Cost of a Standard Hospital Stay

Behind the Scenes?

BC Financial Healthcare Professionals Society

Canadian Institute for Health Information
Road Map

Context – Provincial Spending

CSHS in British Columbia

CSHS – what is it, data processing and methodology

Some CIHI tools that use CSHS

Breaking down CSHS
How do the provinces and territories compare?

Per person (public and private), projected for 2014

Source: Canadian Institute for Health Information, National Health Expenditure Trends, 1975 to 2014.
### Total Health Care Spending by Province

#### Table 6: Total Health Expenditure per Capita and Share, Selected Use of Funds, by Province/Territory and Canada, 2014

<table>
<thead>
<tr>
<th>Province</th>
<th>Hospitals Exp. per Capita</th>
<th>Exp. as Percentage of Provincial Total</th>
<th>Drugs Exp. per Capita</th>
<th>Exp. as Percentage of Provincial Total</th>
<th>Physicians Exp. per Capita</th>
<th>Exp. as Percentage of Provincial Total</th>
<th>Other Professionals Exp. per Capita</th>
<th>Exp. as Percentage of Provincial Total</th>
<th>Other Institutions Exp. per Capita</th>
<th>Exp. as Percentage of Provincial Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>N.L.</td>
<td>2,496</td>
<td>35.9</td>
<td>951</td>
<td>13.7</td>
<td>888</td>
<td>12.8</td>
<td>471</td>
<td>6.8</td>
<td>882</td>
<td>12.7</td>
</tr>
<tr>
<td>P.E.I.</td>
<td>2,034</td>
<td>31.4</td>
<td>934</td>
<td>14.4</td>
<td>751</td>
<td>11.6</td>
<td>526</td>
<td>8.1</td>
<td>908</td>
<td>14.0</td>
</tr>
<tr>
<td>N.S.</td>
<td>2,058</td>
<td>30.4</td>
<td>1,098</td>
<td>16.2</td>
<td>878</td>
<td>13.0</td>
<td>711</td>
<td>10.5</td>
<td>868</td>
<td>12.8</td>
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<tr>
<td>N.B.</td>
<td>2,103</td>
<td>33.2</td>
<td>1,145</td>
<td>18.1</td>
<td>701</td>
<td>12.5</td>
<td>549</td>
<td>8.7</td>
<td>725</td>
<td>11.4</td>
</tr>
<tr>
<td>Que.</td>
<td>1,487</td>
<td>26.5</td>
<td>1,065</td>
<td>19.0</td>
<td>844</td>
<td>15.0</td>
<td>509</td>
<td>9.1</td>
<td>786</td>
<td>14.0</td>
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<tr>
<td>Ont.</td>
<td>1,665</td>
<td>28.3</td>
<td>982</td>
<td>16.7</td>
<td>989</td>
<td>16.8</td>
<td>608</td>
<td>10.3</td>
<td>577</td>
<td>9.8</td>
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<tr>
<td>Man.</td>
<td>2,010</td>
<td>30.0</td>
<td>862</td>
<td>12.9</td>
<td>948</td>
<td>14.2</td>
<td>613</td>
<td>9.2</td>
<td>777</td>
<td>11.6</td>
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<tr>
<td>Sask.</td>
<td>1,945</td>
<td>30.1</td>
<td>856</td>
<td>13.2</td>
<td>926</td>
<td>14.3</td>
<td>569</td>
<td>8.8</td>
<td>795</td>
<td>12.3</td>
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<tr>
<td>Alta.</td>
<td>2,396</td>
<td>35.2</td>
<td>882</td>
<td>13.0</td>
<td>1,060</td>
<td>15.6</td>
<td>740</td>
<td>10.0</td>
<td>506</td>
<td>7.5</td>
</tr>
<tr>
<td>B.C.</td>
<td>1,801</td>
<td>30.7</td>
<td>740</td>
<td>12.6</td>
<td>868</td>
<td>14.8</td>
<td>717</td>
<td>12.2</td>
<td>381</td>
<td>6.5</td>
</tr>
<tr>
<td>Y.T.</td>
<td>2,791</td>
<td>27.8</td>
<td>735</td>
<td>7.3</td>
<td>930</td>
<td>9.3</td>
<td>759</td>
<td>7.6</td>
<td>1,956</td>
<td>19.5</td>
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<tr>
<td>N.W.T.</td>
<td>4,471</td>
<td>36.8</td>
<td>702</td>
<td>5.8</td>
<td>1,177</td>
<td>9.7</td>
<td>654</td>
<td>5.4</td>
<td>922</td>
<td>7.6</td>
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<tr>
<td>Nun.</td>
<td>4,688</td>
<td>35.6</td>
<td>644</td>
<td>4.0</td>
<td>1,400</td>
<td>11.4</td>
<td>570</td>
<td>4.4</td>
<td>1,269</td>
<td>9.6</td>
</tr>
<tr>
<td>Canada</td>
<td>1,797</td>
<td>29.6</td>
<td>555</td>
<td>15.8</td>
<td>936</td>
<td>15.5</td>
<td>613</td>
<td>10.1</td>
<td>625</td>
<td>10.3</td>
</tr>
</tbody>
</table>

**Note:**
- Forecast.

**Source:**
- National Health Expenditure Database, Canadian Institute for Health Information.
Hospital Expenditures

Inpatient

Diagnostics and Therapeutics

Ambulatory Care

Continuing Care

Questions
**Total Acute Inpatient Cost**

Number of Acute Inpatient

**Weighted Cases**

** Includes actual inpatient costs from Canadian hospitals that report to the Canadian MIS Database.

*** Relates to RIWs assigned to acute inpatients in the Discharge Abstract Database
Cost Of A Standard Hospital Stay (CSHS)

- Efficiency Indicator
- Specific to each facility
- Comparable across facilities, provinces, patient characteristics
- Average cost of an average patient

- The average cost to treat a case with an RIW of 1.000
- Can be used to translate RIW into average cost estimates
- Benchmarking
- ?Price?
From CSHS to a cost estimate

\[ \text{CSHS}_i \times \text{RIW}_j = \text{Hospital cost estimate} \]

of treating a specific patient care episode

- \( i \) = national, provincial, regional or hospital level
- \( j \) = patient care episode(s) in DAD
BC CSHS – near the average of Canada

(Source: Canadian Institute for Health Information)
Variation in CSHS between facilities 2014-15
Variation of CSHS by bed size 2014-15
CSHS by peer group 2014-15
BC CSHS by facility by health region 2014-15

[Bar chart showing CSHS by region and fiscal year from 2014 to 2015]
Questions?
Sources of data for the CSHS

- **CMDB (Numerator)**
  - Full acute inpatient cost is calculated for each hospital
  - Includes acute inpatient costs regardless of which functional centre they are reported in
  - Is a full cost (direct cost + indirect cost)

- **DAD (denominator)**
  - Each patient in the DAD is ‘grouped’ and assigned an RIW
  - The RIWs are aggregated by hospital (“weighted cases”)
Cost Of A Standard Hospital Stay (CSHS)
Financial Data Sources

• Financial

  – The Canadian MIS Database (CMDB)

  – Financial and statistical data reported by health service organizations in Canada

  – No patient-level data

  – The MIS Standards

  – A set of national standards for the collection and reporting of financial and statistical data related to day-to-day operations of health service organizations across the continuum
Analytical Data Cut

MIS Standards:
- Regional Data to be allocated
- Clearing Accounts to be cleared

If not, then Data Processing:

Purpose:
- Comparable data across provinces
- Used for most analysis
Data Processing – Regional data Allocated

Communit Services
Rehabilitation hospital and centre

Regional Health Authority

Small Hospital

Medium Hospital

Large Hospital

Extended Care and Long Term Care

Sites
## Distribution of Regional Expenses – non-clinical

<table>
<thead>
<tr>
<th>Regional Entity</th>
<th>Reporting facility 1</th>
<th>Reporting facility 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data – sector code 001</td>
<td>Data – sector code 001</td>
<td>Data – sector code 001</td>
</tr>
<tr>
<td>Data – sector code xxx</td>
<td>Data – sector code xxx</td>
<td>Data – sector code xxx</td>
</tr>
<tr>
<td>Data – sector code yyy</td>
<td>Data – sector code yyy</td>
<td>Data – sector code yyy</td>
</tr>
<tr>
<td>Data – sector code zzz</td>
<td>Data – sector code zzz</td>
<td>Data – sector code zzz</td>
</tr>
</tbody>
</table>
Distribution of Regional Expenses – non-clinical

Regional Entity

Data – sector code 001
Data – sector code xxx
Data – sector code yyy
Data – sector code zzz

Reporting facility 1

Data – sector code 001
Data – sector code xxx
Data – sector code yyy

Reporting facility 2

Data – sector code 001
Data – sector code xxx
Data – sector code zzz
Distribution of Regional Expenses – non-clinical

Regional Entity

Reporting facility 1

Data – sector code 001

Data – sector code xxx

Data – sector code yyy

Data – sector code zzz

Reporting facility 2

Data – sector code xxx

Data – sector code yyy

Data – sector code zzz
Distribution of Regional Expenses – non-clinical

Regional Entity

Reporting facility 1

Reporting facility 2

Data – sector code 001

Data – sector code xxx

Data – sector code yyy

Data – sector code yyy

Data – sector code zzz

Data – sector code zzz
Distribution of Regional Expenses – non-clinical

Regional Entity

Data – sector code 001

Reporting facility 1

Data – sector code xxx
Data – sector code yyy

Reporting facility 2

Data – sector code xxx
Data – sector code zzz

Data – sector code zzz
Distribution of Regional Expenses – non-clinical

Regional Entity

Reporting facility 1

Reporting facility 2

Data – sector code 001

Data – sector code xxx

Data – sector code yyy

Data – sector code xxx

Data – sector code zzz
Distribution of Regional Expenses – non-clinical

Regional Entity

Reporting facility 1
- Data – sector code 001
- Data – sector code xxx
- Data – sector code yyy

Reporting facility 2
- Data – sector code 001
- Data – sector code xxx
- Data – sector code zzz
Data Processing – Clearing accounts cleared

Nursing Administration

NURSING UNIT A

NURSING UNIT B

NURSING UNIT C
CSHS methodology

Define 3 cost pools

Inpatient

Other patient

Non-Patient
CSHS methodology

MD expenses, building amortization, termination benefits, negative expenses, positive revenues (REMOVED)
CSHS methodology

Long Term Care, Research, Education, Community Health Services

- Inpatient
- Other patient
- Non-Patient

LTC and Comm. Care
Research, Education
CSHS methodology

Inpatient Nursing (incl OR, PARR)

Statistics

Inpatient Nursing

LTC and Comm. Care

Research, Education

Non-Patient

Inpatient

Other patient
CSHS methodology

Inpatient Nursing

Ambulatory Care Nursing (incl ER)

Amb Care Nursing
   Inpatient Nursing
   LTC and Comm. Care

Research, Education

Inpatient

Other patient

Non-Patient
Inpatient Nursing

Diagnostics and Therapeutics
Ambulatory Care Nursing

Inpatient

Diagnostic (Lab, MI, Resp. etc.) and Therapeutics (PT, OT, Clin. Nut. etc.)

Diagnostics and Therapeutics
Ambulatory Care Nursing

Inpatient Nursing

Other patient

Statistics

LTC and Comm. Care

Non-Patient

Research, Education

Statistics
CSHS methodology

Admin and Support

Diagnostics and Therapeutics
Ambulatory Care Nursing
Inpatient Nursing

Inpatient

Admin and Support
Diagnostics and Therapeutics
Inpatient Nursing

Other patient

Admin and Support
Diagnostics and Therapeutics
Amb Care Nursing
LTC and Comm. Care

Non-Patient

Research, Education
CSHS methodology

Inpatient Nursing

Admin and Support
Diagnostics and Therapeutics
Ambulatory Care Nursing

Other patient

Admin and Support
Diagnostics and Therapeutics
Amb Care Nursing
Inpatient Nursing
LTC and Comm. Care

Non-Patient

Admin and Support
Research, Education
Allocation methodology

- Use best available data in each FC where possible
- Use linear regressions to determine reasonableness of data and the allocation methodology
- Allocation are done for each level 3 functional centre independently
- Test labour adjusted cost per workload (regression)
  - Pass – use % workload for allocation of expenses
  - Fail – go to next allocation approach
 Allocation methodology (cont’d)

- No workload is reported or workload test fails

<table>
<thead>
<tr>
<th>Service Activity</th>
<th>Service Activity is reported &amp; does not contradict the category of SR reported in wkld</th>
<th>SA is not reported or contradicts the category of SR in wkld</th>
</tr>
</thead>
<tbody>
<tr>
<td>71 2 (except OR/PARR)</td>
<td>National labour adjusted cost per visit x visits</td>
<td>100% inpatient</td>
</tr>
<tr>
<td>OR/PARR</td>
<td>National labour adjusted cost per visit x visits*</td>
<td>National average</td>
</tr>
<tr>
<td>71 3</td>
<td>National labour adjusted cost per visit x number of visits**</td>
<td>100% other patient</td>
</tr>
<tr>
<td>71 4</td>
<td>Test labour adjusted cost per service activity – if passes then use the % of service activity</td>
<td>National average</td>
</tr>
</tbody>
</table>

* Cost per Surgical visits, PARR visits and face-to-face visits are treated separately
** Cost per inpatient day x inpatient days is also considered for emergency
Remove:

Rehabilitation

Mental Health

71 2 80

**IF:**
- NRS
- Unique Institution type in DAD

71 2 75

**IF:**
- OMHRS
- Unique Institution type in DAD
Questions?
CSHS methodology

Inpatient Costs
Inpatient Weighted Cases

Weighted Cases
($\sum RIW$ for all cases)
Cost Of A Standard Hospital Stay (CSHS)
Clinical Data Sources

- Discharge Abstract Database (DAD)
  - Captures administrative, clinical and demographic information on hospital discharges and some day surgeries.

- National Ambulatory Care Reporting System (NACRS)
  - Contains data for hospital-based and community-based ambulatory care.

- International Statistical Classification of Disease, 10th Revision, Canadian Version (ICD-10 CA) & Canadian Classification of Health Interventions (CCI)

- CIHI Case Mix Products:
  - Grouping Methodologies: CMG+, CACS
  - Statistics: RIW, ELOS
CIHI’s case mix system for grouping acute inpatient data (CMG+)

Astronomical # of combinations of diagnoses and interventions
> 3,000,000 discharges in DAD

529 Case Mix Groups
Reasonable number of groups with which to make comparisons between patient types

Goal: Groupings with similar clinical and resource utilization characteristics
Components of CMG +

Grouper

| MCC | CMG |

Resource Indicators

| ELOS | RIW |

Factors

Influencing the Resource Indicators

AGE

Comorbidity Level

Flagged Intervention

Intervention Event

Out-of-Hospital Intervention
Resource Intensity Weights

- **Resource** – reflect total $\$

- **Intensity** – amount of the service utilized

- **Weight** – relative value
  - compared to an “average case” of 1.0000

  - Cases more resource intensive than the average are $>1$, those less intensive than the average are $<1$.  

CSHS methodology

Inpatient Costs
Inpatient Weighted Cases

Weighted Cases
($\sum$RIW for all cases)
Questions?
Generally across Canada – CSHS numerator is made up of:

- Indirect costs: 28%
- Inpatient nursing care: 48%
- Operating room and post anesthesia recovery room: 7%
- Other diagnostic and therapeutic services: 10%
- Clinical laboratory: 3%
- Ambulatory care: 3%
- Medical imaging: 2%
Data Quality - CMDB

What are the key principles of data quality for CMDB data?

- Compliant with the MIS chart of accounts
- Statistical & financial data
- Data must be reasonable
- MIS Compliance Assessment
This site’s interactive tools will help you learn more about your health system and the health of Canadians.

Choose one of the following:

- **Your Health System**
  - **In Brief**
    - Explore 15 indicators representing 5 themes that Canadians told us were important.
  - **In Depth**
    - Take a look at an expanded suite of indicators, find comparable results for hospitals and regions.
  - **Insight**
    - Health care providers and analysts can use this analytical tool to dig deeper into indicator results. Login required.
The Patient Cost Estimator (PCE) is an interactive tool developed by CIHI to estimate the average cost of various services provided in hospitals. This tool provides information nationally, by jurisdiction and by patient age group. The cost estimates represent the estimated average cost of services provided to the average typical inpatient in an acute care facility. They include the costs incurred by the hospital in providing services and exclude physician fees, since physicians are normally paid directly by the jurisdiction and not by the hospital.

Use CIHI’s PCE to find:

- Estimated average costs per Case Mix Group (CMG) by jurisdiction and age group
- Average length of stay by CMG by jurisdiction and age group
- Volumes by CMG by jurisdiction and age group
- Various summary reports

The PCE includes only typical patients who have undergone the expected course of treatment.

Variations across jurisdiction, including differences in care delivery models and labour rates, will limit the comparability of the PCE’s results, so be cautious when interpreting the results.

You can export results from 2010–2011 to 2014–2015 to an Excel spreadsheet by using the Supporting Links below.
# Patient Cost Estimator (BC)

<table>
<thead>
<tr>
<th>Case Mix Group</th>
<th>Age Group</th>
<th>Estimated Average Cost</th>
<th>Estimated Average Cost (all age groups)</th>
<th>Average Acute LOS days</th>
<th>Volume</th>
</tr>
</thead>
<tbody>
<tr>
<td>166</td>
<td>Coronary Artery Bypass Graft with Coronary Angiogram with MI/Shock/Arrest with Pump</td>
<td>18-59 Years (Adult)</td>
<td>$39,733</td>
<td>$38,744</td>
<td>15.2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>60-79 Years (Adult)</td>
<td>$38,883</td>
<td>$38,744</td>
<td>16.5</td>
</tr>
<tr>
<td></td>
<td></td>
<td>80+ Years (Adult)</td>
<td>$35,596</td>
<td>$38,744</td>
<td>16.4</td>
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<tr>
<td>320</td>
<td>Unilateral Hip Replacement</td>
<td>8-17 Years (Paediatric)</td>
<td>$8,589</td>
<td>$8,687</td>
<td>3.4</td>
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<tr>
<td></td>
<td></td>
<td>18-59 Years (Adult)</td>
<td>$8,644</td>
<td>$8,687</td>
<td>2.9</td>
</tr>
<tr>
<td></td>
<td></td>
<td>60-79 Years (Adult)</td>
<td>$8,693</td>
<td>$8,687</td>
<td>3.3</td>
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<tr>
<td></td>
<td></td>
<td>80+ Years (Adult)</td>
<td>$8,713</td>
<td>$8,687</td>
<td>4.0</td>
</tr>
<tr>
<td>321</td>
<td>Unilateral Knee Replacement</td>
<td>18-59 Years (Adult)</td>
<td>$7,704</td>
<td>$7,714</td>
<td>3.1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>60-79 Years (Adult)</td>
<td>$7,723</td>
<td>$7,714</td>
<td>3.2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>80+ Years (Adult)</td>
<td>$7,863</td>
<td>$7,714</td>
<td>3.6</td>
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</tbody>
</table>
## Functional Centre FAR

### Functional Area % by CMG

<table>
<thead>
<tr>
<th>CMG</th>
<th>Volume</th>
<th>N</th>
<th>A</th>
<th>O</th>
<th>L</th>
<th>G</th>
<th>P</th>
<th>I</th>
<th>Grand Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Inp Nursing Services</td>
<td>Outp Nursing Services</td>
<td>Operating &amp; Recovery Room Nursing Services</td>
<td>Total Nurs</td>
<td>Clinic Lab</td>
<td>Medical Imaging</td>
<td>Other Professional Services</td>
<td>Indirect Costs</td>
<td></td>
</tr>
<tr>
<td>001-Intracranial Vessel Intervention except Extraction, Open Approach</td>
<td>556</td>
<td>42%</td>
<td>1%</td>
<td>19%</td>
<td>62%</td>
<td>2%</td>
<td>7%</td>
<td>4%</td>
<td>24%</td>
</tr>
<tr>
<td>002-Intracranial Vessel Intervention except Extraction, Percutaneous Approach</td>
<td>604</td>
<td>39%</td>
<td>1%</td>
<td>2%</td>
<td>42%</td>
<td>2%</td>
<td>33%</td>
<td>3%</td>
<td>20%</td>
</tr>
<tr>
<td>003-Other Vascular Intervention with Nervous System Diagnosis</td>
<td>768</td>
<td>36%</td>
<td>3%</td>
<td>12%</td>
<td>51%</td>
<td>3%</td>
<td>19%</td>
<td>4%</td>
<td>24%</td>
</tr>
<tr>
<td>004-Cranietomy for Drainage</td>
<td>110</td>
<td>49%</td>
<td>1%</td>
<td>12%</td>
<td>62%</td>
<td>3%</td>
<td>4%</td>
<td>6%</td>
<td>25%</td>
</tr>
<tr>
<td>005-Insertion of Shunt/Brain Monitor</td>
<td>1,008</td>
<td>40%</td>
<td>1%</td>
<td>25%</td>
<td>66%</td>
<td>2%</td>
<td>3%</td>
<td>5%</td>
<td>24%</td>
</tr>
<tr>
<td>006-Cranium Intervention</td>
<td>2,136</td>
<td>36%</td>
<td>1%</td>
<td>26%</td>
<td>63%</td>
<td>4%</td>
<td>4%</td>
<td>4%</td>
<td>25%</td>
</tr>
<tr>
<td>007-Thoracic/Major Intervention on Spine/Spinal Canal/Vertebra</td>
<td>1,414</td>
<td>28%</td>
<td>1%</td>
<td>38%</td>
<td>67%</td>
<td>2%</td>
<td>4%</td>
<td>3%</td>
<td>24%</td>
</tr>
<tr>
<td>008-Other Site/Non-Major Intervention on Spine/Spinal Canal/Vertebra</td>
<td>1,837</td>
<td>28%</td>
<td>2%</td>
<td>36%</td>
<td>67%</td>
<td>2%</td>
<td>3%</td>
<td>3%</td>
<td>26%</td>
</tr>
<tr>
<td>009-Excision/Repair of Brain</td>
<td>2,385</td>
<td>36%</td>
<td>1%</td>
<td>26%</td>
<td>62%</td>
<td>4%</td>
<td>3%</td>
<td>4%</td>
<td>27%</td>
</tr>
<tr>
<td>010-Drainage/Release of Brain</td>
<td>748</td>
<td>41%</td>
<td>2%</td>
<td>21%</td>
<td>64%</td>
<td>2%</td>
<td>3%</td>
<td>4%</td>
<td>27%</td>
</tr>
<tr>
<td>011-Management of Nervous System Device/Other Minor Intervention</td>
<td>732</td>
<td>35%</td>
<td>2%</td>
<td>27%</td>
<td>63%</td>
<td>4%</td>
<td>4%</td>
<td>3%</td>
<td>26%</td>
</tr>
<tr>
<td>012-Open Carotid Endarterectomy</td>
<td>1,917</td>
<td>30%</td>
<td>2%</td>
<td>35%</td>
<td>67%</td>
<td>3%</td>
<td>2%</td>
<td>3%</td>
<td>26%</td>
</tr>
<tr>
<td>013-Major Nerve Intervention or Intervention on other Site</td>
<td>456</td>
<td>24%</td>
<td>2%</td>
<td>38%</td>
<td>64%</td>
<td>5%</td>
<td>1%</td>
<td>3%</td>
<td>28%</td>
</tr>
</tbody>
</table>
### Functional centre
### Reported quantity
### Regional allocation
### Clearing allocation
### Exclusions
### Recoveries
### Net value

<table>
<thead>
<tr>
<th>Functional centre</th>
<th>Reported quantity</th>
<th>Regional allocation</th>
<th>Clearing allocation</th>
<th>Exclusions</th>
<th>Recoveries</th>
<th>Net value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>add</td>
<td>add</td>
<td>subtract</td>
<td>Add (net)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>711100000</td>
<td>$1,000,000</td>
<td>$5,000</td>
<td></td>
<td>$10,000</td>
<td>($1,000)</td>
<td>$994,000</td>
</tr>
<tr>
<td>712100000</td>
<td>$5,000,000</td>
<td>$15,000</td>
<td></td>
<td>$40,000</td>
<td></td>
<td>$4,975,000</td>
</tr>
<tr>
<td>713100000</td>
<td>$3,000,000</td>
<td>$10,000</td>
<td></td>
<td>$20,000</td>
<td></td>
<td>$2,990,000</td>
</tr>
<tr>
<td>714100000</td>
<td>$4,000,000</td>
<td>$50,000</td>
<td></td>
<td>$30,000</td>
<td></td>
<td>$4,020,100</td>
</tr>
<tr>
<td>715100000</td>
<td>($400,000)</td>
<td>$2,000</td>
<td></td>
<td>($10,000)</td>
<td></td>
<td>$0</td>
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</tbody>
</table>

**Transaction Data Cut**  |  **Analytical Data Cut**  |  **CSHS methodology**
And Now...the details

<table>
<thead>
<tr>
<th>Functional centre</th>
<th>Net value</th>
<th>IP Quant</th>
<th>OP Quant</th>
<th>NP Quant</th>
<th>Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>7111000000</td>
<td>$994,000</td>
<td>$500,000</td>
<td>$350,000</td>
<td>$144,000</td>
<td>% of cost pool</td>
</tr>
<tr>
<td>7121000000</td>
<td>$4,975,000</td>
<td>$4,960,000</td>
<td>$15,000</td>
<td></td>
<td>Workload</td>
</tr>
<tr>
<td>7131000000</td>
<td>$2,990,000</td>
<td>$20,000</td>
<td>$2,970,000</td>
<td></td>
<td>Cost per visit</td>
</tr>
<tr>
<td>7141000000</td>
<td>$4,020,100</td>
<td>$1,500,000</td>
<td>$2,520,100</td>
<td></td>
<td>National avg</td>
</tr>
<tr>
<td>7151000000</td>
<td>$0</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7170000000</td>
<td>$4,000,000</td>
<td></td>
<td></td>
<td>$4,000,000</td>
<td></td>
</tr>
</tbody>
</table>
# Comparing the FAR and CSHS breakdown reports

<table>
<thead>
<tr>
<th>Facility specific Functional Area</th>
<th>Inpatient Nursing Services</th>
<th>Outpatient Nursing Services</th>
<th>Operating &amp; Recovery Room Nursing Services</th>
<th>Total nursing</th>
<th>Clinical Lab</th>
<th>Medical Imaging</th>
<th>Other professional services</th>
<th>Indirect costs</th>
<th>Grand total</th>
</tr>
</thead>
<tbody>
<tr>
<td>RIW</td>
<td>5,376,0523</td>
<td>485,4561</td>
<td>1,974,5843</td>
<td>7,836,0927</td>
<td>559,2888</td>
<td>569,4955</td>
<td>606,2926</td>
<td>3,182,4428</td>
<td>12,753,6124</td>
</tr>
<tr>
<td>Facility Specific FAR %</td>
<td>42.15%</td>
<td>3.81%</td>
<td>15.48%</td>
<td>61.44%</td>
<td>4.39%</td>
<td>4.47%</td>
<td>4.75%</td>
<td>24.95%</td>
<td>100%</td>
</tr>
<tr>
<td>Facility Specific CSHS breakdown report</td>
<td>33,776,320</td>
<td>769,290</td>
<td>828,276</td>
<td>35,373,886</td>
<td>1,435,053</td>
<td>1,749,390</td>
<td>6,577,200</td>
<td>14,501,492</td>
<td>59,637,021</td>
</tr>
<tr>
<td>Facility Specific CSHS FA %</td>
<td>56.64%</td>
<td>1.29%</td>
<td>1.39%</td>
<td>59.32%</td>
<td>2.41%</td>
<td>2.93%</td>
<td>11.03%</td>
<td>24.32%</td>
<td>100%</td>
</tr>
</tbody>
</table>
Questions?