

BENEFICIARY ACUITY AND STATISTICS

Facility: **0** Site Name: **0** MPI Number: **0** Reporting Period: 07/01/21 to 06/30/22

Section I: Personal Characteristics (Number of Residents by Classification)

A. Ages (from Sec. IV, Col 2)		B. Level of Functioning (from Sec. IV, Col 3)	
0	0-5	0	1 - Mild
0	6-18	0	2 - Moderate
0	19-21	0	3 - Severe
0	22-45	0	4 - Profound
0	46-64	0	5 - ORC
0	65+	0	Total
0	Total		

Section II: Day Program Summary

1. **0** Total # ICF Residents Attending Facility's Own Operated Day Program (Not Related Party) (i.e., Day Program costs that are included in salaries on Schedule 11)
2. **0** Total # ICF Residents Attending Contracted Day Programs [per Schedule 12-HC(A)]
3. **0** Total # ICF Residents NOT Attending Day Programs (unique situations)
4. **N/A for FY 2021-22** Total # Units at Facility's Own Operated (Not Related Party) Day Program (from Sec. IV, Col 6)
5. **N/A for FY 2021-22** Total # Units at Contracted Related Party Day Program (from Sec. IV, Col 7)
6. **N/A for FY 2021-22** Total # Units at Contracted Non-Related Party Day Program (from Sec. IV, Col 8)
7. **N/A for FY 2021-22** Total # Units at Day Program (from Sec. IV, Col 9)
8. **N/A for FY 2021-22** Total market rate for related party day program costs (from Sec. IV, Col 11)

Section III: Acuity Summary (NOT APPLICABLE TO FISCAL YEAR 2021-2022 unless the facility has completed SIS and HRST assessments on all residents)

A. Needs Level (SIS Composite Score) (from Sec. IV, Col 4)		B. HRST (from Sec. IV, Col 5)	
0	Facility Average	0	Facility Average
#DIV/0!	Standard Deviation	#DIV/0!	Standard Deviation

3. Were Related Party Day Program services charged to ICF (and included on Sch. 1) at HCBS Fee Schedule rates? **0** (Yes or No) (If Yes, Col 10 is N/A)

Section IV: Acuity and Day Program Detail (All unused rows must be left blank**)**

COLUMNS 4 THROUGH 11 NOT APPLICABLE FOR FISCAL YEAR 2021-2022

		Acuity Detail			Day Program Detail					
Col. 1	Col. 2	Col. 3	Col. 4	Col. 5	Col. 6	Col. 7	Col. 8	Col. 9	Col. 10	Col. 11
Resident	Age Range (as of last day of fiscal year)	Level of Functioning: 1 - Mild 2 - Moderate 3 - Severe 4 - Profound 5 - ORC	Needs Level (SIS Composite Score) N/A for FY 2021-2022	HRST (0-69+) N/A for FY 2021-2022	No. of UNITS (15 min) at Day Program (for entire fiscal year)			TOTAL Day Program Units (Cols 6 + 7 + 8)	Relevant Program Fee for HCBS (Highest Level Billed) (Applicable to Related Party Units in Col. 7 Only, IF above = No)	Calculated Market Rate for Related Party Day Program Costs Col. 7 x Col. 10
					at Facility's Own Operated Day Program (Not Related Party)	at Contracted Related Party Day Program	at Contracted Non-Related Party Day Program			
1								-		\$0
2								-		\$0
3								-		\$0
4								-		\$0
5								-		\$0
6								-		\$0
7								-		\$0
8								-		\$0
9								-		\$0
10								-		\$0
11								-		\$0
12								-		\$0
13								-		\$0
14								-		\$0
15								-		\$0
16								-		\$0
17								-		\$0
18								-		\$0
19								-		\$0
20								-		\$0
21								-		\$0
22								-		\$0
23								-		\$0
24								-		\$0
25								-		\$0