

Balance Sheet Date (mo-da-yr) 12/31/23

SNF-CR Footnotes

SCHEDULE 12: FOOTNOTES AND EXPLANATIONS
SCHEDULE 1 GENERAL INFORMATION

TABLE 3 LINE 3.11

We consider the preparation of this SNF-CR cost report to be other non-attest services. As such, we will upload the trial balance and account groupings report in support of the cost report.

SCHEDULE 3 EXPENSES

TABLE 4 CAPITAL & FIXED COST EXPENSES:

LINE 4.12 OTHER FIXED COSTS

Consist of equipment rental expense paid to non-related third party

DIRECT MANAGEMENT COMPANY ALLOCATION:

The following accounts reflect a direct allocation of expense from the management company:

HCF Acct. #	Amount	Explanation

Method of allocation:

SCHEDULE 7 DETAIL OF FIXED ASSETS:

TABLE 2 CLAIMED FIXED ASSETS:

Claimed Fixed Costs - Additional Notes, if required

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SCHEDULE 12: FOOTNOTES AND EXPLANATIONS

On October 22,2021 the facility changed ownership in a sale of stock transaction.
The new owner set-up a Realty Company effective 10/22/21 and transferred all fixed assets.
For cost reporting purposes allowable Medicaid Basis remained unchanged from previous year
Assets were shown as deleted on schedule 7 Table 2 of the SNF-CR for Operator,
and as additions on the realty lines

SCHEDULE 9 PATIENT STATISTICS DETAIL:

Other Public Patient Days and/or Other Patient Days consist of:

OTHER:
