOTALS	166
		Total Residents Diagnosed as Mentally Ill	12

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010		
Nursing Care	265	238	188	238	150	115	127	255	194		
Skilled Under 22	0	0	0	0	0	0		0	212		
Intermediate DD	16	16	16	16	16	0		16	240		
Sheltered Care	0	0	0	0	0	0			166		
TOTAL BEDS	281	254	204	254	166	115	127	271		Identified Offenders	2

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	6,749	14.6%	33,788	36.3%	0	82	20,936	0	61,555	63.6%	70.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,819	99.6%	0	0	0	0	5,819	99.6%	99.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	6,749	14.6%	39,607	40.0%	0	82	20,936	0	67,374	65.7%	72.7%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	4	3	0	0	5	3	8
45 to 59	1	1	0	0	2	4	0	0	3	5	8
60 to 64	1	2	0	0	0	0	0	0	1	2	3
65 to 74	3	11	0	0	1	0	0	0	4	11	15
75 to 84	9	27	0	0	1	1	0	0	10	28	38
85+	22	72	0	0	0	0	0	0	22	72	94
TOTALS	37	113	0	0	8	8	0	0	45	121	166

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	16	93	0	0	41	0	150
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	16	109	0	0	41	0	166

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	151	129
Skilled Under 22	0	0
Intermediate DD	117	116
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	2	0	0	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	148	0	16	0	164
Race Unknown	0	0	0	0	0
Total	150	0	16	0	166

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	1	0	1
Non-Hispanic	150	0	15	0	165
Ethnicity Unknown	0	0	0	0	0
Total	150	0	16	0	166

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.50
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	8.30
LPN's	22.00
Certified Aides	74.00
Other Health Staff	5.00
Non-Health Staff	72.10
Totals	188.90

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
27.0%	38.4%	1.5%	0.0%	33.1%	100.0%		0.0%
2,923,831	4,167,070	161,045	368	3,591,925	10,844,239	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	004	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	0	Chronic Alcoholism	4
FREE STANDING FACILITIES	7	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	4
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	3
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	3	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	3	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	7
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	19
		Endocrine/Metabolic	49
		Blood Disorders	12
		Nervous System Non Alzheimer	41
		Alzheimer Disease	102
		Mental Illness	39
		Developmental Disability	19
		Circulatory System	159
		Respiratory System	39
		Digestive System	11
		Genitourinary System Disorders	17
		Skin Disorders	3
		Musculo-skeletal Disorders	66
		Injuries and Poisonings	3
		Other Medical Conditions	56
		Non-Medical Conditions	0
		TOTALS	635
		Total Residents Diagnosed as Mentally Ill	85

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	773	758	628	758	565	208	546	749	640	
Skilled Under 22	0	0	0	0	0	0		0	1,129	
Intermediate DD	16	16	16	16	15	1		16	1,134	
Sheltered Care	70	70	65	70	55	15			635	
TOTAL BEDS	859	844	709	844	635	224	546	765		Identified Offenders 14

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	28,389	14.2%	126,465	46.3%	886	1,761	51,144	0	208,645	73.9%	75.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,733	98.2%	0	0	0	0	5,733	98.2%	98.2%
Sheltered Care					0	0	19,462	0	19,462	76.2%	76.2%
TOTALS	28,389	14.2%	132,198	47.3%	886	1,761	70,606	0	233,840	74.6%	75.9%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	1	0	0	1	4	0	0	3	5	8
45 to 59	22	23	0	0	2	6	0	0	24	29	53
60 to 64	9	18	0	0	0	0	0	0	9	18	27
65 to 74	35	44	0	0	2	0	0	1	37	45	82
75 to 84	48	110	0	0	0	0	6	11	54	121	175
85+	43	210	0	0	0	0	0	37	43	247	290
TOTALS	159	406	0	0	5	10	6	49	170	465	635

HEALTH SERVICE AREA

004

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	72	341	11	8	133	0	565
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	55	0	55
TOTALS	72	356	11	8	188	0	635

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	164	139
Skilled Under 22	0	0
Intermediate DD	0	113
Shelter	120	105

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	51	0	3	0	54
Hawaiian/Pac. Isl.	0	0	0	0	0
White	478	0	12	55	545
Race Unknown	36	0	0	0	36
Total	565	0	15	55	635

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	453	0	15	55	523
Ethnicity Unknown	111	0	0	0	111
Total	565	0	15	55	635

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	6.25
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	65.00
LPN's	59.00
Certified Aides	272.00
Other Health Staff	35.00
Non-Health Staff	203.00
Totals	646.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
29.6%	36.4%	0.7%	1.9%	31.4%	100.0%		0.0%
9,696,724	11,922,415	222,051	611,725	10,266,181	32,719,097	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	2	Aggressive/Anti-Social	0
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	2	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	1	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	1
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	1	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	2
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	1
		Endocrine/Metabolic	6
		Blood Disorders	0
		Nervous System Non Alzheimer	5
		Alzheimer Disease	19
		Mental Illness	2
		Developmental Disability	16
		Circulatory System	17
		Respiratory System	7
		Digestive System	1
		Genitourinary System Disorders	7
		Skin Disorders	0
		Musculo-skeletal Disorders	3
		Injuries and Poisonings	2
		Other Medical Conditions	3
		Non-Medical Conditions	1
		TOTALS	90
		Total Residents Diagnosed as Mentally Ill	22

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	Total Admissions 2010	Total Discharges 2010
Nursing Care	83	83	75	83	75	8	83	83	83	65	58
Skilled Under 22	0	0	0	0	0	0		0		90	
Intermediate DD	16	16	16	16	15	1		16			
Sheltered Care	0	0	0	0	0	0					
TOTAL BEDS	99	99	91	99	90	9	83	99			Identified Offenders 1

LEVEL OF CARE	FACILITY UTILIZATION - 2010										TOTAL	Licensed Beds	Peak Beds Set Up
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE												
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	Pat. days	Occ. Pct.			
Nursing Care	1,587	5.2%	20,902	69.0%	0	0	2,910	0	25,399	83.8%	83.8%		
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%		
Intermediate DD			5,558	95.2%	0	0	0	0	5,558	95.2%	95.2%		
Sheltered Care					0	0	0	0	0	0.0%	0.0%		
TOTALS	1,587	5.2%	26,460	73.2%	0	0	2,910	0	30,957	85.7%	85.7%		

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	2	5	0	0	2	5	7
45 to 59	1	2	0	0	3	3	0	0	4	5	9
60 to 64	5	2	0	0	1	0	0	0	6	2	8
65 to 74	10	8	0	0	0	0	0	0	10	8	18
75 to 84	3	13	0	0	1	0	0	0	4	13	17
85+	2	29	0	0	0	0	0	0	2	29	31
TOTALS	21	54	0	0	7	8	0	0	28	62	90

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	6	64	0	1	4	0	75
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	6	79	0	1	4	0	90

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	180	110
Skilled Under 22	0	0
Intermediate DD	108	98
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	29	0	9	0	38
Hawaiian/Pac. Isl.	0	0	0	0	0
White	46	0	6	0	52
Race Unknown	0	0	0	0	0
Total	75	0	15	0	90

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	75	0	15	0	90
Ethnicity Unknown	0	0	0	0	0
Total	75	0	15	0	90

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	1.50
Physicians	0.00
Director of Nursing	1.00
Registered Nurses	5.50
LPN's	6.00
Certified Aides	36.00
Other Health Staff	10.00
Non-Health Staff	27.00
Totals	87.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
39.0%	51.1%	2.2%	7.4%	0.2%	100.0%		0.0%
1,472,009	1,924,595	84,584	279,999	8,806	3,769,993	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	3	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	1	Ventilator Dependent	3
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	2
		Endocrine/Metabolic	6
		Blood Disorders	0
		Nervous System Non Alzheimer	9
		Alzheimer Disease	22
		Mental Illness	15
		Developmental Disability	16
		Circulatory System	27
		Respiratory System	5
		Digestive System	3
		Genitourinary System Disorders	6
		Skin Disorders	2
		Musculo-skeletal Disorders	5
		Injuries and Poisonings	4
		Other Medical Conditions	8
		Non-Medical Conditions	0
		TOTALS	130
		Total Residents Diagnosed as Mentally Ill	34

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	198	187	140	187	115	83	142	198	Total Admissions 2010	138
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	159
Intermediate DD	16	16	16	16	15	1		16	Residents on 12/31/2010	130
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	214	203	156	203	130	84	142	214		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	3,691	7.1%	22,527	31.2%	277	34	16,067	0	42,596	58.9%	62.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,475	93.8%	0	0	0	0	5,475	93.8%	93.8%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,691	7.1%	28,002	35.8%	277	34	16,067	0	48,071	61.5%	64.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	5	3	0	0	5	3	8
45 to 59	4	6	0	0	3	3	0	0	7	9	16
60 to 64	4	5	0	0	0	0	0	0	4	5	9
65 to 74	6	6	0	0	0	0	0	0	6	6	12
75 to 84	10	12	0	0	1	0	0	0	11	12	23
85+	16	46	0	0	0	0	0	0	16	46	62
TOTALS	40	75	0	0	9	6	0	0	49	81	130

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	12	26	32	0	45	0	115
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	12	41	32	0	45	0	130

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	147	116
Skilled Under 22	0	0
Intermediate DD	0	118
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	5	0	0	0	5
Hawaiian/Pac. Isl.	0	0	0	0	0
White	110	0	15	0	125
Race Unknown	0	0	0	0	0
Total	115	0	15	0	130

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	115	0	15	0	130
Ethnicity Unknown	0	0	0	0	0
Total	115	0	15	0	130

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.25
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	4.73
LPN's	16.69
Certified Aides	58.12
Other Health Staff	2.08
Non-Health Staff	25.53
Totals	111.40

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
24.7%	42.7%	0.4%	0.3%	31.9%	100.0%	0	0.0%
1,614,712	2,793,410	28,104	21,575	2,087,621	6,545,422		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	1
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	4	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	1	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	3	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	4
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	3
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		TOTALS	159
		Total Residents Diagnosed as Mentally III	19

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	209	198	130	198	130	79	88	209	Total Admissions 2010	161
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	152
Intermediate DD	32	32	31	32	29	3		32	Residents on 12/31/2010	159
Sheltered Care	0	0	0	0	0	0			Identified Offenders	4
TOTAL BEDS	241	230	161	230	159	82	88	241		

FACILITY UTILIZATION - 2010												
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE												
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds	
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds	Set Up
Nursing Care	5,668	17.6%	32,585	42.7%	0	254	4,917	0	43,424	56.9%	60.1%	
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%	
Intermediate DD			10,081	86.3%	0	0	0	0	10,081	86.3%	86.3%	
Sheltered Care					0	0	0	0	0	0.0%	0.0%	
TOTALS	5,668	17.6%	42,666	48.5%	0	254	4,917	0	53,505	60.8%	63.7%	

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	3	0	0	7	0	0	0	8	3	11
45 to 59	6	5	0	0	5	7	0	0	11	12	23
60 to 64	3	5	0	0	2	3	0	0	5	8	13
65 to 74	8	13	0	0	1	3	0	0	9	16	25
75 to 84	9	28	0	0	0	1	0	0	9	29	38
85+	8	41	0	0	0	0	0	0	8	41	49
TOTALS	35	95	0	0	15	14	0	0	50	109	159

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	17	97	0	1	15	0	130
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	13	0	29
Sheltered Care			0	0	0	0	0
TOTALS	17	113	0	1	28	0	159

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	130	113
Skilled Under 22	0	0
Intermediate DD	0	117
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	1	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	129	0	28	0	157
Race Unknown	0	0	0	0	0
Total	130	0	29	0	159

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	130	0	29	0	159
Ethnicity Unknown	0	0	0	0	0
Total	130	0	29	0	159

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.30
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	15.60
LPN's	12.50
Certified Aides	53.20
Other Health Staff	15.00
Non-Health Staff	33.75
Totals	136.35

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
24.3%	65.9%	2.2%	1.0%	6.7%	100.0%	0	0.0%
1,415,658	3,844,641	127,043	57,416	391,001	5,835,759		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	5	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	1	Chronic Alcoholism	2
FREE STANDING FACILITIES	4	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	5
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	4	Ventilator Dependent	3
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	2
		Endocrine/Metabolic	12
		Blood Disorders	1
		Nervous System Non Alzheimer	14
		Alzheimer Disease	21
		Mental Illness	7
		Developmental Disability	17
		Circulatory System	60
		Respiratory System	8
		Digestive System	2
		Genitourinary System Disorders	3
		Skin Disorders	2
		Musculo-skeletal Disorders	4
		Injuries and Poisonings	3
		Other Medical Conditions	7
		Non-Medical Conditions	0
		TOTALS	163
		Total Residents Diagnosed as Mentally Ill	47

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	215	198	172	198	147	68	69	177	Total Admissions 2010	139
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	150
Intermediate DD	16	16	16	16	16	0		16	Residents on 12/31/2010	163
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	231	214	188	214	163	68	69	193		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	4,515	17.9%	26,803	41.5%	0	1,441	25,248	0	58,007	73.9%	80.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,515	17.9%	32,643	46.3%	0	1,441	25,248	0	63,847	75.7%	81.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	5	4	0	0	5	4	9
45 to 59	0	2	0	0	4	2	0	0	4	4	8
60 to 64	0	0	0	0	0	0	0	0	0	0	0
65 to 74	5	10	0	0	0	1	0	0	5	11	16
75 to 84	13	30	0	0	0	0	0	0	13	30	43
85+	13	74	0	0	0	0	0	0	13	74	87
TOTALS	31	116	0	0	9	7	0	0	40	123	163

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	9	65	0	4	69	0	147
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	9	81	0	4	69	0	163

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	132	121
Skilled Under 22	0	0
Intermediate DD	133	133
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	3	0	3
Hawaiian/Pac. Isl.	0	0	0	0	0
White	147	0	13	0	160
Race Unknown	0	0	0	0	0
Total	147	0	16	0	163

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	1	0	1
Non-Hispanic	147	0	15	0	162
Ethnicity Unknown	0	0	0	0	0
Total	147	0	16	0	163

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.00
Physicians	1.00
Director of Nursing	4.00
Registered Nurses	17.98
LPN's	10.18
Certified Aides	71.67
Other Health Staff	8.50
Non-Health Staff	76.55
Totals	192.88

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
23.7%	36.5%	1.3%	2.0%	36.5%	100.0%	0	0.0%
1,947,492	3,002,078	102,906	163,322	3,003,430	8,219,231		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	3	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	1	Ventilator Dependent	3
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	4
		Endocrine/Metabolic	23
		Blood Disorders	0
		Nervous System Non Alzheimer	3
		Alzheimer Disease	35
		Mental Illness	0
		Developmental Disability	8
		Circulatory System	23
		Respiratory System	4
		Digestive System	0
		Genitourinary System Disorders	1
		Skin Disorders	0
		Musculo-skeletal Disorders	21
		Injuries and Poisonings	0
		Other Medical Conditions	0
		Non-Medical Conditions	0
		TOTALS	122
		Total Residents Diagnosed as Mentally Ill	4

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	139	126	122	126	114	25	90	124	Total Admissions 2010	105
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	104
Intermediate DD	16	16	16	8	8	8		16	Residents on 12/31/2010	122
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	155	142	138	134	122	33	90	140		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	4,564	13.9%	21,966	48.5%	0	115	13,811	300	40,756	80.3%	88.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			3,211	55.0%	0	0	0	0	3,211	55.0%	55.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,564	13.9%	25,177	49.3%	0	115	13,811	300	43,967	77.7%	84.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	1	1	0	0	1	1	2
45 to 59	1	0	0	0	1	1	0	0	2	1	3
60 to 64	0	0	0	0	0	2	0	0	0	2	2
65 to 74	1	3	0	0	1	0	0	0	2	3	5
75 to 84	8	20	0	0	1	0	0	0	9	20	29
85+	13	68	0	0	0	0	0	0	13	68	81
TOTALS	23	91	0	0	4	4	0	0	27	95	122

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	13	66	0	0	35	0	114
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		8	0	0	0	0	8
Sheltered Care			0	0	0	0	0
TOTALS	13	74	0	0	35	0	122

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	145	128
Skilled Under 22	0	0
Intermediate DD	0	131
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	2	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	114	0	6	0	120
Race Unknown	0	0	0	0	0
Total	114	0	8	0	122

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	114	0	8	0	122
Ethnicity Unknown	0	0	0	0	0
Total	114	0	8	0	122

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	12.00
LPN's	12.00
Certified Aides	51.50
Other Health Staff	4.00
Non-Health Staff	48.00
Totals	132.50

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
33.1%	37.3%	0.0%	0.0%	29.6%	100.0%		0.6%
2,351,326	2,644,018	0	0	2,102,588	7,097,932	40,546	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	8	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	1	Chronic Alcoholism	4
FREE STANDING FACILITIES	7	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	5
NURSING CARE BEDS ONLY	5	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	2
DD CARE BEDS ONLY	3	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	5	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	3	Ventilator Dependent	8
		Infectious Disease w/ Isolation	3
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	1
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	4
		Endocrine/Metabolic	21
		Blood Disorders	13
		Nervous System Non Alzheimer	32
		Alzheimer Disease	37
		Mental Illness	41
		Developmental Disability	48
		Circulatory System	55
		Respiratory System	31
		Digestive System	15
		Genitourinary System Disorders	24
		Skin Disorders	6
		Musculo-skeletal Disorders	31
		Injuries and Poisonings	26
		Other Medical Conditions	6
		Non-Medical Conditions	0
		TOTALS	390
Total Residents Diagnosed as Mentally Ill			118

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	432	401	376	401	344	88	385	418	366	
Skilled Under 22	0	0	0	0	0	0		0	1,024	
Intermediate DD	48	48	48	48	46	2		48	1,000	
Sheltered Care	0	0	0	0	0	0			390	
TOTAL BEDS	480	449	424	449	390	90	385	466	Identified Offenders	0

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Occ. Pct.
Nursing Care	22,723	16.2%	67,658	44.3%	570	479	35,957	0	127,387	80.8%	87.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			16,203	92.5%	0	365	0	0	16,568	94.6%	94.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	22,723	16.2%	83,861	49.3%	570	844	35,957	0	143,955	82.2%	87.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	14	11	0	0	15	11	26
45 to 59	5	7	0	0	10	6	0	0	15	13	28
60 to 64	2	8	0	0	1	1	0	0	3	9	12
65 to 74	15	28	0	0	1	1	0	0	16	29	45
75 to 84	41	84	0	0	0	0	0	0	41	84	125
85+	34	119	0	0	1	0	0	0	35	119	154
TOTALS	98	246	0	0	27	19	0	0	125	265	390

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	64	172	2	3	103	0	344
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		45	0	0	1	0	46
Sheltered Care			0	0	0	0	0
TOTALS	64	217	2	3	104	0	390

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	181	145
Skilled Under 22	0	0
Intermediate DD	113	108
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	1	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	342	0	45	0	387
Race Unknown	1	0	0	0	1
Total	344	0	46	0	390

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	141	0	46	0	187
Ethnicity Unknown	202	0	0	0	202
Total	344	0	46	0	390

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	7.15
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	26.50
LPN's	40.33
Certified Aides	174.00
Other Health Staff	19.50
Non-Health Staff	109.23
Totals	382.71

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
37.7%	36.9%	0.4%	0.9%	24.0%	100.0%	0	0.0%
8,271,050	8,105,350	96,024	204,403	5,267,730	21,944,559		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	1	Chronic Alcoholism	1
FREE STANDING FACILITIES	3	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	1
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	3	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	4
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	2
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	20
		Blood Disorders	1
		Nervous System Non Alzheimer	14
		Alzheimer Disease	32
		Mental Illness	19
		Developmental Disability	19
		Circulatory System	25
		Respiratory System	13
		Digestive System	0
		Genitourinary System Disorders	1
		Skin Disorders	0
		Musculo-skeletal Disorders	19
		Injuries and Poisonings	8
		Other Medical Conditions	2
		Non-Medical Conditions	0
		TOTALS	176
		Total Residents Diagnosed as Mentally Ill	77

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	261	252	180	251	160	101	186	236	Total Admissions 2010	264
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	267
Intermediate DD	16	16	16	16	16	0		16	Residents on 12/31/2010	176
Sheltered Care	0	0	0	0	0	0			Identified Offenders	2
TOTAL BEDS	277	268	196	267	176	101	186	252		

FACILITY UTILIZATION - 2010												
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE												
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds	
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds	Set Up
Nursing Care	4,707	6.9%	37,050	43.0%	0	72	16,067	0	57,896	60.8%	62.9%	
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%	
Intermediate DD			5,840	100.0%	0	0	0	0	5,840	100.0%	100.0%	
Sheltered Care					0	0	0	0	0	0.0%	0.0%	
TOTALS	4,707	6.9%	42,890	46.6%	0	72	16,067	0	63,736	63.0%	65.2%	

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010												
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	2	0	0	0	4	1	0	0	6	1	7	
45 to 59	5	6	0	0	2	3	0	0	7	9	16	
60 to 64	4	2	0	0	1	0	0	0	5	2	7	
65 to 74	6	17	0	0	1	2	0	0	7	19	26	
75 to 84	12	34	0	0	0	2	0	0	12	36	48	
85+	17	55	0	0	0	0	0	0	17	55	72	
TOTALS	46	114	0	0	8	8	0	0	54	122	176	

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	9	107	0	4	40	0	160
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		16	0	0	0	0	16
Sheltered Care			0	0	0	0	0
TOTALS	9	123	0	4	40	0	176

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	148	129
Skilled Under 22	0	0
Intermediate DD	111	110
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	2	0	3	0	5
Hawaiian/Pac. Isl.	0	0	0	0	0
White	158	0	0	0	158
Race Unknown	0	0	13	0	13
Total	160	0	16	0	176

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	160	0	16	0	176
Ethnicity Unknown	0	0	0	0	0
Total	160	0	16	0	176

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.50
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	10.65
LPN's	22.00
Certified Aides	71.73
Other Health Staff	11.00
Non-Health Staff	36.50
Totals	158.38

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
30.2%	53.3%	1.0%	0.4%	15.1%	100.0%		0.0%
1,752,960	3,099,288	57,378	22,290	878,449	5,810,365	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	7	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	7	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	6
		Infectious Disease w/ Isolation	1
		Other Restrictions	2
		No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	6
		Endocrine/Metabolic	45
		Blood Disorders	5
		Nervous System Non Alzheimer	10
		Alzheimer Disease	53
		Mental Illness	18
		Developmental Disability	58
		Circulatory System	41
		Respiratory System	29
		Digestive System	5
		Genitourinary System Disorders	7
		Skin Disorders	3
		Musculo-skeletal Disorders	12
		Injuries and Poisonings	12
		Other Medical Conditions	15
		Non-Medical Conditions	0
		TOTALS	319
		Total Residents Diagnosed as Mentally Ill	33

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	390	369	296	359	262	128	171	372	334	
Skilled Under 22	0	0	0	0	0	0		0	421	
Intermediate DD	65	65	62	65	57	8		65	436	
Sheltered Care	0	0	0	0	0	0			319	
TOTAL BEDS	455	434	358	424	319	136	171	437	Identified Offenders	1

LEVEL OF CARE	FACILITY UTILIZATION - 2010											
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE									TOTAL	Licensed Beds	Peak Beds Set Up
	Medicare Pat. days	Medicare Occ. Pct.	Medicaid Pat. days	Medicaid Occ. Pct.	Other Public Pay Pat. days	Private Insurance Pat. days	Private Pay Pat. days	Charity Care Pat. days	Pat. days			
Nursing Care	13,196	21.1%	58,498	43.1%	1,275	288	24,888	0	98,145	68.9%	72.9%	
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%	
Intermediate DD			21,685	91.4%	0	83	0	0	21,768	91.8%	91.8%	
Sheltered Care					0	0	0	0	0	0.0%	0.0%	
TOTALS	13,196	21.1%	80,183	50.3%	1,275	371	24,888	0	119,913	72.2%	75.7%	

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	2	0	0	6	0	0	0	7	2	9
45 to 59	9	6	0	0	13	15	0	0	22	21	43
60 to 64	7	5	0	0	8	3	0	0	15	8	23
65 to 74	13	25	0	0	5	5	0	0	18	30	48
75 to 84	28	63	0	0	1	1	0	0	29	64	93
85+	19	84	0	0	0	0	0	0	19	84	103
TOTALS	77	185	0	0	33	24	0	0	110	209	319

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	35	154	2	0	71	0	262
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		57	0	0	0	0	57
Sheltered Care			0	0	0	0	0
TOTALS	35	211	2	0	71	0	319

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	105	97
Skilled Under 22	0	0
Intermediate DD	111	111
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	3	0	4
Hawaiian/Pac. Isl.	0	0	0	0	0
White	261	0	54	0	315
Race Unknown	0	0	0	0	0
Total	262	0	57	0	319

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	2	0	2
Non-Hispanic	262	0	55	0	317
Ethnicity Unknown	0	0	0	0	0
Total	262	0	57	0	319

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	7.00
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	16.25
LPN's	43.00
Certified Aides	129.00
Other Health Staff	21.00
Non-Health Staff	106.00
Totals	328.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
35.0%	45.2%	2.8%	1.0%	16.0%	100.0%	0	0.0%
5,752,922	7,429,836	462,917	159,725	2,629,433	16,434,834		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	13	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	1	Chronic Alcoholism	2
FREE STANDING FACILITIES	12	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	5
NURSING CARE BEDS ONLY	8	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	5	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	2
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	12	Ventilator Dependent	12
		Infectious Disease w/ Isolation	5
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	3
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	12
		Endocrine/Metabolic	52
		Blood Disorders	7
		Nervous System Non Alzheimer	36
		Alzheimer Disease	131
		Mental Illness	53
		Developmental Disability	90
		Circulatory System	92
		Respiratory System	26
		Digestive System	8
		Genitourinary System Disorders	11
		Skin Disorders	4
		Musculo-skeletal Disorders	24
		Injuries and Poisonings	4
		Other Medical Conditions	28
		Non-Medical Conditions	0
		TOTALS	578
		Total Residents Diagnosed as Mentally Ill	171

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	667	653	547	497	488	179	337	667	587	
Skilled Under 22	0	0	0	0	0	0		0	477	
Intermediate DD	99	99	92	91	90	9		99	486	
Sheltered Care	0	0	0	0	0	0			578	
TOTAL BEDS	766	752	639	588	578	188	337	766		Identified Offenders 9

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	17,890	14.5%	114,522	47.0%	754	882	46,674	0	180,722	74.2%	75.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			32,219	89.2%	0	0	0	0	32,219	89.2%	89.2%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	17,890	14.5%	146,741	52.5%	754	882	46,674	0	212,941	76.2%	77.6%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	2	2	0	0	20	10	0	0	22	12	34
45 to 59	11	14	0	0	14	17	0	0	25	31	56
60 to 64	7	14	0	0	9	5	0	0	16	19	35
65 to 74	27	44	0	0	4	7	0	0	31	51	82
75 to 84	38	95	0	0	1	2	0	0	39	97	136
85+	43	191	0	0	1	0	0	0	44	191	235
TOTALS	128	360	0	0	49	41	0	0	177	401	578

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	60	299	1	2	126	0	488
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		90	0	0	0	0	90
Sheltered Care			0	0	0	0	0
TOTALS	60	389	1	2	126	0	578

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	104	99
Skilled Under 22	0	0
Intermediate DD	125	127
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	2	0	0	0	2
Black	7	0	13	0	20
Hawaiian/Pac. Isl.	1	0	0	0	1
White	478	0	77	0	555
Race Unknown	0	0	0	0	0
Total	488	0	90	0	578

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	3	0	3
Non-Hispanic	488	0	87	0	575
Ethnicity Unknown	0	0	0	0	0
Total	488	0	90	0	578

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	11.50
Physicians	0.00
Director of Nursing	9.00
Registered Nurses	32.40
LPN's	70.50
Certified Aides	251.00
Other Health Staff	9.00
Non-Health Staff	215.50
Totals	598.90

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
26.6%	46.7%	4.2%	3.5%	19.1%	100.0%		0.0%
6,168,405	10,831,447	965,714	804,879	4,434,780	23,205,230	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	2
FREE STANDING FACILITIES	3	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	3	Ventilator Dependent	3
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	2
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	6
		Blood Disorders	2
		Nervous System Non Alzheimer	5
		Alzheimer Disease	2
		Mental Illness	13
		Developmental Disability	12
		Circulatory System	18
		Respiratory System	7
		Digestive System	2
		Genitourinary System Disorders	3
		Skin Disorders	5
		Musculo-skeletal Disorders	2
		Injuries and Poisonings	2
		Other Medical Conditions	5
		Non-Medical Conditions	0
		TOTALS	87
		Total Residents Diagnosed as Mentally Ill	18

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	109	109	94	109	75	34	75	109	Total Admissions 2010	87
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	65
Intermediate DD	16	16	12	16	12	4		16	Residents on 12/31/2010	65
Sheltered Care	0	0	0	0	0	0			Identified Offenders	87
TOTAL BEDS	125	125	106	125	87	38	75	125		2

FACILITY UTILIZATION - 2010												
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE												
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds	
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds	Set Up
					Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.	
Nursing Care	3,874	14.2%	19,188	48.2%	0	6	5,563	0	28,631	72.0%	72.0%	
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%	
Intermediate DD			3,334	57.1%	0	0	0	0	3,334	57.1%	57.1%	
Sheltered Care					0	0	0	0	0	0.0%	0.0%	
TOTALS	3,874	14.2%	22,522	49.4%	0	6	5,563	0	31,965	70.1%	70.1%	

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010												
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL	
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	0	1	0	0	0	3	0	0	0	4	4	
45 to 59	2	2	0	0	1	3	0	0	3	5	8	
60 to 64	0	2	0	0	1	0	0	0	1	2	3	
65 to 74	9	6	0	0	2	1	0	0	11	7	18	
75 to 84	1	17	0	0	0	0	0	0	1	17	18	
85+	8	27	0	0	0	1	0	0	8	28	36	
TOTALS	20	55	0	0	4	8	0	0	24	63	87	

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	10	46	0	0	19	0	75
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	12	0	0	0	12
Sheltered Care			0	0	0	0	0
TOTALS	10	46	12	0	19	0	87

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	105	95
Skilled Under 22	0	0
Intermediate DD	0	104
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	1	0	1	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	73	0	11	0	84
Race Unknown	0	0	0	0	0
Total	75	0	12	0	87

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	75	0	12	0	87
Ethnicity Unknown	0	0	0	0	0
Total	75	0	12	0	87

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	3.00
LPN's	11.00
Certified Aides	27.00
Other Health Staff	9.00
Non-Health Staff	19.00
Totals	73.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
36.0%	50.3%	0.0%	0.1%	13.6%	100.0%	0	0.0%
1,616,913	2,262,547	0	4,085	613,838	4,497,383		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	5	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	5	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	2	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	2
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	1
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	4	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	4
	0	Infectious Disease w/ Isolation	2
		Other Restrictions	0
		No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	2
		Endocrine/Metabolic	32
		Blood Disorders	4
		Nervous System Non Alzheimer	13
		Alzheimer Disease	56
		Mental Illness	28
		Developmental Disability	28
		Circulatory System	25
		Respiratory System	15
		Digestive System	0
		Genitourinary System Disorders	5
		Skin Disorders	4
		Musculo-skeletal Disorders	37
		Injuries and Poisonings	4
		Other Medical Conditions	7
		Non-Medical Conditions	0
		TOTALS	260
Total Residents Diagnosed as Mentally Ill			119

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	427	383	263	383	232	195	232	427	Total Admissions 2010	291
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	298
Intermediate DD	32	32	30	32	28	4		32	Residents on 12/31/2010	260
Sheltered Care	0	0	0	0	0	0			Identified Offenders	4
TOTAL BEDS	459	415	293	415	260	199	232	459		

FACILITY UTILIZATION - 2010												
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE												
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds	
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds	Set Up
Nursing Care	13,374	15.8%	52,221	33.5%	0	237	22,361	0	88,193	56.6%	63.1%	
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%	
Intermediate DD			10,895	93.3%	0	0	0	0	10,895	93.3%	93.3%	
Sheltered Care					0	0	0	0	0	0.0%	0.0%	
TOTALS	13,374	15.8%	63,116	37.7%	0	237	22,361	0	99,088	59.1%	65.4%	

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	1	0	0	10	8	0	0	11	9	20
45 to 59	8	5	0	0	4	4	0	0	12	9	21
60 to 64	9	4	0	0	2	0	0	0	11	4	15
65 to 74	11	19	0	0	0	0	0	0	11	19	30
75 to 84	22	51	0	0	0	0	0	0	22	51	73
85+	14	87	0	0	0	0	0	0	14	87	101
TOTALS	65	167	0	0	16	12	0	0	81	179	260

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	29	139	0	1	63	0	232
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		28	0	0	0	0	28
Sheltered Care			0	0	0	0	0
TOTALS	29	167	0	1	63	0	260

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	177	117
Skilled Under 22	0	0
Intermediate DD	0	113
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	32	0	5	0	37
Hawaiian/Pac. Isl.	0	0	0	0	0
White	200	0	23	0	223
Race Unknown	0	0	0	0	0
Total	232	0	28	0	260

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	1	0	1
Non-Hispanic	232	0	27	0	259
Ethnicity Unknown	0	0	0	0	0
Total	232	0	28	0	260

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.50
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	15.00
LPN's	31.00
Certified Aides	135.20
Other Health Staff	16.00
Non-Health Staff	86.50
Totals	290.20

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
35.5%	44.7%	1.6%	0.9%	17.3%	100.0%	0	0.0%
5,381,038	6,779,256	245,727	130,055	2,624,500	15,160,576		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	5	25	0	0	18	0	48
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	5	25	0	0	18	0	48

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	130	112
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	48	0	0	0	48
Race Unknown	0	0	0	0	0
Total	48	0	0	0	48

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	48	0	0	0	48
Ethnicity Unknown	0	0	0	0	0
Total	48	0	0	0	48

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	1.00
Physicians	0.00
Director of Nursing	1.00
Registered Nurses	6.00
LPN's	3.00
Certified Aides	15.00
Other Health Staff	2.00
Non-Health Staff	15.00
Totals	43.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
32.6%	34.8%	0.0%	0.0%	32.6%	100.0%		0.0%
806,358	859,213	0	0	806,001	2,471,572	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	6	Aggressive/Anti-Social	0
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	6	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	1
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	6	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	4
	0	Infectious Disease w/ Isolation	1
		Other Restrictions	2
		No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	6
		Endocrine/Metabolic	14
		Blood Disorders	4
		Nervous System Non Alzheimer	19
		Alzheimer Disease	66
		Mental Illness	11
		Developmental Disability	33
		Circulatory System	54
		Respiratory System	19
		Digestive System	10
		Genitourinary System Disorders	14
		Skin Disorders	4
		Musculo-skeletal Disorders	16
		Injuries and Poisonings	16
		Other Medical Conditions	11
		Non-Medical Conditions	0
		TOTALS	297
		Total Residents Diagnosed as Mentally Ill	29

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	346	329	300	326	265	81	116	346	Total Admissions 2010	629
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	629
Intermediate DD	32	32	32	32	32	0		32	Residents on 12/31/2010	297
Sheltered Care	0	0	0	0	0	0			Identified Offenders	5
TOTAL BEDS	378	361	332	358	297	81	116	378		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	15,090	35.6%	61,935	49.0%	878	195	15,712	0	93,810	74.3%	78.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,593	99.3%	0	0	0	0	11,593	99.3%	99.3%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	15,090	35.6%	73,528	53.3%	878	195	15,712	0	105,403	76.4%	80.0%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	7	6	0	0	8	6	14
45 to 59	5	5	0	0	7	3	0	0	12	8	20
60 to 64	6	3	0	0	2	3	0	0	8	6	14
65 to 74	5	20	0	0	0	4	0	0	5	24	29
75 to 84	14	70	0	0	0	0	0	0	14	70	84
85+	28	108	0	0	0	0	0	0	28	108	136
TOTALS	59	206	0	0	16	16	0	0	75	222	297

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	49	169	0	0	47	0	265
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		32	0	0	0	0	32
Sheltered Care			0	0	0	0	0
TOTALS	49	201	0	0	47	0	297

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	152	128
Skilled Under 22	0	0
Intermediate DD	111	110
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	9	0	5	0	14
Hawaiian/Pac. Isl.	0	0	0	0	0
White	256	0	27	0	283
Race Unknown	0	0	0	0	0
Total	265	0	32	0	297

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	265	0	32	0	297
Ethnicity Unknown	0	0	0	0	0
Total	265	0	32	0	297

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.50
Physicians	0.00
Director of Nursing	3.60
Registered Nurses	26.85
LPN's	35.90
Certified Aides	154.10
Other Health Staff	17.00
Non-Health Staff	84.50
Totals	326.45

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
39.9%	42.2%	1.2%	1.7%	15.1%	100.0%	0	0.0%
6,779,325	7,177,536	195,557	284,167	2,567,776	17,004,362		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	5	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	0	Chronic Alcoholism	2
FREE STANDING FACILITIES	5	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	1
FOR PROFIT OWNERSHIP	5	Ventilator Dependent	4
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	6
		Endocrine/Metabolic	8
		Blood Disorders	4
		Nervous System Non Alzheimer	11
		Alzheimer Disease	38
		Mental Illness	23
		Developmental Disability	36
		Circulatory System	52
		Respiratory System	21
		Digestive System	6
		Genitourinary System Disorders	8
		Skin Disorders	10
		Musculo-skeletal Disorders	9
		Injuries and Poisonings	16
		Other Medical Conditions	13
		Non-Medical Conditions	2
		TOTALS	263
		Total Residents Diagnosed as Mentally III	53

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	Total Admissions 2010	Total Discharges 2010
Nursing Care	312	299	255	299	232	80	236	301	275	296	308
Skilled Under 22	0	0	0	0	0	0		0	263		
Intermediate DD	32	32	32	32	31	1		32			
Sheltered Care	0	0	0	0	0	0					
TOTAL BEDS	344	331	287	331	263	81	236	333	Identified Offenders	0	

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	11,780	13.7%	49,371	44.9%	3,194	270	20,404	0	85,019	74.7%	77.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			10,612	90.9%	0	0	0	0	10,612	90.9%	90.9%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	11,780	13.7%	59,983	49.4%	3,194	270	20,404	0	95,631	76.2%	79.2%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	4	1	0	0	4	2	0	0	8	3	11
45 to 59	1	4	0	0	5	7	0	0	6	11	17
60 to 64	5	3	0	0	2	3	0	0	7	6	13
65 to 74	5	20	0	0	4	1	0	0	9	21	30
75 to 84	15	51	0	0	1	1	0	0	16	52	68
85+	18	105	0	0	0	1	0	0	18	106	124
TOTALS	48	184	0	0	16	15	0	0	64	199	263

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	28	130	10	1	63	0	232
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		31	0	0	0	0	31
Sheltered Care			0	0	0	0	0
TOTALS	28	161	10	1	63	0	263

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	112	104
Skilled Under 22	0	0
Intermediate DD	112	102
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	8	0	3	0	11
Hawaiian/Pac. Isl.	0	0	0	0	0
White	224	0	28	0	252
Race Unknown	0	0	0	0	0
Total	232	0	31	0	263

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	232	0	31	0	263
Ethnicity Unknown	0	0	0	0	0
Total	232	0	31	0	263

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.20
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	14.00
LPN's	27.00
Certified Aides	117.50
Other Health Staff	14.25
Non-Health Staff	82.75
Totals	262.70

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
41.7%	35.9%	2.7%	3.3%	16.4%	100.0%		0.2%
3,751,413	3,231,262	238,665	292,293	1,478,355	8,991,990	18,895	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	5	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	5	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	5
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	5
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	1	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	4	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	5
	0	Infectious Disease w/ Isolation	3
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	3
		Endocrine/Metabolic	15
		Blood Disorders	4
		Nervous System Non Alzheimer	16
		Alzheimer Disease	38
		Mental Illness	9
		Developmental Disability	26
		Circulatory System	52
		Respiratory System	33
		Digestive System	11
		Genitourinary System Disorders	7
		Skin Disorders	1
		Musculo-skeletal Disorders	8
		Injuries and Poisonings	2
		Other Medical Conditions	14
		Non-Medical Conditions	0
		TOTALS	239
		Total Residents Diagnosed as Mentally Ill	9

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	360	330	243	330	213	147	224	360	251	
Skilled Under 22	0	0	0	0	0	0		0	443	
Intermediate DD	32	32	27	32	26	6		32	455	
Sheltered Care	0	0	0	0	0	0			239	
TOTAL BEDS	392	362	270	362	239	153	224	392	Identified Offenders	0

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	10,138	12.4%	44,983	34.2%	0	38	26,353	0	81,512	62.0%	67.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			9,418	80.6%	0	0	0	0	9,418	80.6%	80.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,138	12.4%	54,401	38.0%	0	38	26,353	0	90,930	63.6%	68.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	5	8	0	0	5	8	13
45 to 59	3	1	0	0	6	1	0	0	9	2	11
60 to 64	1	4	0	0	0	5	0	0	1	9	10
65 to 74	11	15	0	0	1	0	0	0	12	15	27
75 to 84	18	65	0	0	0	0	0	0	18	65	83
85+	18	77	0	0	0	0	0	0	18	77	95
TOTALS	51	162	0	0	12	14	0	0	63	176	239

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	29	118	0	0	66	0	213
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		26	0	0	0	0	26
Sheltered Care			0	0	0	0	0
TOTALS	29	144	0	0	66	0	239

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	149	126
Skilled Under 22	0	0
Intermediate DD	105	107
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	2	0	0	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	208	0	26	0	234
Race Unknown	3	0	0	0	3
Total	213	0	26	0	239

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	210	0	26	0	236
Ethnicity Unknown	3	0	0	0	3
Total	213	0	26	0	239

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.50
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	25.25
LPN's	31.00
Certified Aides	118.00
Other Health Staff	26.00
Non-Health Staff	160.00
Totals	366.75

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
24.8%	38.1%	0.0%	3.7%	33.4%	100.0%	0	0.0%
3,240,260	4,982,376	0	478,772	4,364,948	13,066,356		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	10	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	7
FREE STANDING FACILITIES	10	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	7
NURSING CARE BEDS ONLY	6	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	4	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	4	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	6	Ventilator Dependent	8
		Infectious Disease w/ Isolation	3
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	9
		Endocrine/Metabolic	35
		Blood Disorders	10
		Nervous System Non Alzheimer	15
		Alzheimer Disease	46
		Mental Illness	12
		Developmental Disability	145
		Circulatory System	132
		Respiratory System	66
		Digestive System	10
		Genitourinary System Disorders	20
		Skin Disorders	5
		Musculo-skeletal Disorders	34
		Injuries and Poisonings	23
		Other Medical Conditions	36
		Non-Medical Conditions	0
		TOTALS	598
		Total Residents Diagnosed as Mentally Ill	83

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	605	603	503	597	455	150	372	583	587	
Skilled Under 22	0	0	0	0	0	0		0	1,252	
Intermediate DD	148	148	145	148	143	5		141	1,241	
Sheltered Care	0	0	0	0	0	0			598	
TOTAL BEDS	753	751	648	745	598	155	372	724		Identified Offenders 4

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	36,398	26.8%	95,906	45.1%	1,985	152	31,036	0	165,477	74.9%	75.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			50,792	98.7%	0	0	365	0	51,157	94.7%	94.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	36,398	26.8%	146,698	55.5%	1,985	152	31,401	0	216,634	78.8%	79.0%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	3	4	0	0	14	12	0	0	17	16	33
45 to 59	11	8	0	0	35	37	0	0	46	45	91
60 to 64	9	16	0	0	11	11	0	0	20	27	47
65 to 74	21	28	0	0	10	8	0	0	31	36	67
75 to 84	37	88	0	0	2	1	0	0	39	89	128
85+	55	175	0	0	0	2	0	0	55	177	232
TOTALS	136	319	0	0	72	71	0	0	208	390	598

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	103	262	6	0	84	0	455
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		142	0	0	1	0	143
Sheltered Care			0	0	0	0	0
TOTALS	103	404	6	0	85	0	598

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	144	134
Skilled Under 22	0	0
Intermediate DD	134	138
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	1	0	1
Amer. Indian	0	0	0	0	0
Black	12	0	26	0	38
Hawaiian/Pac. Isl.	0	0	0	0	0
White	443	0	116	0	559
Race Unknown	0	0	0	0	0
Total	455	0	143	0	598

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	455	0	143	0	598
Ethnicity Unknown	0	0	0	0	0
Total	455	0	143	0	598

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	7.75
Physicians	0.00
Director of Nursing	7.00
Registered Nurses	55.00
LPN's	79.50
Certified Aides	355.00
Other Health Staff	47.75
Non-Health Staff	194.00
Totals	746.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
36.4%	42.0%	7.2%	1.0%	13.5%	100.0%	0	0.0%
13,152,821	15,169,308	2,602,234	343,833	4,876,567	36,144,765		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	3	Aggressive/Anti-Social	1 DIAGNOSIS
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3 Neoplasms 0
FREE STANDING FACILITIES	3	Developmentally Disabled	3 Endocrine/Metabolic 11
FACILITIES LICENSED FOR:		Drug Addiction	3 Blood Disorders 0
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0 Nervous System Non Alzheimer 18
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1 Alzheimer Disease 64
DD CARE BEDS ONLY	0	Mental Illness	3 Mental Illness 1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0 Developmental Disability 1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0 Circulatory System 24
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0 Respiratory System 2
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0 Digestive System 1
FOR PROFIT OWNERSHIP	3	Unable to Self-Medicare	0 Genitourinary System Disorders 5
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	2 Skin Disorders 0
		Infectious Disease w/ Isolation	1 Musculo-skeletal Disorders 10
		Other Restrictions	1 Injuries and Poisonings 4
		No Restrictions	0 Other Medical Conditions 8
		<i>Note: Reported restrictions denoted by 'I'</i>	Non-Medical Conditions 0
			TOTALS 149
			Total Residents Diagnosed as Mentally Ill 1

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	210	203	164	203	149	61	29	210	142	Total Admissions 2010 209
Skilled Under 22	0	0	0	0	0	0		0	202	Total Discharges 2010 202
Intermediate DD	0	0	0	0	0	0		0	149	Residents on 12/31/2010 149
Sheltered Care	0	0	0	0	0	0			0	Identified Offenders 0
TOTAL BEDS	210	203	164	203	149	61	29	210		

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	3,260	30.8%	32,472	42.4%	0	0	16,976	0	52,708	68.8%	71.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	3,260	30.8%	32,472	42.4%	0	0	16,976	0	52,708	68.8%	71.1%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	0	0	0	0	0	1	1
45 to 59	6	4	0	0	0	0	0	0	6	4	10
60 to 64	4	1	0	0	0	0	0	0	4	1	5
65 to 74	6	9	0	0	0	0	0	0	6	9	15
75 to 84	6	24	0	0	0	0	0	0	6	24	30
85+	10	78	0	0	0	0	0	0	10	78	88
TOTALS	32	117	0	0	0	0	0	0	32	117	149

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	13	90	0	0	46	0	149
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	13	90	0	0	46	0	149

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	132	103
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	4	0	0	0	4
Hawaiian/Pac. Isl.	0	0	0	0	0
White	145	0	0	0	145
Race Unknown	0	0	0	0	0
Total	149	0	0	0	149

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	149	0	0	0	149
Ethnicity Unknown	0	0	0	0	0
Total	149	0	0	0	149

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.00
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	7.00
LPN's	19.00
Certified Aides	63.00
Other Health Staff	1.00
Non-Health Staff	40.00
Totals	136.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
18.0%	49.7%	0.0%	0.0%	32.4%	100.0%		0.0%
1,055,513	2,919,072	0	0	1,901,660	5,876,245	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	7	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	4
FREE STANDING FACILITIES	7	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	3
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	3	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	3	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	6
	0	Infectious Disease w/ Isolation	3
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	9
		Endocrine/Metabolic	26
		Blood Disorders	3
		Nervous System Non Alzheimer	22
		Alzheimer Disease	41
		Mental Illness	43
		Developmental Disability	36
		Circulatory System	76
		Respiratory System	19
		Digestive System	4
		Genitourinary System Disorders	15
		Skin Disorders	5
		Musculo-skeletal Disorders	43
		Injuries and Poisonings	14
		Other Medical Conditions	4
		Non-Medical Conditions	0
		TOTALS	360
		Total Residents Diagnosed as Mentally Ill	69

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	492	434	346	434	328	164	170	492	349	
Skilled Under 22	0	0	0	0	0	0		0	307	
Intermediate DD	32	32	32	32	32	0		32	296	
Sheltered Care	0	0	0	0	0	0			360	
TOTAL BEDS	524	466	378	466	360	164	170	524	Identified Offenders	0

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	10,828	17.5%	59,527	33.1%	0	14	46,234	35	116,638	65.0%	73.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,248	96.3%	0	0	0	0	11,248	96.3%	96.3%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,828	17.5%	70,775	37.0%	0	14	46,234	35	127,886	66.9%	75.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	3	4	0	0	4	4	8
45 to 59	0	7	0	0	6	9	0	0	6	16	22
60 to 64	0	7	0	0	5	1	0	0	5	8	13
65 to 74	14	18	0	0	2	2	0	0	16	20	36
75 to 84	24	79	0	0	0	0	0	0	24	79	103
85+	47	131	0	0	0	0	0	0	47	131	178
TOTALS	86	242	0	0	16	16	0	0	102	258	360

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	33	163	0	0	132	0	328
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		32	0	0	0	0	32
Sheltered Care			0	0	0	0	0
TOTALS	33	195	0	0	132	0	360

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	130	113
Skilled Under 22	0	0
Intermediate DD	221	111
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	8	0	9
Hawaiian/Pac. Isl.	0	0	0	0	0
White	327	0	24	0	351
Race Unknown	0	0	0	0	0
Total	328	0	32	0	360

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	1	0	0	0	1
Non-Hispanic	327	0	32	0	359
Ethnicity Unknown	0	0	0	0	0
Total	328	0	32	0	360

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	8.00
Physicians	0.00
Director of Nursing	5.00
Registered Nurses	17.75
LPN's	42.74
Certified Aides	136.75
Other Health Staff	35.75
Non-Health Staff	69.80
Totals	315.79

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
24.6%	41.8%	2.7%	0.0%	30.8%	100.0%		0.1%
4,358,359	7,408,151	485,790	3,552	5,456,626	17,712,480	10,167	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	3
HOSPITAL BASED UNITS	1	Chronic Alcoholism	2
FREE STANDING FACILITIES	3	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	3
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	3
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	4
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	4
		Endocrine/Metabolic	18
		Blood Disorders	2
		Nervous System Non Alzheimer	18
		Alzheimer Disease	21
		Mental Illness	4
		Developmental Disability	19
		Circulatory System	45
		Respiratory System	29
		Digestive System	3
		Genitourinary System Disorders	13
		Skin Disorders	1
		Musculo-skeletal Disorders	48
		Injuries and Poisonings	6
		Other Medical Conditions	15
		Non-Medical Conditions	0
		TOTALS	246
		Total Residents Diagnosed as Mentally Ill	52

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	309	281	269	281	231	78	288	254	275	
Skilled Under 22	0	0	0	0	0	0		0	362	
Intermediate DD	16	16	16	16	15	1		16	391	
Sheltered Care	0	0	0	0	0	0			246	
TOTAL BEDS	325	297	285	297	246	79	288	270		Identified Offenders 2

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	11,980	11.4%	51,843	55.9%	0	7,116	19,038	0	89,977	79.8%	87.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,012	85.8%	0	0	0	0	5,012	85.8%	85.8%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	11,980	11.4%	56,855	57.7%	0	7,116	19,038	0	94,989	80.1%	87.6%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	4	2	0	0	4	3	7
45 to 59	6	7	0	0	2	0	0	0	8	7	15
60 to 64	2	2	0	0	1	3	0	0	3	5	8
65 to 74	13	22	0	0	2	1	0	0	15	23	38
75 to 84	20	46	0	0	0	0	0	0	20	46	66
85+	17	95	0	0	0	0	0	0	17	95	112
TOTALS	58	173	0	0	9	6	0	0	67	179	246

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	22	137	0	0	72	0	231
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	22	152	0	0	72	0	246

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	123	115
Skilled Under 22	0	0
Intermediate DD	0	130
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	1	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	230	0	14	0	244
Race Unknown	0	0	0	0	0
Total	231	0	15	0	246

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	231	0	15	0	246
Ethnicity Unknown	0	0	0	0	0
Total	231	0	15	0	246

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.50
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	33.00
LPN's	24.40
Certified Aides	103.20
Other Health Staff	2.00
Non-Health Staff	74.65
Totals	243.75

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
35.6%	42.3%	1.0%	0.8%	20.3%	100.0%	0	0.0%
4,436,188	5,278,426	129,819	93,799	2,529,270	12,467,503		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	11	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	0	Chronic Alcoholism	6
FREE STANDING FACILITIES	11	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	4
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	6	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	3
GOVERNMENTAL OWNERSHIP	1	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	1	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	9	Unable to Self-Medicare	2
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	7
	0	Infectious Disease w/ Isolation	4
		Other Restrictions	1
		No Restrictions	2
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	1
		Endocrine/Metabolic	11
		Blood Disorders	0
		Nervous System Non Alzheimer	15
		Alzheimer Disease	58
		Mental Illness	44
		Developmental Disability	138
		Circulatory System	25
		Respiratory System	11
		Digestive System	1
		Genitourinary System Disorders	6
		Skin Disorders	1
		Musculo-skeletal Disorders	8
		Injuries and Poisonings	0
		Other Medical Conditions	23
		Non-Medical Conditions	13
		TOTALS	355
Total Residents Diagnosed as Mentally Ill			141

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	293	290	246	290	219	74	99	231	Total Admissions 2010	181
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	172
Intermediate DD	143	143	138	127	136	7		143	Residents on 12/31/2010	355
Sheltered Care	0	0	0	0	0	0			Identified Offenders	6
TOTAL BEDS	436	433	384	417	355	81	99	374		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	6,442	17.8%	41,984	49.8%	3,369	183	28,152	0	80,130	74.9%	75.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			48,874	93.6%	0	0	0	0	48,874	93.6%	93.6%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	6,442	17.8%	90,858	66.6%	3,369	183	28,152	0	129,004	81.1%	81.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	22	17	0	0	23	17	40
45 to 59	4	5	0	0	41	12	0	0	45	17	62
60 to 64	13	7	0	0	7	4	0	0	20	11	31
65 to 74	18	13	0	0	14	7	0	0	32	20	52
75 to 84	31	37	0	0	5	5	0	0	36	42	78
85+	35	55	0	0	0	2	0	0	35	57	92
TOTALS	102	117	0	0	89	47	0	0	191	164	355

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	15	116	10	0	78	0	219
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		136	0	0	0	0	136
Sheltered Care			0	0	0	0	0
TOTALS	15	252	10	0	78	0	355

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	183	130
Skilled Under 22	0	0
Intermediate DD	133	113
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	11	0	24	0	35
Hawaiian/Pac. Isl.	0	0	0	0	0
White	208	0	112	0	320
Race Unknown	0	0	0	0	0
Total	219	0	136	0	355

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	2	0	2
Non-Hispanic	219	0	134	0	353
Ethnicity Unknown	0	0	0	0	0
Total	219	0	136	0	355

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	8.75
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	23.50
LPN's	38.00
Certified Aides	177.00
Other Health Staff	14.00
Non-Health Staff	110.00
Totals	377.25

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
26.5%	46.8%	14.3%	0.6%	11.9%	100.0%	0	0.0%
4,651,572	8,227,153	2,513,453	97,271	2,085,771	17,575,222		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	5	Aggressive/Anti-Social	1
HOSPITAL BASED UNITS	1	Chronic Alcoholism	4
FREE STANDING FACILITIES	4	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	4
NURSING CARE BEDS ONLY	2	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	3	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	4
		Infectious Disease w/ Isolation	3
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	0
		Endocrine/Metabolic	8
		Blood Disorders	5
		Nervous System Non Alzheimer	10
		Alzheimer Disease	9
		Mental Illness	9
		Developmental Disability	35
		Circulatory System	26
		Respiratory System	7
		Digestive System	8
		Genitourinary System Disorders	14
		Skin Disorders	6
		Musculo-skeletal Disorders	7
		Injuries and Poisonings	11
		Other Medical Conditions	19
		Non-Medical Conditions	3
		TOTALS	177
		Total Residents Diagnosed as Mentally Ill	29

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010			
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	Total Admissions 2010	Total Discharges 2010
Nursing Care	258	258	153	258	142	116	37	230	181	170	174
Skilled Under 22	0	0	0	0	0	0		0	177		
Intermediate DD	48	48	38	48	35	13		48			
Sheltered Care	0	0	0	0	0	0			Identified Offenders		0
TOTAL BEDS	306	306	191	306	177	129	37	278			

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	4,031	29.8%	21,374	25.5%	371	0	25,632	0	51,408	54.6%	54.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			13,272	75.8%	0	0	0	0	13,272	75.8%	75.8%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	4,031	29.8%	34,646	34.1%	371	0	25,632	0	64,680	57.9%	57.9%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	3	4	0	0	3	4	7
45 to 59	1	5	0	0	7	7	0	0	8	12	20
60 to 64	0	0	0	0	1	3	0	0	1	3	4
65 to 74	5	9	0	0	2	3	0	0	7	12	19
75 to 84	13	25	0	0	2	1	0	0	15	26	41
85+	19	65	0	0	1	1	0	0	20	66	86
TOTALS	38	104	0	0	16	19	0	0	54	123	177

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	8	55	1	0	78	0	142
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		35	0	0	0	0	35
Sheltered Care			0	0	0	0	0
TOTALS	8	90	1	0	78	0	177

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	131	103
Skilled Under 22	0	0
Intermediate DD	203	122
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	1	0	10	0	11
Hawaiian/Pac. Isl.	0	0	0	0	0
White	141	0	25	0	166
Race Unknown	0	0	0	0	0
Total	142	0	35	0	177

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	142	0	35	0	177
Ethnicity Unknown	0	0	0	0	0
Total	142	0	35	0	177

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	1.00
Registered Nurses	7.00
LPN's	17.70
Certified Aides	63.40
Other Health Staff	0.50
Non-Health Staff	36.00
Totals	127.60

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
13.0%	58.0%	0.3%	0.0%	28.6%	100.0%		0.0%
833,716	3,712,170	18,904	0	1,831,778	6,396,568	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	5	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	1	Chronic Alcoholism	3
FREE STANDING FACILITIES	4	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	4
NURSING CARE BEDS ONLY	3	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	2	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	3	Ventilator Dependent	4
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Infectious Disease w/ Isolation	1
	0	Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	2
		Endocrine/Metabolic	14
		Blood Disorders	1
		Nervous System Non Alzheimer	4
		Alzheimer Disease	10
		Mental Illness	2
		Developmental Disability	35
		Circulatory System	39
		Respiratory System	15
		Digestive System	3
		Genitourinary System Disorders	6
		Skin Disorders	0
		Musculo-skeletal Disorders	4
		Injuries and Poisonings	3
		Other Medical Conditions	17
		Non-Medical Conditions	3
		TOTALS	158
		Total Residents Diagnosed as Mentally Ill	18

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	169	167	134	167	126	43	134	139	Total Admissions 2010	289
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	278
Intermediate DD	32	32	32	32	32	0		32	Residents on 12/31/2010	158
Sheltered Care	0	0	0	0	0	0			Identified Offenders	4
TOTAL BEDS	201	199	166	199	158	43	134	171		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	5,419	11.1%	25,562	50.4%	399	91	12,167	0	43,638	70.7%	71.6%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			11,655	99.8%	0	0	0	0	11,655	99.8%	99.8%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	5,419	11.1%	37,217	59.6%	399	91	12,167	0	55,293	75.4%	76.1%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	6	4	0	0	6	4	10
45 to 59	1	1	0	0	2	9	0	0	3	10	13
60 to 64	2	2	0	0	3	3	0	0	5	5	10
65 to 74	8	11	0	0	1	2	0	0	9	13	22
75 to 84	6	19	0	0	2	0	0	0	8	19	27
85+	16	60	0	0	0	0	0	0	16	60	76
TOTALS	33	93	0	0	14	18	0	0	47	111	158

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	19	66	2	0	39	0	126
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		32	0	0	0	0	32
Sheltered Care			0	0	0	0	0
TOTALS	19	98	2	0	39	0	158

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	123	115
Skilled Under 22	0	0
Intermediate DD	118	118
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	126	0	32	0	158
Race Unknown	0	0	0	0	0
Total	126	0	32	0	158

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	2	0	2
Non-Hispanic	126	0	30	0	156
Ethnicity Unknown	0	0	0	0	0
Total	126	0	32	0	158

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.50
Physicians	0.00
Director of Nursing	3.25
Registered Nurses	20.20
LPN's	11.00
Certified Aides	79.70
Other Health Staff	8.00
Non-Health Staff	35.50
Totals	161.15

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
19.1%	59.9%	3.0%	1.3%	16.7%	100.0%	0	0.0%
1,132,796	3,553,778	176,202	79,418	993,207	5,935,401		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	1
FREE STANDING FACILITIES	4	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	3
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	1
	1	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	2
		Endocrine/Metabolic	16
		Blood Disorders	1
		Nervous System Non Alzheimer	16
		Alzheimer Disease	35
		Mental Illness	9
		Developmental Disability	3
		Circulatory System	73
		Respiratory System	16
		Digestive System	4
		Genitourinary System Disorders	8
		Skin Disorders	4
		Musculo-skeletal Disorders	23
		Injuries and Poisonings	1
		Other Medical Conditions	14
		Non-Medical Conditions	0
		TOTALS	225
		Total Residents Diagnosed as Mentally Ill	62

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	355	351	270	343	225	130	168	275	Total Admissions 2010	330
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	345
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	225
Sheltered Care	0	0	0	0	0	0			Identified Offenders	6
TOTAL BEDS	355	351	270	343	225	130	168	275		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	12,538	20.4%	49,058	48.9%	3,217	1,767	20,445	0	87,025	67.2%	67.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	12,538	20.4%	49,058	48.9%	3,217	1,767	20,445	0	87,025	67.2%	67.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	3	4	0	0	0	0	0	0	3	4	7
60 to 64	3	3	0	0	0	0	0	0	3	3	6
65 to 74	6	24	0	0	0	0	0	0	6	24	30
75 to 84	23	59	0	0	0	0	0	0	23	59	82
85+	28	72	0	0	0	0	0	0	28	72	100
TOTALS	63	162	0	0	0	0	0	0	63	162	225

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	29	134	5	4	53	0	225
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	29	134	5	4	53	0	225

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	150	115
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	224	0	0	0	224
Race Unknown	0	0	0	0	0
Total	225	0	0	0	225
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	225	0	0	0	225
Ethnicity Unknown	0	0	0	0	0
Total	225	0	0	0	225

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	5.00
Physicians	0.00
Director of Nursing	4.00
Registered Nurses	23.00
LPN's	40.00
Certified Aides	109.00
Other Health Staff	7.00
Non-Health Staff	102.50
Totals	290.50

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
47.1%	28.4%	1.4%	3.6%	19.4%	100.0%		0.0%
6,536,818	3,936,596	198,735	496,993	2,696,461	13,865,606	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	005	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	8	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	2
FREE STANDING FACILITIES	8	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	2
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	3	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	2
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	1
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	8	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	6
	0	Infectious Disease w/ Isolation	2
		Other Restrictions	0
		No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	4
		Endocrine/Metabolic	18
		Blood Disorders	7
		Nervous System Non Alzheimer	30
		Alzheimer Disease	49
		Mental Illness	27
		Developmental Disability	44
		Circulatory System	86
		Respiratory System	37
		Digestive System	21
		Genitourinary System Disorders	23
		Skin Disorders	15
		Musculo-skeletal Disorders	33
		Injuries and Poisonings	20
		Other Medical Conditions	53
		Non-Medical Conditions	1
		TOTALS	468
Total Residents Diagnosed as Mentally Ill			91

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010			
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	Total Admissions 2010	Total Discharges 2010
Nursing Care	563	563	468	562	428	135	310	512	476	733	741
Skilled Under 22	0	0	0	0	0	0		0	468		
Intermediate DD	80	48	41	48	40	40		80			
Sheltered Care	0	0	0	0	0	0					
TOTAL BEDS	643	611	509	610	468	175	310	592	Identified Offenders	1	

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	32,641	28.8%	89,584	47.9%	737	1,625	29,441	122	154,150	75.0%	75.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			14,169	48.5%	0	0	0	0	14,169	48.5%	80.9%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	32,641	28.8%	103,753	48.0%	737	1,625	29,441	122	168,319	71.7%	75.5%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	5	4	0	0	4	5	0	0	9	9	18
45 to 59	10	14	0	0	8	7	0	0	18	21	39
60 to 64	10	7	0	0	3	5	0	0	13	12	25
65 to 74	20	30	0	0	1	5	0	0	21	35	56
75 to 84	43	91	0	0	0	1	0	0	43	92	135
85+	32	162	0	0	1	0	0	0	33	162	195
TOTALS	120	308	0	0	17	23	0	0	137	331	468

HEALTH SERVICE AREA

005

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	94	246	0	1	86	1	428
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		40	0	0	0	0	40
Sheltered Care			0	0	0	0	0
TOTALS	94	286	0	1	86	1	468

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	147	121
Skilled Under 22	0	0
Intermediate DD	121	105
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	1	0	0	0	1
Black	12	0	1	0	13
Hawaiian/Pac. Isl.	0	0	0	0	0
White	414	0	39	0	453
Race Unknown	0	0	0	0	0
Total	428	0	40	0	468

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	428	0	40	0	468
Ethnicity Unknown	0	0	0	0	0
Total	428	0	40	0	468

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	8.00
Physicians	0.00
Director of Nursing	6.00
Registered Nurses	20.13
LPN's	68.11
Certified Aides	204.24
Other Health Staff	53.18
Non-Health Staff	131.05
Totals	490.71

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
44.2%	36.6%	1.3%	0.7%	17.1%	100.0%	0	0.0%
12,089,785	10,010,744	346,824	200,473	4,685,865	27,333,695		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	006	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	64	Aggressive/Anti-Social	45
HOSPITAL BASED UNITS	3	Chronic Alcoholism	37
FREE STANDING FACILITIES	61	Developmentally Disabled	25
FACILITIES LICENSED FOR:		Drug Addiction	43
NURSING CARE BEDS ONLY	41	Medicaid Recipient	4
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	18	Mental Illness	32
MULTI-LICENSED FACILITIES	5	Non-Ambulatory	19
		Non-Mobile	21
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	5
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	4
NON-PROFIT OWNERSHIP	26	Unable to Self-Medicare	14
FOR PROFIT OWNERSHIP	37	Ventilator Dependent	55
		Infectious Disease w/ Isolation	28
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	5
	3	No Restrictions	2
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	187
		Endocrine/Metabolic	663
		Blood Disorders	167
		Nervous System Non Alzheimer	336
		Alzheimer Disease	408
		Mental Illness	1,757
		Developmental Disability	569
		Circulatory System	851
		Respiratory System	407
		Digestive System	175
		Genitourinary System Disorders	146
		Skin Disorders	73
		Musculo-skeletal Disorders	296
		Injuries and Poisonings	105
		Other Medical Conditions	285
		Non-Medical Conditions	106
		TOTALS	6,531
		Total Residents Diagnosed as Mentally Ill	2,699

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS						ADMISSIONS AND DISCHARGES - 2010		Residents on 1/1/2010	6,425
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED		
Nursing Care	7,200	7,037	6,341	6,806	5,930	1,270	4327	6945	13,208	13,102
Skilled Under 22	150	120	91	17	80	70		150	6,531	
Intermediate DD	421	421	409	421	401	20		421		
Sheltered Care	255	190	128	190	120	135			Identified Offenders	447
TOTAL BEDS	8,026	7,768	6,969	7,434	6,531	1,495	4327	7516		

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	185,246	11.7%	1,737,353	68.5%	80,810	16,103	143,815	983	2,164,310	82.4%	84.3%
Skilled Under 22			31,598	57.7%	0	685	0	0	32,283	59.0%	73.7%
Intermediate DD			135,599	88.2%	0	0	1,095	0	136,694	89.0%	89.0%
Sheltered Care					0	346	41,864	165	42,375	45.5%	61.1%
TOTALS	185,246	11.7%	1,904,550	69.4%	80,810	17,134	186,774	1,148	2,375,662	81.1%	83.8%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	17	10	0	11	0	0	17	21	38
18 to 44	342	149	32	12	116	149	0	0	490	310	800
45 to 59	1,010	493	4	4	46	70	1	0	1,061	567	1,628
60 to 64	378	247	0	1	2	6	1	0	381	254	635
65 to 74	546	481	0	0	0	1	3	3	549	485	1,034
75 to 84	455	662	0	0	0	0	10	29	465	691	1,156
85+	308	859	0	0	0	0	19	54	327	913	1,240
TOTALS	3,039	2,891	53	27	164	237	34	86	3,290	3,241	6,531

HEALTH SERVICE AREA

006

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	682	4,764	53	37	391	3	5,930
Skilled Under 22	0	79	0	0	1	0	80
ICF/DD		398	0	0	3	0	401
Sheltered Care			18	0	101	1	120
TOTALS	682	5,241	71	37	496	4	6,531

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	218	206
Skilled Under 22	0	313
Intermediate DD	216	211
Shelter	153	27

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	308	4	4	0	316
Amer. Indian	24	0	0	0	24
Black	1,742	37	28	0	1,807
Hawaiian/Pac. Isl.	11	0	3	0	14
White	3,723	19	365	120	4,227
Race Unknown	122	20	1	0	143
Total	5,930	80	401	121	6,531
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	505	13	11	1	530
Non-Hispanic	5,404	47	389	119	5,959
Ethnicity Unknown	21	20	1	0	42
Total	5,930	80	401	120	6,531

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	67.77
Physicians	3.02
Director of Nursing	52.50
Registered Nurses	615.10
LPN's	436.21
Certified Aides	2127.35
Other Health Staff	551.42
Non-Health Staff	1696.40
Totals	5549.77

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
19.6%	66.0%	1.2%	1.3%	11.9%	100.0%		0.1%
72,370,419	243,853,998	4,336,590	4,812,218	43,903,628	369,276,864	199,538	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	006	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	29	Aggressive/Anti-Social	13
HOSPITAL BASED UNITS	3	Chronic Alcoholism	11
FREE STANDING FACILITIES	26	Developmentally Disabled	16
FACILITIES LICENSED FOR:		Drug Addiction	12
NURSING CARE BEDS ONLY	27	Medicaid Recipient	2
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	8
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	7
		Non-Mobile	8
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	8	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	21	Ventilator Dependent	27
		Infectious Disease w/ Isolation	7
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	6
	3	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	93
		Endocrine/Metabolic	373
		Blood Disorders	42
		Nervous System Non Alzheimer	247
		Alzheimer Disease	248
		Mental Illness	1,338
		Developmental Disability	29
		Circulatory System	471
		Respiratory System	195
		Digestive System	126
		Genitourinary System Disorders	108
		Skin Disorders	32
		Musculo-skeletal Disorders	115
		Injuries and Poisonings	15
		Other Medical Conditions	167
		Non-Medical Conditions	0
		TOTALS	3,599
		Total Residents Diagnosed as Mentally Ill	1,681

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	4,264	4,183	3,833	3,972	3,578	686	2175	3423	3,568	6,839
Skilled Under 22	0	0	0	0	0	0		0		6,808
Intermediate DD	12	12	12	12	12	0		12		3,599
Sheltered Care	49	20	12	20	9	40			Identified Offenders	302
TOTAL BEDS	4,325	4,215	3,857	4,004	3,599	726	2175	3435		

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.	
Nursing Care	125,930	15.9%	1,079,846	86.4%	14,016	14,313	64,100	38	1,298,243	83.4%	85.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			4,380	100.0%	0	0	0	0	4,380	100.0%	100.0%
Sheltered Care					0	0	3,375	0	3,375	18.9%	46.2%
TOTALS	125,930	15.9%	1,084,226	86.5%	14,016	14,313	67,475	38	1,305,998	82.7%	84.9%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	266	115	0	0	4	1	0	0	270	116	386
45 to 59	788	339	0	0	3	3	0	0	791	342	1,133
60 to 64	261	129	0	0	0	0	0	0	261	129	390
65 to 74	321	234	0	0	0	1	0	1	321	236	557
75 to 84	257	319	0	0	0	0	1	1	258	320	578
85+	134	415	0	0	0	0	1	5	135	420	555
TOTALS	2,027	1,551	0	0	7	5	2	7	2,036	1,563	3,599

HEALTH SERVICE AREA

006

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	349	2,956	47	34	191	1	3,578
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		12	0	0	0	0	12
Sheltered Care			0	0	9	0	9
TOTALS	349	2,968	47	34	200	1	3,599

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	240	210
Skilled Under 22	0	0
Intermediate DD	128	128
Shelter	140	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	39	0	0	0	39
Amer. Indian	2	0	0	0	2
Black	1,811	0	0	0	1,811
Hawaiian/Pac. Isl.	5	0	0	0	5
White	1,659	0	12	9	1,680
Race Unknown	62	0	0	0	62
Total	3,578	0	12	9	3,599

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	519	0	5	0	524
Non-Hispanic	3,052	0	7	9	3,068
Ethnicity Unknown	7	0	0	0	7
Total	3,578	0	12	9	3,599

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	28.55
Physicians	1.10
Director of Nursing	27.70
Registered Nurses	263.06
LPN's	287.38
Certified Aides	943.20
Other Health Staff	234.90
Non-Health Staff	883.08
Totals	2668.97

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
27.6%	60.0%	1.6%	2.3%	8.6%	100.0%	0	0.0%
54,340,507	118,194,110	3,127,003	4,542,271	16,927,225	197,131,120		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	006	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	29	Aggressive/Anti-Social	14
HOSPITAL BASED UNITS	0	Chronic Alcoholism	14
FREE STANDING FACILITIES	29	Developmentally Disabled	14
FACILITIES LICENSED FOR:		Drug Addiction	17
NURSING CARE BEDS ONLY	23	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	5	Mental Illness	6
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	6
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	7
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	1
NON-PROFIT OWNERSHIP	8	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	21	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	2	Ventilator Dependent	25
	1	Infectious Disease w/ Isolation	9
		Other Restrictions	2
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	108
		Endocrine/Metabolic	644
		Blood Disorders	104
		Nervous System Non Alzheimer	201
		Alzheimer Disease	567
		Mental Illness	733
		Developmental Disability	224
		Circulatory System	661
		Respiratory System	368
		Digestive System	143
		Genitourinary System Disorders	86
		Skin Disorders	91
		Musculo-skeletal Disorders	176
		Injuries and Poisonings	26
		Other Medical Conditions	143
		Non-Medical Conditions	8
		TOTALS	4,283
		Total Residents Diagnosed as Mentally Ill	1,240

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	5,015	4,904	4,449	4,645	4,090	925	3252	4962	4,293	Total Admissions 2010
Skilled Under 22	125	125	121	16	119	6		125	7,325	Total Discharges 2010
Intermediate DD	75	75	74	75	74	1		75	7,335	Residents on 12/31/2010
Sheltered Care	0	0	0	0	0	0			4,283	Identified Offenders
TOTAL BEDS	5,215	5,104	4,644	4,736	4,283	932	3252	5162		355

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.	
Nursing Care	178,259	15.0%	1,150,167	63.5%	63,740	17,073	71,516	0	1,480,755	80.9%	82.7%
Skilled Under 22			41,255	90.4%	0	0	1,825	0	43,080	94.4%	94.4%
Intermediate DD			27,010	98.7%	0	0	0	0	27,010	98.7%	98.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	178,259	15.0%	1,218,432	64.7%	63,740	17,073	73,341	0	1,550,845	81.5%	83.2%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	16	19	0	0	0	0	16	19	35
18 to 44	285	125	43	33	15	12	0	0	343	170	513
45 to 59	687	336	4	3	14	22	0	0	705	361	1,066
60 to 64	249	155	0	1	4	2	0	0	253	158	411
65 to 74	327	317	0	0	1	1	0	0	328	318	646
75 to 84	284	531	0	0	1	1	0	0	285	532	817
85+	177	617	0	0	1	0	0	0	178	617	795
TOTALS	2,009	2,081	63	56	36	38	0	0	2,108	2,175	4,283

HEALTH SERVICE AREA

006

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	399	3,307	181	42	161	0	4,090
Skilled Under 22	114	0	0	0	5	0	119
ICF/DD		74	0	0	0	0	74
Sheltered Care			0	0	0	0	0
TOTALS	513	3,381	181	42	166	0	4,283

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	165	150
Skilled Under 22	301	301
Intermediate DD	127	127
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	76	3	0	0	79
Amer. Indian	9	0	0	0	9
Black	3,530	29	64	0	3,623
Hawaiian/Pac. Isl.	1	0	0	0	1
White	453	81	7	0	541
Race Unknown	21	6	3	0	30
Total	4,090	119	74	0	4,283
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	125	5	3	0	133
Non-Hispanic	3,652	114	71	0	3,837
Ethnicity Unknown	313	0	0	0	313
Total	4,090	119	74	0	4,283

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	36.33
Physicians	2.56
Director of Nursing	29.60
Registered Nurses	212.84
LPN's	594.08
Certified Aides	1494.75
Other Health Staff	394.89
Non-Health Staff	1144.95
Totals	3910.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
24.4%	66.6%	2.8%	1.0%	5.2%	100.0%	0	0.0%
60,479,944	165,305,314	6,979,068	2,524,824	13,027,521	248,316,674		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	26	Aggressive/Anti-Social	19
HOSPITAL BASED UNITS	0	Chronic Alcoholism	18
FREE STANDING FACILITIES	26	Developmentally Disabled	16
FACILITIES LICENSED FOR:		Drug Addiction	24
NURSING CARE BEDS ONLY	14	Medicaid Recipient	2
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	5	Mental Illness	13
MULTI-LICENSED FACILITIES	7	Non-Ambulatory	2
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	1
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	2
NON-PROFIT OWNERSHIP	10	Under 65 Years Old	2
FOR PROFIT OWNERSHIP	16	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	6	Ventilator Dependent	23
	3	Infectious Disease w/ Isolation	5
		Other Restrictions	1
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	44
		Endocrine/Metabolic	232
		Blood Disorders	19
		Nervous System Non Alzheimer	145
		Alzheimer Disease	216
		Mental Illness	88
		Developmental Disability	290
		Circulatory System	489
		Respiratory System	193
		Digestive System	97
		Genitourinary System Disorders	113
		Skin Disorders	35
		Musculo-skeletal Disorders	280
		Injuries and Poisonings	147
		Other Medical Conditions	530
		Non-Medical Conditions	78
		TOTALS	2,996
		Total Residents Diagnosed as Mentally Ill	157

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	3,135	3,003	2,718	2,979	2,507	628	2633	2061	2,925	
Skilled Under 22	57	57	57	6	57	0		55	9,970	
Intermediate DD	239	239	234	239	226	13		239	9,899	
Sheltered Care	336	235	227	235	206	130			2,996	
TOTAL BEDS	3,767	3,534	3,236	3,459	2,996	771	2633	2355		Identified Offenders 2

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	218,819	22.8%	427,740	56.9%	7,493	26,689	227,307	5,402	913,450	79.8%	83.3%
Skilled Under 22			20,354	101.4%	0	0	150	0	20,504	98.6%	98.6%
Intermediate DD			82,670	94.8%	0	0	730	0	83,400	95.6%	95.6%
Sheltered Care					0	0	76,148	189	76,337	62.2%	89.0%
TOTALS	218,819	22.8%	530,764	61.7%	7,493	26,689	304,335	5,591	1,093,691	79.5%	84.8%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	6	6	0	0	0	0	6	6	12
18 to 44	3	7	21	23	38	27	0	0	62	57	119
45 to 59	37	34	1	0	47	55	0	0	85	89	174
60 to 64	24	36	0	0	13	13	0	1	37	50	87
65 to 74	108	160	0	0	12	16	2	4	122	180	302
75 to 84	233	542	0	0	3	2	14	43	250	587	837
85+	263	1,060	0	0	0	0	28	114	291	1,174	1,465
TOTALS	668	1,839	28	29	113	113	44	162	853	2,143	2,996

HEALTH SERVICE AREA

007

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	648	1,147	12	64	615	21	2,507
Skilled Under 22	0	57	0	0	0	0	57
ICF/DD		224	0	0	2	0	226
Sheltered Care			0	0	205	1	206
TOTALS	648	1,428	12	64	822	22	2,996

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	284	239
Skilled Under 22	250	250
Intermediate DD	148	139
Shelter	142	163

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	30	2	4	0	36
Amer. Indian	2	0	0	0	2
Black	29	12	14	0	55
Hawaiian/Pac. Isl.	1	0	0	0	1
White	2,436	43	208	206	2,893
Race Unknown	9	0	0	0	9
Total	2,507	57	226	207	2,996

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	39	12	7	1	59
Non-Hispanic	2,369	45	219	205	2,838
Ethnicity Unknown	99	0	0	0	99
Total	2,507	57	226	206	2,996

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	29.00
Physicians	0.45
Director of Nursing	22.50
Registered Nurses	396.83
LPN's	226.10
Certified Aides	1212.03
Other Health Staff	283.93
Non-Health Staff	943.93
Totals	3114.77

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
37.1%	29.7%	0.5%	3.1%	29.6%	100.0%		0.4%
101,649,688	81,286,087	1,264,507	8,581,715	81,192,415	273,974,413	1,149,793	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	46	Aggressive/Anti-Social	22
HOSPITAL BASED UNITS	0	Chronic Alcoholism	23
FREE STANDING FACILITIES	46	Developmentally Disabled	30
FACILITIES LICENSED FOR:		Drug Addiction	33
NURSING CARE BEDS ONLY	37	Medicaid Recipient	7
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	3
DD CARE BEDS ONLY	2	Mental Illness	22
MULTI-LICENSED FACILITIES	7	Non-Ambulatory	3
		Non-Mobile	3
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	6
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	3
NON-PROFIT OWNERSHIP	16	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	30	Ventilator Dependent	41
		Infectious Disease w/ Isolation	3
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	7	Other Restrictions	2
	7	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	148
		Endocrine/Metabolic	525
		Blood Disorders	76
		Nervous System Non Alzheimer	413
		Alzheimer Disease	734
		Mental Illness	923
		Developmental Disability	161
		Circulatory System	866
		Respiratory System	472
		Digestive System	118
		Genitourinary System Disorders	143
		Skin Disorders	48
		Musculo-skeletal Disorders	396
		Injuries and Poisonings	81
		Other Medical Conditions	597
		Non-Medical Conditions	80
		TOTALS	5,781
		Total Residents Diagnosed as Mentally Ill	1,290

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS						ADMISSIONS AND DISCHARGES - 2010		Residents on 1/1/2010	5,832
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED		
Nursing Care	7,061	6,725	6,020	6,634	5,500	1,561	4796	5623	15,494	15,545
Skilled Under 22	0	0	0	0	0	0		0	Residents on 12/31/2010	5,781
Intermediate DD	147	147	147	147	144	3		147	Identified Offenders	110
Sheltered Care	312	276	159	273	137	175				
TOTAL BEDS	7,520	7,148	6,326	7,054	5,781	1,739	4796	5770		

LEVEL OF CARE	FACILITY UTILIZATION - 2010										TOTAL	Licensed Beds	Peak Beds Set Up		
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE													TOTAL	Peak Beds
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	Pat. days	Occ. Pct.					
Nursing Care	294,641	16.8%	1,236,170	60.2%	26,384	42,279	419,731	7,430	2,026,635	78.6%	82.6%				
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%				
Intermediate DD			52,221	97.3%	848	0	0	0	53,069	98.9%	98.9%				
Sheltered Care					0	822	51,176	0	51,998	45.7%	51.6%				
TOTALS	294,641	16.8%	1,288,391	61.2%	27,232	43,101	470,907	7,430	2,131,702	77.7%	81.7%				

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										GRAND TOTAL	
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL			
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female		
Under 18	0	0	0	0	0	0	0	0	0	0	0	0
18 to 44	155	86	0	0	35	12	0	0	190	98	288	
45 to 59	460	350	0	0	32	20	0	0	492	370	862	
60 to 64	180	195	0	0	13	7	0	0	193	202	395	
65 to 74	334	408	0	0	9	7	2	1	345	416	761	
75 to 84	373	781	0	0	4	4	19	18	396	803	1,199	
85+	437	1,741	0	0	0	1	27	70	464	1,812	2,276	
TOTALS	1,939	3,561	0	0	93	51	48	89	2,080	3,701	5,781	

HEALTH SERVICE AREA

007

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	759	3,377	67	106	1,168	25	5,502
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		144	0	0	0	0	144
Sheltered Care			0	3	132	0	135
TOTALS	759	3,521	67	109	1,300	25	5,781

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	252	207
Skilled Under 22	0	0
Intermediate DD	166	162
Shelter	187	183

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	393	0	4	5	402
Amer. Indian	2	0	1	0	3
Black	405	0	33	0	438
Hawaiian/Pac. Isl.	12	0	1	0	13
White	4,678	0	105	130	4,913
Race Unknown	12	0	0	0	12
Total	5,502	0	144	135	5,781

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	191	0	8	0	199
Non-Hispanic	5,155	0	136	135	5,426
Ethnicity Unknown	156	0	0	0	156
Total	5,502	0	144	135	5,781

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	52.00
Physicians	3.80
Director of Nursing	45.00
Registered Nurses	817.84
LPN's	287.22
Certified Aides	2056.86
Other Health Staff	475.32
Non-Health Staff	1782.49
Totals	5520.53

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
32.6%	38.5%	0.9%	3.4%	24.6%	100.0%		0.4%
139,628,582	165,112,713	4,050,506	14,613,413	105,453,638	428,858,853	1,809,647	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA

007

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare		Other		Private	Charity	TOTALS
	Medicare	Medicaid	Public	Insurance	Pay	Care	
Nursing Care	6	0	0	0	31	0	37
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	6	0	0	0	31	0	37

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	318	0
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	37	0	0	0	37
Race Unknown	0	0	0	0	0
Total	37	0	0	0	37

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	37	0	0	0	37
Ethnicity Unknown	0	0	0	0	0
Total	37	0	0	0	37

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	1.00
Physicians	0.10
Director of Nursing	1.00
Registered Nurses	7.50
LPN's	1.00
Certified Aides	17.00
Other Health Staff	0.00
Non-Health Staff	16.00
Totals	43.60

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
35.3%	0.0%	0.0%	0.0%	64.8%	100.1%		0.0%
969,916	0	0	-1,875	1,780,001	2,748,042	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	1	Aggressive/Anti-Social	0
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	1	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	0
NURSING CARE BEDS ONLY	1	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	1
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Ventilator Dependent	1
	1	Infectious Disease w/ Isolation	0
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by '1'</i>	
		DIAGNOSIS	
		Neoplasms	1
		Endocrine/Metabolic	1
		Blood Disorders	0
		Nervous System Non Alzheimer	10
		Alzheimer Disease	12
		Mental Illness	0
		Developmental Disability	0
		Circulatory System	1
		Respiratory System	1
		Digestive System	0
		Genitourinary System Disorders	2
		Skin Disorders	0
		Musculo-skeletal Disorders	8
		Injuries and Poisonings	0
		Other Medical Conditions	1
		Non-Medical Conditions	0
		TOTALS	37
		Total Residents Diagnosed as Mentally Ill	0

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	38	38	38	38	37	1	38	0	37	Total Admissions 2010
Skilled Under 22	0	0	0	0	0	0		0	59	Total Discharges 2010
Intermediate DD	0	0	0	0	0	0		0	59	Residents on 12/31/2010
Sheltered Care	0	0	0	0	0	0		0	37	Identified Offenders
TOTAL BEDS	38	38	38	38	37	1	38	0		0

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	1,879	13.5%	0	0.0%	0	0	11,698	0	13,577	97.9%	97.9%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	1,879	13.5%	0	0.0%	0	0	11,698	0	13,577	97.9%	97.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010												
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female		
Under 18	0	0	0	0	0	0	0	0	0	0	0	
18 to 44	0	0	0	0	0	0	0	0	0	0	0	
45 to 59	0	0	0	0	0	0	0	0	0	0	0	
60 to 64	0	0	0	0	0	0	0	0	0	0	0	
65 to 74	0	0	0	0	0	0	0	0	0	0	0	
75 to 84	0	7	0	0	0	0	0	0	0	7	7	
85+	9	21	0	0	0	0	0	0	9	21	30	
TOTALS	9	28	0	0	0	0	0	0	9	28	37	

HEALTH SERVICE AREA

007

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	759	3,377	67	106	1,168	25	5,502
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		144	0	0	0	0	144
Sheltered Care			0	3	132	0	135
TOTALS	759	3,521	67	109	1,300	25	5,781

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	252	207
Skilled Under 22	0	0
Intermediate DD	166	162
Shelter	187	183

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	393	0	4	5	402
Amer. Indian	2	0	1	0	3
Black	405	0	33	0	438
Hawaiian/Pac. Isl.	12	0	1	0	13
White	4,678	0	105	130	4,913
Race Unknown	12	0	0	0	12
Total	5,502	0	144	135	5,781

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	191	0	8	0	199
Non-Hispanic	5,155	0	136	135	5,426
Ethnicity Unknown	156	0	0	0	156
Total	5,502	0	144	135	5,781

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	52.00
Physicians	3.80
Director of Nursing	45.00
Registered Nurses	817.84
LPN's	287.22
Certified Aides	2056.86
Other Health Staff	475.32
Non-Health Staff	1782.49
Totals	5520.53

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
32.6%	38.5%	0.9%	3.4%	24.6%	100.0%		0.4%
139,628,582	165,112,713	4,050,506	14,613,413	105,453,638	428,858,853	1,809,647	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA

007

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare		Other		Private	Charity	TOTALS
	Medicare	Medicaid	Public	Insurance	Pay	Care	
Nursing Care	6	0	0	0	31	0	37
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	6	0	0	0	31	0	37

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	318	0
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	37	0	0	0	37
Race Unknown	0	0	0	0	0
Total	37	0	0	0	37

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	37	0	0	0	37
Ethnicity Unknown	0	0	0	0	0
Total	37	0	0	0	37

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	1.00
Physicians	0.10
Director of Nursing	1.00
Registered Nurses	7.50
LPN's	1.00
Certified Aides	17.00
Other Health Staff	0.00
Non-Health Staff	16.00
Totals	43.60

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
35.3%	0.0%	0.0%	0.0%	64.8%	100.1%		0.0%
969,916	0	0	-1,875	1,780,001	2,748,042	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	43	Aggressive/Anti-Social	33
HOSPITAL BASED UNITS	1	Chronic Alcoholism	32
FREE STANDING FACILITIES	42	Developmentally Disabled	23
FACILITIES LICENSED FOR:		Drug Addiction	32
NURSING CARE BEDS ONLY	31	Medicaid Recipient	6
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	5
DD CARE BEDS ONLY	5	Mental Illness	23
MULTI-LICENSED FACILITIES	7	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	6
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	10	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	32	Ventilator Dependent	39
		Infectious Disease w/ Isolation	8
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	5	Other Restrictions	2
	6	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	89
		Endocrine/Metabolic	306
		Blood Disorders	47
		Nervous System Non Alzheimer	398
		Alzheimer Disease	572
		Mental Illness	438
		Developmental Disability	319
		Circulatory System	836
		Respiratory System	375
		Digestive System	161
		Genitourinary System Disorders	182
		Skin Disorders	44
		Musculo-skeletal Disorders	570
		Injuries and Poisonings	182
		Other Medical Conditions	591
		Non-Medical Conditions	144
		TOTALS	5,254
		Total Residents Diagnosed as Mentally Ill	968

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	5,922	5,637	5,146	5,619	4,748	1,174	4453	4439	5,196	Total Admissions 2010
Skilled Under 22	149	140	140	125	132	17		149	13,193	Total Discharges 2010
Intermediate DD	164	164	164	164	164	0		164	13,135	Residents on 12/31/2010
Sheltered Care	316	300	232	300	210	106			5,254	Identified Offenders
TOTAL BEDS	6,551	6,241	5,682	6,208	5,254	1,297	4453	4752	42	

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		TOTAL	Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	307,427	18.9%	983,644	60.7%	21,246	43,265	380,749	2,699	1,739,030	80.5%	84.5%
Skilled Under 22			48,421	89.0%	520	0	424	0	49,365	90.8%	96.6%
Intermediate DD			59,256	99.0%	0	365	0	0	59,621	99.6%	99.6%
Sheltered Care					0	0	80,445	1,088	81,533	70.7%	74.5%
TOTALS	307,427	18.9%	1,091,321	62.9%	21,766	43,630	461,618	3,787	1,929,549	80.7%	84.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	27	13	0	0	0	0	27	13	40
18 to 44	98	63	37	32	17	23	0	0	152	118	270
45 to 59	236	209	9	10	23	44	1	0	269	263	532
60 to 64	124	112	1	0	36	5	0	1	161	118	279
65 to 74	229	370	2	1	4	4	2	6	237	381	618
75 to 84	365	803	0	0	6	0	8	49	379	852	1,231
85+	400	1,739	0	0	2	0	31	112	433	1,851	2,284
TOTALS	1,452	3,296	76	56	88	76	42	168	1,658	3,596	5,254

HEALTH SERVICE AREA

007

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	871	2,652	53	101	1,064	9	4,750
Skilled Under 22	20	109	1	0	2	0	132
ICF/DD		163	0	1	0	0	164
Sheltered Care			0	0	204	4	208
TOTALS	891	2,924	54	102	1,270	13	5,254

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	280	239
Skilled Under 22	327	284
Intermediate DD	160	198
Shelter	156	98

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	129	3	6	0	138
Amer. Indian	5	0	0	0	5
Black	211	32	18	0	261
Hawaiian/Pac. Isl.	8	0	0	0	8
White	4,385	73	140	208	4,806
Race Unknown	12	24	0	0	36
Total	4,750	132	164	208	5,254

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	125	19	6	0	150
Non-Hispanic	4,622	89	158	208	5,077
Ethnicity Unknown	3	24	0	0	27
Total	4,750	132	164	208	5,254

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	44.00
Physicians	1.40
Director of Nursing	42.00
Registered Nurses	672.99
LPN's	423.12
Certified Aides	1984.38
Other Health Staff	568.95
Non-Health Staff	1699.76
Totals	5436.60

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
36.4%	37.2%	0.7%	4.1%	21.6%	100.0%		0.1%
146,008,177	149,195,430	2,903,399	16,500,770	86,550,647	401,158,425	549,773	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	20	Aggressive/Anti-Social	12
HOSPITAL BASED UNITS	3	Chronic Alcoholism	11
FREE STANDING FACILITIES	17	Developmentally Disabled	11
FACILITIES LICENSED FOR:		Drug Addiction	15
NURSING CARE BEDS ONLY	15	Medicaid Recipient	3
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	2	Mental Illness	7
MULTI-LICENSED FACILITIES	3	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	2
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	7	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	12	Ventilator Dependent	17
		Infectious Disease w/ Isolation	2
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	0
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	60
		Endocrine/Metabolic	323
		Blood Disorders	66
		Nervous System Non Alzheimer	131
		Alzheimer Disease	454
		Mental Illness	180
		Developmental Disability	124
		Circulatory System	384
		Respiratory System	247
		Digestive System	42
		Genitourinary System Disorders	55
		Skin Disorders	5
		Musculo-skeletal Disorders	178
		Injuries and Poisonings	26
		Other Medical Conditions	143
		Non-Medical Conditions	0
		TOTALS	2,418
		Total Residents Diagnosed as Mentally Ill	501

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	2,904	2,763	2,452	2,709	2,249	655	2204	2671	2,372	Total Admissions 2010
Skilled Under 22	0	0	0	0	0	0		0	6,637	Total Discharges 2010
Intermediate DD	98	98	98	98	95	3		98	6,591	Residents on 12/31/2010
Sheltered Care	99	99	81	99	74	25			2,418	Identified Offenders
TOTAL BEDS	3,101	2,960	2,631	2,906	2,418	683	2204	2769	60	

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	124,450	15.5%	547,536	56.2%	11,559	16,982	100,273	11,378	812,178	76.6%	80.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			35,091	98.1%	0	0	365	0	35,456	99.1%	99.1%
Sheltered Care					0	0	25,680	1,036	26,716	73.9%	73.9%
TOTALS	124,450	15.5%	582,627	57.6%	11,559	16,982	126,318	12,414	874,350	77.2%	80.9%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	77	50	0	0	10	14	0	0	87	64	151
45 to 59	237	128	0	0	22	28	0	0	259	156	415
60 to 64	103	74	0	0	7	8	0	0	110	82	192
65 to 74	162	195	0	0	1	4	1	0	164	199	363
75 to 84	188	379	0	0	0	1	5	16	193	396	589
85+	138	518	0	0	0	0	8	44	146	562	708
TOTALS	905	1,344	0	0	40	55	14	60	959	1,459	2,418

HEALTH SERVICE AREA

007

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	338	1,519	24	35	276	57	2,249
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		94	0	0	1	0	95
Sheltered Care			0	0	72	2	74
TOTALS	338	1,613	24	35	349	59	2,418

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	305	270
Skilled Under 22	0	0
Intermediate DD	153	164
Shelter	166	159

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	19	0	2	0	21
Amer. Indian	1	0	0	0	1
Black	752	0	18	0	770
Hawaiian/Pac. Isl.	2	0	0	0	2
White	1,411	0	75	74	1,560
Race Unknown	64	0	0	0	64
Total	2,249	0	95	74	2,418
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	243	0	8	0	251
Non-Hispanic	1,930	0	87	74	2,091
Ethnicity Unknown	76	0	0	0	76
Total	2,249	0	95	74	2,418

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	25.50
Physicians	1.00
Director of Nursing	24.50
Registered Nurses	302.58
LPN's	256.65
Certified Aides	800.03
Other Health Staff	196.40
Non-Health Staff	765.03
Totals	2371.69

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
28.4%	52.4%	1.2%	1.8%	16.2%	100.0%		0.3%
43,345,323	80,074,319	1,908,002	2,689,101	24,691,914	152,708,662	483,184	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	007	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	78	Aggressive/Anti-Social	50
HOSPITAL BASED UNITS	2	Chronic Alcoholism	54
FREE STANDING FACILITIES	76	Developmentally Disabled	25
FACILITIES LICENSED FOR:		Drug Addiction	58
NURSING CARE BEDS ONLY	53	Medicaid Recipient	5
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	20
DD CARE BEDS ONLY	22	Mental Illness	24
MULTI-LICENSED FACILITIES	3	Non-Ambulatory	2
		Non-Mobile	3
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	9
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	2
NON-PROFIT OWNERSHIP	30	Unable to Self-Medicare	2
FOR PROFIT OWNERSHIP	47	Ventilator Dependent	71
		Infectious Disease w/ Isolation	21
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	3	Other Restrictions	8
	3	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	127
		Endocrine/Metabolic	631
		Blood Disorders	118
		Nervous System Non Alzheimer	333
		Alzheimer Disease	412
		Mental Illness	1,616
		Developmental Disability	471
		Circulatory System	1,248
		Respiratory System	530
		Digestive System	211
		Genitourinary System Disorders	292
		Skin Disorders	81
		Musculo-skeletal Disorders	394
		Injuries and Poisonings	149
		Other Medical Conditions	1,055
		Non-Medical Conditions	5
		TOTALS	7,673
Total Residents Diagnosed as Mentally Ill			2,299

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	8,969	8,642	7,930	8,619	7,211	1,758	6349	7710	7,695	Total Admissions 2010
Skilled Under 22	67	67	66	22	66	1		67	23,046	Total Discharges 2010
Intermediate DD	340	340	326	337	322	18		340	23,068	Residents on 12/31/2010
Sheltered Care	107	87	84	87	74	33			7,673	Identified Offenders
TOTAL BEDS	9,483	9,136	8,406	9,065	7,673	1,810	6349	8117	337	

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	498,605	21.5%	1,774,768	63.1%	40,640	84,861	257,138	3,161	2,659,173	81.2%	84.3%
Skilled Under 22			23,450	95.9%	0	0	365	0	23,815	97.4%	97.4%
Intermediate DD			115,625	93.2%	0	0	0	0	115,625	93.2%	93.2%
Sheltered Care					0	0	23,829	3,640	27,469	70.3%	86.5%
TOTALS	498,605	21.5%	1,913,843	64.6%	40,640	84,861	281,332	6,801	2,826,082	81.6%	84.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	22	24	0	0	0	0	22	24	46
18 to 44	450	245	14	6	54	43	0	0	518	294	812
45 to 59	992	562	0	0	88	82	0	0	1,080	644	1,724
60 to 64	312	298	0	0	10	16	0	0	322	314	636
65 to 74	450	506	0	0	7	13	1	0	458	519	977
75 to 84	500	962	0	0	2	6	2	12	504	980	1,484
85+	379	1,555	0	0	0	1	10	49	389	1,605	1,994
TOTALS	3,083	4,128	36	30	161	161	13	61	3,293	4,380	7,673

HEALTH SERVICE AREA

007

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	1,358	4,843	84	173	746	7	7,211
Skilled Under 22	0	65	0	0	1	0	66
ICF/DD		307	15	0	0	0	322
Sheltered Care			0	0	65	9	74
TOTALS	1,358	5,215	99	173	812	16	7,673

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	216	188
Skilled Under 22	540	0
Intermediate DD	144	173
Shelter	138	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	16	0	1	0	17
Amer. Indian	3	0	0	0	3
Black	2,958	49	64	0	3,071
Hawaiian/Pac. Isl.	1	1	3	0	5
White	4,147	16	253	74	4,490
Race Unknown	86	0	1	0	87
Total	7,211	66	322	74	7,673

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	248	7	9	0	264
Non-Hispanic	6,954	59	313	74	7,400
Ethnicity Unknown	9	0	0	0	9
Total	7,211	66	322	74	7,673

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	76.00
Physicians	26.00
Director of Nursing	65.00
Registered Nurses	631.10
LPN's	859.11
Certified Aides	2565.25
Other Health Staff	776.85
Non-Health Staff	2678.10
Totals	7677.41

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
40.3%	43.3%	1.3%	5.5%	9.6%	100.0%		0.3%
220,036,147	236,733,056	7,345,106	29,815,435	52,743,759	546,673,510	1,514,131	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	008	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	29	Aggressive/Anti-Social	18
HOSPITAL BASED UNITS	0	Chronic Alcoholism	16
FREE STANDING FACILITIES	29	Developmentally Disabled	7
FACILITIES LICENSED FOR:		Drug Addiction	19
NURSING CARE BEDS ONLY	20	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	4
DD CARE BEDS ONLY	8	Mental Illness	16
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	1
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	15	Unable to Self-Medicare	1
FOR PROFIT OWNERSHIP	14	Ventilator Dependent	27
		Infectious Disease w/ Isolation	2
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	4
	1	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	36
		Endocrine/Metabolic	198
		Blood Disorders	27
		Nervous System Non Alzheimer	102
		Alzheimer Disease	213
		Mental Illness	229
		Developmental Disability	136
		Circulatory System	311
		Respiratory System	159
		Digestive System	54
		Genitourinary System Disorders	100
		Skin Disorders	16
		Musculo-skeletal Disorders	234
		Injuries and Poisonings	50
		Other Medical Conditions	301
		Non-Medical Conditions	0
		TOTALS	2,166
		Total Residents Diagnosed as Mentally Ill	439

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	2,423	2,343	2,133	2,139	1,966	457	1649	1836	2,147	4,748
Skilled Under 22	0	0	0	0	0	0		0		4,729
Intermediate DD	128	128	128	128	127	1		96		2,166
Sheltered Care	103	103	90	103	73	30			Identified Offenders	30
TOTAL BEDS	2,654	2,574	2,351	2,370	2,166	488	1649	1932		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	107,566	17.9%	427,364	63.8%	6,525	18,742	147,980	148	708,325	80.1%	82.8%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			45,696	130.4%	0	0	365	0	46,061	98.6%	98.6%
Sheltered Care					0	0	28,742	0	28,742	76.5%	76.5%
TOTALS	107,566	17.9%	473,060	67.1%	6,525	18,742	177,087	148	783,128	80.8%	83.4%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	42	14	0	0	36	49	0	0	78	63	141
45 to 59	122	93	0	0	16	22	0	1	138	116	254
60 to 64	57	61	0	0	1	0	2	3	60	64	124
65 to 74	116	137	0	0	2	1	6	5	124	143	267
75 to 84	181	343	0	0	0	0	3	13	184	356	540
85+	169	631	0	0	0	0	13	27	182	658	840
TOTALS	687	1,279	0	0	55	72	24	49	766	1,400	2,166

HEALTH SERVICE AREA

008

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	309	1,175	6	68	408	0	1,966
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		126	0	0	1	0	127
Sheltered Care			0	0	73	0	73
TOTALS	309	1,301	6	68	482	0	2,166

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	231	178
Skilled Under 22	0	0
Intermediate DD	69	214
Shelter	38	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	18	0	8	0	26
Amer. Indian	3	0	0	0	3
Black	106	0	16	0	122
Hawaiian/Pac. Isl.	1	0	0	0	1
White	1,827	0	103	73	2,003
Race Unknown	11	0	0	0	11
Total	1,966	0	127	74	2,166

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	87	0	5	1	93
Non-Hispanic	1,589	0	122	72	1,783
Ethnicity Unknown	290	0	0	0	290
Total	1,966	0	127	73	2,166

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	29.00
Physicians	0.25
Director of Nursing	22.00
Registered Nurses	264.63
LPN's	157.95
Certified Aides	846.63
Other Health Staff	189.60
Non-Health Staff	684.17
Totals	2194.24

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
32.1%	40.2%	0.3%	3.8%	23.6%	100.0%		0.0%
48,075,375	60,313,724	388,756	5,752,765	35,334,459	149,865,080	37,942	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	008	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	38	Aggressive/Anti-Social	26
HOSPITAL BASED UNITS	1	Chronic Alcoholism	26
FREE STANDING FACILITIES	37	Developmentally Disabled	20
FACILITIES LICENSED FOR:		Drug Addiction	31
NURSING CARE BEDS ONLY	30	Medicaid Recipient	2
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	5
DD CARE BEDS ONLY	8	Mental Illness	15
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	4
		Non-Mobile	3
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	3
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	12	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	25	Ventilator Dependent	35
		Infectious Disease w/ Isolation	10
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	4	Other Restrictions	4
	2	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	82
		Endocrine/Metabolic	185
		Blood Disorders	35
		Nervous System Non Alzheimer	210
		Alzheimer Disease	495
		Mental Illness	765
		Developmental Disability	293
		Circulatory System	561
		Respiratory System	190
		Digestive System	49
		Genitourinary System Disorders	104
		Skin Disorders	39
		Musculo-skeletal Disorders	279
		Injuries and Poisonings	70
		Other Medical Conditions	412
		Non-Medical Conditions	1
		TOTALS	3,770
Total Residents Diagnosed as Mentally Ill			1,019

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	4,783	4,488	3,866	4,345	3,491	1,292	3231	3618	3,790	11,603
Skilled Under 22	0	0	0	0	0	0		0		11,623
Intermediate DD	293	291	282	275	279	14		293		3,770
Sheltered Care	0	0	0	0	0	0			Identified Offenders	74
TOTAL BEDS	5,076	4,779	4,148	4,620	3,770	1,306	3231	3911		

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.	
Nursing Care	224,158	19.0%	800,257	60.6%	21,336	25,196	211,701	410	1,283,058	73.5%	78.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			97,809	91.5%	0	0	1,783	0	99,592	93.1%	93.8%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	224,158	19.0%	898,066	62.9%	21,336	25,196	213,484	410	1,382,650	74.6%	79.3%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	113	61	0	0	15	57	0	0	128	118	246
45 to 59	309	193	0	0	41	90	0	0	350	283	633
60 to 64	123	99	0	0	12	11	0	0	135	110	245
65 to 74	200	249	0	0	7	28	0	0	207	277	484
75 to 84	283	567	0	0	2	9	0	0	285	576	861
85+	290	1,004	0	0	0	7	0	0	290	1,011	1,301
TOTALS	1,318	2,173	0	0	77	202	0	0	1,395	2,375	3,770

HEALTH SERVICE AREA

008

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	747	2,062	52	49	581	0	3,491
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		274	0	0	5	0	279
Sheltered Care			0	0	0	0	0
TOTALS	747	2,336	52	49	586	0	3,770

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	245	188
Skilled Under 22	0	0
Intermediate DD	144	171
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	96	0	4	0	100
Amer. Indian	2	0	1	0	3
Black	337	0	21	0	358
Hawaiian/Pac. Isl.	5	0	0	0	5
White	2,983	0	252	0	3,235
Race Unknown	68	0	1	0	69
Total	3,491	0	279	0	3,770

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	178	0	6	0	184
Non-Hispanic	3,299	0	273	0	3,572
Ethnicity Unknown	14	0	0	0	14
Total	3,491	0	279	0	3,770

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	34.14
Physicians	1.40
Director of Nursing	33.14
Registered Nurses	470.77
LPN's	226.92
Certified Aides	1513.59
Other Health Staff	357.35
Non-Health Staff	1045.85
Totals	3683.17

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
36.7%	37.4%	1.0%	3.8%	21.0%	100.0%		0.0%
104,644,386	106,466,657	2,919,887	10,881,244	59,840,583	284,752,764	133,662	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	008	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	11	Aggressive/Anti-Social	9
HOSPITAL BASED UNITS	2	Chronic Alcoholism	7
FREE STANDING FACILITIES	9	Developmentally Disabled	4
FACILITIES LICENSED FOR:		Drug Addiction	10
NURSING CARE BEDS ONLY	9	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	1	Mental Illness	6
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	2
GOVERNMENTAL OWNERSHIP	2	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	3	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	6	Ventilator Dependent	11
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	2	Other Restrictions	0
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	24
		Endocrine/Metabolic	30
		Blood Disorders	2
		Nervous System Non Alzheimer	39
		Alzheimer Disease	52
		Mental Illness	94
		Developmental Disability	92
		Circulatory System	180
		Respiratory System	57
		Digestive System	32
		Genitourinary System Disorders	41
		Skin Disorders	6
		Musculo-skeletal Disorders	97
		Injuries and Poisonings	35
		Other Medical Conditions	75
		Non-Medical Conditions	34
		TOTALS	890
		Total Residents Diagnosed as Mentally Ill	177

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010		
Nursing Care	1,028	942	830	942	756	272	852	743	865		
Skilled Under 22	0	0	0	0	0	0		0	2,491		
Intermediate DD	96	96	91	96	91	5		94	2,466		
Sheltered Care	63	52	49	52	43	20			890		
TOTAL BEDS	1,187	1,090	970	1,090	890	297	852	837		Identified Offenders	6

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	52,767	17.0%	142,209	52.4%	4,888	7,436	68,921	305	276,526	73.7%	80.4%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			31,670	92.3%	0	0	365	0	32,035	91.4%	91.4%
Sheltered Care					2,828	0	12,993	365	16,186	70.4%	85.3%
TOTALS	52,767	17.0%	173,879	56.9%	7,716	7,436	82,279	670	324,747	75.0%	81.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	6	7	0	0	8	14	0	0	14	21	35
45 to 59	22	16	0	0	26	16	0	0	48	32	80
60 to 64	15	21	0	0	8	3	0	1	23	25	48
65 to 74	42	49	0	0	4	5	0	1	46	55	101
75 to 84	64	130	0	0	3	4	0	5	67	139	206
85+	76	308	0	0	0	0	1	35	77	343	420
TOTALS	225	531	0	0	49	42	1	42	275	615	890

HEALTH SERVICE AREA

008

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	130	377	10	17	222	0	756
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		90	0	0	1	0	91
Sheltered Care			7	0	36	0	43
TOTALS	130	467	17	17	259	0	890

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	297	250
Skilled Under 22	0	0
Intermediate DD	124	124
Shelter	131	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	3	0	1	0	4
Amer. Indian	1	0	0	0	1
Black	2	0	7	0	9
Hawaiian/Pac. Isl.	0	0	0	0	0
White	750	0	83	43	876
Race Unknown	0	0	0	0	0
Total	756	0	91	43	890

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	17	0	3	0	20
Non-Hispanic	739	0	88	43	870
Ethnicity Unknown	0	0	0	0	0
Total	756	0	91	43	890

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	11.00
Physicians	0.00
Director of Nursing	11.00
Registered Nurses	126.56
LPN's	59.73
Certified Aides	326.11
Other Health Staff	65.39
Non-Health Staff	253.80
Totals	853.59

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
35.1%	35.6%	4.2%	1.7%	23.5%	100.0%		0.1%
21,132,476	21,399,139	2,516,980	998,060	14,124,449	60,171,109	84,204	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	2	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	2	Developmentally Disabled	0
FACILITIES LICENSED FOR:		Drug Addiction	0
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	1
		Infectious Disease w/ Isolation	0
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	8
		Endocrine/Metabolic	26
		Blood Disorders	3
		Nervous System Non Alzheimer	9
		Alzheimer Disease	12
		Mental Illness	5
		Developmental Disability	1
		Circulatory System	33
		Respiratory System	11
		Digestive System	4
		Genitourinary System Disorders	4
		Skin Disorders	2
		Musculo-skeletal Disorders	61
		Injuries and Poisonings	8
		Other Medical Conditions	35
		Non-Medical Conditions	0
		TOTALS	222
		Total Residents Diagnosed as Mentally Ill	10

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	265	265	235	265	222	43	126	241	196	Total Admissions 2010
Skilled Under 22	0	0	0	0	0	0		0	366	Total Discharges 2010
Intermediate DD	0	0	0	0	0	0		0	340	Residents on 12/31/2010
Sheltered Care	0	0	0	0	0	0			222	Identified Offenders
TOTAL BEDS	265	265	235	265	222	43	126	241	0	

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	15,745	34.2%	37,342	42.5%	0	438	21,173	0	74,698	77.2%	77.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	15,745	34.2%	37,342	42.5%	0	438	21,173	0	74,698	77.2%	77.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	3	5	0	0	0	0	0	0	3	5	8
60 to 64	3	2	0	0	0	0	0	0	3	2	5
65 to 74	8	17	0	0	0	0	0	0	8	17	25
75 to 84	18	45	0	0	0	0	0	0	18	45	63
85+	16	105	0	0	0	0	0	0	16	105	121
TOTALS	48	174	0	0	0	0	0	0	48	174	222

HEALTH SERVICE AREA

009

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	49	106	0	0	67	0	222
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	49	106	0	0	67	0	222

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	168	147
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	171	139

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	222	0	0	0	222
Race Unknown	0	0	0	0	0
Total	222	0	0	0	222

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	222	0	0	0	222
Ethnicity Unknown	0	0	0	0	0
Total	222	0	0	0	222

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	20.00
LPN's	16.00
Certified Aides	91.00
Other Health Staff	2.00
Non-Health Staff	84.00
Totals	217.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
47.2%	21.3%	0.0%	4.8%	26.7%	100.0%	0	0.0%
7,568,552	3,420,906	0	763,710	4,271,859	16,025,029		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	21	Aggressive/Anti-Social	19
HOSPITAL BASED UNITS	0	Chronic Alcoholism	16
FREE STANDING FACILITIES	21	Developmentally Disabled	6
FACILITIES LICENSED FOR:		Drug Addiction	17
NURSING CARE BEDS ONLY	8	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	11
DD CARE BEDS ONLY	12	Mental Illness	2
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	0
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	15	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	5	Ventilator Dependent	21
		Infectious Disease w/ Isolation	12
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	3
	1	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	20
		Endocrine/Metabolic	55
		Blood Disorders	5
		Nervous System Non Alzheimer	69
		Alzheimer Disease	200
		Mental Illness	399
		Developmental Disability	124
		Circulatory System	188
		Respiratory System	58
		Digestive System	20
		Genitourinary System Disorders	18
		Skin Disorders	8
		Musculo-skeletal Disorders	88
		Injuries and Poisonings	14
		Other Medical Conditions	66
		Non-Medical Conditions	10
		TOTALS	1,342
		Total Residents Diagnosed as Mentally Ill	630

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,368	1,366	1,252	1,366	1,195	173	624	789	1,338	
Skilled Under 22	0	0	0	0	0	0		0	1,917	
Intermediate DD	128	128	115	128	115	13		128	1,913	
Sheltered Care	79	36	36	36	32	47			1,342	
TOTAL BEDS	1,575	1,530	1,403	1,530	1,342	233	624	917		Identified Offenders 18

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	45,484	20.0%	223,676	77.7%	1,586	3,080	150,721	2,798	427,345	85.6%	85.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			41,161	88.1%	0	0	0	0	41,161	88.1%	88.1%
Sheltered Care					0	0	9,541	365	9,906	34.4%	75.4%
TOTALS	45,484	20.0%	264,837	79.1%	1,586	3,080	160,262	3,163	478,412	83.2%	85.7%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	47	35	0	0	21	13	0	0	68	48	116
45 to 59	138	77	0	0	35	19	0	0	173	96	269
60 to 64	44	24	0	0	13	4	0	0	57	28	85
65 to 74	72	58	0	0	7	2	0	1	79	61	140
75 to 84	118	145	0	0	0	1	0	9	118	155	273
85+	198	239	0	0	0	0	3	19	201	258	459
TOTALS	617	578	0	0	76	39	3	29	696	646	1,342

HEALTH SERVICE AREA

009

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	134	623	5	15	418	0	1,195
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		115	0	0	0	0	115
Sheltered Care			0	0	31	1	32
TOTALS	134	738	5	15	449	1	1,342

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	158	146
Skilled Under 22	0	0
Intermediate DD	140	168
Shelter	120	108

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	2	0	0	0	2
Amer. Indian	0	0	0	0	0
Black	181	0	15	0	196
Hawaiian/Pac. Isl.	0	0	0	0	0
White	1,012	0	95	32	1,139
Race Unknown	0	0	5	0	5
Total	1,195	0	115	32	1,342

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	11	0	7	0	18
Non-Hispanic	1,184	0	108	32	1,324
Ethnicity Unknown	0	0	0	0	0
Total	1,195	0	115	32	1,342

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	10.00
Physicians	3.00
Director of Nursing	9.00
Registered Nurses	123.50
LPN's	137.50
Certified Aides	552.00
Other Health Staff	103.00
Non-Health Staff	359.00
Totals	1297.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
25.3%	40.3%	11.3%	1.2%	21.8%	100.0%		0.6%
19,299,631	30,780,685	8,651,461	950,746	16,617,226	76,299,755	461,916	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	2	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	2	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	0
NON-PROFIT OWNERSHIP	0	Under 65 Years Old	0
FOR PROFIT OWNERSHIP	2	Unable to Self-Medicare	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Ventilator Dependent	2
	0	Infectious Disease w/ Isolation	0
		Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	2
		Endocrine/Metabolic	4
		Blood Disorders	6
		Nervous System Non Alzheimer	16
		Alzheimer Disease	31
		Mental Illness	0
		Developmental Disability	0
		Circulatory System	22
		Respiratory System	18
		Digestive System	3
		Genitourinary System Disorders	7
		Skin Disorders	1
		Musculo-skeletal Disorders	36
		Injuries and Poisonings	2
		Other Medical Conditions	4
		Non-Medical Conditions	0
		TOTALS	152
		Total Residents Diagnosed as Mentally Ill	3

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	185	168	163	166	152	33	169	64	Total Admissions 2010	538
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	519
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	152
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	185	168	163	166	152	33	169	64		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	14,801	24.0%	14,577	62.4%	0	774	21,662	0	51,814	76.7%	84.5%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	14,801	24.0%	14,577	62.4%	0	774	21,662	0	51,814	76.7%	84.5%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	1	0	0	0	0	0	0	0	1	1
45 to 59	1	0	0	0	0	0	0	0	1	0	1
60 to 64	1	1	0	0	0	0	0	0	1	1	2
65 to 74	2	19	0	0	0	0	0	0	2	19	21
75 to 84	12	41	0	0	0	0	0	0	12	41	53
85+	20	54	0	0	0	0	0	0	20	54	74
TOTALS	36	116	0	0	0	0	0	0	36	116	152

HEALTH SERVICE AREA

009

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	46	41	0	3	62	0	152
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	46	41	0	3	62	0	152

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	250	181
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	120

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	1	0	0	0	1
Amer. Indian	0	0	0	0	0
Black	2	0	0	0	2
Hawaiian/Pac. Isl.	0	0	0	0	0
White	149	0	0	0	149
Race Unknown	0	0	0	0	0
Total	152	0	0	0	152

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	152	0	0	0	152
Ethnicity Unknown	0	0	0	0	0
Total	152	0	0	0	152

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	26.00
LPN's	13.00
Certified Aides	63.00
Other Health Staff	0.00
Non-Health Staff	59.00
Totals	165.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
51.6%	11.6%	0.5%	2.3%	34.0%	100.0%		0.0%
7,380,915	1,651,778	66,278	330,954	4,863,181	14,293,106	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	009	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	28	Aggressive/Anti-Social	15
HOSPITAL BASED UNITS	0	Chronic Alcoholism	18
FREE STANDING FACILITIES	28	Developmentally Disabled	7
FACILITIES LICENSED FOR:		Drug Addiction	21
NURSING CARE BEDS ONLY	14	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	12	Mental Illness	7
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	1
		Non-Mobile	10
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	2
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	2
NON-PROFIT OWNERSHIP	12	Unable to Self-Medicare	5
FOR PROFIT OWNERSHIP	15	Ventilator Dependent	25
		Infectious Disease w/ Isolation	13
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	2	Other Restrictions	3
	2	No Restrictions	1
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	44
		Endocrine/Metabolic	153
		Blood Disorders	68
		Nervous System Non Alzheimer	128
		Alzheimer Disease	215
		Mental Illness	211
		Developmental Disability	162
		Circulatory System	429
		Respiratory System	186
		Digestive System	102
		Genitourinary System Disorders	76
		Skin Disorders	36
		Musculo-skeletal Disorders	229
		Injuries and Poisonings	43
		Other Medical Conditions	250
		Non-Medical Conditions	40
		TOTALS	2,372
		Total Residents Diagnosed as Mentally Ill	867

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	2,644	2,572	2,357	2,572	2,191	453	2059	2349	2,350	3,869
Skilled Under 22	0	0	0	0	0	0		0		3,847
Intermediate DD	144	144	142	96	139	5		144		2,372
Sheltered Care	56	48	44	48	42	14				Identified Offenders 77
TOTAL BEDS	2,844	2,764	2,543	2,716	2,372	472	2059	2493		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	134,715	17.9%	533,632	62.2%	9,746	13,719	106,191	0	798,003	82.7%	85.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			48,985	93.2%	603	0	0	0	49,588	94.3%	94.3%
Sheltered Care					0	0	15,501	0	15,501	75.8%	88.5%
TOTALS	134,715	17.9%	582,617	64.0%	10,349	13,719	121,692	0	863,092	83.1%	85.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	74	52	0	0	31	20	0	0	105	72	177
45 to 59	180	133	0	0	35	22	0	0	215	155	370
60 to 64	86	59	0	0	10	5	0	0	96	64	160
65 to 74	143	161	0	0	5	5	1	1	149	167	316
75 to 84	181	381	0	0	5	1	2	9	188	391	579
85+	129	612	0	0	0	0	1	28	130	640	770
TOTALS	793	1,398	0	0	86	53	4	38	883	1,489	2,372

HEALTH SERVICE AREA

009

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	364	1,464	22	37	304	0	2,191
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		139	0	0	0	0	139
Sheltered Care			0	0	42	0	42
TOTALS	364	1,603	22	37	346	0	2,372

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	198	171
Skilled Under 22	0	0
Intermediate DD	184	199
Shelter	120	121

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	14	0	2	0	16
Amer. Indian	5	0	1	0	6
Black	372	0	28	0	400
Hawaiian/Pac. Isl.	7	0	0	0	7
White	1,772	0	106	42	1,920
Race Unknown	21	0	2	0	23
Total	2,191	0	139	42	2,372

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	79	0	7	0	86
Non-Hispanic	2,029	0	132	42	2,203
Ethnicity Unknown	83	0	0	0	83
Total	2,191	0	139	42	2,372

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	28.25
Physicians	0.00
Director of Nursing	16.00
Registered Nurses	248.00
LPN's	264.00
Certified Aides	872.00
Other Health Staff	121.50
Non-Health Staff	901.25
Totals	2451.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
39.0%	41.2%	0.9%	2.1%	16.7%	100.0%		0.0%
58,240,335	61,589,389	1,385,364	3,135,913	24,996,988	149,347,992	27,363	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	010	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	2
HOSPITAL BASED UNITS	1	Chronic Alcoholism	1
FREE STANDING FACILITIES	3	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	4	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	2
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	2	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	4
		Infectious Disease w/ Isolation	0
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	2
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	2
		Endocrine/Metabolic	29
		Blood Disorders	1
		Nervous System Non Alzheimer	59
		Alzheimer Disease	44
		Mental Illness	46
		Developmental Disability	2
		Circulatory System	53
		Respiratory System	24
		Digestive System	4
		Genitourinary System Disorders	8
		Skin Disorders	4
		Musculo-skeletal Disorders	17
		Injuries and Poisonings	7
		Other Medical Conditions	23
		Non-Medical Conditions	0
		TOTALS	323
		Total Residents Diagnosed as Mentally Ill	88

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	446	446	382	446	323	123	358	394	361	705
Skilled Under 22	0	0	0	0	0	0		0		743
Intermediate DD	0	0	0	0	0	0		0		323
Sheltered Care	0	0	0	0	0	0				Identified Offenders 17
TOTAL BEDS	446	446	382	446	323	123	358	394		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	7,631	5.8%	70,635	49.1%	3,751	735	38,034	0	120,786	74.2%	74.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	7,631	5.8%	70,635	49.1%	3,751	735	38,034	0	120,786	74.2%	74.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	4	3	0	0	0	0	0	0	4	3	7
45 to 59	29	20	0	0	0	0	0	0	29	20	49
60 to 64	8	5	0	0	0	0	0	0	8	5	13
65 to 74	20	29	0	0	0	0	0	0	20	29	49
75 to 84	18	57	0	0	0	0	0	0	18	57	75
85+	23	107	0	0	0	0	0	0	23	107	130
TOTALS	102	221	0	0	0	0	0	0	102	221	323

HEALTH SERVICE AREA

010

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	22	190	4	3	104	0	323
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	22	190	4	3	104	0	323

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	154	117
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	8	0	0	0	8
Hawaiian/Pac. Isl.	0	0	0	0	0
White	313	0	0	0	313
Race Unknown	2	0	0	0	2
Total	323	0	0	0	323
ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	2	0	0	0	2
Non-Hispanic	321	0	0	0	321
Ethnicity Unknown	0	0	0	0	0
Total	323	0	0	0	323

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	4.00
Physicians	0.00
Director of Nursing	4.00
Registered Nurses	22.40
LPN's	41.80
Certified Aides	129.50
Other Health Staff	8.00
Non-Health Staff	94.00
Totals	303.70

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
19.4%	57.4%	0.0%	2.2%	21.1%	100.0%	0	0.0%
2,608,771	7,715,478	0	289,450	2,832,867	13,446,567		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	010	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	2	Aggressive/Anti-Social	1
HOSPITAL BASED UNITS	0	Chronic Alcoholism	0
FREE STANDING FACILITIES	2	Developmentally Disabled	1
FACILITIES LICENSED FOR:		Drug Addiction	1
NURSING CARE BEDS ONLY	2	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	0
DD CARE BEDS ONLY	0	Mental Illness	0
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	0	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	1	Ventilator Dependent	2
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	2
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	0
		Endocrine/Metabolic	12
		Blood Disorders	1
		Nervous System Non Alzheimer	10
		Alzheimer Disease	31
		Mental Illness	2
		Developmental Disability	1
		Circulatory System	23
		Respiratory System	4
		Digestive System	5
		Genitourinary System Disorders	8
		Skin Disorders	2
		Musculo-skeletal Disorders	16
		Injuries and Poisonings	13
		Other Medical Conditions	6
		Non-Medical Conditions	0
		TOTALS	134
		Total Residents Diagnosed as Mentally Ill	3

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	172	172	152	172	134	38	80	172	Total Admissions 2010	96
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	109
Intermediate DD	0	0	0	0	0	0		0	Residents on 12/31/2010	134
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	172	172	152	172	134	38	80	172		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	1,942	6.7%	24,802	39.5%	603	210	23,330	0	50,887	81.1%	81.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			0	0.0%	0	0	0	0	0	0.0%	0.0%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	1,942	6.7%	24,802	39.5%	603	210	23,330	0	50,887	81.1%	81.1%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	0	0	0	0	0	0	0	0	0	0	0
45 to 59	0	0	0	0	0	0	0	0	0	0	0
60 to 64	1	3	0	0	0	0	0	0	1	3	4
65 to 74	4	7	0	0	0	0	0	0	4	7	11
75 to 84	11	19	0	0	0	0	0	0	11	19	30
85+	19	70	0	0	0	0	0	0	19	70	89
TOTALS	35	99	0	0	0	0	0	0	35	99	134

HEALTH SERVICE AREA

010

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	4	65	0	0	65	0	134
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		0	0	0	0	0	0
Sheltered Care			0	0	0	0	0
TOTALS	4	65	0	0	65	0	134

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	127	113
Skilled Under 22	0	0
Intermediate DD	0	0
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	0	0	0
Hawaiian/Pac. Isl.	0	0	0	0	0
White	134	0	0	0	134
Race Unknown	0	0	0	0	0
Total	134	0	0	0	134

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	134	0	0	0	134
Ethnicity Unknown	0	0	0	0	0
Total	134	0	0	0	134

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	2.00
Physicians	0.00
Director of Nursing	2.00
Registered Nurses	5.00
LPN's	19.00
Certified Aides	69.00
Other Health Staff	4.00
Non-Health Staff	55.00
Totals	156.00

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
7.9%	48.7%	0.0%	0.5%	42.8%	100.0%		0.0%
514,172	3,164,528	292	33,843	2,781,166	6,494,001	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	010	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	15	Aggressive/Anti-Social	8
HOSPITAL BASED UNITS	1	Chronic Alcoholism	8
FREE STANDING FACILITIES	14	Developmentally Disabled	4
FACILITIES LICENSED FOR:		Drug Addiction	9
NURSING CARE BEDS ONLY	9	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	3
DD CARE BEDS ONLY	4	Mental Illness	4
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	7	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	7	Ventilator Dependent	13
		Infectious Disease w/ Isolation	4
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	1	Other Restrictions	1
	1	No Restrictions	2
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	20
		Endocrine/Metabolic	58
		Blood Disorders	10
		Nervous System Non Alzheimer	49
		Alzheimer Disease	127
		Mental Illness	111
		Developmental Disability	89
		Circulatory System	169
		Respiratory System	64
		Digestive System	20
		Genitourinary System Disorders	40
		Skin Disorders	9
		Musculo-skeletal Disorders	53
		Injuries and Poisonings	41
		Other Medical Conditions	313
		Non-Medical Conditions	2
		TOTALS	1,175
Total Residents Diagnosed as Mentally Ill			241

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS							ADMISSIONS AND DISCHARGES - 2010		
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	1,326	1,321	1,117	1,318	1,036	290	923	1060	1,166	
Skilled Under 22	0	0	0	0	0	0		0	2,859	
Intermediate DD	88	88	88	88	87	1		104	2,850	
Sheltered Care	58	79	68	58	52	6			1,175	
TOTAL BEDS	1,472	1,488	1,273	1,464	1,175	297	923	1164		Identified Offenders 20

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	60,589	18.0%	209,432	54.1%	380	9,719	90,333	878	371,331	76.7%	77.0%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			31,941	84.1%	0	0	0	0	31,941	99.4%	99.4%
Sheltered Care					0	0	22,069	0	22,069	104.2%	76.5%
TOTALS	60,589	18.0%	241,373	56.8%	380	9,719	112,402	878	425,341	79.2%	78.3%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	14	15	0	0	20	19	0	0	34	34	68
45 to 59	52	47	0	0	19	15	0	1	71	63	134
60 to 64	16	26	0	0	3	3	0	0	19	29	48
65 to 74	54	67	0	0	2	3	0	1	56	71	127
75 to 84	91	199	0	0	1	2	2	2	94	203	297
85+	99	356	0	0	0	0	13	33	112	389	501
TOTALS	326	710	0	0	45	42	15	37	386	789	1,175

HEALTH SERVICE AREA

010

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	145	599	2	28	262	0	1,036
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		87	0	0	0	0	87
Sheltered Care			0	0	52	0	52
TOTALS	145	686	2	28	314	0	1,175

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	197	177
Skilled Under 22	0	0
Intermediate DD	0	136
Shelter	160	140

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	3	0	1	0	4
Amer. Indian	1	0	1	0	2
Black	99	0	9	0	108
Hawaiian/Pac. Isl.	1	0	0	0	1
White	926	0	75	52	1,053
Race Unknown	6	0	1	0	7
Total	1,036	0	87	52	1,175

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	32	0	2	0	34
Non-Hispanic	1,002	0	84	52	1,138
Ethnicity Unknown	2	0	1	0	3
Total	1,036	0	87	52	1,175

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	13.00
Physicians	0.00
Director of Nursing	12.15
Registered Nurses	90.62
LPN's	171.85
Certified Aides	537.68
Other Health Staff	109.25
Non-Health Staff	339.00
Totals	1273.55

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
31.3%	34.3%	0.7%	5.6%	28.1%	100.0%		0.3%
22,013,988	24,155,043	516,764	3,911,238	19,782,268	70,379,304	183,227	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	011	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	11	Aggressive/Anti-Social	7
HOSPITAL BASED UNITS	0	Chronic Alcoholism	8
FREE STANDING FACILITIES	11	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	9
NURSING CARE BEDS ONLY	5	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	6	Mental Illness	4
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	1
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	0
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	2	Unable to Self-Medicare	1
FOR PROFIT OWNERSHIP	9	Ventilator Dependent	11
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Infectious Disease w/ Isolation	6
	0	Other Restrictions	0
		No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	6
		Endocrine/Metabolic	33
		Blood Disorders	3
		Nervous System Non Alzheimer	33
		Alzheimer Disease	61
		Mental Illness	19
		Developmental Disability	124
		Circulatory System	81
		Respiratory System	15
		Digestive System	6
		Genitourinary System Disorders	7
		Skin Disorders	3
		Musculo-skeletal Disorders	21
		Injuries and Poisonings	4
		Other Medical Conditions	19
		Non-Medical Conditions	0
		TOTALS	435
		Total Residents Diagnosed as Mentally Ill	130

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	407	393	332	393	315	92	165	401	Total Admissions 2010	321
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	326
Intermediate DD	130	130	126	130	120	10		130	Residents on 12/31/2010	435
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	537	523	458	523	435	102	165	531		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	10,495	17.4%	62,143	42.5%	0	199	37,843	0	110,680	74.5%	77.2%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			44,333	93.4%	0	0	0	0	44,333	93.4%	93.4%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	10,495	17.4%	106,476	54.9%	0	199	37,843	0	155,013	79.1%	81.2%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	2	0	0	22	16	0	0	23	18	41
45 to 59	11	6	0	0	24	31	0	0	35	37	72
60 to 64	4	5	0	0	3	5	0	0	7	10	17
65 to 74	14	16	0	0	5	7	0	0	19	23	42
75 to 84	32	55	0	0	3	2	0	0	35	57	92
85+	32	137	0	0	0	2	0	0	32	139	171
TOTALS	94	221	0	0	57	63	0	0	151	284	435

HEALTH SERVICE AREA

011

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	33	180	0	27	75	0	315
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		120	0	0	0	0	120
Sheltered Care			0	0	0	0	0
TOTALS	33	300	0	27	75	0	435

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	156	122
Skilled Under 22	0	0
Intermediate DD	198	130
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	1	0	1
Amer. Indian	0	0	0	0	0
Black	3	0	18	0	21
Hawaiian/Pac. Isl.	0	0	0	0	0
White	311	0	101	0	412
Race Unknown	1	0	0	0	1
Total	315	0	120	0	435

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	314	0	120	0	434
Ethnicity Unknown	1	0	0	0	1
Total	315	0	120	0	435

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	85.25
Physicians	0.00
Director of Nursing	85.00
Registered Nurses	103.00
LPN's	346.50
Certified Aides	1078.75
Other Health Staff	47.00
Non-Health Staff	977.25
Totals	2722.75

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
20.5%	36.5%	19.7%	1.2%	22.1%	100.0%	0	0.0%
5,764,997	10,277,868	5,559,941	332,202	6,217,643	28,152,654		

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	011	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	42	Aggressive/Anti-Social	19
HOSPITAL BASED UNITS	3	Chronic Alcoholism	19
FREE STANDING FACILITIES	39	Developmentally Disabled	4
FACILITIES LICENSED FOR:		Drug Addiction	24
NURSING CARE BEDS ONLY	22	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	6
DD CARE BEDS ONLY	19	Mental Illness	4
MULTI-LICENSED FACILITIES	1	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	0	Under 65 Years Old	1
NON-PROFIT OWNERSHIP	25	Unable to Self-Medicare	5
FOR PROFIT OWNERSHIP	17	Ventilator Dependent	38
		Infectious Disease w/ Isolation	19
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	3	Other Restrictions	5
	1	No Restrictions	3
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	33
		Endocrine/Metabolic	104
		Blood Disorders	14
		Nervous System Non Alzheimer	76
		Alzheimer Disease	295
		Mental Illness	111
		Developmental Disability	513
		Circulatory System	317
		Respiratory System	146
		Digestive System	36
		Genitourinary System Disorders	57
		Skin Disorders	25
		Musculo-skeletal Disorders	120
		Injuries and Poisonings	88
		Other Medical Conditions	135
		Non-Medical Conditions	11
		TOTALS	2,081
		Total Residents Diagnosed as Mentally Ill	528

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	2,216	2,116	1,795	2,089	1,581	635	1189	1737	2,116	4,099
Skilled Under 22	0	0	0	0	0	0		0		4,134
Intermediate DD	540	528	503	528	494	46		519		2,081
Sheltered Care	7	7	7	7	6	1				Identified Offenders 3
TOTAL BEDS	2,763	2,651	2,305	2,624	2,081	682	1189	2256		

LEVEL OF CARE	FACILITY UTILIZATION - 2010										
	BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE										
	Medicare		Medicaid		Other Public Pay	Private Insurance	Private Pay	Charity Care	TOTAL	Licensed Beds	Peak Beds Set Up
Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Pat. days	Occ. Pct.	Occ. Pct.
Nursing Care	76,495	17.6%	306,180	48.3%	9,158	11,259	176,980	150	580,222	71.7%	75.1%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			172,224	90.9%	0	0	4,492	0	176,716	89.7%	91.7%
Sheltered Care					0	0	2,397	52	2,449	95.9%	95.9%
TOTALS	76,495	17.6%	478,404	58.1%	9,158	11,259	183,869	202	759,387	75.3%	78.5%

AGE GROUPS	RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010										
	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND TOTAL
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	7	4	0	0	107	79	0	0	114	83	197
45 to 59	34	31	0	0	100	91	0	0	134	122	256
60 to 64	16	40	0	0	42	12	0	0	58	52	110
65 to 74	82	151	0	0	31	16	0	0	113	167	280
75 to 84	143	336	0	0	11	4	1	0	155	340	495
85+	132	605	0	0	0	1	0	5	132	611	743
TOTALS	414	1,167	0	0	291	203	1	5	706	1,375	2,081

HEALTH SERVICE AREA

011

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	209	834	20	26	492	0	1,581
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		480	0	0	14	0	494
Sheltered Care			0	0	6	0	6
TOTALS	209	1,314	20	26	512	0	2,081

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	267	242
Skilled Under 22	0	0
Intermediate DD	122	139
Shelter	199	159

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	2	0	3	0	5
Amer. Indian	0	0	0	0	0
Black	85	0	37	0	122
Hawaiian/Pac. Isl.	0	0	2	0	2
White	1,494	0	452	6	1,952
Race Unknown	0	0	0	0	0
Total	1,581	0	494	6	2,081

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	5	0	6	0	11
Non-Hispanic	1,576	0	488	6	2,070
Ethnicity Unknown	0	0	0	0	0
Total	1,581	0	494	6	2,081

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	38.00
Physicians	1.00
Director of Nursing	25.00
Registered Nurses	143.20
LPN's	256.07
Certified Aides	1022.79
Other Health Staff	188.92
Non-Health Staff	667.84
Totals	2342.82

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
25.1%	44.5%	0.7%	2.5%	27.3%	100.0%		0.0%
30,265,264	53,623,757	802,550	2,997,327	32,916,137	120,605,042	51,283	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	011	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	4	Aggressive/Anti-Social	4
HOSPITAL BASED UNITS	0	Chronic Alcoholism	3
FREE STANDING FACILITIES	4	Developmentally Disabled	2
FACILITIES LICENSED FOR:		Drug Addiction	4
NURSING CARE BEDS ONLY	3	Medicaid Recipient	0
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	1
DD CARE BEDS ONLY	1	Mental Illness	1
MULTI-LICENSED FACILITIES	0	Non-Ambulatory	0
		Non-Mobile	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Public Aid Recipient	1
GOVERNMENTAL OWNERSHIP	1	Under 65 Years Old	0
NON-PROFIT OWNERSHIP	1	Unable to Self-Medicare	0
FOR PROFIT OWNERSHIP	2	Ventilator Dependent	4
		Infectious Disease w/ Isolation	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	0	Other Restrictions	0
	0	No Restrictions	0
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	1
		Endocrine/Metabolic	16
		Blood Disorders	4
		Nervous System Non Alzheimer	12
		Alzheimer Disease	81
		Mental Illness	1
		Developmental Disability	16
		Circulatory System	59
		Respiratory System	35
		Digestive System	13
		Genitourinary System Disorders	3
		Skin Disorders	3
		Musculo-skeletal Disorders	3
		Injuries and Poisonings	19
		Other Medical Conditions	40
		Non-Medical Conditions	1
		TOTALS	307
		Total Residents Diagnosed as Mentally III	9

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	324	321	300	321	292	32	149	285	Total Admissions 2010	307
Skilled Under 22	0	0	0	0	0	0		0	Total Discharges 2010	293
Intermediate DD	16	16	15	16	15	1		16	Residents on 12/31/2010	307
Sheltered Care	0	0	0	0	0	0			Identified Offenders	0
TOTAL BEDS	340	337	315	337	307	33	149	301		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	7,018	12.9%	46,724	44.9%	0	0	49,708	0	103,450	87.5%	88.3%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			5,471	93.7%	0	0	0	0	5,471	93.7%	93.7%
Sheltered Care					0	0	0	0	0	0.0%	0.0%
TOTALS	7,018	12.9%	52,195	47.5%	0	0	49,708	0	108,921	87.8%	88.6%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	1	0	0	0	3	2	0	0	4	2	6
45 to 59	2	4	0	0	2	6	0	0	4	10	14
60 to 64	3	3	0	0	2	0	0	0	5	3	8
65 to 74	7	12	0	0	0	0	0	0	7	12	19
75 to 84	30	71	0	0	0	0	0	0	30	71	101
85+	30	129	0	0	0	0	0	0	30	129	159
TOTALS	73	219	0	0	7	8	0	0	80	227	307

HEALTH SERVICE AREA

011

RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	18	131	0	0	143	0	292
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		15	0	0	0	0	15
Sheltered Care			0	0	0	0	0
TOTALS	18	146	0	0	143	0	307

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	163	137
Skilled Under 22	0	0
Intermediate DD	0	114
Shelter	0	0

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	0	0	0	0	0
Amer. Indian	0	0	0	0	0
Black	0	0	1	0	1
Hawaiian/Pac. Isl.	0	0	0	0	0
White	292	0	14	0	306
Race Unknown	0	0	0	0	0
Total	292	0	15	0	307

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	0	0	0	0	0
Non-Hispanic	292	0	15	0	307
Ethnicity Unknown	0	0	0	0	0
Total	292	0	15	0	307

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	3.25
Physicians	0.00
Director of Nursing	3.00
Registered Nurses	14.25
LPN's	44.00
Certified Aides	131.00
Other Health Staff	5.00
Non-Health Staff	149.00
Totals	349.50

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
17.6%	34.6%	0.0%	0.0%	47.7%	100.0%	0	0.0%
3,013,327	5,924,007	0	0	8,164,368	17,101,703	0	

*Charity Expense does not include expenses which may be considered a community benefit.

HEALTH SERVICE AREA	011	ADMISSION RESTRICTIONS	RESIDENTS BY PRIMARY DIAGNOSIS
TOTAL FACILITIES	24	Aggressive/Anti-Social	8
HOSPITAL BASED UNITS	0	Chronic Alcoholism	6
FREE STANDING FACILITIES	24	Developmentally Disabled	3
FACILITIES LICENSED FOR:		Drug Addiction	12
NURSING CARE BEDS ONLY	18	Medicaid Recipient	1
SHELTERED CARE BEDS ONLY	0	Medicare Recipient	2
DD CARE BEDS ONLY	4	Mental Illness	5
MULTI-LICENSED FACILITIES	2	Non-Ambulatory	0
FACILITIES REPORTED BY OWNERSHIP TYPE		Non-Mobile	0
GOVERNMENTAL OWNERSHIP	0	Public Aid Recipient	2
NON-PROFIT OWNERSHIP	9	Under 65 Years Old	2
FOR PROFIT OWNERSHIP	15	Unable to Self-Medicare	1
CONTINUING CARE COMMUNITY LIFE CARE FACILITY	2	Ventilator Dependent	20
	1	Infectious Disease w/ Isolation	6
		Other Restrictions	5
		No Restrictions	4
		<i>Note: Reported restrictions denoted by 'I'</i>	
		DIAGNOSIS	
		Neoplasms	30
		Endocrine/Metabolic	133
		Blood Disorders	20
		Nervous System Non Alzheimer	96
		Alzheimer Disease	169
		Mental Illness	211
		Developmental Disability	159
		Circulatory System	327
		Respiratory System	218
		Digestive System	48
		Genitourinary System Disorders	54
		Skin Disorders	22
		Musculo-skeletal Disorders	111
		Injuries and Poisonings	87
		Other Medical Conditions	212
		Non-Medical Conditions	20
		TOTALS	1,917
		Total Residents Diagnosed as Mentally Ill	337

LEVEL OF CARE	LICENSED BEDS, BEDS IN USE, MEDICARE/MEDICAID CERTIFIED BEDS								ADMISSIONS AND DISCHARGES - 2010	
	LICENSED BEDS	PEAK BEDS SET-UP	PEAK BEDS USED	BEDS SET-UP	BEDS IN USE	AVAILABLE BEDS	MEDICARE CERTIFIED	MEDICAID CERTIFIED	Residents on 1/1/2010	
Nursing Care	2,294	2,200	1,907	2,056	1,734	560	1109	2028	1,879	3,323
Skilled Under 22	0	0	0	0	0	0		0		3,285
Intermediate DD	148	148	147	148	146	2		148		1,917
Sheltered Care	100	100	55	60	37	63			Identified Offenders	55
TOTAL BEDS	2,542	2,448	2,109	2,264	1,917	625	1109	2176		

FACILITY UTILIZATION - 2010											
BY LEVEL OF CARE PROVIDED AND PATIENT PAYMENT SOURCE											
LEVEL OF CARE	Medicare		Medicaid		Other	Private	Private	Charity	TOTAL	Licensed	Peak Beds
	Pat. days	Occ. Pct.	Pat. days	Occ. Pct.	Public Pay	Insurance	Pay	Care		Pat. days	Beds
Nursing Care	71,152	17.6%	404,849	54.7%	15,436	15,392	132,401	365	639,595	76.4%	79.7%
Skilled Under 22			0	0.0%	0	0	0	0	0	0.0%	0.0%
Intermediate DD			52,228	96.7%	0	0	0	0	52,228	96.7%	96.7%
Sheltered Care					0	0	14,512	365	14,877	40.8%	40.8%
TOTALS	71,152	17.6%	457,077	57.5%	15,436	15,392	146,913	730	706,700	76.2%	79.1%

RESIDENTS BY AGE GROUP, SEX AND LEVEL OF CARE - DECEMBER 31, 2010											
AGE GROUPS	NURSING CARE		SKL UNDER 22		INTERMED. DD		SHELTERED		TOTAL		GRAND
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	TOTAL
Under 18	0	0	0	0	0	0	0	0	0	0	0
18 to 44	29	24	0	0	31	25	0	0	60	49	109
45 to 59	145	84	0	0	30	33	0	0	175	117	292
60 to 64	51	51	0	0	7	7	0	0	58	58	116
65 to 74	105	134	0	0	5	3	1	0	111	137	248
75 to 84	180	341	0	0	2	3	1	7	183	351	534
85+	104	486	0	0	0	0	7	21	111	507	618
TOTALS	614	1,120	0	0	75	71	9	28	698	1,219	1,917

HEALTH SERVICE AREA

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RESIDENTS BY PAYMENT SOURCE AND LEVEL OF CARE

LEVEL OF CARE	Medicare	Medicaid	Other Public	Insurance	Private Pay	Charity Care	TOTALS
Nursing Care	180	1,098	37	44	374	1	1,734
Skilled Under 22	0	0	0	0	0	0	0
ICF/DD		146	0	0	0	0	146
Sheltered Care			1	0	35	1	37
TOTALS	180	1,244	38	44	409	2	1,917

AVERAGE DAILY PAYMENT RATES

LEVEL OF CARE	SINGLE	DOUBLE
Nursing Care	152	131
Skilled Under 22	0	0
Intermediate DD	109	118
Shelter	84	81

RESIDENTS BY RACIAL/ETHNICITY GROUPING

RACE	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Asian	9	0	2	0	11
Amer. Indian	0	0	0	0	0
Black	477	0	34	1	512
Hawaiian/Pac. Isl.	0	0	1	0	1
White	1,248	0	109	36	1,393
Race Unknown	0	0	0	0	0
Total	1,734	0	146	37	1,917

ETHNICITY	Nursing	SkUnd22	ICF/DD	Shelter	Totals
Hispanic	13	0	0	0	13
Non-Hispanic	1,721	0	146	37	1,904
Ethnicity Unknown	0	0	0	0	0
Total	1,734	0	146	37	1,917

STAFFING

EMPLOYMENT CATEGORY	FULL-TIME EQUIVALENT
Administrators	22.83
Physicians	0.00
Director of Nursing	22.00
Registered Nurses	100.10
LPN's	273.43
Certified Aides	755.58
Other Health Staff	117.84
Non-Health Staff	645.98
Totals	1937.76

NET REVENUE BY PAYOR SOURCE (Fiscal Year Data)

Medicare	Medicaid	Other Public	Private Insurance	Private Pay	TOTALS	Charity Care Expense*	Charity Care Expense as % of Total Net Revenue
32.1%	41.5%	3.2%	4.8%	18.3%	100.0%		0.8%
36,408,642	47,086,980	3,651,041	5,469,906	20,747,561	113,364,130	906,683	

*Charity Expense does not include expenses which may be considered a community benefit.