

**APPEAL RECOMPUTATION
OF THE
MEDI-CAL RATE DEVELOPMENT WORKSHEET**

**KAISER FOUNDATION HOSPITALS - BELLFLOWER
BELLFLOWER, CALIFORNIA
PROVIDER NUMBER: ZZT30139F
NATIONAL PROVIDER IDENTIFIER: 1518012301**

**FISCAL PERIOD ENDED
DECEMBER 31, 2008**

**Audits Section—Santa Ana
Financial Audits Branch
Audits and Investigations
Department of Health Care Services**

**Section Chief: Margaret A. Varho
Audit Supervisor: Felipe Avila
Auditor: Huyen Stefan**



TOBY DOUGLAS
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

Date: February 12, 2013

Jane C. Moore
Senior Manager Finance, National Medicare Finance
Kaiser Foundation Hospitals
393 East Walnut St., 4th Floor
Pasadena, CA 91188

In the Matter of:

KAISER FOUNDATION HOSPITALS -
BELLFLOWER
PROVIDER NUMBER: ZZT30139F
PROVIDER NPI: 1518012301
FISCAL YEAR ENDED: 12/31/08
CASE NUMBER: HA12-1208-920D-JC

DEPARTMENT OF HEALTH
CARE SERVICES
AUDITS AND INVESTIGATIONS
MEDI-CAL PROGRAM
RATE DEVELOPMENT WORKSHEET

Enclosed is the final Rate Development Worksheets pursuant to the Report of Findings dated November 29, 2012.

If you have any questions in regard to this revision, please contact Felipe Avila, Supervisor at (714) 558-4434.

(Original signed by Margaret Varho)

Margaret A. Varho, Chief
Audits Section—Santa Ana
Financial Audits Branch

Enclosure
Certified

RATE DEVELOPMENT WORKSHEETS

PROVIDER: KAISER FOUNDATION HOSPITALS - BELLFLOWER
PROVIDER NO. ZZT30139F
FISCAL PERIOD: JANUARY 1, 2008 THROUGH DECEMBER 31, 2008
CONTRACT PERIOD: N/A

	Noncontract Cost Settlement		Medi-Cal For Contract Services		Medi-Cal Total For Fiscal Period
<u>ACUTE CARE ONLY*</u>					
A. Medi-Cal Net Cost of Covered Services Plus Hospital-Based Physician Costs, Excluding Return on Equity (Rev. 1)	\$ 3,863,460			\$	\$ 3,863,460
B. Deductibles and Coinsurance (Third Party Liability) (Rev.)	\$ 41,576			\$	\$ 41,576
C. Medi-Cal Inpatient Days (Rev.)					
1. Routine (Adults & Pediatrics)		872			872
2. ICU		46			46
3. CCU					
4. Nursery		46			46
5. NICU		733			733
6. Other (Specify)					
a.					
b.					
D. Total Hospital Discharges ** (Rev. 1)		20,073		N/A	20,073
E. Total Medi-Cal Discharges** (Rev)		277			277
F. Total Medi-Cal Inpatient Charges (Rev. 1)	\$ 6,362,672			\$	\$ 6,362,672

(The previous Section D. Average Per Diem was eliminated. This information is not needed by RDB and has been removed from the Rate Development Branch Schedules that are sent by ARAS to the provider for completion.)

* Do not include data for NF or Administrative Days.
 ** Do not include newborns that were born in the hospital.

RATE DEVELOPMENT WORKSHEETS

PROVIDER: KAISER FOUNDATION HOSPITALS - BELLFLOWER
PROVIDER NO. ZZT30139F
FISCAL PERIOD: JANUARY 1, 2008 THROUGH DECEMBER 31, 2008
CONTRACT PERIOD: N/A

A. EXPENSE PASS-THROUGH DATA	<u>REFERENCE</u>		
1. Depreciation Expense:	8810 - 8813, and/or .71, .72, .73 and .74	\$	7,828,562
2. Rent and Lease Expense:	8820, and/or .75 and .76	\$	4,738,835
3. Interest Expense:	8860, 8870	\$	1,575,999
4. Property Taxes and License Fees:	8850 and/or .83	\$	43,599
5. Utility Expense:	.77, .78, .79, and .80	\$	4,319,437
6. Malpractice Insurance Expense:	8830 and/or .81	\$	1,528,804
 B. GROSS OPERATING EXPENSES	 Sch 10, line 101, col. 3	 \$	 349,660,008
C. STUDENT AND PHYSICIANS COMPENSATION			
1. Salaries and Wages (include benefits)	.07, 8210.09 - 8290.09	\$	298,138
2. Professional Fees	.20	\$	
D. PHARMACY NONLABOR EXPENSES	8390.37 and 8390.38	\$	5,034,758
E. FOOD SERVICES NONLABOR EXPENSES	8320, 8330 and 8340 and/or .42 and .43	\$	1,137,804
F. DIRECT OPERATING COSTS			
1. Salaries and Wages	.00 - .09, .91, .95	\$	115,972,382
2. Employee Benefits	.10 - .19, .92, .96	\$	51,711,076
3. Other Professional Fees	.21 - .29	\$	23,025
4. Purchased Services	.61 - .69	\$	159,858,931
5. Supplies	.31 - .36, .93, .97	\$	49,732,256
6. Other Direct Operating Expense	.85 - .90	\$	

RATE DEVELOPMENT WORKSHEETS

PROVIDER: KAISER FOUNDATION HOSPITALS - BELLFLOWER
PROVIDER NO. ZZT30139F
FISCAL PERIOD: JANUARY 1, 2008 THROUGH DECEMBER 31, 2008
CONTRACT PERIOD: N/A

A. DIRECT PAYROLL COSTS (Totals)	<u>REFERENCE</u>		
1. Management and Supervision			
a. Productive Salaries	.00	\$	8,545,269
b. Productive Hours			172,107.00
2. Technicians and Specialists			
a. Productive Salaries	.01	\$	11,541,209
b. Productive Hours			302,291.00
3. Registered Nurses			
a. Productive Salaries	.02	\$	45,409,027
b. Productive Hours			883,518.00
4. Licensed Vocational Nurses			
a. Productive Salaries	.03	\$	1,624,393
b. Productive Hours			55,520.00
5. Aides and Orderlies			
a. Productive Salaries	.04	\$	3,097,958
b. Productive Hours			161,208.00
6. Physicians (Salaried)			
a. Productive Salaries	.07	\$	298,138
b. Productive Hours			12,163.00
7. Nonphysician Medical Practitioners			
a. Productive Salaries	.08	\$	25,072
b. Productive Hours			336.00
8. Environmental and Food Services			
a. Productive Salaries	.06	\$	6,714,479
b. Productive Hours			382,224.00
9. Clerical and Other Administrative			
a. Productive Salaries	.05	\$	13,166,239
b. Productive Hours			592,218.00
10. Other Salaries and Wages			
a. Productive Salaries	.09	\$	2,913,860
b. Productive Hours			141,937.00
11. All Nonproductive Salaries and Wages			
a. Nonproductive Salaries	Labor Distribution	\$	22,934,876
b. Nonproductive Hours	Report or Provider W/P		554,653.00
B. SUBTOTALS DIRECT PAYROLL COSTS			
1. Productive Salaries (lines 1a - 10a)		\$	<u>93,335,644</u>
2. Productive Hours (lines 1b - 10b)			<u>2,703,522.00</u>
C. TOTAL PRODUCTIVE AND NONPRODUCTIVE SALARIES (11a + B1)		\$	<u>116,270,520</u>
D. TOTAL PRODUCTIVE AND NONPRODUCTIVE HOURS (11b + B2)			<u>3,258,175.00</u>

AUDIT REVISIONS

Provider: KAISER FOUNDATION HOSPITALS - BELLFLOWER				Provider No. ZZT30139F	Fiscal Period: JANUARY 1, 2008 THROUGH DECEMBER 31, 2008	No. of Revs: 1	
Report Reference				Explanation of Audit Revisions	Audited	Increase (Decrease)	Revised
Rev. No.	Schedule	Page	Line				
<u>REVISION TO RATE DEVELOPMENT WORKSHEETS</u>							
1	1	1	A	Medi-Cal Net Cost of Covered Services - Noncontract	\$ 4,026,535	\$ (162,487)	\$ 3,863,460
	1	1	D	Total Hospital Discharges	18,290	1,783	20,073
	1	1	F	Total Medi-Cal Inpatient Charges - Noncontract	\$ 6,366,193	\$ (3,522)	\$ 6,362,671

APPEAL FINDING ISSUE 6 - ADJUSTMENTS 1,8
CASE NUMBER: RD12-1208-920D-JC

