

Date: Sep 26, 2024
Time: 07:50:28 ET
User: Nandan Kishore

**Asbury Solomons Healthcare Center
Detailed Census Report - By Payer
from 8/1/2024 to 8/31/2024**

Asbury Solomons Healthcare Center

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Unit: All Floor: All Payers: All Bed Certification: All

Resident ResidentID Number	# of Payer Days Code	Care Level	Alt Care Level	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Room	Rate Type
Andrews, Hilma (34628)	31	MCD	STD	STD	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	213-A	S	
Balderson, Carmel (38986)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	239-A	P	
Barker, Myrtle (107263)	31	MCD	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	234-A	P	
Barth, Joseph (98208)	12	MCA	GDGF1	STD																			A	A	A	A	A	A	A	A	A	A	A	232-A	P	
Bennett, Jarvis (52299ASHC)	31	MCD	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	240-A	P	
Bishop, Kensel (83888)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	202-A	P	
Bowen, Delores (103262)	31	MCD	STD	STD	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	220-A	P	
Brooks, Mary (52340ASHC)	8	MCA	JBCE1	STD	A	A	A	A	A	A	A																							212-A	P	
	23	PP	STD									A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	212-A	P	
Chandlee, Rosanne (91206)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	215-A	P	
Cole, Ronald (52357ASHC)	10	MGD	L1	STD	A	A	A	A	A	A	A	A	A	A	A																			200-B	S	
	0														D																			-		
Cook, Carol (52361ASHC)	8	PP	STD															A	A	A	A	A	A	A	A									213-B	S	
	0																									D								-		
Davis, Charles (117311)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	221-A	P	
Delamarter, Ann (4135)	31	MCD	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	222-A	P	
Delano, Helen (3852)	31	MCD	STD	STD	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	219-A	P	
Dobson, Irenaeia (118007)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	207-A	P	
Downing, Dorothy (52355ASHC)	6	MCA	GAPF1	STD	A	A	A	A	A	A																								214-A	S	
	1	MCA	GAPF1	STD						A																								214-A	S	
	0										D																							-		
	17	MCA	GAXD1	STD												A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	D	214-A	S	
	0																																	-		
Elwell, Mary Ellen (3856)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	201-A	P	
Fowler, Mildred (68723)	31	MCD	STD	STD	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	237-A	P	
Gabrelcik, Joyce (70282)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	230-A	P	
Greitzer Silberschlag, Deborah (52350ASHC)	19	INS	L21	STD	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A													217-A	P	
	0																						D											-		
Hayward, Martha (86509)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	205-A	P	
Heflebower, Mary (4393)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	210-A	P	
Hill, Edith (110020)	31	MCD	STD	STD	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	206-A	P	
Hill, Lynn (103572)	31	PP	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	227-B	S	
Holbrook, Willard (67963)	1	MCA	JEPE1	STD	A																													211-A	P	
	7	PP	STD			A	A	A	A	A	A																							211-A	P	
	0											D																						-		
Houston, Robert (6227)	31	MCD	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	203-A	P	

Resident ResidentID Number	# of Payer Days Code	Care Level	Alt Care Level	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Room	Rate Type
Weber, Joanne (30057)	31	MCD	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	235-A	P
Willis, Grace (20621)	31	MCD	STD		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	231-A	P
Wiseman, Phyllis (118418)	8 0	PP	STD																A	A	A	A	A	A	A									223-A	P	
																											D								-	
PAID DAYS	1247				38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40	
UNPAID DAYS	0				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
TOTAL DAYS	1247				38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40	

Summary By: Payer		# of Days	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Commercial - Carefirst 4 Levels (INS)	Paid	19	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Levels (INS)	Paid	3	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Medicaid MD (MCD)	Paid	416	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	14	14	14	14	14	14	14	14	14	14	14	14	14
Medicaid Pending MD (MAP)	Paid	31	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Medicare A (MCA)	Paid	160	5	5	5	5	5	6	6	5	4	3	3	4	6	6	5	6	6	6	5	6	6	6	5	5	5	5	5	5	6	5	5
Medicare Adv - Aetna 4 Levels (MGD)	Paid	10	0	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Private Pay (PP)	Paid	608	17	18	18	18	18	18	19	19	19	19	19	18	18	18	21	21	22	22	22	21	21	21	21	20	20	20	20	20	20	20	20
PAID DAYS		1247	38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40
UNPAID DAYS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL DAYS		1247	38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40

Summary By:
Payer# of Care
Days Level

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Commercial - Carefirst 4 Levels (L2)	Paid	19	L2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Levels (L1)	Paid	3	L1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Medicaid MD (STD)	Paid	416	STD	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	14	14	14	14	14	14	14	14	14	14	14	14	14
Medicaid Pending MD (STD)	Paid	31	STD	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Medicare A (CAPE)	Paid	18	CAPE	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0
	Paid	35	GAPE	1	1	1	1	1	2	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Paid	9	GAPF	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Paid	17	GAXD	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0
	Paid	12	GAXF	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1
	Paid	12	GDGF	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1
	Paid	25	IEUE	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	1	1	1	1	0	0	0	0	0	0
	Paid	8	JBCE	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Paid	2	JBEE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
	Paid	1	JEPE	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Paid	18	KAQC	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0
	Paid	3	MIMD	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1
Medicare Adv - Aetna 4 Levels (L1)	Paid	10	L1	0	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Private Pay (STD)	Paid	608	STD	17	18	18	18	18	18	19	19	19	19	19	18	18	18	21	21	22	22	22	21	21	21	21	20	20	20	20	20

PAID DAYS	1247	38	40	40	39	39	40	41	40	39	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	41	40	40
UNPAID DAYS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL DAYS	1247	38	40	40	39	39	40	41	40	39	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	41	40	40

Summary By: Care Level		# of Days	Payer	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
CAPE (MCA)	18	MCA	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0			
GAPE (MCA)	35	MCA	1	1	1	1	1	2	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
GAPF (MCA)	9	MCA	1	1	1	1	1	1	1	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
GAXD (MCA)	17	MCA	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0			
GAXF (MCA)	12	MCA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1			
GDGF (MCA)	12	MCA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1			
IEUE (MCA)	25	MCA	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	1	1	1	1	0	0	0	0	0	0	0	0			
JBCE (MCA)	8	MCA	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
JBEE (MCA)	2	MCA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1		
JEPE (MCA)	1	MCA	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
KAQC (MCA)	18	MCA	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0			
L1 (INS)	3	INS	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	10	MGD	0	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
L2 (INS)	19	INS	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0			
MIMD (MCA)	3	MCA	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1			
STD (MAP)	31	MAP	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
	416	MCD	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	14	14	14	14	14	14	14	14	14	14	14	14	14			
	608	PP	17	18	18	18	18	18	19	19	19	19	19	19	18	18	18	21	21	22	22	22	21	21	21	21	21	20	20	20	20	20	20	20	20		
PAID DAYS	1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	42	41	40	40	40	40	41	40	40				
UNPAID DAYS	0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
TOTAL DAYS	1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	42	41	40	40	40	40	41	40	40				

Summary By: Status		# of Days	Payer	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
Active	19	INS	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0				
	3	INS	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
	31	MAP	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1					
	160	MCA	5	5	5	5	5	6	6	6	5	4	3	3	4	6	6	5	6	6	6	5	6	6	6	5	5	5	5	5	5	6	5	5				
	416	MCD	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	14	14	14	14	14	14	14	14	14	14	14	14	14				
	10	MGD	0	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
Hospital Paid Leave	593	PP	17	18	18	18	18	18	19	19	19	19	19	19	17	17	17	19	20	21	21	21	21	21	21	20	19	19	19	19	19	20	20	20				
	15	PP	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	2	1	1	1	1	0	0	0	1	1	1	1	1	1	0	0	0				
PAID DAYS		1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40				
UNPAID DAYS		0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
TOTAL DAYS		1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40				

Summary By: Rate Type			# of Days	Payer	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Private	19	INS	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	
	3	INS	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	31	MAP	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	97	MCA	4	4	4	3	3	3	3	3	2	2	2	3	3	3	3	3	4	4	4	3	3	3	3	4	3	3	3	3	3	3	3	3	3	
	385	MCD	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	13	13	13	13	13	13	13	13	13	13	13	13	13	13
Semi	533	PP	15	16	16	16	16	16	16	17	17	17	17	17	16	16	16	17	17	17	18	18	18	18	18	18	19	18	18	18	18	18	18	18	18	18
	63	MCA	1	1	1	2	2	3	3	2	2	1	1	1	1	3	3	2	2	2	2	2	2	3	2	2	2	2	2	2	2	2	3	2	2	
	31	MCD	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
	10	MGD	0	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	75	PP	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	4	4	4	4	4	4	3	3	3	2	2	2	2	2	2	2	2	2
PAID DAYS			1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40	
UNPAID DAYS			0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
TOTAL DAYS			1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40	

Summary By: Unit		# of Days	Payer	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
A Wing (MCA)	51	MCA	4	3	3	2	2	2	2	2	2	1	1	1	2	2	2	2	2	2	2	1	1	1	1	1	1	1	1	1	1	2	1	1				
	106	MCD	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	4	4	4	4	4	4	4	4	4	4	4	4	4				
	10	MGD	0	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
	241	PP	6	7	7	7	7	7	7	7	7	7	7	7	7	7	7	9	9	9	9	9	9	9	9	9	8	8	8	8	8	8	8	8	8			
B Wing (INS)	19	INS	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0				
	31	MAP	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1				
	46	MCA	1	1	1	2	2	2	2	1	1	0	0	0	2	2	1	1	1	1	1	1	2	2	2	2	2	2	2	2	2	2	2	2				
	124	MCD	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4				
C Wing (INS)	194	PP	6	6	6	6	6	6	6	6	6	6	6	6	5	5	5	6	7	8	8	8	7	7	7	7	6	6	6	6	6	6	6	6				
	3	INS	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
	63	MCA	0	1	1	1	1	2	2	2	2	2	2	2	2	2	2	3	3	3	3	3	3	3	3	2	2	2	2	2	2	2	2	2				
	186	MCD	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6				
	173	PP	5	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	5	5	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6			
PAID DAYS		1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40				
UNPAID DAYS		0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
TOTAL DAYS		1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40				

Summary By: Payer Reporting Group		# of Days	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Managed Care	Paid	22	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0
Managed Medicare	Paid	10	0	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Medicaid	Paid	416	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	14	14	14	14	14	14	14	14	14	14	14	14	14
Medicaid Pending	Paid	31	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Medicare A	Paid	160	5	5	5	5	5	6	6	5	4	3	3	4	6	6	5	6	6	6	5	6	6	6	5	5	5	5	5	5	6	5	5
Private	Paid	608	17	18	18	18	18	18	19	19	19	19	19	18	18	18	21	21	22	22	22	21	21	21	21	20	20	20	20	20	20	20	20
PAID DAYS		1247	38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40
UNPAID DAYS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL DAYS		1247	38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40

Summary By: Payer Reporting Group		# of Days	Care Level	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
Managed Care	Paid	3	L1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	Paid	19	L2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0			
Managed Medicare	Paid	10	L1	0	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Medicaid	Paid	416	STD	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	13	14	14	14	14	14	14	14	14	14	14	14	14			
Medicaid Pending	Paid	31	STD	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
Medicare A	Paid	18	CAPE	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0			
	Paid	35	GAPE	1	1	1	1	1	2	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1			
	Paid	9	GAPF	1	1	1	1	1	1	1	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	Paid	17	GAXD	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0			
	Paid	12	GAXF	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1			
	Paid	12	GDGF	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1			
	Paid	25	IEUE	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	1	1	1	1	1	0	0	0	0	0	0	0	0			
	Paid	8	JBCE	1	1	1	1	1	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	Paid	2	JBEE	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1			
	Paid	1	JEPE	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
	Paid	18	KAQC	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0			
	Paid	3	MIMD	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	1			
Private	Paid	608	STD	17	18	18	18	18	18	19	19	19	19	19	18	18	18	21	21	22	22	22	21	21	21	21	20	20	20	20	20	20	20	20			
PAID DAYS		1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40			
UNPAID DAYS		0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
TOTAL DAYS		1247		38	40	40	39	39	40	41	40	39	38	38	37	39	39	41	42	43	43	43	42	42	42	41	40	40	40	40	40	41	40	40			

