State of Connecticut



Annual Report of Long-Term Care FacilityCost Year 2023

Name of Facility (as licensed)				
Maple View Manor of CT, LLC				
Address (No. & Street, City, State	e, Zip Code)			
856 Maple Street, Rocky Hill, CT	06067			
Type of Facility				
Chronic and Convalescent ☑ Nursing Home (CCNH) & RHNS Combined		(Specify)		Specify)
Report for Year Beginning 10/1/2022		Report for Year Ending 9/30/202	3	
License Numbers:	CCNH / RHNS 940C	(Specify)	(Specify)	Medicare Provider 07-5238
Medicaid Provider Numbers:	000009407	CCNH / RHNS	(Specify)	(Specify)

State of Connecticut Annual Report of Long-Term Care Facility CSP-1 Rev.9/2002

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Ceneral	Information

	Ge	neral Info	rmation						
Name of Facility (as licensed) Maple View Manor of Connecticut, LLC		License No. 940C	Report for Year End 9/30/2023	led Page of 1 37					
	OR FALSIFICA	TION OF AN	er's Certification Y INFORMATION CONTAINED D/OR IMPRISIONMENT UNDER						
Cost Report and supporting cost report period beginning	schedules prep 10/01/2022 nowledge and b	ared for Maple Vie	e, correct, and complete statement	name], for the					
I hereby certify that I have directed the preparation of the attached General Information and Questionnaires, Schedule of Resident Statistics, Statements of Reported Expenditures, Statements of Revenues and the related Balance Sheet of this Facility in accordance with the Reporting Requirements of the State of Connecticut for the year ended as specified above.									
knowledge under the penalt this Report as a basis for sec incurred to provide resident	y of perjury. I curing reimburs care in this Fac	also certify that tement for Title cility. All supp	ation provided is true and correct to t all salary and non-salary expense e XIX and/or other State assisted re- corting records for the expenses records made available to auditors upon re-	s presented in esidents were corded have					
1									
Signed (Administrator)		Date	Signed (Owner)	Date					
bu: /6		2/12/24	A	2/12/24					
Printed Name (Administrator)			Printed Name (Owner)						
Lewis Abramson			Marvin J. Ostreicher	3					
New Service and the Contract of the Contract o	ate of	Date	Signed (Notary Public)	Comm. Expires					
to before me:	YU	2/12/24	Man I. Mueller	5110126					
Address of Notary Public									
2845 DAVIS St Ocean	iside NY	11572	ı						

(Notary Seal)
MARIE T. MUELLER NOTARY PUBLIC, STATE OF NEW YORK Registration No. 01MU6221801 Qualified in Nassau County Commission Expires 05/10/2026

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Department of Social Services

55 Farmington Avenue, Hartford, Connecticut 06105

Data Required for Real Wage Adjus	Page	of		
			1A	37
Name of Facility	Period Cov	ered:	From	То
Maple View Manor of CT, LLC			10/1/2022	9/30/2023
Address of Facility				
856 Maple Street, Rocky Hill, CT 06067				
Report Prepared By	Phone Num	ber	Date	
Marcum LLP	203-781-96	00	2/10/2024	
		CCNH /		
Item	Total	RHNS	(Specify)	(Specify)
1. Dietary wages paid	\$			
2. Laundry wages paid	\$			
3. Housekeeping wages paid	\$			
4. Nursing wages paid	\$			
5. All other wages paid	\$			
6. Total Wages Paid	\$			
7. Total salaries paid	\$			
8. Total Wages and Salaries Paid (As per page 10 of Report)	\$			

Wages - Compensation computed on an hourly wage rate.

Salaries - Compensation computed on a weekly or other basis which does not generally vary, based on the number of hours worked.

DO NOT include Fringe Benefit Costs.

General Information and Questionnaire Type of Facility - Organization Structure

			ne No. of Facility -563-2861		Report for Ye 9/30/2023	ar Ended	Page 2		of 37
Name of Facility (as shown on license)		800	Address (No. & Street, City, State, Zip) 856 Maple Street, Rocky Hill, CT 06067						31
Maple View Manor of CT, LLC	CCNH / RHNS 940C		(Specify)	, Roc	(Specify)	J0 /	Medicare I	Provid	der No.
License Numbers: Type of Facility (Check appropriate box(es) Chronic and Convalescent Mursing Home (CCNH) & RHNS Combined)	(Spe	ecify)			(Specify	(7)		
Type of Ownership (Check appropriate box)								
• Proprietorship O LLC O	Partnership	0	Profit Corp.	0	Non-Profit Con	rp. O	Government	0	Trust
If this facility opened or closed during repor	t year provide:			Date	e Opened	Date Cl	osed		
Has there been any change in ownership									
or operation during this report year? N/A		0	Yes	•	No	If "Yes,	" explain full	y.	
Administrator					1				
Name of Administrator Lewis Abramson					Nursing Administration Licens	rator's	000692		
Other Operators/Owners who are assistant a	administrators (fu	ıll or	part time) of this fa	acilit	y.	•			
Name					Licens	e No.:			

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General Information and Questionnaire Partners/Members

Name of Facility Maple View Manor of CT, LLC		License No. Report for Y 940C 9/30/2023		Year Ended	Page of 3 37		
Legal Name of Partnership/LLC Maple View Manor of CT, LLC		Business	Address		d/or Town(s) in Registered		
		856 Maple Stre Hill, CT 06067		СТ			
Name of Partners/Members	Business Ac	ddress		Title	% Owned		
Marvin J. Ostreicher	856 Maple Street, Rock 06067	President /	President / Director				
Agnes Zitter	856 Maple Street, Rocky Hill, CT N		Member		50		

General Information and Questionnaire Corporate Owners

	License No.	Report for Year	Ended	Page	of
Maple View Manor of CT, LLC	940C	9/30/2023		3A	37
If this facility is owned or operated as a corpor	ration, provide tl	ne following inform	ation:		
Legal Name of Corporation	Busin	ness Address	State(s) in W	hich Incorp	orated
N/A					
Name of Directors, Officers	Busin	ness Address	Title	No. SI Held by	
N/A					
Names of Stockholders Owning at Least 10% of Shares					
N/A					

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General Information and Questionnaire Individual Proprietorship

Name of Facility	License No.	Report for Year Ended	Page	of								
Maple View Manor of CT, LLC	940C	9/30/2023	3B	37								
If this facility is owned or operated as an individual	proprietorship, pro	vide the following information	1:									
Owner(s) of Facility												
	•											
N/A												

General Information and Questionnaire Related Parties*

Name of Facility		License	e No.		Report for Year Ended		Page	of
Maple View Manor of C	CT, LLC		940C		9/30/2023			37
Are any individuals rece	eiving compensation from the fac	ility rel	ated thro	ough		If "Yes," provide th	e Name/Ado	lress and
marriage, ability to contr	rol, ownership, family or busines	ss assoc	iation?	•	Yes O No	complete the inform	nation on Pag	ge 11 of the report.
Are any individuals or co	ompanies which provide goods of	or servic	es,					
including the rental of pr	roperty or the loaning of funds to	this fac	cility,					
	ssociation, common ownership,			ess	⊙ Yes ○ No			
	owners, operators, or officials of					If "Yes," provide th	e following	information:
acceptance of any of the	e mare, eperaters, er emerate					ii res, provide iii	e ronowing :	
		Δ1	so Provi	des		Indicate Where		
			ds/Servio			Costs are Included		
Name of Related	Business		Related I		Description of Goods/Services	in Annual Report	Cost	Actual Cost to the
Individual or Company	Address	Yes	No	%**	Provided	Page # / Line #	Reported	Related Party
National HealthCare	20 E Sunrise Hwy, Valley Stream	1 08		70	Flovided	rage # / Line #	Reported	Related Farty
Associates	NY, 11581	0	•		Consulting Fees	Pg. 16 / Line m12	4,186	4,186
National HealthCare	20 E Sunrise Hwy, Valley Stream				3	8	,	,
Associates	NY, 11581	0	•		Interest	Pg. 27 / Line 12d	1,945	1,945
National HealthCare	20 E Sunrise Hwy, Valley Stream	0	•					
Associates	NY, 11581		0		Shared Expense	Pg. 16 / Line m12	658,638	658,638
Preferred Therapy Solutions	850 Silas Deane Hwy Wethersfield, CT 06109	0	•		PT, OT, ST, Services/ Consulting	Various	887,414	856,743
Treferred Therapy Solutions	6851 Jericho Tpke, Suite 150	_	_		11, 01, 51, Services/ Consuming	various	007,717	830,743
NOA DIAGNOSTICS	Syosset, NY 11791	0	•		Radiology	Pg. 20 / Line 5f	23,165	23,165
PROCARE LTC	1492 Highland Ave Cheshire CT							,
PHARMACY OF CT	06410	0	•		Drugs/OTC/RX Consulting	Various	374,271	347,642
National HealthCare	850 Silas Deane Hwy Wethersfield,	0	•					
Associates-Aetna	CT 06109		U		Health Insurance	Page 15 / Line 1a5	968,816	968,816
PROFESSIONAL SERVICES	850 Silas Deane Hwy Wethersfield, Ct	0	•		Contract RNs / LPNs / CNAs	Various	243,900	243,900
See attached for continued		_	_		Contract ICINS / El INS / CINAS	v arious	273,700	273,900
list	Various	0	•		Various	Various	1.781.253	1.781.253

^{*} Use additional sheets if necessary.

^{**} Provide the percentage amount of revenue received from non-related parties.

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General Information and Questionnaire Related Parties*

Name of Facility		License N	lo.		Report for Year Ended		Page	of
Maple View Health & Rehab			940-C		9/30/2023		4a	37
			Also Provides Goods/Services to Non-Related Parties		Description of	Indicate Where Costs are Included		Actual Cost
Name of Related	Business	10 110	II-Kelateu	rarues	Goods/Services	in Annual Report	Cost	to the
Individual or Company	Address	Yes	No	%**	Provided	Page # / Line #	Reported	Related Party
Mapleview Realty	46 Stauderman Ave, Lynbrook, NY 11563	0	•	0%	Facility Lease	Page 22 / Line 9	833,331	833,331***
Mapleview Realty	46 Stauderman Ave, Lynbrook, NY 11563	0	•	0%	Real Estate Taxes	Page 22 / Line 10b	170,866	170,866
Mapleview Realty	46 Stauderman Ave, Lynbrook, NY 11563	0	•	0%	Property Insurance	Page 27 / Line 14	21,803	21,803
National HealthCare Associates	20 E Sunrise Hwy, Valley Stream NY, 11581	0	•	0%	Bank Charges	Pg 16 / Line m13	25,581	25,581
850 SILAS DEANE	850 Silas Deane Hwy Wethersfield, CT 06109	0	•	0%	Rent/Other	Pg 16 / Line m12	1,120	1,120
20Sunrise	20 E Sunrise Hwy, Valley Stream NY, 11581	0	•	0%	Rent/Other	Pg 16 / Line m12	14,915	14,915
Cambridge Manor of Fairfield, LLC	2428 Easton Turnpike, Fairfield CT, 06825	0	•	0%	Shared Employee	Pg 13 / Line B12o	733	733
Marlborough Health Care Center, Inc.	85 State Harbor Road, Marlborough CT, 06447	0	•	0%	Shared Employee	Pg 13 / Line B12o	1,920	1,920
Various Intercompany Due to/From	Various	0	•	0%	Due to/from Related / Realty	Pg 34 / Line B3	710,984	710,984

^{*} Use additional sheets if necessary.

^{**} Provide the percentage amount of revenue received from non-related parties.

*** N/A Medicaid reimbursement is based upon fair rental value system. Replaced during rate setting.

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General Information and Questionnaire Basis for Allocation of Costs

Name of Facility	License No		Report for Year Ended	Page	of
Maple View Manor of CT, LLC	940C		9/30/2023	5	37
If the facility is licensed as CDH and/or RCH or p	DS or TBI se	ervices with special Medicaid ra	tes, costs	;	
must be allocated to CCNH and RHNS as follows	s:				
Item			Method of Allocation		
Dietary		Number of	meals served to residents		
Laundry		Number of	pounds processed		
Housekeeping		Number of	square feet serviced		
		Number of	hours of routine care provided b	y EACH	
Nursing		employee c	lassification, i.e., Director (or C	harge Nu	ırse),
		Registered	Nurses, Licensed Practical Nurs	es, Aides	s and
		Attendants			
Direct Resident Care Consultants		Number of	hours of resident care provided	by EACI	H
		specialist (See listing page 13)		
Maintenance and operation of plant		Square feet			
Property costs (depreciation)		Square feet			
Employee health and welfare		Gross salar	ies		
Management services			e cost center involved		
All other General Administrative expenses		Total of Di	rect and Allocated Costs		
The preparer of this report must answer the follow	wing questic	ns applicabl	le to the cost information provid	ed.	
1. In the preparation of this Report, were all	• Yes	O No	If "No," explain fully why such	allocatio	n was not
costs allocated as required?	o ies	O No	made.		
N/A					
2. Explain the allocation of related company exp	enses and at	tach copy of	f appropriate supporting data.		
N/A					
3. Did the Facility appropriately allocate and self	-disallow di	rect and ind	irect costs to non-nursing home	cost cent	ers?
(e.g., Assisted Living, Home Health, Outpatien	nt Services,	Adult Day C	Care Services, etc.)		
	O V	O N-	If "No," explain fully why such	allocatio	on was not
	• Yes	O No	made.		
N/A					

General Information and Questionnaire Other Lines of Business

Name of Facil	ity	License No.		Rep	ort for Year Ended	Page	of
Maple View N	Manor of CT, LLC	9400	2	9/30	0/2023	6	37
Square footage	e of entire facility.	23,600					
Outpatient T	herapy						
Does the Facil	ity provide outpatient	therapy services?	No				
If ves. please o	complete the following			•			
<u>-, , , , , , , , , , , , , , , , , , , </u>	Square footage of						
	1 0	17 1					
Meals on Wh	eels						
	ity provide Meals on V	Wheels?	No				
IC]			
ij yes, piease d	complete the following						
	Square footage of						
No	Number of meals s Are meals include		on maga 10	of the Ame	aval Damant?		
No			1 0		iuai Keport?		
No	Are direct costs in If yes, please state			<u></u>			
No	Are drivers for the		_	lity's navro	119		
INO	If yes, please com	-		inty's payre	л:		
	j yes, prease com	Amount Repo					
		Annual Repor		ine			
	Please state the sa				etary aides		
	Please state where	the cooks and/or	dietary aide	s are repor	ted in the Annual R	Report	
Apartments,	Independent Living,	Assisted Living					
Does the facil	ity have apartments, in	dependent living,	, and/or	No			
assisted living	•						
If yes, please o	complete the following	:		<u> </u>			
	Square footage of	apartments					
	Square footage of	independent livin	g				
	Square footage of	assisted living					
	Please identify the	services provided	 1:				
	,	,	7				
			_				

General Information and Questionnaire Other Lines of Business (Continued)

Name of Fac		Report for Year Ended	Page of
Maple View	Manor of 940C	9/30/2023	7 37
Child Day C	Care		
Does the Fac	ility provide Child Day Care? No		
If yes, please	e complete the following:		
S	quare footage of child day care space.		
A	verage number of daily participants.		
N	Tumber of meals per day provided to child day care.		
N	lature of services provided:		
Adult Day C	Care		
Does the Fac	rility provide Adult Day Care? No		
If yes, please	e complete the following:		
S	quare footage of adult day care space.		
P	lease state where it is located in relation to the facility.		
A	verage number of daily participants.		
N	lumber of meals per day provided to adult day care.		
N	lature of services provided:		

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Schedule of Resident Statistics

Name of Facility			License No				Report for Year Ended				Page	of
Maple View Manor of CT, LLC			94	10C			9/30/2023				8	37
						Period 10)/1 Thru 6/3	0	Period 7/1 Thru 9/30			0
		Total										
	m . 1 . 11	CCNH /		m . 1		GCNHI /				GCNHI /		
	Total All Levels	RHNS Level	Total	Total (Specify)	Total	CCNH / RHNS	(Specify)	(Specify)	Total	CCNH / RHNS	(Specify)	(Specify)
Certified Bed Capacity	Levels	Level	Total	(Specify)	Total	KIII (5	(Бреспу)	(Specify)	Total	KIIIVS	(Specify)	(Specify)
A. On last day of PREVIOUS report period	120	120			120	120						
B. On last day of THIS report period	120	120							120	120		
2. Number of Residents												
A. As of midnight of PREVIOUS report period	105	105			105	105						
B. As of midnight of THIS report period	109	109							109	109		
3. Total Number of Days Care Provided During Period												
A. Medicare	3,460	3,460			2,793	2,793			667	667		
B. Medicaid (Conn.)	25,938	25,938			19,262	19,262			6,676	6,676		
C. Medicaid (other states)												
D. Private Pay	5,243	5,243			3,977	3,977			1,266	1,266		
E. State SSI for RCH												
F. Other (Specify) Managed Care / Hospice / Comm	3,838	3,838			2,872	2,872			966	966		
G. Total Care Days During Period (3A thru F)	38,479	38,479			28,904	28,904			9,575	9,575		
Total Number of Days Not Included in Figures in 3G for Which Revenue Was Received for Reserved Beds A. Medicaid Bed Reserve Days												
B. Other Bed Reserve Days	44	44							44	44		
5. Total Resident Days (3G + 4A + 4B)	38,523	38,523			28,904	28,904			9,619	9,619		

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Schedule of Resident Statistics (Cont'd)

Name of Facil	lity			Licer	ise No.				Report for Year Ended				Page	of
Maple View N	Manor of	CT, LLC		94	10C					9/30/202	23		9	37
		-	certified bed capa	icity d	uring tl	ne rep	ort yea	r?		0	Yes	•	No	
II TES	Provide	Place of C					Chan	ge in 1	Reds	C	apacity After	Change		
	CCNH	Tiuce of C					Chan	50 III .	Beds		upucity ritter	Change		
	/													
Date of	RHNS	(Specify)	(Specify)		Lost				Gained					
Change										CCNH /				
	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	RHNS	(Specify)	(Specify)	Reason fo	or Change
N/A														
		_	fied bed capacity		-	eport y	ear (a	s repo	rted in item 4 above) pro	ovide the 1	number of			
		-												
			Change i	n Resi	dent D	ays				CCNI	H / RHNS	(Specify)	(Spe	cify)
1st chang	_													
2nd chan														
3rd change														
		nts and Rates	s on September 3	0 of C	ost Ye	ar								
			Medicare		Med					Self-Pay			Other Stat	e Assisted
	Item		CCNH / RHNS		NH / HNS	(Spe	ecify)		CCNH / RHNS	(Sį	pecify)	(Specify)	R.C.H.	ICF-MR
No. of R	esidents		5		77				27					
Per Dien														
a. One b			Various		308.58				500.00					
			Various		308.58				510.00					
c. Three bed r														
ocu i	1115.			<u> </u>										
		Physical Then e - Part B	rapy Treatments						TOTAL 3,689	CCNI	H / RHNS 3,689	(Specify)	Outpatient	(Specify)
		d (Exclusive	of Part B)						3,007		3,007			
	1. Main	tenance Trea	tments						771		771			
		rative Treatr	nents											
	Other		T						9,315		9,315			
			py Treatments						13,775		13,775			
		e - Part B	py Treatments						565		565			
B.	Medicai	d (Exclusive	of Part B)											
		tenance Trea							120		120			
		rative Treatr	nents											
	Other	and Thouse	y Treatments						1,826		1,826			
			Therapy Treatm	ents					2,511		2,511			
		e - Part B	Therapy Treatm	-1110					5,589		5,589			
		d (Exclusive	of Part B)								- /			
	1. Main	tenance Trea	tments						907		907			
		orative Treatr	nents											
	Other	ccunational	Therapy Treatm	onts					12,284 18,780		12,284 18,780			
D.	I villi U	capuitonul .	inciupy liculm					1	10,/00		10,700			

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Report of Expenditures - Salaries & Wages

	Report of E	xpenanui							
Name of Facility	License No.			Report for Yea	r Ended			Page	of
Maple View Manor of CT, LLC	940C			9/30/2023				10	37
A 4 i			0	Yes	No				
Are time records maintained by all individuals receiving co	mpensation?		•			0	No		
				Total (Cost and Hours		T		
Item	CCNH / RHNS	Adjustment	Hours	(Specify)	Adjustment	Hours	(Specify)	Adjustment	Hours
A. Salaries and Wages*									
Operators/Owners (Complete also Sec. I of Schedule A1)	26,800		62						
2. Administrator(s) (Complete also Sec. III	20,800		02						
of Schedule A1)	184,588		2,080						
3. Assistant Administrator (Complete also Sec. IV	104,500		2,000						
of Schedule A1)									
4. Other Administrative Salaries (telephone									
operator, clerks, receptionists, etc.)	289,215		10,981						
5. Dietary Service									
a. Head Dietitian	29,251		750						
b. Food Service Supervisor	65,624		2,080						
c. Dietary Workers	516,292		23,678						
6. Housekeeping Service	45.257		1 702						
Head Housekeeper Other Housekeeping Workers	45,257 343,510		1,792 18,234					+	
7. Repairs & Maintenance Services	343,310		10,234						
a. Engineer or Chief of Maintenance	73,876		2,080						
b. Other Maintenance Workers	88,335		4,327						
8. Laundry Service									
a. Supervisor									
b. Other Laundry Workers									
9. Barber and Beautician Services									
10. Protective Services 11. Accounting Services									
a. Head Accountant									
b. Other Accountants									
12. Professional Care of Residents									
a. Directors and Assistant Director of Nurses	261,388		4,210						
b. RN									
Direct Care	455,573		9,904						
2. Administrative**	369,834		8,415						
c. LPN									
1. Direct Care	1,198,819		31,238					+	
Administrative** d. Aides and Attendants	1,916,081		89,568		+			+	
e. Physical Therapists	1,910,081		09,308					+	
f. Speech Therapists								1	
g. Occupational Therapists									
h. Recreation Workers	205,461		7,819						
i. Physicians									
1. Medical Director					<u> </u>			1	
2. Utilization Review								1	
3. Resident Care*** 4. Other (Specify)									
T. Outer (Specify)									
j. Dentists	1				†			1	
k. Pharmacists									
1. Podiatrists									
m. Social Workers/Case Management	133,058		4,168						
n. Marketing									
o. Other (Specify)	110 (00	(0.5.000)	2.7/2						
See Attached Schedule	112,682	(25,220) (25,220)	2,763		 			+	
A-13. Total Salary Expenditures	6,315,644	(23,220)	224,149	ļ			<u> </u>	1	

^{*} Do not include in this section any expenditures paid to persons who receive a fee for services rendered or who are paid on a contract basis.

^{**} Administrative - costs and hours associated with the following positions: MDS Coordinator, Inservice Training Coordinator and Infection Control Nurse. Such costs shall be included in the direct care category for the purposes of rate setting.

^{***} This item is not reimbursable to facility. For Title 19 residents, doctors should bill DSS directly. Also, any costs for Title 18 and/or other private pay residents must be removed in the Adjustment column.

Schedule of Other Salaries and Wages (Page 10)

		CCNH / RHNS		(Specify)				(Specify)		
Position	\$	Adjustment	Hours	\$	Adjustment	Hours	\$	Adjustment	Hours	
	-									
Admissions (Portion Relating to Marketing Disallowed)	\$ 109,327	\$ (21,865)	\$ 2,665							
Respiratory Therapy	3,355	(3,355)	98							
Total	\$ 112,682	\$ (25,220)	2,763	\$ -	\$ -	-	\$ -	\$ -	-	

Schedule of Other Fees (Page 13)

		CCNH / RHNS			(Specify)			(Specify)	
Service	\$	Adjustment	Hours	\$	Adjustment	Hours	\$	Adjustment	Hours
	-								
Consult Rehab / IV Nursing Consultant	\$ 12,722	\$ (12,722)	65						
Shared EE Nursing Consultant	733		8						
Respiratory Therapy	109	(109)	1						
Total	\$ 13,564	\$ (12,831)	74	\$ -	\$ -	-	\$ -	\$ -	-

CSP-11 Rev. 10/2005

Schedule A1 - Salary Information for Operators/Owners; Administrators, Assistant Administrators and Other Related Parties*

Name of Facility		<u> </u>		License No.		1	Year Ended		Page	of
Maple View Manor of CT, LLC				940C		9/30/2023	Tear Endea		11	37
Wapie view Manor of C1, EEC		Salary Paid	<u> </u>	7400		9/30/2023			11	31
Name	CCNH / RHNS	(Specify)	(Specify)	Fringe Benefits and/or Other Payments (describe fully)	Full Description of Services Rendered	Total Hours Worked	Line Where Claimed on Page 10	Name and Address of All Other Employment**	Total Hours Worked	Compensation Received
Section I - Operators/Owners										
Marvin J. Ostreicher	26,800			Non Discriminatory	Supervises operations, Deals with DNS	62	A1	See Attached		
Section II - Other related parties of Operators/Owners employed in and paid by facility (EXCEPT those who may be the Administrator or Assistant Administrators who are identified on Page 12).										

^{*} No allowance for salaries will be considered unless full information is provided. Use additional sheets if required.

^{**} Include all employment worked during the cost year.

			Allocated	
	TOTAL	BEDS	Benefits	Total w/ Bnft
Augusta	44.50	72	8.64	53.14
Belair	45.25	102	12.24	57.49
Bethel	40.75	161	19.31	60.06
Bloomfield	43.50	120	14.39	57.89
Brattleboro	45.50	80	9.60	55.10
Brentwood	40.50	78	9.36	49.86
Brewer	43.50	111	13.31	56.81
Bristol	45.00	132	15.83	60.83
Cambridge	41.75	160	19.19	60.94
Catskill	40.50	136	16.31	56.81
Colony	9.75	92	11.04	20.79
Country	10.50	111	13.31	23.81
Dover	47.75	112	13.43	61.18
Eastside	45.75	69	8.28	54.03
Eliot	11.00	114	13.67	24.67
Glen Falls Hebrew Home	45.75	120	14.39 30.83	60.14
	61.50	257		92.33 82.88
Huntington Kennebunk	44.50 48.50	320 78	38.38 9.36	82.88 57.86
_Ludlowe	47.50 47.50	78 144	9.36 17.27	64.77
Maple View	47.75	120	14.39	62.14
Marlborough	48.50	120	14.39	62.89
Maywood	0.00	120	14.39	14.39
Milford	46.25	120	14.39	60.64
Newton Wellseley	13.75	110	13.19	26.94
Norway	48.25	70	8.40	56.65
Poughkeepsie	51.50	200	23.99	75.49
Regency	45.50	130	15.59	61.09
Reservoir	49.75	144	17.27	67.02
Riverside	47.25	345	41.38	88.63
Rutland	51.25	125	14.99	66.24
Sachem	10.75	111	13.31	24.06
Sands Point	27.50	180	21.59	49.09
Utica	48.50	117	14.03	62.53
Village Crest	46.50	95	11.40	57.90
Water's Edge	47.25	150	17.99	65.24
Westgate	37.75	104	12.48	50.23
Winship	47.00	72	8.64	55.64
Vacation	408.00			
Sick	120.00			
Personal	32.00			
Holiday	40.00			
Total	2118.25	5,002	600	2,118.25

CSP-12 Rev. 10/2005

Schedule A1 - Salary Information for Operators/Owners; Administrators, Assistant Administrators and Other Related Parties*

Name of Facility (as licensed)				License No.		Report for Y	ear Ended		Page	of
Maple View Manor of CT, LLC				940C		9/30/2023			12	37
Name	CCNH / RHNS	Salary Paid (Specify)	(Specify)	Fringe Benefits and/or Other Payments (describe fully)	Full Description of Services Rendered	Total Hours Worked	Line Where Claimed on Page 10	Name and Address of All Other Employment**	Total Hours Worked	Compensation Received
Section III - Administrators***										
Lewis Abramson	184,588			Non Discriminatory	Administrator	2,080	A2			
Section IV - Assistant Administrators										

^{*}No allowance for salaries will be considered unless full information is provided. Use additional sheets if required.

^{**} Include <u>all</u> other employment worked during the cost year.

^{***} If more than one Administrator is reported, include dates of employment for each.

CSP-13 Rev. 3/2023

B. Report of Expenditures - Professional Fees

		of Expend		Report for Y				Do	
Name of Facility	License No.	0400		9/30/2023	ear Ended			Page	of
Maple View Manor of CT, LLC		940C			10 / 177			13	37
		1		I ota	l Cost and Hou	ırs	1	1	
	CCNH /								i
I4	RHNS	A 4:	II	(C:£-)	A 1:	II	(C:E-)	A 4:	
*B. Direct care consultants paid on a fee	KHNS	Adjustment	Hours	(Specify)	Adjustment	Hours	(Specify)	Adjustment	Hours
for service basis in lieu of salary									
(For all such services complete Schedule B1)									
Dietitian									
2. Dentist	7,116		480						
3. Pharmacist	12,794		215						
4. Podiatrist	12,/94		213						
5. Physical Therapy									
a. Resident Care	310,286		6,918						
b. Other	310,280		0,916						
6. Social Worker									
7. Recreation Worker									
8. Physicians									
a. Medical Director (entire facility)	30,000		201						
b. Utilization Review	30,000		201						
(Title 18 and 19 only) monthly meeting									
c. Resident Care**	57,987	(57,987)	67						
d. Administrative Services facility	37,987	(37,987)	07						
Administrative Services racinty Infection Control Committee									
(Quarterly meetings)									ì
Pharmaceutical Committee									
(Quarterly meetings)									
Staff Development Committee (Once annually)									ì
e. Other (Specify)									
c. Other (Specify)									
9. Speech Therapist									
a. Resident Care	101,694		1,850						
b. Other	101,051		1,000						-
10. Occupational Therapist									
a. Resident Care	413,897	(413,897)	7,178						
b. Other	113,057	(113,057)	7,170						-
11. Nurses and aides and attendants									
a. RN									
1. Direct Care	189,568		2,696						
2. Administrative***	107,500	 	2,070		†				
b. LPN									
1. Direct Care	177,512		2,954						
2. Administrative***	1/1,512		2,754						
c. Aides	251,031		7,340						
d. Other	231,031		7,540						
12. Other (Specify)									
See Attached Schedule	13,564	(12,831)	74						
B-13 Total Fees Paid in Lieu of Salaries	1,565,449	(484,715)	29,973						
* Do not include in this section management consultants or services wh				l by required inform	nation Page 17		ı	1	

^{*} Do not include in this section management consultants or services which must be reported on Page 16 item M-12 and supported by required information, Page 17.

^{**} This item is not reimbursable to facility. For Title 19 residents, doctors should bill DSS directly. Also, any costs for Title 18 and/or other private pay residents must be removed in the Adjustment column.

^{***} Administrative - costs and hours associated with the following positions: MDS Coordinator, Inservice Training Coordinator and Infection Control Nurse. Such costs shall be included in the direct care category for the purposes of rate setting.

Report of Expenditures Schedule B1 - Information Required for Individual(s) Paid on Fee for Service Basis*

Name of Facility	L	icense No.		Report for Y	Year Ended	Page	of		
Maple View Manor of CT, LLC		940C		9/30/2023		14	37		
Name & Address of Individual	Full Explana	ation of Service	Operato	* to Owners, rs, Officers					
Gerident Solutions, P.O. Box 290539, Wethersfield, CT 06129	D	Pentist	Yes O	No •	N/A				
Procare LTC of CT, 111 Executive Blvd, Farmingdale, NY 11735		Nursing Consultant / ult Rehab	•	0	Common Own	Common Ownership			
Preferred Therapy-809 Main St., E.Hartford, CT, 06108	PT,	OT, ST	•	0	Common Owne	ership			
Starling Physicians, 2110 Silas Deane HWY, Rocky Hill CT 06067		/ Medical Consulting	0	•	N/A	N/A			
PREFERRED PROFESSIONAL SERVICES 850 Silas Deane Hwy Wethersfield, CT 06109	Contract RN	s / LPNs / CNAs	•	0	Common Own	ership			
INTELYCARE INC PO BOX 200413 PITTSBURGH PA 15262		RNs / LPNs	0	•	N/A				
CAMBRIDGE MANOR 2428 Easton Turnpike, Fairfield, CT 06825	Shared EE N	ursing Consultant	•	0	Common Own	ership			
ACUTE CARE GASES II LLC 23 Nutmeg Valley Rd, Wolcott, CT 06716	Respirat	ory Therapy	0	•	N/A				
			0	•					
			0	•					
			0	•					
			0	•					
			0	•					
			0	•					
			0	•					
			0	•					
			0	•	⊙				
			0	•					
			0	•					
			0	•					
			0	•					
			0	•					

^{*} Use additional sheets if necessary.

^{**} Refer to Page 4 for definition of related.

C. Expenditures Other Than Salaries - Administrative and General

J	cense No.	Report for Y	ear Ended				Page	of
Maple View Manor of CT, LLC	940C	9/30/2023					15	37
T.			CCNH /		(9 :0)		(0 :0)	
Item		Total	RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
Administrative and General								
a. Employee Health & Welfare Benefits								
Workmen's Compensation	\$	210,194	210,194					
Disability Insurance	\$							
Unemployment Insurance	\$	44,264	44,505	(241)				
4. Social Security (F.I.C.A.)	\$,	466,181	(2,521)				
5. Health Insurance	\$	963,577	968,816	(5,239)				
6. Life Insurance (employees only)								
(not-owners and not-operators)	\$							
7. Pensions (Non-Discriminatory)	\$	377,509	377,509					
(not-owners and not-operators)								
8. Uniform Allowance	\$							
9. Other (<i>Specify</i>)	\$	30,354	30,354					
See Attached Schedule								
b. Personal Retirement Plans, Pensions, and	\$							
Profit Sharing Plans for Owners and								
Operators (Discriminatory)*								
c. Bad Debts*	\$		41,018	(41,018)				
d. Accounting and Auditing	\$	33,560	33,560					
e. Legal (Services should be fully described on	Page 15b) \$	9,301	25,191	(15,890)				
f. Insurance on Lives of Owners and	\$							
Operators (Specify)*								
g. Office Supplies	\$	33,696	33,696					
h. Telephone and Cellular Phones								
Telephone & Pagers	\$	24,797	24,797					
2. Cellular Phones	\$		4,203	(1,403)				
i. Appraisal (Specify purpose and	\$							
attach copy)*								
177								
j. Corporation Business Taxes (franchise tax)	\$	250	16,000	(15,750)				
k. Other Taxes (Not related to property - See F	Page 22)							
1. Income*	\$		65,456	(65,456)				
2. Other (Specify)	\$			(, , , , ,				
See Attached Schedule	•							
3. Resident Day User Fee	\$	660,323	660,323					
Subtotal	\$		3,001,803	(147,517)				
* Facility of ould call discillant the assessment in the Adington on	Ψ	_,=====================================		tale forward t		ı		I

^{*} Facility should self-disallow the expense in the Adjustment column.

(Carry Subtotals forward to next page)

Schedule of Other Employee Benefits

Description	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
	-					
Union Training and Upgrading	\$ 27,366					
Background Checks	2,657					
Employee Benefits Other - COVID	331					
Total	\$ 30,354	\$ -	\$ -	\$ -	\$ -	\$ -

Schedule of Other Taxes

Description	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
	-					
Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

CSP-15b Rev. 3/2023

General Information and Questionnaire Accounting Basis

Name of Facility	License No.	Report for Year Ended		Page	of
Maple View Manor of CT, LLC	940C	9/30/2023		15b	37
The records of this facility for the p	period covered by this report	were maintained on the following basis:			
	Modified Cash				
Is the accounting basis for this					
1	Yes	If "No," explain.			
previous period?	No				
N/A					
Independent Accounting Firm					
Name of Accounting Firm		Address (No. & Street, City, State, Zip Code))		
1 Marcum LLP		555 Long Wharf Drive, 8th Floor, New F	Haven, CT (06511	
2					
3					
4					
Services Provided by This Firm (de	escribe fully)				
1 Compilation, preparation of Medicare	and Medicaid cost reports and YE	tax services	\$	33,560	
2			\$		
3			\$		
4			\$		
			Charge for	r Services	Provided
			¢ Clark	33,560	
Are These Charges Reflected in the Evnend	liture Portion of This Report? If Ve	es, Specify Expense Classification and Line No.	Φ	33,300	<u>'</u>
	Page 15, Line 1d	is, specify Expense Classification and Elife 110.			
Legal Services Information	Tuge 15, Ellie 14				
Name of Legal Firm or Independent	t Attorney		Telephone	Number	
1 MURTHA CULLINA LLP	tAttorney		860-240-6		
2 JACKSON LEWIS P.C.			860-522-0		
3 BARRACKS BREYANNA			N/A	404	
4 Various			Various		
5			various		
Address (No. & Street, City, State, .			<u> </u>		
1 280 Trumbell St, 12th fl Hartfo					
2 90 State House Square, 8th Flo	oor, Hartford,CT 06103				
3 199 Baltimore Street Hartford,	CT 06112				
4 Various					
5 Services Provided by This Firm (<i>de</i>	ogovih a fullu)				
`			Ф.	115	
1 Telephone conference with Sprinkler i	issue and resident evacuations		\$	115	
2 Reviewed Worker's Comp settlement			\$	4,286	
3 Worker's Comp Commission			\$	4,900	
4 Various Non Allowable Collections / C	Conservatorship (Disallowed)		\$	15,890	
5			\$		
			Charge for	r Services 1	Provided
			\$	25,191	
	liture Portion of This Report? If Ye Page 15, Line 1e	es, Specify Expense Classification and Line No.			
• Yes O No	<u> </u>				

Maple View Health & Rehab September 30, 2023 Benefits Disallowance

Pg. 15a

Respiratory Therapist Benefits Disallowance

Respiratory Therapist Salary	3,355 Page 10
Total Salaries	6,315,644 TB Linked
Percent to Total Salaries	0.05%
Total Benefits (Pg 15, Line 1a3 - 1a6)	1,479,502 TB Linked
,	
Respiratory Therapist Benefits Disallowed	786 Pg 15

Pg. 15a

National Health Care Associates, Inc. (CT) Disallowance Schedule for Cell Phones September 30, 2023

	<u>Amount</u>					
Total Cell Phone Expense		4,203	TB Linked			
Total Allowable Cost	\$	2,800				
Days in Cost Report (365out of 365 Days)		365				
Days in Cost Report Year		365				
Partial Year Allowable %		100%	-			
Revised Allowable Cost	\$	2,800				
Disallowed Cell Phone (Page 28, Line 12)	\$	1,403	- =			

C. Expenditures Other Than Salaries (cont'd) - Administrative and General

Name of Facility	License No.	Report for Ye	ar Ended				Page	of
Maple View Manor of CT, LLC	940C	9/30/2023					16	37
Item	Subtotals Brought Forward:	Total 2.854.286	CCNH / RHNS 3,001,803	Adjustment (147,517)	(Specify)	Adjustment	(Specify)	Adjustment
l. Travel and Entertainment	Subtotuis Brought 1 of wara.	2,034,200	3,001,003	(147,517)				
Resident Travel and Entertainment	\$							
Nesident Travel and Entertainment Holiday Parties for Staff	\$							
Gifts to Staff and Residents	<u> </u>		23,295	(23,295)				
4. Employee Travel	\$	1,026	1,026	(23,230)				
Education Expenses Related to Seminars ar	nd Conventions \$	309	309					
6. Automobile Expense (not purchase or depr			6,676	(6,676)				
7. Other (Specify)	\$,					
See Attached Schedule								
m. Other Administrative and General Expenses								
Advertising Help Wanted (all such expense)	s) \$	1,600	1,600					
2. Advertising Telephone Directory (all such	expenses)*** \$							
 Advertising Other (Specify)*** 	\$		57,676	(57,676)				
See Attached Schedule								
4. Fund-Raising***	\$							
Medical Records	\$							
Barber and Beauty Supplies (if this service								
directly and not by contract or fee for servi-	ce)***							
7. Postage	\$	2,508	2,508					
* 8. Dues and Membership Fees to Professional	\$	8,848	8,848					
Associations (Specify)								
See Attached Schedule								
8a. Dues to Chamber of Commerce & Other N								
9. Subscriptions	\$	8,611	8,611					
10. Contributions***	\$		200	(200)				
See Attached Schedule								
11. Services Provided by Contract (Specify and		117,349	117,349					
Schedule C-2, Page 21 for each firm or inc	,	205.525	(70.010	(202.274)				
12. Administrative Management Services**	\$		678,810	(383,274)				
13. Other (Specify)	\$	41,304	77,163	(35,859)				
See Attached Schedule	th.	2 221 277	2.005.074	((54.407)				
C-14 Total Administrative & General Expenditures	\$	3,331,377	3,985,874	(654,497)				

^{*} Do not include Subscriptions, which should go in item 9.

** Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

*** Facility should self-disallow the expense in the Adjustment column.

Schedule of Other Travel and Entertainment

Description	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
	-					
		•				
Total Other Travel and Entertainment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Schedule of Other Advertising

				Adjustment	(Specify)	Adjustment
	-					
arketing Supplies \$ 1	11,483	\$ (11,483)				
romotional Advertising 4	46,193	(46,193)				
otal Other Advertising \$ 5	57,676	\$ (57,676)	\$ -	\$ -	\$ -	\$ -

Schedule of Dues

Description	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
	-					
CAHCF Dues	\$ 8,188					
ACHCA Dues	310					
AAPACN Dues	350					
Total Dues	\$ 8,848	\$ -	\$ -	\$ -	\$ -	\$ -

Schedule of Contributions

Description	CCNH /	RHNS	Adjustme	nt	(Specify)	Adjustmei	ıt	(Specify)	Adjust	ment
		-								
Donations	\$	200	\$ (200)						
Total Contributions	\$	200	\$ (200)	\$ -	\$		\$ -	\$	-

Schedule of Other Administrative and General

Description	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
	-					
Licenses and Permits-Maple View-Administration	\$ 2,840					
Penalties-Maple View-Administration	94	\$ (94)				
Bank Charges-Maple View-Administration	49,437					
Misc. Expense-Maplev-Administration	9,707	(9,707)				
Prior Period Expense-Maple View-Administration	15,085	(15,085)				
Misc Revenue Adjustment		(10,620)				
Medical Records Revenue Adjustment		(353)				
Total Other Administrative and General	\$ 77,163	\$ (35,859)	\$ -	\$ -	\$ -	\$ -

Maple View Health & Rehab Calculation of Allowable Management Fee September 30, 2023

<u>Descrption</u>	Amount			
Management fees Charged	678,810	Page 16, L		
Accounting Charges Total Management Fees Per Agreement	33,560 712,370	Page 15, L	ine 1d	
Total Management Lees Let Atgreement	712,370			
Patient Days	38,523	Page 8 of C	C/R	
Imputed Days - 90% Occupancy (365/365 Days)	39,420	Calculation		
Amount Per Patient Day (Greater of 90% or Acta	ul Days)	\$	18.07	
PPD Allowance Per Client 2022			7.92	
2023 CPI Increase %			1.0541	J.01b
PPD Allowance 9/30/2022			8.35	_
				-
Amount over (Under)		\$	9.7228	
Total Days			39,420	Page 8 of C/R
Disallowed Management Fee		\$	383,274	- -

Schedule C-1 - Management Services*

Name of Facility Maple View Manor of CT, LLC	License No. 940C	Report for Year Ended 9/30/2023	Page of 17 37
Name & Address of Individual or Company Supplying Service	Cost of Management Service	Full Description of Mgmt. Service Provided	Indicate Where Costs are Included in Annual Report Page #/Line #
National Healthcare Associates, Inc.	678,810	Shared Expenses	Page 16 / Line m12

^{*} In addition to management fees reported on page 16, line m12 include any additional management company charges or allocations of home office overhead costs reported elsewhere in the Annual Report.

C. Expenditures Other Than Salaries (cont'd) - Dietary Basis for Allocation of Costs (See Note on Page 5)

Name of Facility	License		Report for Ye		iocación or c	osts (Sec 110	Page	of
Maple View Manor of CT, LLC		940C	9/30/2023					37
			CCNH /					
Item		Total	RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
2. Dietary								
a. In-House Preparation & Service								
1. Raw Food	\$	385,554	385,554					
2. Non-Food Supplies	\$	39,594	39,594					
3. Other (Specify)	_ \$							
b. Purchased Services (by contract other	\$	8,397	8,397					
than through Management Services)								
(Complete Schedule C-2 att. Page 21)								
c. Other (Specify)	\$							
2D. Total Dietary Expenditures (2a + b + c + d)	•	433,545	433,545					
2D. Total Dietary Experiationes (2a + 6 + c + d)	3	433,343	455,545			l		
2E. Dietary Questionnaire		Total	CCNH / RHNS		(Specify)		(Specify)	
F. Resident Meals: Total no. of meals served per da	y:*							
G. Is cost of employee meals included in 2D?) Yes	•	No					
H. Did you receive revenue from employees?	O Yes O No If yes, specify amt.							
I. Where is the revenue received reported in the Cos	t Report?	(Page/Line Iter	n)					
Is cost of meals provided to persons other than J. employees or residents (i.e., Board Members, C) V	0	No		If yes, specify			
J. employees or residents (i.e., Board Members, Guests) included in 2D?) res	•	INO		cost.			
K. Is any revenue collected from these people?) Yes	•	No		If yes, specify amt.			
L. Where is the revenue received reported in the Cos	t Report?	(Page/Line Iter	n)					
Is cost of food (other than meals, e.g., snacks M. at monthly staff meetings, board meetings) provided to employees included in 2D?) Yes	•	No		If yes, specify cost.			
N. Is any revenue collected from employees?) Yes	•	No		If yes, specify amt.			
O. Where is the revenue received reported in the Cos	t Report?	(Page/Line Iter	n)					

^{*} Count each tray served to a resident at meal time, but do not count liquids or other "between meal" snacks.

C. Expenditures Other Than Salaries (cont'd) - Laundry Basis for Allocation of Costs (See Note on Page 5)

Name of Facility Maple View Manor of CT, LLC	License	No. 940C	Report for Yea	ır Ended			Page 19	of 37
Item	<u>'</u>	Total	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
Laundry a. In-House Processing* 1. Bed linens, cubicle curtains, draperies,	Lbs.			J		J	(1)	J
gowns and other resident care items washed, ironed, and/or processed.***	Amt. \$							
Employee items including uniforms, gowns, etc. washed, ironed and/or	Lbs.							
processed.***	Amt. \$							
Personal clothing of residents	Lbs.							
washed, ironed, and/or processed.***	Amt. \$							
4. Repair and/or purchase of linens.***	Lbs.							
	Amt. \$							
b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)	\$	168,840	168,840					
c. Other (Specify) Other Supplies / Diapers / Linen	\$	47,326	47,326					
3D. <i>Total Laundry Expenditures</i> (3a + b + c)	\$	216,166	216,166					
3E. Laundry Questionnaire								
F. Is cost of employee laundry included in 3D?	Yes	•	No		If yes, specify cost.			
	Yes	•	No		If yes, specify amt.			
H. Where is the revenue received reported in the Cost	Report?		(Page/Line Ite	em)				
I. Is Cost of laundry provided to persons other than employees or residents included in 3D?	Yes	•	No		If yes, specify cost.			
	Yes	•	No		If yes, specify amt.			
K. Where is the revenue received reported in the Cost	-		(Page/Line Ite	em)				

^{*} Do not include salaries from page 10 as part of dollar values recorded in 1, 2, 3, and 4. All allocations should add to total recorded in 3D.

^{***} Pounds of Laundry only required for multi-level facilities.

C. Expenditures Other Than Salaries (cont'd) - Housekeeping and Resident Care Basis for Allocation of Costs (See Note on Page 5)

Item	Name of Facility	Repo	rt for Year Er	nded				Page	of	
Item	Maple View Manor of CT, LLC 940C			9/30/2023				37		
4. Housekeeping a. In-House Care 1. Supplies - Cleaning (Mops, palls, brooms, etc.) b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21) C. Other (Specify) 5. Resident Care (Supplies)** a. Prescription Drugs** 1. Own Pharmacy 2. Purchased from b. Medicine Cabinet Drugs c. Medical and Therapeutic Supplies c. Medical and Therapeutic Supplies c. Medical and Therapeutic Supplies d. Ambulance/Limousine*** e. Oxygen 1. For Emergency Use 2. Other** 5. Arays and Related Radiological Procedures** e. Oxygen 1. For Emergency Use 2. Other** 5. Is, 146 (18,146) 6. X-rays and Related Radiological Salaries or fees) b. Laboratory*** g. Dental (Not dentists who should be included under Salaries or fees) b. Indirect Management Services* c. Indirect Management Services* S. 10,3068 S. 18,562 S. 10,308 S. 10,338	Item			Total		Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
1. Supplies - Cleaning (Mops, palls, brooms, etc.)	4. Housekeeping	Sq. Ft. Serviced				-	` • •	•	1	*
Department Dep	1 0	by Personnel								
b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21) C. Other (Specify) 4D. Total Housekeeping Expenditures (4a + b + c) \$ 43,135 43,135 5. Resident Care (Supplies)*** a. Prescription Drugs** 1. Own Pharmacy \$ 356,619 (356,619) 2. Purchased from \$ 10,338 10,338 c. Medicine Cabinet Drugs \$ 10,338 10,338 c. Medicine Cabinet Drugs \$ 90,419 100,541 (10,122) d. Medical and Therapeutic Supplies \$ 90,419 100,541 (10,122) d. Ambulance/Limousine*** \$ 9,984 (9,984) c. Oxygen 1. For Emergency Use \$ 18,146 (18,146) d. C. Warays and Related Radiological \$ 23,478 (23,478) Procedures*** g. Dental (Not dentists who should be included under \$ salaries or fees)		Amt.	\$	43,135	43,135					
than through Management Servicesy (Complete Schedule C-2 att. Page 21) C. Other (Specify) \$ 4D. Total Housekeeping Expenditures (4a + b + c) \$ 43,135 \$ 43,135 \$ 5. Resident Care (Supplies)** a. Prescription Drugs*** 1. Own Pharmacy \$ 356,619 (356,619) 2. Purchased from \$ \$ b. Medicine Cabinet Drugs \$ 10,338 10,338 c. Medical and Therapeutic Supplies \$ 90,419 100,541 (10,122) \$ d. Ambulance/Limousine*** \$ 9,984 (9,984) \$ c. Oxygen		Sa. Ft. Serviced								
Complete Schedule C-2 att.		*								
C. Other (Specify) S	(Complete Schedule C-2 att.		\$							
### AD. **Total Housekeeping Expenditures** (4a + b + c) \$ 43,135		<u>.</u> L	\$							
5. Resident Care (Supplies)** a. Prescription Drugs*** 1. Own Pharmacy 2. Purchased from 5. Since the supplies of the supplies	C. Other (specify)		Ψ							
a. Prescription Drugs*** 1. Own Pharmacy 2. Purchased from b. Medicine Cabinet Drugs c. Medical and Therapeutic Supplies d. Ambulance/Limousine*** e. Oxygen 1. For Emergency Use 2. Other*** 5. 18,146 6. X-rays and Related Radiological procedures*** g. Dental (Not dentists who should be included under salaries or fees) h. Laboratory*** k. Indirect Management Services* k. Indirect Management Services* 1. Cable TV m. Other (Specify)**** S. 356,619 (356,619) (356,619) (356,619) (356,619) (356,619) (356,619) (356,619) (356,619) (49,984) (10,122)	4D. Total Housekeeping Expenditures (4a +	b+c)	\$	43,135	43,135					
1. Own Pharmacy \$ 356,619 (356,619) 2. Purchased from \$ 5										
2. Purchased from \$	a. Prescription Drugs***									
b. Medicine Cabinet Drugs \$ 10,338 10,338 10,338 c. Medical and Therapeutic Supplies \$ 90,419 100,541 (10,122) d. Ambulance/Limousine*** \$ 9,984 (9,984) c. Oxygen 1. For Emergency Use \$ 1. Laborators** \$ 1. Cable TV \$ 1. For Emergency Use \$ 1. Cable TV \$ 1. For Emergency Use \$ 1. For Emergency Use \$ 1. Cable TV \$ 1. For Emergency Use \$			\$		356,619	(356,619)				
c. Medical and Therapeutic Supplies \$ 90,419 100,541 (10,122) d. Ambulance/Limousine*** \$ 9,984 (9,984) e. Oxygen 1. For Emergency Use (18,146) (18,146) 2. Other*** \$ 18,146 (18,146) (18,	Purchased from		\$							
c. Medical and Therapeutic Supplies \$ 90,419 100,541 (10,122) d. Ambulance/Limousine*** \$ 9,984 (9,984) e. Oxygen 1. For Emergency Use (18,146) (18,146) 2. Other*** \$ 18,146 (18,146) (18,										
d. Ambulance/Limousine*** \$ 9,984 (9,984) e. Oxygen 1. For Emergency Use \$ 2. Other*** \$ 18,146 (18,146) f. X-rays and Related Radiological Procedures*** \$ 23,478 (23,478) g. Dental (Not dentists who should be included under salaries or fees) \$ 29,090 (29,090) h. Laboratory*** \$ 29,090 (29,090) i. Recreation \$ 18,562 18,562 j. Direct Management Services* \$ k. Indirect Management Services* \$ 1. Cable TV \$ 7,200 17,001 (9,801) m. Other (Specify)**** \$ 30,658 48,928 (18,270) See Attached Schedule \$ n. Physical Therapy Expense \$			\$	10,338	10,338					
c. Oxygen 1. For Emergency Use 2. Other*** \$ 18,146 (18,146) f. X-rays and Related Radiological Procedures*** g. Dental (Not dentists who should be included under salaries or fees) h. Laboratory*** \$ 29,090 (29,090) i. Recreation \$ 18,562 18,562 j. Direct Management Services* k. Indirect Management Services* 1. Cable TV \$ 7,200 17,001 (9,801) m. Other (Specify)**** \$ 30,658 48,928 (18,270) See Attached Schedule n. Physical Therapy Expense	c. Medical and Therapeutic Supplies		\$	90,419	100,541	(10,122)				
1. For Emergency Use \$	d. Ambulance/Limousine***		\$		9,984	(9,984)				
2. Other*** \$ 18,146 (18,146) f. X-rays and Related Radiological Procedures*** \$ 23,478 (23,478) g. Dental (Not dentists who should be included under salaries or fees) \$ 29,090 (29,090) h. Laboratory*** \$ 29,090 (29,090) i. Recreation \$ 18,562 18,562 j. Direct Management Services* \$ 10,000 (9,000) k. Indirect Management Services* \$ 7,200 17,001 (9,801) m. Other (Specify)**** \$ 30,658 48,928 (18,270) See Attached Schedule \$ 10,000 (10,000) n. Physical Therapy Expense \$ 10,000 (18,270)	e. Oxygen									
f. X-rays and Related Radiological \$ 23,478 (23,478)	For Emergency Use		\$							
Procedures*** g. Dental (Not dentists who should be included under salaries or fees) h. Laboratory*** \$ 29,090 (29,090) i. Recreation \$ 18,562 18,562 j. Direct Management Services* \$ k. Indirect Management Services* \$ l. Cable TV \$ 7,200 17,001 (9,801) m. Other (Specify)**** \$ 30,658 48,928 (18,270) See Attached Schedule \$ n. Physical Therapy Expense \$			\$		18,146	(18,146)				
g. Dental (Not dentists who should be included under salaries or fees) h. Laboratory*** i. Recreation j. Direct Management Services* k. Indirect Management Services* l. Cable TV m. Other (Specify)**** See Attached Schedule n. Physical Therapy Expense			\$		23,478	(23,478)				
salaries or fees) 29,090 (29,090) h. Laboratory*** \$ 29,090 (29,090) i. Recreation \$ 18,562 18,562 j. Direct Management Services* \$ k. Indirect Management Services* \$ l. Cable TV \$ 7,200 17,001 (9,801) m. Other (Specify)**** \$ 30,658 48,928 (18,270) See Attached Schedule \$ (18,270) n. Physical Therapy Expense \$ (18,270)										
h. Laboratory*** i. Recreation j. Direct Management Services* k. Indirect Management Services* l. Cable TV m. Other (Specify)**** See Attached Schedule n. Physical Therapy Expense \$ 29,090 (29,090) 18,562 18,562 19,000 19,001 (9,801) (9,801) (18,270) (18,270) (18,270) (18,270)		luded under	\$		_					_
i. Recreation \$ 18,562 18,562 j. Direct Management Services* \$ k. Indirect Management Services* \$ l. Cable TV \$ 7,200 17,001 (9,801) m. Other (Specify)**** \$ 30,658 48,928 (18,270) See Attached Schedule \$ 1, 2,200 1, 2,200 n. Physical Therapy Expense \$ 1, 2,200 1, 2,200			\$		29.090	(29,090)				
j. Direct Management Services* \$			Ψ	18.562		(25,550)				
k. Indirect Management Services* \$ 1. Cable TV \$ 7,200 17,001 (9,801) m. Other (Specify)**** \$ 30,658 48,928 (18,270) See Attached Schedule n. Physical Therapy Expense \$			\$	10,002	10,002					
1. Cable TV	Ž Č		\$							
m. Other (Specify)**** \$ 30,658 48,928 (18,270) See Attached Schedule n. Physical Therapy Expense \$			\$	7,200	17,001	(9,801)				
See Attached Schedule n. Physical Therapy Expense \$			\$			() /				
n. Physical Therapy Expense \$			-	2 0,02 0		(10,270)				
			\$							
0. Special filidapy expense	o. Speech Therapy Expense		\$							
5P. Total Resident Care Expenditures (5a - 5o) \$ 157,177 632,687 (475,510)		(o)	\$	157,177	632,687	(475,510)				

^{*} Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

^{**} Do not include any fees to professional staff, these should be reported on Page 13, or, if paid on salary basis, on Page 10.

^{***} Facility should self-disallow the expense in the Adjustment column.

^{****} ICFMR's should provide a detailed schedule of all Day Program Costs.

Schedule of Other Resident Care

Description	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
	-					
Supplies-Maple View-Rehab Tpy and Ancllry	\$ 177	\$ (177)				
Supplies COVID-Maple View-Nursing	21,400					
IV Thy Supplies-Maple View-Rehab Tpy and Ancllry	7,913	(7,913)				
Minor Equip-Maple View-Nursing	3,039					
Podiatrist Fees-Maplev-Medical Services	26	(26)				
Purch Services-Maple View-Nursing	2,647					
Equip Rental-Maple View-Nursing	3,572					
Equip Rental-Maple View-Rehab Tpy and Ancllry	10,154	(10,154)				
Total Other Resident Care	\$ 48,928	\$ (18,270)	\$ -	\$ -	\$ -	\$ -

National Health Care Associates, Inc. (CT) Cable TV Disallowance September 30, 2023

Pg. 20a

Total Cable TV Expense	17,001	TB Linked
Total Monthy Fee Allowed	\$ 600	
Total Months	12	
Total Allowable Expense	\$ 7,200	_
Partial Year Cost Report (365 out of 365 Days)	\$ 365	
Days in Cost Report Year	365	
Partial Year Allowable %	100.00%	_
Revised Allowable Cost	\$ 7,200	
Disallowed Expense	\$ 9,801	{a}

Tickmark

{a}

Ties to page 20

Report of Expenditures Schedule C-2 - Individuals or Firms Providing Services by Contract *

Name of Facility				License No.	Report for Year Ende	d			Page	
Maple View Manor of CT, LI	<u>.C</u>			940C	9/30/2023				21	37
		Related *** Operators					Total Cost/P	age Ref.***	Ī	
Name of Individual or Company	Address	Yes	No	Explanation of Relationship	Full Explanation of Service Provided*	CCNH / RHNS	(Specify)	(Specify)	Pg	Line
ADP	325 Chestnut Street, Philadelphia, PA 19103	0	•	N/A	Payroll	12,137	` 1			m11
MANHATTAN TECH SUPPORT	55 W 39TH ST NEW YORK, NY 10018	0	•	N/A	Computer Maintenance System	38,001			16	m11
ADM Environmental Group	1370 Coney Island Ave, Brooklyn, NY 11230	0	•	N/A	Trash Removal/Recycling	27,904			22	6f
Med - Apparel Services	Pkwy, Mount Vernon, NY 10550	0	•	N/A	Laundry/Linen Services	27,712			19	3b
Unitex Textile Rental	Pkwy, Mount Vernon, NY 10550	0	•	N/A	Laundry/Linen Services	140,567			19	3b
Fire Protection Services	1701 Highland Ave. Chesire, CT 06410	0	•	N/A	Fire Alarm	12,376			22	6f
Smartlinx	333 Thornall St. 4th Floor Edison, NJ 08837	0	•	N/A	Time & Attendance	14,726			16	m11
EMCORE SEVICES	30 Lindeman Drive Trumbull, CT 06611	0	•	N/A	HVAC	39,225			22	6f
Brothers Landscape	5 Chelsea Dr, Cromwell CT 06416	0	•	N/A	Landscaping/Plowing	10,418			22	6f
Otis	South Hutchinson, 67505	0	•	N/A	Elevator	12,534			22	6f
		0	•							
		0	•							
		0	•							
		0	•							

^{*} List all contracted services over \$10,000. Use additional sheets if necessary.

^{**} Refer to Page 4 for definition of related.

^{***} Please cross-reference amount to the appropriate page in the Annual Report (Pages 16, 18, 19, 20 or 22).

C. Expenditures Other Than Salaries (cont'd) - Maintenance and Property

Name of Facility	License No.	Report for Year	Ended				Page	of
Maple View Manor of CT, LLC	940C	9/30/2023					22	37
Item		Total	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
6. Maintenance & Operation of Plant				,	(1)/	,	1 7/	
a. Repairs & Maintenance	\$							
b. Heat	\$	41,347	41,347					
c. Light & Power	\$	83,248	83,248					
d. Water	\$	24,044	24,044					
e. Equipment Lease (Provide detail of	on page 22b) \$	52,189	52,189					
f. Other (itemize)	\$	156,065	156,065					
See Attached Schedule								
6g. Total Maint. & Operating Expense	(6a - 6f) \$	356,893	356,893					
7. Depreciation (complete schedule page	e 23*)							
a. Land Improvements	\$							
b. Building & Building Improvement	ts \$							
c. Non-Movable Equipment	\$	2,884	2,884					
d. Movable Equipment	\$	40,731	41,795	(1,064)				
*7e. <i>Total Depreciation Costs</i> (7a + b + c	(+ d) \$	43,615	44,679	(1,064)				
8. Amortization (Complete att. Schedule	-							
a. Organization Expense	\$							
b. Mortgage Expense	\$		20.025					
c. Leasehold Improvements	<u>\$</u>	90,026	90,026					
d. Other (Specify)	*	00.026	00.026					
*8e. Total Amortization Costs (8a + b + c	, ,	90,026	90,026					
9. Rental payments on leased real proper		022 221	022 221					
real estate taxes included in item 10b	\$	833,331	833,331					
10. Property Taxes	d)							
a. Real estate taxes paid by owner	\$	170.000	170.066					
b. Real estate taxes paid by lessor		170,866	170,866					
c. Personal property taxes	\$		12,207	(1.051)				
11. Total Property Expenses (7e + 8e +	9 + 10) \$	1,150,045	1,151,109	(1,064)				

^{*} Amounts entered in these items must agree with detail on Schedule for Depreciation and Amortization Page 23 and Page 24.

Schedule of Other Repairs and Maintenance

Description	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
	-					
Supplies-Maple View-Maintenance	\$ 23,590					
Supplies COVID-Maple View-Maintenance	136					
Minor Equip-Maple View-Maintenance	431					
Purch Services-Maple View-Maintenance	84,619					
Ground Services-Maple View-Maintenance	10,418					
Pest Control-Maplev-Maintenance	3,664					
Carting-Maple View-Maintenance	31,972					
Rental Expenses-Maple View-Maintenance	1,235					
Total Other Repairs and Maintenance	\$ 156,065	\$ -	\$ -	\$ -	\$ -	\$ -

General Information and Questionnaire Leases (Excluding Real Property)

Operating Leases - Include all long-term leases for motor vehicles and equipment that have not been capitalized. Short-term leases or as needed rentals should not be included in these amounts.

Name of Facility			License No.	Report for Y	ear Ended		Page	of
Maple View Manor of CT, LLC			940C	9/30/2023			22b	37
	Relate	ed * to						
l l	Ow	ners,						
	_	ators,				Annual		
	Officers			Date of	Term of	Amount		ount
	Name and Address of Lessor Yes N		Description of Items Leased	Lease**	Lease	of Lease	Clai	med
Reliable Health Systems, Nostrand Ave, Brooklyn, NY 11230	0	•	Computer Equipment	10/01/08	Ongoing	909	909	
Wescom Solutions (PCC), PO Box 674802, Detroit, MI 48267	0	•	Software	03/07/12	Ongoing	39,811	39,811	
Leaf, PO Box 644006, Cincinnatti, OH 45264	0	•	Copier	05/01/18	Ongoing	3,684	3,684	
PITNEY BOWES GLOBAL F P.O.Box 3711887 Pittsburgh PA 15250-7887	0	•	Postage	06/16/15	Ongoing	796	796	
The Office Works Inc. P.O. Box 5066 Hartford,CT 06102	0	•	Copier	05/31/22	Ongoing	6,989	6,989	
	0	•						
	0	•						
	0	•						
	0	•						
	0	•						
Is a Mileage Log Book Maintained for All Le	ased Ve	ehicles ?	O Yes	•	No	Total ***	52,189	

Is a Mileage Log Book Maintained for All Leased Vehicles?

^{*} Refer to Page 4 for definition of related. If "Yes," transaction should be reported on Page 4 also.

^{**} Attach copies of newly acquired leases.

^{***} Amount should agree to Page 22, Line 6e.

Annual Report of Long-Term Care Facility CSP-23 Rev. 10/2022

Depreciation Schedule

						iation Sc	iicuuic					
Name of Facility					License No.	_		Report for Year E	nded		Page	of
Maple View Manor of CT, LLC					940	C		9/30/2023	1	,	23	37
Property Item					Historical Cost Exclusive of Land	Less Salvage Value	Cost to Be Depreciated	Accumulated Depreciation to Beginning of Year's Operations	Method of Computing Depreciation	Useful Life	Depreciation for This Year	Totals
A. Land Improvements					Luna	v arac	Вергесіанса	Operations	Вергесіанон	Life	Tor Time Tear	Totals
Acquired prior to this report period												
Disposals (attach schedule)												
3. Acquired during this report period (attach	ı schedi	ıle)										
A-4. Subtotal												
B. Building and Building Improvements												
Acquired prior to this report period					4,479,109		4,479,109	4,479,109	S/L	Various		
Disposals (attach schedule)												
Acquired during this report period (attach	ı schedi	ıle)										
B-4. Subtotal												
C. Non-Movable Equipment												
 Acquired prior to this report period 					56,171		56,171	32,703	S/L	Various	2,884	
Disposals (attach schedule)												
Acquired during this report period (attack)	ı schedi	ıle)										
C-4. Subtotal												2,884
	logb		Date of A	equisition Year	Historical Cost Exclusive of Land	Less Salvage Value	Cost to Be Depreciated	Accumulated Depreciation to Beginning of Year's Operations	Method of Computing Depreciation	Useful Life	Depreciation for This Year	Totals
D. Movable Equipment 1. Motor Vehicles (Specify name, model and year of each vehicle) a.	168	No	Wolth	i eai	Land	Value	Depreciated	Tear's Operations	Бергестаноп	Life	TOT THIS TEAT	Totals
b.												
c.												
d.												
Movable Equipment a. Acquired prior to this report period			Var	Var	1,311,867		1,311,867	487,967	C/I	Various	37,170	
b. Disposals (attach schedule)			v ai	v ai	1,311,80/		1,311,80/	40/,90/	S/L	v arrous	3/,1/0	
Acquired during this report period (attach schedule):												
c. Administrative			Var	Var	28,056		28,056		S/L	Various	3,345	
d. Standard Resident			Var	Var	16,206		16,206		S/L	Various	1,281	
e. Specialized Resident							,					
Total Acquired during this report period					44,262		44,262				4,625	
D-3. Subtotal												41,795
E. Total Depreciation												44,679

Schedule of Land Improvements Acquired during this report period

	D. J. C. O.	C .	Useful	ъ
Acquisition Date	Description of Item	Cost	Life	Depreciation
Additions:				
				+
Total additions for Land Impro	ovements	\$ -		\$ - *
Deletions:				
Total deletions for Land Impro	vements	\$ -		\$ - *
4TI (D 22 I) 12				

^{*}Ties to Page 23, Line A3

Schedule of Building Improvements Acquired during this report period

			Useful	
Acquisition Date	Description of Item	Cost	Life	Depreciation
Additions:				
Total additions for B	Building Improvements	\$ -		\$ -
Deletions:				
Total deletions for B	uilding Improvements	\$ -		\$ -

^{*}Ties to Page 23, Line B3

Schedule of Non-Movable Equipment Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:	Description of rem	0000	1	Бергеению
ruditions:				
Total additions for N	on-Movable Equipment	\$ -		\$ - *
Deletions:				
Total deletions for No	on-Movable Equipment	\$ -		\$ - *

^{**}Ties to Page 23, Line A2

^{**}Ties to Page 23, Line B2

^{*}Ties to Page 23, Line C3
**Ties to Page 23, Line C2

Schedule of Movable Equipment Acquired during this report period

Acquisition Date	Description of Item	Pick One Movable Category	Cost	Useful Life	Depreciation
Additions:					
11/3/2022	Dell Latitude Laptop	Administrative	1,201	3	367
11/15/2022	Long-term care bed	Administrative	2,148	10	197
11/30/2022	Dell Latitude Laptop	Administrative	1,201	3	367
12/1/2022	Replace-motor/Ignition control	Administrative	2,378	10	198
12/15/2022	Single Hamper W/Foot Pedal x 6	Administrative	1,585	3	440
12/23/2022	Replace Fan Motors	Administrative	1,394	10	116
12/23/2022	Pump Motors for boiler room	Administrative	4,065	10	338
12/27/2022	Check in/Temperature device	Standard Resident	5,030	5	838
12/31/2022	Pump Motor	Administrative	1,904	10	158
2/3/2023	Nobles Floor Polisher	Administrative	1,908	5	255
2/23/2023	Motorola Business Radios	Administrative	1,056	5	123
3/9/2023	Dell Latitude Laptop	Administrative	1,190	3	232
4/11/2023	Whittaker Smart care Cleaner	Standard Resident	4,575	8	286
4/19/2023	Prime Care Electric Bed	Standard Resident	2,490	12	104
5/31/2023	Dell Business Laptop	Administrative	1,814	3	252
5/31/2023	Bearing Assembly	Administrative	2,642	10	110
7/31/2023	Dell Latitude Laptop	Administrative	1,243	3	104
7/31/2023	Dell Business Desktop	Administrative	1,069	5	54
8/31/2023	PRIMECAE BED (2)	Standard Resident	2,145	10	36
9/30/2023	HP Chromebook (3)	Administrative	1,259	3	35
9/30/2023	Sit to Stand - Power Base	Standard Resident	1,965	10	16
Total additions for	Movable Equipment		\$ 44,262		\$ 4,625
Deletions:					
_					
Total deletions for	Movable Equipment		\$ -		\$ -

^{*}Ties to Page 23, Line D2c

Schedule of Leasehold Improvements Acquired during this report period

			Useful		
Acquisition Date	Description of Item	Cost	Life	Depreciation	
Additions:					
10/14/2022	Stair Threads	\$ 1,378	5	\$ 276	
8/31/2023	Carpet Install	1,329	5	44	ĺ
5/31/2023	Provider 700 IP Nurse Call Sys	25,959	10	1,082	Ì
3/1/2023	700 IP Nurse call system	25,959	10	1,514	ĺ
10/14/2022	Cyber Router/Network Devices	35,183	5	7,037	
Total additions for	Leasehold Improvement	\$ 89,808		\$ 9,953	*
Deletions:					
					ĺ
					Ì
					Ì
					l
Total deletions for	Leasehold Improvement	\$ -		\$ -	**

^{*}Ties to Page 24, Line C3

^{**}Ties to Page 23, Line D2b

^{**}Ties to Page 24, Line C2

Annual Report of Long-Term Care Facility

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Amortization Schedule*

Nam	e of Facility			License No.		Report for Yea	r Ended		Page	of
Map	e View Manor of CT, LLC			940)C	9/30/2023			24	37
						Accumulated				
			e of			Amort. to				
		Acquisition				Beginning of	Basis for			
				Length of	Cost to Be	Year's	Computing	Rate	Amortization	
	Item	Month	Year	Amortization	Amortized	Operations	Amortization**	%	for This Year	Totals
A.	Organization Expense									
	1.									
	2.									
	3.									
A-4.	Subtotal									
B.	Mortgage Expense									
	1.									
	2.									
	3.									
B-4.	Subtotal									
C.	Leasehold Improvements and Other									
	1. Acquired prior to this report period	Var	Var	Various	1,628,448	1,056,569	S/L	Variou	80,073	
	2. Disposals (attach schedule)									
	3. Acquired during this report period									
	(attach schedule) Var Var		Various	89,808		S/L	Variou	9,953		
C-4.	C-4. Subtotal								90,026	
D.	Total Amortization									90,026

^{*} Straight-line method must be used.

- A. Minimum of 5 years or 60 months.
- B. Life of mortgage; OR
- C. Remaining Life of Lease; OR
- D. Actual Life if owned by Related Party.

^{**} Specify which of the following bases were used:

Maple View Health & Rehab FIXED ASSET / DEPRECIATION SCHEDULE

Asset Type	Description	Date In Service	Method	Life	Historical Cost	2022 Deprec.	2022 A/D	2023 Deprec.	2023 A/D	NBV
LEASHOLD IMPROV	/EMENTS									
LI	Prior Period Acquisitions (Per 9/30/18 CR)	Various	S/L	Various	1,085,197	27,413	892,452	28,699	921,151	164,046
2019 Additions										
LI LI	Install Fan motor on AAon unit	11/30/2018	S/L S/L	10 10	3,449	345 4,552	1,380	345	1,725	1,724
LI	nurse call sytem Loading dock doors & frame	11/30/2018 12/31/2018	S/L S/L	10	45,518 4,020	4,332	18,208 1,608	4,552 402	22,760 2,010	22,758 2,010
LI	HVAC	1/31/2019	S/L	15	1,604	107	428	107	535	1,069
LI LI	Roof replacement	6/30/2019	S/L S/L	10	251,225	25,123	100,492	25,123	125,615	125,610
LI LI	IT Set up - Passport Unit IT Set up	8/31/2019 8/31/2019	S/L S/L	10 10	1,840 2,120	184 212	736 848	184 212	920 1,060	920 1,060
LI	Boiler	9/30/2019	S/L	20	57,987	2,899	11,596	2,899	14,495	43,492
LI LI	Cedar Wood Fence Cedar Fence	9/30/2019 9/30/2019	S/L S/L	8	466 2,639	58 330	232 1,320	58 330	290 1,650	176 989
2020 Additions										
LI	Water Valve Repair	6/30/2020	S/L	10	1,107	111	333	111	444	663
LI LI	Water Valve Repair Walk in Freezer Repair	6/30/2020 6/30/2020	S/L S/L	10 10	985 833	99 83	297 249	99 83	396 332	589 501
LI	Walk in Freezer Repair	8/31/2020	S/L	10	17,564	1,756	5,268	1,756	7,024	10,540
LI	New Boiler	8/31/2020	S/L	20	45,077	2,254	6,762	2,254	9,016	36,061
LI	Painting-Morales	9/30/2020	S/L	10	26,031	2,603	7,809	2,603	10,412	15,619
LI LI	Network Equipment Door Repair	9/30/2020 9/30/2020	S/L S/L	10 10	5,250 4,089	525 409	1,575 1,227	525 409	2,100 1,636	3,150 2,453
2021 Additions LI	Painting	2/28/2021	S/L	10	10,708	1,071	1,785	1,071	2,856	7,852
LI LI	Painting Wall Bumpers & Kick Plates	4/30/2021 5/31/2021	S/L S/L	10 10	8,065 12,034	806 1,203	1,209 1,704	806 1,203	2,015 2,907	6,050 9,127
2021 Disposals	wan bumpers & Rick Fates	3/31/2021	3/L	10	12,034	1,203	1,704	1,203	2,907	9,127
2021 Disposais	Disposal of Prior Period Assets Asset 327 Disposal				(6,147) (1,044)	-	(6,147) (1,044)	-	(6,147) (1,044)	-
2022 Additions										
LI	Direct Supply - Heat Controls	10/11/2021	S/L	10	4,894	489	489	489	978	3,916
LI LI	Magnum Industries - Carpet Install automatic door equipme	10/11/2021 11/30/2021	S/L S/L	5 10	1,880 8,542	376 854	376 854	376 854	752 1,708	1,128 6,834
LI	Wall Paint	1/4/2022	S/L S/L	5	8,542 1,690	338	338	338	676	1,014
LI	DOM Heat Time Electronic Valve	2/28/2022	S/L	10	7,704	770	770	770	1,540	6,164
LI	Install new Carpet	3/1/2022	S/L	5	8,166	1,633	1,633	1,633	3,266	4,900
LI	Vinyl Flooring -50% Deposit	4/4/2022	S/L	10	3,617	362	362	362	724	2,893
LI	Bathroom floor remodel	6/8/2022	S/L	10	1,143	114	114	114	228	915
LI LI	Glass installation New carpet/Additional Work	7/1/2022 7/1/2022	S/L S/L	10 5	4,573 2,871	457 574	457 574	457 574	914 1,148	3,659 1,723
LI	Spacia wood Vinal Tile	7/6/2022	S/L	10	2,751	275	275	275	550	2,201
2023 Additions										
LI	Stair Threads	10/14/2022	S/L	5	1,378	-	-	276	276	1,102
LI LI	Carpet Install 700 IP Nurse call system	8/31/2023 3/1/2023	S/L S/L	5 10	1,329 25,959	-	-	44 1,514	44 1,514	1,285 24,445
LI	Provider 700 IP Nurse Call Sys	5/31/2023	S/L S/L	10	25,959	-	-	1,082	1,082	24,443
LI	Cyber Router/Network Devices	10/14/2022	S/L	5	35,183	-	-	7,037	7,037	28,146
TOTAL LEASEHOLE	DIMPROVEMENTS			=	1,718,256	78,787	1,056,569	90,026	1,146,595	571,661
Building Improvement	s									
Bldng Imp	Prior Period Acquisitions (Per 9/30/18 CR)	Various	S/L	Various	4,479,109	-	4,479,109	-	4,479,109	
TOTAL Building Impi	rovements			-	4,479,109	-	4,479,109	-	4,479,109	-
Non Movable Equipme NME	Prior Period Acquisitions (Per 9/30/18 CR)	Various	S/L	Various	27,332		27,332		27,332	
	Prior Period Acquisitions (Per 9/30/18 CR)	various	S/L	various	27,332	-	27,332	-	27,332	-
2021 Additions NME	Dish washer	11/30/2020	S/L	10	10,046	1,005	1,926	1,005	2,931	7,115
NME	Dishwasher Sink Relocations	12/31/2020	S/L	10	18,793	1,879	3,445	1,879	5,324	13,469
TOTAL Non Movable	Equipment			-	56,171	2,884	32,703	2,884	35,587	20,584
MOVABLE EQUIPM	ENT									
MME	Prior Period Acquisitions (Per 9/30/18 CR)	Various	S/L	Various	1,164,997	27,856	446,608	18,162	464,770	700,227
2019 Additions										
MME	Hyper Steam Concection Steamer	11/30/2018	S/L	10	7,105	710	2,840	710	3,550	3,555
MME	Dexktop mini PC	11/30/2018	S/L	3	707	-	707	-	707	(0)
MME MME	refrigerator- reach-in tax and gate on asset#308	12/31/2018 1/31/2019	S/L S/L	10 10	4,191 396	419 40	1,676 160	419 40	2,095 200	2,096 196
MME MME	tax and gate on asset#308 Qty 20 Dining Chairs	1/31/2019	S/L S/L	15	4,880	325	1,300	325	1,625	3,255
MME	Nobles Heavy Duty Vaccum	3/31/2019	S/L	8	635	79	316	79	395	240
MME	Meridien Ice & Water Dispenser	3/31/2019	S/L	10	6,111	611	2,444	611	3,055	3,056
MME	Heavy Duty Food Blender	4/30/2019	S/L	10	1,283	128	512	128	640	643
MME MME	Bariatric bed & Mattress 6 Copiers: 3 Kyocera, 3 Toshiba	6/30/2019 7/31/2019	S/L S/L	15 5	1,537 620	102 124	408 496	102 124	510 620	1,027
MME	6 Copiers: 3 Kyocera, 3 Toshib	7/31/2019	S/L S/L	5	1,206	241	964	241	1,205	1
MME	3 Full Electric Beds	7/31/2019	S/L	12	1,822	152	608	152	760	1,062
										,,

Maple View Health & Rehab FIXED ASSET / DEPRECIATION SCHEDULE

Asset Type	Description	Date In Service	Method	Life	Historical Cost	2022 Deprec.	2022 A/D	2023 Deprec.	2023 A/D	NBV
MME	Network Equipment	8/31/2019	S/L	5	3,264	653	2,612	652	3,264	0
MME	1 Electric Bed	8/31/2019	S/L	12	607	51	204	51	255	352
MME	Dish Dispenser	8/31/2019	S/L	10	4,079	408	1,632	408	2,040	2,039
MME	6 Mattresses	9/30/2019	S/L	5	1,090	218	872	218	1,090	0
2020 Additions	1.0	10/21/2010	C/I	10	1.00	167	501	167	((0	000
MME MME	Lift Scale	10/31/2019 10/31/2019	S/L S/L	10 10	1,666 756	167 76	501 228	167 76	668 304	998 452
MME	Refridgerator	11/30/2019	S/L	10	3,177	318	954	318	1,272	1,905
MME	2 Desktops	12/31/2019	S/L	3	1,660	553	1,659	1	1,660	0
MME	Ultrasound Scanner	2/29/2020	S/L	7	8,147	1,164	3,492	1,164	4,656	3,491
MME	Computer Monitor	12/31/2019	S/L	5	1,125	225	675	225	900	225
MME	Washer & Dryer	5/31/2020	S/L	10	1,740	174	522	174	696	1,044
MME	Thermal Food Cover	6/30/2020	S/L	10	1,091	109	327	109	436	655
MME	Electric Bed	6/30/2020	S/L	12	676	56	168	56	224	452
MME	Commercial Toaster	6/30/2020	S/L	10	604	60	180	60	240	364
MME	Extractor	8/31/2020	S/L	10	2,293	229	687	229	916	1,377
MME	Network Equipment	9/302020	S/L	5	1,000	200	600	200	800	200
MME	Network Equipment	9/302020	S/L	5	1,560	312	936	312	1,248	312
2021 Additions MME	Heat Exchanger-Trane PK4	12/31/2020	S/L	15	6,692	446	818	446	1,264	5,428
MME	Inducer Motor Unit Replacement	2/28/2021	S/L	10	1,637	164	273	164	437	1,200
MME	Trane PK4 Compressor	8/31/2021	S/L	15	7,429	495	578	495	1,073	6,356
MME	Food processor	8/31/2021	S/L	10	3,315	332	387	332	719	2,596
MME	Dell Computer	8/31/2021	S/L	3	1,192	397	463	397	860	331
MME	Dell Computer	8/31/2021	S/L	3	1,216	405	473	405	878	338
MME	Firewall Security	8/31/2021	S/L	5	8,083	1,617	1,886	1,617	3,503	4,580
2022 Additions										
MME	Dell Latitude Laptops x 2	11/30/2021	S/L	3	2,214	738	738	738	1,476	738
MME	Ice and Water dispenser	3/3/2022	S/L	10	5,123	512	512	512	1,024	4,099
MME	HyperSteam Convection Steamer	4/13/2022	S/L	10	10,849	1,085	1,085	1,085	2,170	8,679
MME	Dell Desktop and Dell Laptop	4/15/2022	S/L	3	2,500	833	833	833	1,666	834
MME	Oak Park Loveseat/Chair/Couch	4/19/2022	S/L	12	7,858	655	655	655	1,310	6,548
MME	Dishwasher Sink Relocation	4/30/2022	S/L	10	6,731	673	673	673	1,346	5,385
MME	Patient Monitor (Vitals)	5/25/2022	S/L	7	4,573	653	653	653	1,306	3,267
MME	Maxwell Thomas Tables	6/17/2022	S/L	15	1,384	92	92	92	1,300	1,200
MME	Ice Maker	7/18/2022	S/L	5	4,068	814	814	814	1,628	2,440
MME	Dell OptiPlex Desktop	8/18/2022	S/L	3	1,329	443	443	443	886	443
MME	ViewBladder 10 & Stand	9/16/2022	S/L	5	4,354	871	871	871	1,742	2,612
MME	Dell Desktop/Dell Monitor	9/30/2022	S/L	3	1,295	432	432	432	864	431
2023 Additions										
MME	Dell Latitude Laptop	11/3/2022	S/L	3	1,201	-	-	367	367	834
MME	Long-term care bed	11/15/2022	S/L	10	2,148	-	-	197	197	1,951
MME	Dell Latitude Laptop	11/30/2022	S/L	3	1,201	-	-	367	367	834
MME	Replace-motor/Ignition control	12/1/2022	S/L	10	2,378	-	-	198	198	2,180
MME	Single Hamper W/Foot Pedal x 6	12/15/2022	S/L	3	1,585	-	-	440	440	1,145
MME	Replace Fan Motors	12/23/2022	S/L	10	1,394	-	-	116	116	1,278
MME	Pump Motors for boiler room	12/23/2022	S/L	10	4,065	-	-	338	338	3,726
MME	Check in/Temperature device	12/27/2022	S/L	5	5,030	-	-	838	838	4,192
MME	Pump Motor	12/31/2022	S/L	10	1,904	-	-	158	158	1,745
MME	Nobles Floor Polisher Motorola Business Radios	2/3/2023	S/L S/L	5	1,908	-	-	255 123	255 123	1,653
MME MME		2/23/2023 3/9/2023	S/L S/L	5 3	1,056 1,190	-	-	232	232	932 958
MME MME	Dell Latitude Laptop Whittaker Smart care Cleaner	3/9/2023 4/11/2023	S/L S/L	8	1,190 4,575	-	-	232 286	232	4,289
MME	Prime Care Electric Bed	4/11/2023	S/L S/L	12	2,490	-	-	104	104	2,386
MME MME	Dell Business Laptop	5/31/2023	S/L S/L	3	2,490 1,814	-	-	252	104 252	1,562
MME	Bearing Assembly	5/31/2023	S/L S/L	10	2,642	-	-	110	110	2,532
MME	Dell Latitude Laptop	7/31/2023	S/L	3	1,243	-	-	104	104	1,139
MME	Dell Business Desktop	7/31/2023	S/L	5	1,069	_	-	54	54	1,016
MME	PRIMECAE BED (2)	8/31/2023	S/L	10	2,145	-	-	36	36	2,110
MME	HP Chromebook (3)	9/30/2023	S/L	3	1,259	-	-	35	35	1,224
MME	Sit to Stand - Power Base	9/30/2023	S/L	10	1,965	-	-	16	16	1,949
TOTAL MOVABLE E	QUIPMENT			=	1,356,129	47,417	487,967	41,795	529,762	826,367
				=						
TOTAL ASSETS PER					7,609,665	129,088	6,056,348	134,705	6,191,053	1,418,612
TOTAL ASSETS PER LESS REALTY ASSE					2,493,981 (4,479,109)	131,821 0	1,718,109 (4,479,109)	131,821 0	1,718,109 (4,479,109)	775,872 0
ROUNDING				=						
VARIANCE					636,575	(2,733)	(140,870)	2,884	(6,165)	642,740

C. Expenditures Other Than Salaries (cont'd) - Property Questionnaire

	ense No.	Report for Year End	Page of		
Maple View Manor of CT, LLC	940C	9/30/2023			25 37
11. Property Questionnaire					
Part A					
Is the property either owned by the Fac	cility	37	0	N	If "Yes," complete Part B.
or leased from a Related Party?*	O	Yes	•	No	If "No," complete Part C.
*If any owner or operator of this facility is	s related by family, man	rriage, ownership, ability	to control or		
business association to any person or orga	nization from whom bu	aildings are leased, then it	t is considered a		
related party transaction.		Total			
Description 1. Date Land Purchased		Total 03/17/75			
Date Land Furchased Date Structure Completed		03/17/73			
3. If NOT Original Owner, Date of I	Purchase				
4. Date of Initial Licensure	dienase				
5. Total Licensed Bed Capacity		120			
6. Square Footage		40,000			
7. Acquisition Cost		,			
a. Land					
b. Building					
Part B - Owner and Related Parties	1	1st Mortgage	2nd Mortgage	3rd Mortgage	4th Mortgage
1. Financing					
a. Type of Financing (e.g., fixed,	variable)	Fixed			
b. Date Mortgage Obtained		10/01/15			
c. Interest Rate for the Cost Year		2.99%			
d. Term of Mortgage (number of	* /	35			
e. Amount of Principal Borrowed		3,848,600			
f. Principal balance outstanding		3,339,807			
Complete if Mortgage was Refin	nanced				
During Current Cost Year	. 11 >				
g. Type of Financing (e.g., fixed,	variable)				
h. Date of Refinancing i. New Interest Rate					
j. Term of Mortgage (number of	veare)				
k. Amount of Principal Borrowed					
Principal Outstanding on Note					
Part C - Arms-Length Leases fo		mprovements Only	7		
Name and Address of Lessor		perty Leased		Term of Lease	Annual Amount of Lease
		,			

Note: Be sure required copies of leases are attached to Page 25 and real estate taxes paid by lessor are included on Page 22, Item 10b.

C. Expenditures Other Than Salaries (cont'd) - Interest

Name of Facility License No.		Report for Yea	ar Ended				Page	of
Maple View Manor of CT, LLC 940C		9/30/2023	1		1	1	26	37
Item		Total	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
12. Interest				•				•
A. Building, Land Improvement & Non-Movab	le							
Equipment	\$							
1. First Mortgage Name of Lender	Rate							
Ivanic of Echder	Kate							
Address of Lender	1							
Second Mortgage	\$							
Name of Lender	Rate							
Address of Lender								
3. Third Mortgage	\$							
Name of Lender	Rate							
Address of Lender								
4. Fourth Mortgage	\$							
Name of Lender	Rate							
Address of Lender		-						
B. CHEFA Loan Information								
Original Loan Amount	\$							
Loan Origination Date								
3. Interest Rate %								
4. Term								
5. CHEFA Interest Expense								
12 B7. Total Building Interest Expense (A1 - A4 + B5) \$							

(Carry Subtotals forward to next page)

C. Expenditures Other Than Salaries (cont'd) - Interest and Insurance

Name of Facility Maple View Manor of CT, LLC	License No. 940C		Report for Yea 9/30/2023	ar Ended				Page 27	of 37
Ite			Total	CCNH / RHNS	Adjustment	(Specify)	Adjustment	(Specify)	Adjustment
	Subtotals Brought	Forward:							
12. C. Movable Equipment									
Automotive Equipment		\$							
A. Item	Rate A	mount							
Lender									
Address of Lender									
2. Other (Specify)		\$							
A. Item	Rate A	mount							
Lender									
Address of Lender									
B. Item	Rate A	mount							
Lender	<u> </u>								
Address of Lender									
12. C. 3. Total Movable Equip	ment Interest								
Expense (C1 + 2)	7 (6)	<u>\$</u>	2.270	2.250					
12. D. Other Interest Expense (Admin / Computer Loan		5	3,379	3,379					
13. Total All Interest Expense (1	2B7 + 12C3 + 12D)	S	3,379	3,379					
14. Insurance)	Ψ	2,2,7	3,317			İ		
a. Insurance on Property (b)	uildings only)	\$	21,803	21,803					
b. Insurance on Automobile	s	\$							
c. Insurance other than Prop)							
Umbrella (Blanket Co		\$							
Fire and Extended Co	verage	\$							
3. Other (Specify)		\$	91,010	91,010					
Liability / Crime Insur	rance								
14d. Total Insurance Expenditur	as(14a+b+c)	\$	112,813	112,813					
15. Total All Expenditures (A-1.		\$ \$		14,816,694	(1,641,006)				

Annual Report of Long-Term Care Facility

CSP-30 Rev. 3/2023

F. Statement of Revenue

Name of Facility Maple View Manor of CT, LLC	License No. 940C		Report for Y 9/30/2023	ear Ended		Page 30	of 37
1				CCNH /			
	Item		Total	RHNS	(Specify)	(Specif	y)
I. Resident Room, Board & Routine	Care Revenue						
1. a. Medicaid Residents (CT only	<i>v</i>)	\$	11,681,299	11,681,299			
b. Medicaid Room and Board C	Contractual Allowance **	\$	(4,179,559)	(4,179,559)			
2. a. Medicaid (All other states)		\$					
b. Other States Room and Boar	d Contractual Allowance **	\$					
3. a. Medicare Residents (all incl	usive)	\$	1,720,806	1,720,806			
b. Medicare Room and Board C	Contractual Allowance **	\$	(1,411,160)	(1,411,160)			
4. a. Private-Pay Residents and O	ther	\$	4,769,771	4,769,771			
b. Private-Pay Room and Board	l Contractual Allowance **	\$	(656,250)	(656,250)			
II. Other Resident Revenue							
a. Prescription Drugs - Medica:	re	\$	306,898	306,898			
b. Prescription Drugs - Medicar		\$	(324,512)	(324,512)			
c. Prescription Drugs - Non-Mo		\$	334,671	334,671			
	edicare Contractual Allowance **	\$	(352,146)	(352,146)			
2. a. Medical Supplies - Medicare		\$					
b. Medical Supplies - Medicare		\$					
c. Medical Supplies - Non-Med		\$					
	licare Contractual Allowance **	\$					
	a. Physical Therapy - Medicare						
b. Physical Therapy - Medicare		\$ \$	422,793 (14,175)	422,793 (14,175)			
	c. Physical Therapy - Non-Medicare						
d. Physical Therapy - Non-Med		\$ \$	601,458 (473,135)	601,458 (473,135)			
4. a. Speech Therapy - Medicare		\$	194,417	194,417			
b. Speech Therapy - Medicare (Contractual Allowance **	\$	11,305	11,305			
c. Speech Therapy - Non-Medi		\$	265,249	265,249			
d. Speech Therapy - Non-Medi		\$	(215,393)	(215,393)			
5. a. Occupational Therapy - Med		\$	598,268	598,268			
	dicare Contractual Allowance **	\$	(187,365)	(187,365)			
c. Occupational Therapy - Nor		\$	827,051	827,051			
	n-Medicare Contractual Allowance **	\$	(707,733)	(707,733)			
6. a. Other (Specify) - Medicare		\$	1,387,545	1,387,545			
b. Other (Specify) - Non-Medic	care	\$	480,180	480,180			
III. Total Resident Revenue (Section	I. thru Section II.)	\$	15,080,283	15,080,283			
IV. Other Revenue*	·						
Meals sold to guests, employees	s & others	\$					
2. Rental of rooms to non-resident		\$					
3. Telephone		\$					
4. Rental of Television and Cable	Services	\$					
5. Interest Income (Specify)	\$	9,409	9,409				
6. Private Duty Nurses' Fees	\$	- , - ,	- ,				
7. Barber, Coffee, Beauty and Gift	\$						
	8. Other (<i>Specify</i>)						
V. Total Other Revenue (1 thru 8)		\$ \$	10,974 20,383	10,974 20,383			
VI. Total All Revenue (III+V)		\$					
71. IOIIII AII REVERUE (III + V)		Ψ	15,100,666	15,100,666		l	

^{*} Facility should off-set the appropriate expense on Page 28 or Page 29 of the Cost Report.

^{**} Facility should report all contractual allowances and/or payer discounts.

Schedule of Other Resident Revenue - Medicare

Related Exp

Page Ref	Description	CCNH / RHNS	(Specify)	(Specify)
		-		
30 II 6a	Medicare A NTA Contra-Maple View	\$ 501,839		
30 II 6a	Medicare A Nsng Comp Contra-Maple View	834,076		
30 II 6a	MCR Pt A Chargeable Med Supp-Maple View	1,832		
30 II 6a	MCR Pt A Charge Med Supp Contra-Maple View	(1,832)		
30 II 6a	Medicare Pt A IV Therapy-Maple View	17,614		
30 II 6a	Medicare Pt A Lab-Maple View	18,006		
30 II 6a	Medicare Pt A X-Maple View	18,748		
30 II 6a	Medicare Pt B Prior Period-Maple View	(2,738)		
Total Other	er Resident Revenue - Medicare	\$ 1,387,545	\$ -	\$ -

Schedule of Other Non-Medicare Resident Revenue

Related Exp

Page Ref Description CCNH / RHNS (Specify) (Specify) 30 II 6b Medicare Pt B Flu/Pneumonia-Maple View 4,770 30 II 6b Private Pharmacy Contra-Maple View (1,913)30 II 6b Comm Ins IV Therapy-Maple View 16,996 30 II 6b Comm Ins Lab-Maple View 2,179 30 II 6b Comm Ins X-Maple View 2,380 30 II 6b Mgd Medicare NTA Contra-Maple View 84,607 30 II 6b 125,319 Mgd Medicare Nsng Comp Contra-Maple View 30 II 6b Mgd Medicare IV Therapy-Maple View 5,985 Mgd Medicare Lab-Maple View 30 II 6b 18,947 30 II 6b Mgd Medicare Specialty Beds-Maple View 1,259 Mgd Medicare X-Maple View 30 II 6b 26,007 30 II 6b Mgd Medicare Prior Period-Maple View (10,011) Patient Revenue Capitation -Maple View 30 II 6b 203,655 Total Other Resident Revenue 480,180 \$

Interest Income

Account

Page Ref	Account	Balance	CCNH / RHNS	(Specify)	(Specify)
			-		
30 IV 5	Interest on Cash Receipts	N/A	\$ 666		
30 IV 5	Interest on Money Market Account	1,033,565	8,743		
Total Inter	rest Income		\$ 9,409	\$ -	\$ -

Schedule of Other Revenue

Page Ref	Description	CCNH	I / RHNS	(Specify)	(Specify)
30 IV 8	Misc Revenue (Disallowed on Pg 16a)	\$	10,620		
30 IV 8	Medical Records Revenue (Disallowed on Pg 16a)		354		
Total Otho	er Revenue	\$	10,974	\$ -	\$ -
					•

G. Balance Sheet

Name of	f Facility	License No.	Report for Year Ended	Page	of
Maple V	View Manor of CT, LLC	940C	9/30/2023	31	37
		Account		Aı	mount
Assets					
A. Cu	urrent Assets				
1.	Cash (on hand and in banks)			\$	1,264,306
2.		\	/	\$	1,385,717
3.	\	Excluding Owners or R	Related Parties)	\$	2,078,336
4	Inventories			\$	18,641
5.	Prepaid Expenses			\$	89,230
	a				
	b				
	c				
	d. See Schedule	89,230			
6.				\$	
-	Medicare Final Settlement Red			\$	
8.	Other Current Assets (itemize		47.700	\$	47,700
	CT PET Tax Receivable-Maple	View	47,700	-	
	See Schedule				
	otal Current Assets (Lines A1 t	hru 8)		\$	4,883,930
	xed Assets				
	Land			\$	
2.	Land Improvements	*Historical Cost		\$	
		Accum. Depreciation			
3.	Buildings	*Historical Cost	4,479,109	\$	
		Accum. Depreciation			
4.	Leasehold Improvements	*Historical Cost	1,718,256	\$	571,661
	37 36 11 5	Accum. Depreciation			20.704
5.	Non-Movable Equipment	*Historical Cost	56,171	\$	20,584
	36 11 7	Accum. Depreciation	· · · · · · · · · · · · · · · · · · ·		00606
6.	Movable Equipment	*Historical Cost	1,356,129	\$	826,367
	77.11.1	Accum. Depreciation	529,762 Net		
7.	Motor Vehicles	*Historical Cost		\$	
		Accum. Depreciation	n Net	Φ.	
8.	Minor Equipment-Not Deprec	ıable		\$	
9.	Other Fixed Assets (itemize)			\$	(642,740)
	F/S vs C/R NBV		(642,740)		· · · /
	See Schedule		· / /		
B-10.	Total Fixed Assets (Lines B1	thru 9)		\$	775,872

^{*} Historical Costs must agree with Historical Cost reported in Schedules on Depreciation and Amortization (Pages 23 and 24).

31 A5		Description		
		Description Description	\$	15.00
		Prepaid Workers Comp-Maple View Prepaid Gen. Ins-Maple View	3	15,90 29,98
31 A5		Prepaid Expense Other-Maple View		14,99
31 A5		Prepaid Personal Property Taxes-Maple View		9,02
31 A5		Prepaid Mgmt Assets-Maple View		19,31
31 11		repaiding in ruses maple from		17,51
otal Prepaid	Expenses		\$	89,23
	•			
chedule of O	ther Curi	rent Assets (itemized) Page 31 Line A8		
age Ref I	Line Ref	Description		
otal Other C	urrent As	sets (Itemize)	s	-
ouii ouici c		(remite)		
	N	A A and Alexander December 11 and 12 and 13 and 14 and 15		
chedule of O	ther Fixe	d Assets (Itemize) Page 31 Line B9		
age Ref I	Line Ref	Description		
. 101 0			_	
otai Otner O	mer Fixe	d Assets (Itemize)	\$	
chedule of O	Other Asse	ts Page 32 Line D7		
age Ref L	I ine Ref	Description		
32 D7		Loans and Exchange-Maple View	\$	200,00
32 D7		Security Deposits-Maple View		11,82
32 D7		Operating Lease Right of Use Asset		2,590,21
otal Other A	Assets		\$	2,802,04
otal Other A	Assets		\$	2,802,04
			\$	2,802,044
		ble (Itemize) Page 33 Line A2	\$	2,802,04
chedule of N	iotes Paya	ble (Itemize) Page 33 Line A2 Description	\$	2,802,04
chedule of N	iotes Paya		\$	2,802,04
chedule of N	iotes Paya		\$	2,802,04
chedule of N	iotes Paya		S	2,802,04
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chedule of N	iotes Paya		S	2,802,04
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chedule of N	iotes Paya		S	2,802,04
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chedule of N. age Ref I	iotes Paya Line Ref Payable	Description Tent Liabilities (Itemize) Page 33 Line A12 Description		-
otal Notes Pi	Line Ref Payable Other Curr	Description Tent Liabilities (Itemize) Page 33 Line A12		
otal Notes P: chedule of Orage Ref I 33 Al 33 Al 33 Al 35 Al 35 Al 35 Al 36 Al 37 A	Cayable Other Curi	Description ent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View	S	10,71
otal Notes Prochedule of Orange Ref I 33 Al 33 Al 33 Al 33 Al 33 Al 33 Al 34 Al 35 Al 35 Al 35 Al 36 Al 36 Al 36 Al 37 A	Cayable Other Curr Line Ref 12 12	Description ent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patient Recreation Fund-Maple View Patient Recreation Fund-Maple View	S	10,711
chedule of Notes Proceedings of the Control of the Control of Notes Proceedings of the Control o	Cayable Cayable Cayable Carrier Current Carrent Carr	Description cent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patient Recreation Fund-Maple View Operating Lease Liability - Current	S	10,711 59,76 68 91,20
otal Notes Proceedings of All States of All	Payable Cher Ref Line Ref Payable Cher Ref L12 L12 L12 L12 L12 L12 L12 L1	Description ent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patient Recreation Fund-Maple View Patient Recreation Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View	S	10,711 59,76 688 91,20
otal Notes Prochedule of Orange Ref I 33 Al 33 A	Payable Deter Curr Line Ref 12 12 12 12 12	Description ent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patients Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Volunteersuntary Ded. Exchange-Maple View Volunteersuntary Ded. Exchange-Maple View	S	10,711 59,76 68 91,20
otal Notes Protectedule of Orage Ref L 33 Al 33	Tayable Tayable Tayable Line Ref Line Ref 12 12 12 12 12	Description Tent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patient Recreation Fund-Maple View Patient Recreation Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Volunteersuntary Ded Exchange-Maple View Volunteersuntary Ded Exchange-Maple View Volunteersuntary Ded Exchange-Maple View Accrued Expenses-Maple View	S	10,711 59,766 688 91,20
otal Notes P: otal Notes P: 33 Al	Line Ref Tayable United Curring 12 Line Ref Line Ref Line Ref Line Ref Line Line Line Line Line Line Line Line	Description ent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patient Fund-Maple View Patient Recreation Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Volunteersuntary Ded. Exchange-Maple View Volunteersuntary Ded. Exchange-Maple View Accrued Expenses-Maple View Accrued Expenses-Maple View Accrued Expenses-Maple View	S	10,71 59,76 68 91,20 (228,22 230,2,94
chedule of Notal Notes Proceedings Ref I 33 Al 3	Tayable with the Curricular Ref 12 12 12 12 12 12 12 12 12 12 12 12 12	Description ent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patients Fund-Maple View Patients Recreation Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Volunteersuntary Ded. Exchange-Maple View Accrued Expenses-Maple View Accrued Pension-Maple View Accrued Pension-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View	S	10,71 59,76 68 91,20 (<u>c</u> 228,22,24 66,222
chedule of N. age Ref I chedule of Or age Ref I 33 Al	ayable Line Ref Line Ref Line Ref 12 12 12 12 12 12 12 12	Description Tent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patient Recreation Fund-Maple View Patient Recreation Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Voluntersuntary Ded. Exchange-Maple View Accrued Expenses-Maple View Accrued Pension-Maple View Accrued Pension-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Expenses-Maple View	S	10,71 59,76 68 91,20 (228,22 302,949 66,22 58,54 58,54
chedule of N. age Ref I chedule of Or age Ref I 33 Al	ayable Line Ref Line Ref Line Ref 12 12 12 12 12 12 12 12	Description ent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patients Fund-Maple View Patients Recreation Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Volunteersuntary Ded. Exchange-Maple View Accrued Expenses-Maple View Accrued Pension-Maple View Accrued Pension-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View	S	10,71 59,766 688 91,20 (228,222,302,94 66,22 58,54 58,54
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otal Notes P: otal N	ayable ayable ayable Line Ref Line Ref 12 12 12 12 12 12 12 12 12 1	Description Tent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patients Fund-Maple View Patients Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Voluntersuntary Ded. Exchange-Maple View Accrued Expenses-Maple View Accrued Expenses-Maple View Accrued Pension-Maple View Accrued Pension-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Description Ten Transaction of the Maple View Accrued Expense-Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Ten Transaction of the Maple View But I and I are the Maple View Accrued Worker's Comp-Maple View Ten Transaction of the Maple View But I are the Maple View Accrued Expense-Maple View Accrued Expense-Maple View Accrued Expense-Maple View Accrued Worker's Comp-Maple View Accrued Expense-Maple View Accrued Expense-Maple View Accrued Worker's Comp-Maple View Accrued Expense-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Expense-Maple View Accrued Worker's Comp-Maple View Accrued Wo	S	10,71 59,766 688 91,20 (228,222,302,94 66,22 58,54 58,54
otal Notes P: otal Notes P: otal Notes P: chedule of Or age Ref I 33 Al 33 Al 33 Al 33 Al 33 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 30 Al 31 Al 32 Al 33 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 30 Al 30 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 30 Al 30 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 39 Al 30 Al 30 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 39 Al 30 Al 30 Al 31 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 38 Al 39 Al 39 Al 30 Al 30 Al 30 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 38 Al 39 Al 39 Al 30 Al 30 Al 30 Al 31 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 36 Al 37 Al 38 Al 38 Al 38 Al 39 Al 30 Al 30 Al 30 Al 31 Al 32 Al 42 Al 42 Al 43 Al 44 Al 44 Al 45 Al 46 Al 4	ayable ayable ayable Line Ref Line Ref 12 12 12 12 12 12 12 12 12 1	Description Tent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patients Fund-Maple View Patients Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Voluntersuntary Ded. Exchange-Maple View Accrued Expenses-Maple View Accrued Expenses-Maple View Accrued Pension-Maple View Accrued Pension-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Description Ten Transaction of the Maple View Accrued Expense-Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Ten Transaction of the Maple View But I and I are the Maple View Accrued Worker's Comp-Maple View Ten Transaction of the Maple View But I are the Maple View Accrued Expense-Maple View Accrued Expense-Maple View Accrued Expense-Maple View Accrued Worker's Comp-Maple View Accrued Expense-Maple View Accrued Expense-Maple View Accrued Worker's Comp-Maple View Accrued Expense-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Expense-Maple View Accrued Worker's Comp-Maple View Accrued Wo	S	10,71 59,766 688 91,20 (228,222,302,94 66,22 58,54 58,54
otal Notes P: chedule of Orage Ref I 33 Al 33 Al 33 Al 33 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 30 Al 31 Al 31 Al 32 Al 33 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 30 Al 30 Al 31 Al 32 Al 33 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 30 Al 30 Al 31 Al 32 Al 33 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 39 Al 30 Al 30 Al 31 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 38 Al 39 Al 30 Al 30 Al 30 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 38 Al 39 Al 30 Al 30 Al 30 Al 31 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 38 Al 39 Al 30 Al 30 Al 30 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al 38 Al 38 Al 39 Al 30 Al 30 Al 30 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 36 Al 37 Al 38 Al 38 Al 39 Al 30 Al 30 Al 30 Al 31 Al 32 Al 33 Al 34 Al 35 Al 36 Al 37 Al 38 Al	ayable ayable ayable Line Ref Line Ref 12 12 12 12 12 12 12 12 12 1	Description Tent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patients Fund-Maple View Patients Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Voluntersuntary Ded. Exchange-Maple View Accrued Expenses-Maple View Accrued Expenses-Maple View Accrued Pension-Maple View Accrued Pension-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Description Ten Transaction of the Maple View Accrued Expense-Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Ten Transaction of the Maple View Bell View Ten Transaction of the Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Accrued Expense-Maple View Accrued First Accrued Expense-Maple View Accru	S	10,771 59,76 68 91,20 (228,22 302,94 66,22 58,54
chedule of Notes Principle of Orige Ref L 33 Al 33 Al 33 Al 33 Al 33 Al 33 Al 34 Al 34 Al 35 Al	ayable ayable ayable Line Ref Line Ref 12 12 12 12 12 12 12 12 12 1	Description Tent Liabilities (Itemize) Page 33 Line A12 Description Unclaimed ADP checks-Maple View Patients Fund-Maple View Patients Fund-Maple View Patients Fund-Maple View Operating Lease Liability - Current Union Dues payable-Maple View Voluntersuntary Ded. Exchange-Maple View Accrued Expenses-Maple View Accrued Expenses-Maple View Accrued Pension-Maple View Accrued Pension-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Accrued Worker's Comp-Maple View Description Ten Transaction of the Maple View Accrued Expense-Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Ten Transaction of the Maple View Bell View Ten Transaction of the Maple View Accrued Expense-Maple View Ten Transaction of the Maple View Accrued Expense-Maple View Accrued First Accrued Expense-Maple View Accru	S	10,771 59,76 68 91,20 (228,22 302,94 66,22 58,54

Annual Report of Long-Term Care Facility

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G. Balance Sheet (cont'd)

Name	Jame of Facility		License No.	1			f
Mapl	e V	view Manor of CT, LLC	940C	9/30/2023		32 37	7
			Account			Amount	
				Total Brought Forward:	\$	5,659,80	12
C.	Le	asehold or like property record	led for Equity Purposes				
	1.	Land			\$		
	2.	Land Improvements	*Historical Cost				
			Accum. Depreciation	Net	\$		
	3.	Buildings	*Historical Cost				
			Accum. Depreciation	Net Net	\$		
	4.	Non-Movable Equipment	*Historical Cost				
			Accum. Depreciation	Net Net	\$		
	5.	Movable Equipment	*Historical Cost				
			Accum. Depreciation	Net Net	\$		
	6.	Motor Vehicles	*Historical Cost				
			Accum. Depreciation	Net Net	\$		
		Minor Equipment-Not Depre			\$		
C-8	To	otal Leasehold or Like Proper	ties (C1 thru 7)		\$		
D.	Inv	vestment and Other Assets					
	1.	Deferred Deposits			\$		
	2.	Escrow Deposits			\$		
	3.	Organization Expense	*Historical Cost				
			Accum. Depreciation	Net Net	\$		
	4.				\$		
	5.	Investments Related to Resid	ent Care (itemize)		\$		
					-		
	6	Loans to Owners or Related	Porties (itamiza)		\$		
	0.	Name and Address	Amount	Loan Date	Ψ		
		Name and Address	Amount	Loan Date	1		
	7.	Other Assets (itemize)	L	I	\$	2,802,04	4
		See Schedule					
		tal Investments and Other As	\$	2,802,04	4		
D-9.	To	otal All Assets (Lines A9 + B1	0 + C8 + D8		\$	8,461,84	6

^{*} Historical Costs must agree with Historical Cost reported in Schedules on Depreciation and Amortization (Pages 23 and 24).

G. Balance Sheet (cont'd)

Name of Faci			License No.	Report for Year Er	ıded		Page	of
Maple View	Mano	or of CT, LLC	940C	9/30/2023			33	37
			Account				Amou	nt
Liabilities								
A.	Cu	rrent Liabilities						
	1.	Trade Accounts Payable				\$		618,372
	2.	Notes Payable (itemize)				\$		
		See Schedule						
	3.	Loans Payable for Equipme	ent (Current portion) (temize)		\$		17,709
		Name of Lender	Purpose	Amount	Date Due	Ψ		11,100
			1					
			Equipment Obligation	17,709				
	4.	Accrued Payroll (Exclusive	a of Owners and/or Stor	ekholdars only)		\$		428,036
	 5.	Accrued Payroll (Owners of				\$		420,030
	6.	Accrued Payroll Taxes Pay		у)		\$		
	7.	Medicare Final Settlement				\$		
	8.	Medicare Current Financin	-			\$		
	9.	Mortgage Payable (Curren	· ·			\$		
	10.	. Interest Payable (Exclusive	<u> </u>	ted Parties)		\$		
		. Accrued Income Taxes*	V			\$		
	12.	Other Current Liabilities (i	temize)			\$		818,317
	<i>T</i>	. 10	A 1 .1 . 10\	See Schedule	818,317	Φ.		
A-13.	<i>To</i>	tal Current Liabilities (Line	es A1 thru 12)			\$		1,882,434

^{*} Business Income Tax (not that withheld from employees). Attach copy of owner's Federal Income Tax Return.

Annual Report of Long-Term Care Facility

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G. Balance Sheet (cont'd)

Name of Facility	License No.	Report for Year I	Ended	Page	of
Maple View Manor of CT, LLC	940C	9/30/2023		34	37
	Account				Amount
		Total Brough	ht Forward:		1,882,434
Liabilities (cont'd)					
B. Long-Term Liabilities					
Loans Payable-Equipment ((itemize)	1		\$	8,251
Name of Lender	Purpose	Amount	Date Due		
	Equipment				
	Obligation LT	8,251			
	o enganten 21	0,201			
2. Mortgages Payable			9	\$	
3. Loans from Owners or Rela	ted Parties (itemize)	1		\$	1,637,797
Name and Address of Lender	Amount	Loan Da	ate		
Due to Realty / Related	1,637,797				
4. Other Long-Term Liabilitie	s (itemize)			\$	2,528,366
Due to HMS-Maple View		29,404			
Operating Lease Liability - Noncurrent 2,499,009					
Due to Aging in Amer-Map	le View	(47)			
See Schedule				*	
B-5. Total Long-Term Liabilities (\$	4,174,414
C. Total All Liabilities (Lines A-	13 + B-3)			\$	6,056,848

G. Balance Sheet (cont'd) Reserves and Net Worth

	ne of Facility	License No.			ear Ended	Pa		of
Map	le View Manor of CT, LLC	940C	9/3	0/2023		35		37
A.	Reserves	Account					Amoun	<u> </u>
Λ.		14				¢.		
						\$		
	2. Reserve for depreciation va	llue of leased buildi	ngs and	appurtena	ances	Ф		
	to be amortized					\$		
	3. Reserve for depreciation va	alue of leased person	nal prop	erty (Equ	ity)	\$		
	4. Reserve for leasehold real properties on which fair rental value is based					\$		
	5. Reserve for funds set aside as donor restricted				\$			
	6. Total Reserves					\$		
B.	Net Worth							
	1. Owner's Capital					\$		
	2. Capital Stock					\$		
	3. Paid-in Surplus					\$		
	4. Treasury Stock					\$		
	5. Cumulated Earnings					\$	2,	118,142
	6. Gain or Loss for Period	10/1/20	022	thru	9/30/2023	\$		286,856
	7. Total Net Worth					\$	2,	404,998
C.	Total Reserves and Net Worth					\$	2,	404,998
D.	Total Liabilities, Reserves, an	d Net Worth				\$	8,	461,846

CSP-36 Rev. 6/95

H. Changes in Total Net Worth

Nam	ne of Facility	License No.	Report for Year	Ended	Page	of
Map	le View Manor of CT, LLC	940C	9/30/2023		36	37
		Account			Am	ount
A.	Balance at End of Prior Period as sl	hown on Report of	09/30/2022	\$		3,062,550
B.	Total Revenue (From Statement of	Revenue Page 30)		\$		15,100,666
C.	Total Expenditures (From Statemen	nt of Expenditures	Page 27)	\$		14,813,810
D.	Net Income or Deficit			\$		286,856
E.	Balance			\$		3,349,406
F.	Additions					
	1. Additional Capital Contributed	,				
	Total Expenses Per Page 27	7 \$14,816,694				
	F/S vs C/R Depreciation	(2,884)				
	Total Expenses Per FS	\$14,813,810				
	2. Other (<i>itemize</i>)					
	Prior Period Adjustments		(944,408)			
F-3.	Total Additions			\$		(944,408)
G.	Deductions					
	1. Drawings of Owners/Operators	Partners (Specify))	\$		
	Name and Address (No., City,	State, Zip)	Title	Amount		
	2. Other Withdrawings (Specify)		!	\$		
	Purpose		Amou			
	1 3. post					
	3. Total Deductions			\$		
H.	Balance at End of Period	00/20	1/23	\$		2,404,998
11.	Balance at End of Period 09/30/23					۷,404,336

I. Preparer's/Reviewer's Certification

Name of Facility	License No.	Report for Year Ended	Page	of			
Maple View Manor of CT, LLC	940C	9/30/2023	37	37			
·	Check appropriate category						
Chronic and Convalescent Nursing Home (CCNH) & RHNS Combined	(Specify)	□ (Specify)					
Pro	parer/Reviewer Certificat	tion					
I have prepared and reviewed this report and am familiar with the applicable regulations governing its preparation. have read the most recent Federal and State issued field audit reports for the Facility and have inquired of appropriate personnel as to the possible inclusion in this report of expenses which are not reimbursable under the applicable regulations. All non-reimbursable expenses of which I am aware (except those expenses known to be automatically removed in the State rate computation system) as a result of reading reports, inquiry or other services performed by me are properly reported as such in this report on Pages 28 and 29 (adjustments to statement of expenditures). Further, the data contained in this report is in agreement with the books and records, as provided to me, by the Facility.							
Signature of Preparer	Title	Date Signed					
Matthew S Bavolack	Principal	02/14/2024					
Printed Name of Preparer	•	•					
Matthew S. Bavolack Addres Address		Phone Number					
Address		I none Number					
555 Long Wharf Drive, New Haven, CT 06511		203-781-9600	203-781-9600				
Contacted Person Regarding Additional Informa	tion Needed Regarding This Report	Phone Number					
Benjamin Goodman	516-705-4842						
Contact Email Address							
goodman@nathealthcare.com							



ACCOUNTANTS' CONSULTING REPORT

Management is responsible for the accompanying Annual Report of Long-Term Care Facility (the "Cost Report") for Maple View Manor of CT, LLC for the year ended September 30, 2023, included in the accompanying prescribed form. We have prepared the Cost Report in accordance with the American Institute of Certified Public Accountants' Statements on Standards for Consulting Services. The Cost Report was prepared in conformity with regulations prescribed by The State of CT Department of Social Services (DSS) from data provided to us by the management of Maple View Manor of CT, LLC. We did not audit or review the Cost Report included in the accompanying prescribed form, nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the Cost Report included in the accompanying prescribed form.

Management is responsible for maintaining its records in accordance with accounting principles generally accepted in the United States of America and in accordance with reimbursement regulations set forth by DSS. Management is also responsible for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial data and supplemental information included in the Cost Report.

This report is intended solely for the information and use of the management of Maple View Manor of CT, LLC and DSS and is not intended to be, and should not be, used by anyone other than these specified parties.

MARCUM LLP

New Haven, CT February 14, 2024



Annual Report of Long-Term Care Facility Cost Year 2023 Checklist

This checklist is not required to be submitted with the Annual Report

Facility Na	meMaple View Manor of CT, LLC
	following check list. Provide an explanation for any "No" answers. Attach ets to explain further, if necessary.
Yes No Explanation:	1. Have all related parties been properly disclosed on Pages 4, 11, 12, 14, 17 and 21?
Yes No / Explanation:	2. Are the methods of allocating costs consistent with prior year? If not, explain the reporting change.
Yes No / Explanation:	3. Are costs allocated based on the methods prescribed on Page 5 of the Annual Report? If not, provide the basis of your allocation.
Yes No Explanation:	4. Do equipment leases listed on Page 22b agree with equipment leases reported on Page 22, Line 6e? If not, state where these costs are included in the Annual Report.

Yes No Explanation	5. Do accounting and legal fees reported on Page 15b agree with Page 15, Lines 1d and 1e, respectively?
Yes No V Explanation	6. During cost year, did you report all certified bed changes on Page 9? Do the bed change dates agree to the license issued by the Department of Health?
Yes No / Explanation	7. If there has been a change in Administrators, have the dates of employment and applicable hours for each Administrator been reported on Page 12?
Yes No / Explanation	8. Have hours been reported for all expenses claimed on Page 13? Hours must be actual rather than estimated.
Yes No V Explanation	9. Has resident day user fee expense been properly reported on Page 15, Line 1k3?
Yes No / Explanation	10. Have purchased services greater than \$10,000 reported on Pages 16, 18, 19, 20 and 22 been detailed on Page 21?

Yes No / Explanation:	11. Have the dietary and laundry questionnaires on Pages 18 and 19 been completed?
Yes No / Explanation:	12. Has the personal use portion of automobile expense been disallowed, including, depreciation, lease payments, insurance and taxes?
Yes No / Explanation:	13. Does historical cost and accumulated depreciation of all assets reported on Pages 23 and 24 roll forward from the prior cost year?
Yes No Explanation:	14. Does the net book value of all assets reported on Pages 23 and 24 agree with the net book value reported on Pages 31 and 32?
Yes No Explanation:	15. Has asset useful life been reported in accordance with the 2018 edition of the American Hospital Association guidelines?
Yes No / Explanation:	16. Have all assets been categorized between movable and fixed in accordance with the 2018 edition of the American Hospital Association guidelines?

Yes No V Explanation:	17. Have all contractual allowances been properly reported on Page 30?
Yes No / Explanation:	18. Were all discrepancies on the Error Page addressed?
Yes No / Explanation:	19. Have Pages 1 and 37 been signed? Cost reports without a signed Page 1 and 37 will not be accepted.
	20. Have detailed schedules been provided for all "other" line items, fixed asset and movable equipment additions (ensure that the Movable Equipment Category is select for all movable equipment additions.)? <i>If detail is not provided, appropriate disallowances will be made.</i>
Yes No / Explanation:	21. Have all costs associated with non-nursing home businesses (i.e., Adult Daycare, Meals on Wheels, Outpatient Therapy Services, etc.) been disallowed on the applicable expense lines of the Annual Report? If applicable, have pages 6 and 7 been completed for the non-nursing home businesses?
Yes No	22. Has all required documentation, including the working trial balance, crosswalk, Form W-411, movable/fixed asset additions support, and the Nursing Facility Narrative Summary of Expenditures form been submitted to the Annual Report review and audit contractor?
Explanation:	

National Health Care Associates, Inc. (CT) Medicaid - Maple View Health & Rehab 9/30/2023 A.01 - TB-CCNH

Client: Engagement: Period Ending: Trial Balance:

Trial Balance:	A.01 - TB-CCNH				
Account	Description	ADJ	JE Ref # RJE	FINAL	1st PP-FINAL
		9/30/2023		9/30/2023	9/30/2022
101005-0105-00-000	Cash Operating-Maple View	159,121.00		159,121.00	190,854.00
	Cash - Payroll-Maple View	9,752.00		9,752.00	13,183.00
	Cash - Savings-Maple View	1,033,565.00		1,033,565.00	1,069,922.00
	Cash - Savings Patients-Maple View	59,768.00		59,768.00	63,612.00
	Petty Cash-Maple View	1,500.00		1,500.00	1,500.00
	Petty Cash - Resident Funds-Maple View	600.00		600.00	600.00
	Accounts Receivable-Maple View	259,986.00		259,986.00	253,695.00
	A/R Private-Maple View	888,687.00		888,687.00	856,159.00
	A/R Comm Ins-Maple View AR Hospice-Maple View	(40,963.00) 69,492.00		(40,963.00) 69,492.00	(3,316.00) 181,744.00
	A/R Mgd Medicare-Maple View	95,398.00		95,398.00	(37,622.00)
	A/R Medicare Pt A-Maple View	19,810.00		19,810.00	173,416.00
	A/R Medicare Pt B-Maple View	13,880.00		13,880.00	9,729.00
113000-0105-00-000-0	A/R Medicaid-Maple View	496,322.00		496,322.00	290,199.00
	A/R Patient Pticipation-Maple View	(196,710.00)		(196,710.00)	(183,888.00)
	Medicare Colns Bad Debt-Maple View	13,251.00		13,251.00	0.00
	Allowance for Doubtful Accounts-Maple View	(233,436.00)		(233,436.00)	(247,183.00)
	Prepaid Workers Comp-Maple View	15,905.00		15,905.00	15,734.00
	Prepaid Gen. Ins-Maple View Prepaid Expense Other-Maple View	29,984.00 14,998.00		29,984.00 14,998.00	28,035.00
	Prepaid Personal Property Taxes-Maple View	9,026.00		9,026.00	5,100.00 7,728.00
	Prepaid Mgmt Assets-Maple View	19,317.00		19,317.00	13,703.00
	CT PET Deferred Tax-Maple View	0.00		0.00	50,186.00
130000-0105-00-000-0	·	18,641.00		18,641.00	20,216.00
141000-0105-00-000-0	Loans and Exchange-Maple View	200,000.00		200,000.00	200,000.00
	Due from Realty-Maple View	0.00		0.00	70,138.00
	Due from Related-Maple View	2,078,336.00		2,078,336.00	1,825,164.00
	CT PET Tax Receivable-Maple View	47,700.00		47,700.00	47,700.00
	Security Deposits-Maple View Lease hold Improvements-Maple View	11,826.00 1,623,027.00	87,101.00	11,826.00 1,710,128.00	11,826.00 1,620,320.00
	Leasehold Improvement Mgmt-Maple View	8,128.00	07,101.00	8,128.00	8,128.00
	Fixed Equipment-Maple View	27,332.00		27,332.00	27,332.00
	Major Movable Equip-Maple View	835,494.00	(87,101.00		704,131.00
	Operating Lease Right of Use Asset	2,590,218.00		2,590,218.00	0.00
164000-0105-00-000-0	Accum Depr LHI-Maple View	(1,180,450.00)		(1,180,450.00)	(1,100,057.00)
	Accum Depr MME-Maple View	(537,659.00)		(537,659.00)	(486,231.00)
	Accounts Payable-Maple View	(618,372.00)		(618,372.00)	(505,648.00)
	Equipment Obligation ST-Maple View	(17,709.00)		(17,709.00)	(16,781.00)
	Equipment Obligation LT 1-Maple View Unclaimed ADP checks-Maple View	(8,251.00) (10,712.00)		(8,251.00) (10,712.00)	(25,959.00) (9,907.00)
	Due to Realty-Maple View	(564,851.00)		(564,851.00)	0.00
	Due to HMS-Maple View	(29,404.00)		(29,404.00)	0.00
	Patients Fund-Maple View	(59,768.00)		(59,768.00)	(63,612.00)
226300-0105-00-000-0	Patient Recreation Fund-Maple View	(680.00)		(680.00)	0.00
231100-0105-00-000-0	Operating Lease Liability - Current	(91,209.00)		(91,209.00)	0.00
	Operating Lease Liability - Noncurrent	(2,499,009.00)		(2,499,009.00)	0.00
	Union Dues payable-Maple View	(8.00)		(8.00)	0.00
	Volunteersuntary Ded. Exchange-Maple View	6.00		6.00	6.00
	Accrued Expenses-Maple View Accrued Pension-Maple View	(228,229.00) (302,948.00)		(228,229.00) (302,948.00)	(290,806.00) (136,359.00)
	Accrued Worker's Comp-Maple View	(302,948.00)		(66,225.00)	(46,719.00)
	Accrued Payroll-Maple View	(107,837.00)		(107,837.00)	(83,702.00)
	Accrued Vacation-Maple View	(320,199.00)		(320,199.00)	(313,117.00)
254900-0105-00-000-0	CT PET Tax Accrued Expense-Maple View	(58,544.00)		(58,544.00)	0.00
271000-0105-00-000-0	Due to Aging in Amer-Maple View	47.00		47.00	0.00
	Due to Related-Maple View	(1,034,058.00)		(1,034,058.00)	(1,107,715.00)
	Due to Other-Maple View	(38,888.00)		(38,888.00)	(38,888.00)
280000-0105-00-000-0		537,077.00		537,077.00	537,077.00
	Petroined Farnings Maple View	1,500,000.00		1,500,000.00	0.00
	Retained Earnings-Maple View Hospice Revenue-Maple View	(4,155,219.00) (397,055.00)		(4,155,219.00) (397,055.00)	(2,451,541.00) (976,320.00)
	Hospice C/A-Maple View	142,679.00		142,679.00	380,418.00
	Hospice Pharmacy-Maple View	(2,226.00)		(2,226.00)	(250.00)
	Hospice Pharmacy Contra-Maple View	2,226.00		2,226.00	250.00
304300-0105-00-000-0	Hospice PT-Maple View	(27.00)		(27.00)	0.00
	Hospice PT Contra-Maple View	27.00		27.00	0.00
	Medicaid Room & Board-Maple View	(11,681,299.00)			(10,220,812.00)
	Medicaid Room & Board Contra-Maple View	4,179,559.00		4,179,559.00	3,968,204.00
	Medicaid Contra Other-Maple View Medicaid Pharmacy-Maple View	0.00 (41,962.00)		0.00	156.00
	Medicaid Pharmacy-Maple View Medicaid Pharmacy Contra-Maple View	41,962.00		(41,962.00) 41,962.00	(47,850.00) 47,850.00
		71,302.00		-1,502.00	17,000.00

Account	Description	ADJ	JE Ref # RJE	FINAL	1st PP-FINAL
	and pro-	9/30/2023		9/30/2023	9/30/2022
314300-0105-00-000-0	Medicaid PT-Maple View	(57,096.00)		(57,096.00)	(30,205.00)
	Medicaid PT Contra-Maple View	57,096.00		57,096.00	30,205.00
	Medicaid ST-Maple View	(21,611.00)		(21,611.00)	(13,769.00)
	Medicaid ST Contra-Maple View	21,611.00		21,611.00	13,769.00
	Medicaid Lab-Maple View	0.00		0.00	(156.00)
	Medicaid OT-Maple View Medicaid OT Contra-Maple View	(73,564.00) 73,564.00		(73,564.00) 73,564.00	(39,761.00) 39,761.00
	Medicare Pt A Room & Board-Maple View	(1,708,408.00)		(1,708,408.00)	(1,949,455.00)
	Medicare Pt A R and B Contra-Maple View	1,329,875.00		1,329,875.00	1,539,315.00
321006-0105-00-000-0	Medicare A PT Contra-Maple View	(348,434.00)		(348,434.00)	(396,986.00)
	Medicare A OT Contra-Maple View	(325,447.00)		(325,447.00)	(370,531.00)
	Medicare A ST Contra-Maple View	(188,279.00)		(188,279.00)	(223,469.00)
	Medicare A NTA Contra-Maple View Medicare A Nsng Comp Contra-Maple View	(501,839.00) (834,076.00)		(501,839.00) (834,076.00)	(553,847.00) (879,080.00)
	Medicare Pt A Contra Other-Maple View	36,754.00		36,754.00	31,646.00
	Medicare Pt A Pharmacy-Maple View	(306,898.00)		(306,898.00)	(297,303.00)
324105-0105-00-000-0	Medicare Pt A Pharmacy Contra-Maple View	324,512.00		324,512.00	325,751.00
	MCR Pt A Chargeable Med Supp-Maple View	(1,832.00)		(1,832.00)	(362.00)
	MCR Pt A Charge Med Supp Contra-Maple View	1,832.00		1,832.00	362.00
	Medicare Pt A PT-Maple View Medicare Pt A PT Contra-Maple View	(276,713.00) 276,713.00		(276,713.00) 276,713.00	(237,665.00) 237,665.00
	Medicare Pt A ST-Maple View	(159,152.00)		(159,152.00)	(142,264.00)
	Medicare Pt A ST Contra-Maple View	159,152.00		159,152.00	142,264.00
	Medicare Pt A IV Therapy-Maple View	(17,614.00)		(17,614.00)	(28,447.00)
324600-0105-00-000-0	Medicare Pt A Lab-Maple View	(18,006.00)		(18,006.00)	(19,900.00)
	Medicare Pt A OT-Maple View	(390,486.00)		(390,486.00)	(296,156.00)
	Medicare Pt A OT Contra-Maple View	390,486.00		390,486.00	296,156.00
	Medicare Pt A X-Maple View Medicare Pt A Sequestration-Maple View	(18,748.00) 44,531.00		(18,748.00) 44,531.00	(11,747.00) 20,277.00
	Medicare Pt A Sequestration-maple view Medicare Pt A Settlement-Maple View	(12,398.00)		(12,398.00)	0.00
	Medicare Pt B PT-Maple View	(146,080.00)		(146,080.00)	(38,459.00)
	Medicare Pt B PT Contra-Maple View	85,896.00		85,896.00	11,519.00
	Medicare Pt B ST-Maple View	(35,265.00)		(35,265.00)	(13,354.00)
	Medicare Pt B ST Contra-Maple View	17,822.00		17,822.00	2,874.00
	Medicare Pt B OT-Maple View	(207,782.00)		(207,782.00)	(71,748.00)
	Medicare Pt B OT Contra-Maple View Medicare Pt B Flu/Pneumonia-Maple View	122,326.00 (4,770.00)		122,326.00 (4,770.00)	27,722.00 (4,182.00)
	Mgd Medicare Pt B PT-Maple View	(4,740.00)		(4,740.00)	(912.00)
	Mgd Medicare Pt B PT Contra-Maple View	2,553.00		2,553.00	4,247.00
337800-0105-00-000-0	Mgd Medicare Pt B OT-Maple View	(5,157.00)		(5,157.00)	(686.00)
	Mgd Medicare Pt B OT Contra-Maple View	3,029.00		3,029.00	(154.00)
	Medicare Pt B Prior Period-Maple View	2,738.00		2,738.00	499.00
	Private Room & Board-Maple View Private Room & Board Contra-Maple View	(2,459,999.00) 48,572.00		(2,459,999.00) 48,572.00	(2,294,887.00) 78,803.00
	Private Pharmacy-Maple View	(1,054.00)		(1,054.00)	(1,708.00)
	Private Pharmacy Contra-Maple View	1,913.00		1,913.00	0.00
344300-0105-00-000-0	Private PT-Maple View	0.00		0.00	(1,631.00)
	Private OT-Maple View	0.00		0.00	(1,098.00)
	Comm Ins Room & Board-Maple View	(97,870.00)		(97,870.00)	(193,180.00)
	Comm Ins Room & Board Contra-Maple View	3,868.00		3,868.00	(9,951.00)
	Comm Ins Contra Other-Maple View Comm Ins Pharmacy-Maple View	4,558.00 (9,016.00)		4,558.00 (9,016.00)	3,552.00 (29,599.00)
	Comm Ins Pharmacy-Maple View	26,012.00		26,012.00	29,599.00
	Comm Ins PT-Maple View	(24,454.00)		(24,454.00)	(29,491.00)
354305-0105-00-000-0	Comm Ins PT Contra-Maple View	24,454.00		24,454.00	29,491.00
	Comm Ins ST-Maple View	(1,661.00)		(1,661.00)	(11,962.00)
	Comm Ins ST Contra-Maple View	1,661.00		1,661.00	11,962.00
	Comm Ins IV Therapy-Maple View Comm Ins Lab-Maple View	(16,996.00)		(16,996.00)	0.00 (2,384.00)
	Comm Ins Cab-Maple View Comm Ins OT-Maple View	(2,179.00) (32,164.00)		(2,179.00) (32,164.00)	(31,096.00)
	Comm Ins OT Contra-Maple View	32,164.00		32,164.00	31,096.00
	Comm Ins X-Maple View	(2,380.00)		(2,380.00)	(1,168.00)
	Mgd Medicare Room and Board-Maple View	(1,814,847.00)		(1,814,847.00)	(1,409,039.00)
	Mgd Medicare Room & Board Contra-Maple View	410,360.00		410,360.00	266,765.00
	Mgd Medicare PT Contra-Maple View	(59,731.00)		(59,731.00)	(28,247.00)
	Mgd Medicare OT Contra-Maple View Mgd Medicare ST Contra-Maple View	(55,632.00) (25,467.00)		(55,632.00) (25,467.00)	(46,756.00) (20,465.00)
	Mgd Medicare NTA Contra-Maple View	(84,607.00)		(84,607.00)	(68,398.00)
	Mgd Medicare Nsng Comp Contra-Maple View	(125,319.00)		(125,319.00)	(111,859.00)
373005-0105-00-000-0	Mgd Medicare Contra Other-Maple View	46,213.00		46,213.00	30,402.00
	Mgd Medicare Pharmacy-Maple View	(279,649.00)		(279,649.00)	(239,618.00)
	Mgd Medicare Pharmacy Contra-Maple View	284,172.00		284,172.00	253,256.00
	Mgd Medicare Chargeable Medical Supplies-Maple Vie Mgd Medicare Chargeable Med Supp Contra-Maple View	0.00 0.00		0.00	(4,097.00) 4 097 00
	Mgd Medicare Chargeable Med Supp Contra-Maple View Mgd Medicare PT-Maple View	(397,688.00)		0.00 (397,688.00)	4,097.00 (200,385.00)
51 7000-0 100-00-000-0	mga medicale i i-mapie view	(00.000,000)		(00.000,160)	(200,000.00)

\$2595-0100-00000 Upt Medicane PT Contra-Maple View (178.718.00) (178.718.00) (19.25.00)	Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
37400-0105-00000 Mgs Medicar PT Contra-Maple View 176,115.00 176,715.00	Account	Description		OL Itol #	NOL		
274405-0105-000-000 Mg/ Moderae ST-Maple View (176,715.00) (176,715.00) (176,715.00) (29,250.00) (20,000)	27/205 0105 00 000 0	Mad Madigaro PT Contro Manlo Vious					
\$74405-0105-0-0000- Mg/ Modicare PT Contra-Maple View			•			,	,
27400-0105-00-0000- Mg/mfc/more Challey New							
374800-0105-00-0000 Mg/l Medicare OT Charlas Mayle View		9 ,, ,	* * * * * * * * * * * * * * * * * * * *				
774809-0115-00-0000 Mgd Medicare OT Contra-Maple View 77590-0115-00-0000 Mgd Medicare X-Maple View 77590-0115-00-0000 Mgd Medicare Mgd Care PLB FT-Maple View 77590-0115-00-0000 Mgd Medicare Mgd Care PLB FT-Maple View 77590-0115-00-0000 Mgd Medicare Mgd PB FT Contra-Maple View 77590-0115-00-0000 Mgd Medicare Mgd PB ST Contra-Maple View 77590-0115-00-0000 Mgd Medicare Mgd PB ST Contra-Maple View 77590-0115-00-0000 Mgd		·					
778000-0105-00-0000 Mgd Medicare Specially Beats-Maple View (20000) (20000) (25400) (2590)		·					
\$75000.0155.00.000.0 Mg/ Medicare W. Mingle View		·					
1,0011.00 1,00							
17.780.00 17.		•				(2,990.00)	(2,485.00)
378105-00-000-00 Medicare Might PI B PT Contra-Maple View			•				
391120-0105-00-0000 Meciane Might Pile ST Contart-Balley View (68,282.00)		•					
391815-0105-00-000-0 Medicare Mgd Pt B STContra-Maple View (20, 395.00) (20, 395.00							,
378135-0105-00-000-0 Mediciare Majd Pt B OT Contra-Maple View (20, 555.00) (20, 365.00) (33, 365.00) (724.00) (34, 409.00) (724.00) (31100-0105-00-000-0) Patient Revenue Captation Ample View (10, 54.00 0.0) (34, 409.00) (724.00) (31100-0105-00-000-0) Interest Income-Maple View (10, 54.00 0.0) (34, 409.00) (32, 400.00) (724.00		•	V /				
389010-0105-00-000-0 Interest Income-Maple View	378130-0105-00-000-0	Medicare Mgd Care Pt B OT-Maple View	(209,395.00)			(209,395.00)	(54,698.00)
391100-01105-00-000-0 Interest Innorme-Margle View		•					
391500-0105-00-000-0 Transcription Income-Maple View (36.21.00) (33.30) (354.00) (353.00) (354.00) (353.00) (354.0		·					
391600-0105-00-000-0 Compton Tomose Maple View (363.00) (363.00) (654.00)			* * * * * * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * * * * * * *	
391900-0105-00-000-0 Long- Term CT PET Tax Income-Mapler 50,186.00 50,186.00 62,800.00 0.00 0.00 0.000-0105-03-07-0 Sallany-Mapler-Operator-Omerated							
400000-0105-03-007-0 Salary-Maplev-Administrator-Administrator- 184,588.00 1	391900-0105-00-000-0	Long- Term CT PET Tax Income-Maplev					
400000-0105-03-009-0 Salary-Maplev-Flacin Operations-Administrator-							
400000-0105-04-007-0 Salary-Maplev-Reical Operations-Administrative A-							,
47,807.00 47,807.00 47,807.00 47,807.00 48,607.00 46,						,	
			•				
400000-0105-07-086-0 Salary-Maplev-Rec Therapy-Rec Asst	400000-0105-06-096-0	Salary-Maplev-Social service-Social Worker-	63,260.00			63,260.00	17,967.00
			•				
400000-0105-09-098-0 Salary-Maplev-Maintenance-Maintenance Worker 88,577.00 72,115.00 72,115.00 71,804.00 304,678.00 330,654.00 400000-0105-09-014-0 330,654.00 400000-0105-09-014-0 344,678.00 344,678.00 344,678.00 346,550.00 48,250.00 48,250.00 48,250.00 48,250.00 48,250.00 48,250.00 48,250.00 48,250.00 48,250.00 48,250.00 48,250.00 48,250.00 49,023.00 96,923.00 96,						· · · · · · · · · · · · · · · · · · ·	
400000-0105-09-04R-0 Salary-Maplev-Housekeeping-Supervisor- 48,250.00 48,250.00 41923.00 400000-0105-01-00-010-0-010-0-010-0-010-01							
400000-0105-11-011-0 Salary-Maplev-Admissions-Admissions Coordinator 12.615.00 31,545.00 400000-0105-11-030-0 Salary-Maplev-Admissions-Dir 96.923.00 99.392.00 97,396.00 400000-0105-13-013-0 Salary-Maplev-Dietary-Aide 366.841.00 356.841.00 356.841.00 400000-0105-13-035-0 Salary-Maplev-Dietary-Dietician- 29.124.00 29.124.00 22.488.00 400000-0105-13-035-0 Salary-Maplev-Dietary-Supervisor- 65.322.00 65.322.00 64.010.00 400000-0105-13-010-1 Salary-Maplev-Nursing Admin-Clerical- 73.194.00 73.194.00 84.06.00 400000-0105-14-028-0 Salary-Maplev-Nursing Admin-Clerical- 73.194.00 73.194.00 84.106.00 400000-0105-14-028-0 Salary-Maplev-Nursing Admin-Clerical- 73.194.00 73.194.00 84.106.00 400000-0105-15-021-0 Salary-Maplev-Nursing-CNA- 1.908.348.00 1,908.348.00 1,808.214.00 400000-0105-15-022-0 Salary-Maplev-Nursing-CNA- 1.908.348.00 1,809.214.00 484.23.00 400000-0105-24-139-0 Salary-Maplev-Nursing-CNA- 77.1137.00 (30.3,726.00 467							
400000-0105-13-013-0 Salary-Maplev-Dietary-Aide- 368,841.00 150,117.00 160,117.00 138,950.00 400000-0105-13-035-0 Salary-Maplev-Dietary-Cook- 160,117.00 160,117.00 138,950.00 400000-0105-13-035-0 Salary-Maplev-Dietary-Dietcian- 29,124.00 22,124.00 26,488.00 400000-0105-13-010-1 Salary-Maplev-Nursing Admin-Clerical- 73,194.00 108,645.00 108,6							
400000-0105-13-031-0 Salary-Maplev-Dietary-Cook- 160,117.00 183,950.00 400000-0105-13-031-0 Salary-Maplev-Dietary-Supervisor- 65,322.00 65,322.00 64,010.00 400000-0105-13-101-0 Salary-Maplev-Nursing Admin-Clerical- 73,194.00 180,845.00 193,840.00 400000-0105-14-028-0 Salary-Maplev-Nursing Admin-DNS- 155,888.00 155,888.00 180,340.00 400000-0105-14-028-0 Salary-Maplev-Nursing Admin-DNS- 155,888.00 1,968.348.00 1,968.348.00 400000-0105-15-021-0 Salary-Maplev-Nursing-CNA- 1,908.348.00 1,968.348.00 1,968.348.00 400000-0105-15-021-0 Salary-Maplev-Nursing-CNA- 1,908.348.00 1,908.348.00 1,908.348.00 400000-0105-15-022-0 Salary-Maplev-Nursing-CNA- 771,137.00 (303,726.00) 467.411.00 400000-0105-21-040-0 Salary-Maplev-Respiratory - 0.00 0.00 1,044.00 400000-0105-24-139-0 Salary-Maplev-Nursing-CNA- 0.00 0.00 1,044.00 400000-0105-30-030-0 Salary - PTO-Maplev-Administration-Administration-Administration-Administration-Administration-Administration-Administration-Administration-Admi							
400000-0105-13-035-0 Salary-Maplev-Dietary-Dietcican- 29,124.00 65,322.00 68,010.00 400000-0105-14-012-0 Salary-Maplev-Nursing Admin-ADNS- 108,645.00 108,645.00 108,645.00 108,645.00 400000-0105-14-012-0 Salary-Maplev-Nursing Admin-DNS- 155,888.00 155,888.00 143,504.00 400000-0105-14-028-0 Salary-Maplev-Nursing Admin-DNS- 155,888.00 155,888.00 143,504.00 400000-0105-15-021-0 Salary-Maplev-Nursing-Admin-DNS- 155,888.00 155,888.00 143,504.00 400000-0105-15-021-0 Salary-Maplev-Nursing-Admin-DNS- 1,908,348.00 1,908,348.00 1,908,348.00 1,908,348.00 1,908,348.00 4,00000-0105-15-022-0 Salary-Maplev-Nursing-LPN- 1,200,369.00 467,411.00 449,423.00 400000-0105-15-092-0 Salary-Maplev-Nursing-LPN- 771,137.00 (303,726.00) 467,411.00 449,423.00 400000-0105-24-139-0 Salary-Maplev-Nursing-RN- 771,137.00 303,726.00 467,411.00 449,423.00 400000-0105-24-139-0 Salary-Maplev-Respiratory- 3,355.00 3,355.00 5,350.00 1,044.00 400000-0105-24-139-0 Salary-Maplev-Respiratory- 3,355.00 3,355.00 634.00 400000-0105-24-157-0 Salary-Maplev-Respiratory- 3,355.00 3,355.00 634.00 400000-0105-30-007-0 Salary-PTO-Maplev-Administrativ- 705.00 735.00 735.00 735.00 1,563.00 40005-0105-03-007-0 Salary - PTO-Maplev-Administrativ- 705.00 7							
400000-0105-14-012-0 Salary-Maplev-Nursing Admin-ADNS- 108,645.00 108,645.00 108,340.00 400000-0105-14-042-0 Salary-Maplev-Nursing Admin-DNS- 155,888.00 155,888.00 143,504.00 400000-0105-14-044-0 Salary-Maplev-Nursing Admin-DNS- 1,908,348.00 1,908,348.00 1,908,348.00 1,908,348.00 1,809,214.00 400000-0105-15-021-0 Salary-Maplev-Nursing-LPN- 1,200,369.00 1,							
400000-0105-14-024-0 Salary-Maplev-Nursing Admin-Clerical 73, 194,00 84,106,00 400000-0105-15-024-0 Salary-Maplev-Nursing-CNA- 1,58,888,00 1,58,888,00 1,508,348,00 400000-0105-15-021-0 Salary-Maplev-Nursing-CNA- 1,200,368,00 1,200,368,00 1,508,348,00 400000-0105-15-022-0 Salary-Maplev-Nursing-CNA- 1,200,368,00 467,411.00 449,23,00 400000-0105-21-040-0 Salary-Maplev-Human Resources-Dir of Human Resources-Dir							
400000-0105-14-044-0 Salary-Maplev-Nursing-CNA- 1,508,380.0 1,508,380.0 1,608,214.00 400000-0105-15-021-0 Salary-Maplev-Nursing-CNA- 1,908,348.00 1,200,369.00 1,200,369.00 400000-0105-15-052-0 Salary-Maplev-Nursing-LPN- 1,200,369.00 303,726.00 467,411.00 400000-0105-15-092-0 Salary-Maplev-Hursing-RN- 771,137.00 303,726.00 467,411.00 400000-0105-24-139-0 Salary-Maplev-Respiratory- 0.00 0.00 1,044.00 400000-0105-30-017-0 Salary-Maplev-Respiratory- 0.00 0.00 11.00 400000-0105-30-017-0 Salary-Pro-Maplev-Administration-Admini							
400000-0105-15-021-0 Salary-Maplev-Nursing-CNA- 1,908,348.00 1,908,348.00 1,908,348.00 1,200,369.00 1,200,369.00 1,200,369.00 1,200,369.00 1,154,300.00 400000-0105-15-052-0 Salary-Maplev-Nursing-LPN- 771,137.00 (303,726.00) 467,411.00 449,423.00 400000-0105-15-092-0 Salary-Maplev-Human Resources-Dir of Human Resources-Dir of Resources-Dir of Human Resources-Dir of Resources-Dir of Human Resources-Dir of Reso						,	
400000-0105-15-052-0 Salary-Maplev-Nursing-LPN- 1,200,369.00 1,200,369.00 467,41.00 449,423.00 400000-0105-15-092-0 Salary-Maplev-Human Resources-Dir of Human							
400000-0105-15-092-0 Salary-Maplev-Nursing-RN- 771,137.00 (303,726.00) 467,411.00 449,423.00 400000-0105-21-04-0 Salary-Maplev-Human Resources-Dir of Human Resources-Dir of Resources-Dir of Human Resources-							
400000-0105-24-139-0 Salary-Maplev-Respiratory			771,137.00		(303,726.00)		
400000-0105-24-167-0 Salary-Maplev-Respiratory - 3,355.00 3,355.00 634.00 400000-0105-35-021-0 Salary-Maplev-Nursing-CNA- 0.00 0.00 11.00 400050-0105-03-007-0 Salary - PTO-Maplev-Administration-Administrator- 0.00 0.00 (5,408.00) 400050-0105-03-007-0 Salary - PTO-Maplev-Administration-Administrator- 0.00 0.00 (5,408.00) 400050-0105-04-007-0 Salary - PTO-Maplev-Social service-Dir- 1,190.00 1,190.00 1,190.00 400050-0105-06-038-0 Salary - PTO-Maplev-Social service-Social Worker- 3,071.00 3,071.00 277.00 400050-0105-07-086-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 5,742.00 (1,970.00) 400050-0105-07-086-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 5,742.00 (1,970.00) 400050-0105-07-086-0 Salary - PTO-Maplev-Rec Therapy-Fir- 5,742.00 3,586.00 (1,970.00) 400050-0105-08-086-0 Salary - PTO-Maplev-Maintenance-Work- (242.00) (242.00) (242.00) 400050-0105-09-040-0 Salary - PTO-Maplev-Maintenance-Supervisor- 1,761.00 1,761							
400000-0105-35-021-0 Salary-Maplev-Nursing-CNA- 0.00 11.00 400050-0105-03-007-0 Salary - PTO-Maplev-Administration-Administration- 0.00 (5,688.00) 400050-0105-03-009-0 Salary - PTO-Maplev-Fiscal Operations-Administrator- 0.00 4,011.00 400050-0105-04-007-0 Salary - PTO-Maplev-Social service-Dir- 1,190.00 1,190.00 400050-0105-06-096-0 Salary - PTO-Maplev-Social service-Social Worker- 3,071.00 3,071.00 400050-0105-06-096-0 Salary - PTO-Maplev-Social service-Social Worker- 3,071.00 3,071.00 400050-0105-06-096-0 Salary - PTO-Maplev-Rec Social Worker- 3,071.00 5,742.00 400050-0105-08-058-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 5,742.00 400050-0105-08-058-0 Salary - PTO-Maplev-Rec Therapy-Rec Therapy							
400050-0105-03-007-0 Salary - PTO-Maplev-Ādministration-Administrativ- (735.00) (1,563.00) 400050-0105-03-009-0 Salary - PTO-Maplev-Administration-Administrator- 0.00 0.00 (5,408.00) 400050-0105-04-007-0 Salary - PTO-Maplev-Fiscal Operations-Administra- 4,111.00 1,190.00 1,190.00 400050-0105-06-038-0 Salary - PTO-Maplev-Social service-Dir- 1,190.00 3,071.00 277.00 400050-0105-07-038-0 Salary - PTO-Maplev-Social service-Social Worker- 3,071.00 3,071.00 277.00 400050-0105-07-038-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 5,742.00 (1,970.00) 400050-0105-07-038-0 Salary - PTO-Maplev-Rec Therapy-Rec Therapy-Brec Therapy-Brec Therapy-Brec Therapy-Rec Therapy-R							
400050-0105-03-009-0 Salary - PTO-Maplev-Administration-Administrator- 0.00 (5,408.00) 400050-0105-04-007-0 Salary - PTO-Maplev-Fiscal Operations-Administra- 4,111.00 3,282.00 400050-0105-06-038-0 Salary - PTO-Maplev-Social service-Social Worker- 3,071.00 3,071.00 3,071.00 400050-0105-07-038-0 Salary - PTO-Maplev-Social service-Social Worker- 3,071.00 3,071.00 277.00 400050-0105-07-038-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 5,742.00 (1,970.00) 400050-0105-07-086-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 3,586.00 (1,008.00) 400050-0105-08-058-0 Salary - PTO-Maplev-Rec Therapy-Rec Therapist- 3,586.00 (242.00) 169.00 400050-0105-08-058-0 Salary - PTO-Maplev-Maintenance-Work- (242.00) (242.00) 169.00 400050-0105-09-048-0 Salary - PTO-Maplev-Housekeeping-Housekeeper- (1,168.00) (1,168.00) (2,993.00) (2,993.00) 3,160.00 400050-0105-01-10-10-0 Salary - PTO-Maplev-Housekeeping-Supervisor- (2,993.00) (2,993.00) (2,993.00) (3,102.00) (3,102.00) (804							
400050-0105-06-038-0 Salary - PTO-Maplev-Social service-Dir- 1,190.00 1,190.00 (5,702.00) 400050-0105-06-096-0 Salary - PTO-Maplev-Social service-Social Worker- 3,071.00 3,071.00 277.00 400050-0105-07-038-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 5,742.00 (1,970.00) 400050-0105-07-086-0 Salary - PTO-Maplev-Rec Therapy-Rec Therapist- 3,586.00 3,586.00 (242.00) 169.00 400050-0105-08-058-0 Salary - PTO-Maplev-Maintenance-Maintenance Work- (242.00) (242.00) 169.00 400050-0105-09-048-0 Salary - PTO-Maplev-Housekeeping-Housekeeper- 1,761.00 1,761.00 569.00 400050-0105-09-101-0 Salary - PTO-Maplev-Housekeeping-Housekeeper- (1,168.00) (1,168.00) (457.00) 400050-0105-11-011-0 Salary - PTO-Maplev-Housekeeping-Supervisor- (2,993.00) (2,993.00) (3,000 400050-0105-11-038-0 Salary - PTO-Maplev-Admissions-Admissions Coordi- 482.00 482.00 (62.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Admissions-Dir- (693.00) (693.00) (804.00) 400050-0105-13-031-0		, ,					* * * * * * * * * * * * * * * * * * * *
400050-0105-06-096-0 Salary - PTO-Maplev-Social service-Social Worker- 3,071.00 3,071.00 277.00 400050-0105-07-038-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 5,742.00 (1,970.00) 400050-0105-07-086-0 Salary - PTO-Maplev-Rec Therapy-Rec Therapy-Rec Therapist- 3,586.00 3,586.00 (1,008.00) 400050-0105-08-058-0 Salary - PTO-Maplev-Maintenance-Work- (242.00) (242.00) 169.00 400050-0105-08-101-0 Salary - PTO-Maplev-Maintenance-Supervisor- 1,761.00 1,761.00 569.00 400050-0105-09-048-0 Salary - PTO-Maplev-Housekeeping-Housekeeper- (1,168.00) (1,168.00) (457.00) 400050-0105-19-09-101-0 Salary - PTO-Maplev-Housekeeping-Supervisor- (2,993.00) (2,993.00) 3,160.00 400050-0105-11-011-0 Salary - PTO-Maplev-Admissions-Admissions Coordi- 482.00 482.00 (62.00) 400050-0105-13-035-0 Salary - PTO-Maplev-Admissions-Dir- (693.00) (3,102.00) (148.00) 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 2,436.00	400050-0105-04-007-0	Salary - PTO-Maplev-Fiscal Operations-Administra-	4,111.00			4,111.00	3,282.00
400050-0105-07-038-0 Salary - PTO-Maplev-Rec Therapy-Dir- 5,742.00 5,742.00 (1,970.00) 400050-0105-07-086-0 Salary - PTO-Maplev-Rec Therapy-Rec Therapist- 3,586.00 3,586.00 (1,008.00) 400050-0105-08-058-0 Salary - PTO-Maplev-Maintenance-Maintenance Work- (242.00) 169.00 400050-0105-08-101-0 Salary - PTO-Maplev-Maintenance-Supervisor- 1,761.00 1,761.00 569.00 400050-0105-09-048-0 Salary - PTO-Maplev-Housekeeping-Housekeeper- (1,168.00) (1,168.00) (457.00) 400050-0105-09-101-0 Salary - PTO-Maplev-Housekeeping-Supervisor- (2,993.00) (2,993.00) 3,160.00 400050-0105-11-031-0 Salary - PTO-Maplev-Admissions-Admissions Coordi- 482.00 482.00 (62.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Admissions-Dir- (693.00) (693.00) (804.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 1,574.00 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.		•					
400050-0105-07-086-0 Salary - PTO-Maplev-Rec Therapy-Rec Therapist- 3,586.00 (1,008.00) 400050-0105-08-058-0 Salary - PTO-Maplev-Maintenance-Maintenance Work- (242.00) (242.00) 169.00 400050-0105-08-101-0 Salary - PTO-Maplev-Maintenance-Supervisor- 1,761.00 1,761.00 569.00 400050-0105-09-048-0 Salary - PTO-Maplev-Housekeeping-Housekeeper- (1,168.00) (2,993.00) (2,993.00) 3,100.00 400050-0105-11-011-0 Salary - PTO-Maplev-Housekeeping-Supervisor- (2,993.00) (2,993.00) 3,100.00 400050-0105-11-031-0 Salary - PTO-Maplev-Admissions-Admissions Coordi- 482.00 482.00 (62.00) 400050-0105-13-033-0 Salary - PTO-Maplev-Admissions-Dir- (693.00) (693.00) (804.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 1,574.00 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.00 302.00 1,122.00 400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-AD		•					
400050-0105-08-058-0 Salary - PTO-Maplev-Maintenance-Maintenance Work- (242.00) 169.00 400050-0105-08-101-0 Salary - PTO-Maplev-Maintenance-Supervisor- 1,761.00 1,761.00 569.00 400050-0105-09-048-0 Salary - PTO-Maplev-Housekeeping-Housekeeper- (1,168.00) (1,168.00) (457.00) 400050-0105-09-101-0 Salary - PTO-Maplev-Housekeeping-Supervisor- (2,993.00) (2,993.00) 3,160.00 400050-0105-11-011-0 Salary - PTO-Maplev-Admissions-Admissions Coordi- 482.00 482.00 (62.00) 400050-0105-13-038-0 Salary - PTO-Maplev-Admissions-Dir- (693.00) (693.00) (693.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Foletician- 127.00 127.00 0.00 400050-0105-13-101-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (4,784.00) (1,701.00) 400050-0105-14-028-0 Salary - PTO-Maplev-Nursing Admin-Cleri							
400050-0105-08-101-0 Salary - PTO-Maplev-Maintenance-Supervisor- 1,761.00 1,761.00 569.00 400050-0105-09-048-0 Salary - PTO-Maplev-Housekeeping-Housekeeper- (1,168.00) (1,168.00) (457.00) 400050-0105-09-101-0 Salary - PTO-Maplev-Housekeeping-Supervisor- (2,993.00) (2,993.00) 3,160.00 400050-0105-11-011-0 Salary - PTO-Maplev-Admissions-Admissions Coordi- 482.00 482.00 (62.00) 400050-0105-11-038-0 Salary - PTO-Maplev-Admissions-Dir- (693.00) (693.00) (804.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 1,574.00 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Dietician- 127.00 127.00 0.00 400050-0105-13-101-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.00 302.00 1,122.00 400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (7,086.00) 3,914.00 400050-0105-14-044-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,639.00 1,							
400050-0105-09-101-0 Salary - PTO-Maplev-Housekeeping-Supervisor- (2,993.00) 3,160.00 400050-0105-11-011-0 Salary - PTO-Maplev-Admissions-Admissions Coordi- 482.00 482.00 (62.00) 400050-0105-11-038-0 Salary - PTO-Maplev-Admissions-Dir- (693.00) (693.00) (804.00) 400050-0105-13-013-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 1,574.00 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Dietician- 127.00 127.00 0.00 400050-0105-13-101-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.00 302.00 1,122.00 400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (1,701.00) 400050-0105-14-028-0 Salary - PTO-Maplev-Nursing Admin-Clerical- (7,086.00) 7,086.00 3,914.00 400050-0105-14-044-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,507.00 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00	400050-0105-08-101-0	Salary - PTO-Maplev-Maintenance-Supervisor-					569.00
400050-0105-11-011-0 Salary - PTO-Maplev-Admissions-Admissions Coordi- 482.00 482.00 (62.00) 400050-0105-11-038-0 Salary - PTO-Maplev-Admissions-Dir- (693.00) (804.00) 400050-0105-13-013-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 1,574.00 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Dietician- 127.00 0.00 400050-0105-13-101-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.00 302.00 1,122.00 400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (1,701.00) 400050-0105-14-028-0 Salary - PTO-Maplev-Nursing Admin-Clerical- (7,086.00) 3,914.00 400050-0105-14-044-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,507.00 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (393.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LNA- (1,550.00) (1,550.00) (1,500.00)			* * * * * * * * * * * * * * * * * * * *				
400050-0105-11-038-0 Salary - PTO-Maplev-Admissions-Dir- (693.00) (804.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (3,102.00) (148.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 1,574.00 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Dietician- 127.00 127.00 0.00 400050-0105-13-101-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.00 302.00 1,122.00 400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (1,701.00) 400050-0105-14-028-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,507.00 400050-0105-15-021-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,507.00 400050-0105-15-021-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (939.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (1,550.00)						* * * * * * * * * * * * * * * * * * * *	
400050-0105-13-013-0 Salary - PTO-Maplev-Dietary-Aide- (3,102.00) (148.00) 400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 1,574.00 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Dietican- 127.00 127.00 0.00 400050-0105-13-101-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.00 302.00 1,122.00 400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (1,701.00) 400050-0105-14-042-0 Salary - PTO-Maplev-Nursing Admin-Clerical- (7,086.00) (7,086.00) 3,914.00 400050-0105-14-044-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,639.00 400050-0105-15-021-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (939.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (140.00)							
400050-0105-13-031-0 Salary - PTO-Maplev-Dietary-Cook- 2,436.00 2,436.00 1,574.00 400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Dietician- 127.00 127.00 0.00 400050-0105-13-101-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.00 302.00 1,122.00 400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (1,701.00) 400050-0105-14-028-0 Salary - PTO-Maplev-Nursing Admin-Clerical- (7,086.00) 1,639.00 1,639.00 1,639.00 1,639.00 1,639.00 1,070.00 400050-0105-15-021-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (939.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (140.00)							
400050-0105-13-035-0 Salary - PTO-Maplev-Dietary-Dietician- 127.00 127.00 0.00 400050-0105-13-101-0 Salary - PTO-Maplev-Dietary-Supervisor- 302.00 302.00 1,122.00 400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (1,701.00) 400050-0105-14-028-0 Salary - PTO-Maplev-Nursing Admin-Clerical- (7,086.00) (7,086.00) 3,914.00 400050-0105-15-04-04-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,639.00 400050-0105-15-021-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (939.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (140.00)		, ,					
400050-0105-14-012-0 Salary - PTO-Maplev-Nursing Admin-ADNS- (4,784.00) (4,784.00) (1,701.00) 400050-0105-14-028-0 Salary - PTO-Maplev-Nursing Admin-Clerical- (7,086.00) (7,086.00) 3,914.00 400050-0105-14-044-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,507.00 400050-0105-15-021-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (939.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (140.00)	400050-0105-13-035-0	Salary - PTO-Maplev-Dietary-Dietician-	127.00			127.00	0.00
400050-0105-14-028-0 Salary - PTO-Maplev-Nursing Admin-Clerical- (7,086.00) (7,086.00) 3,914.00 400050-0105-14-044-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,507.00 400050-0105-15-021-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (939.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (140.00)							
400050-0105-14-044-0 Salary - PTO-Maplev-Nursing Admin-DNS- 1,639.00 1,639.00 1,507.00 400050-0105-15-021-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (939.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (140.00)							5.7
400050-0105-15-021-0 Salary - PTO-Maplev-Nursing-CNA- 7,733.00 7,733.00 (939.00) 400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (140.00)							
400050-0105-15-052-0 Salary - PTO-Maplev-Nursing-LPN- (1,550.00) (1,550.00) (140.00)							
	400050-0105-15-092-0	Salary - PTO-Maplev-Nursing-RN-	(11,838.00)			(11,838.00)	4,484.00

Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
7.000	2000	9/30/2023	02 1101 11		9/30/2023	9/30/2022
400050-0105-21-040-0	Salary - PTO-Maplev-Human Resources-Dir of Human-	(652.00)			(652.00)	1,468.00
400050-0105-24-139-0	Salary - PTO-Maplev-Respiratory	0.00			0.00	(452.00)
	Salary - PTO-Mapley-Nursing-CNA-	0.00			0.00	262.00
	FICA-Maplev-Emp Benefits FUI-Maplev-Emp Benefits	466,181.00 9,313.00			466,181.00 9,313.00	431,157.00 5,896.00
	SUI-Maplev-Emp Benefits	35,192.00			35,192.00	35,437.00
	Health Ins-Maplev-Emp Benefits	968,816.00			968,816.00	627,743.00
	Workers Compensation-Mapley-Emp Benefits -	210,194.00 0.00			210,194.00 0.00	208,154.00 32,364.00
	Workers Comp Retro Exp-Maplev-Emp Benefits Pension-Maplev-Emp Benefits	377,509.00			377,509.00	136,359.00
	Union Training and Upgrading-Maplev-Emp Benefi	27,366.00			27,366.00	23,655.00
	Supplies-Maple View-Administration	1,737.00			1,737.00	0.00
	Supplies-Maple View-Fiscal Operations Supplies-Maple View-Rec Therapy	23,511.00 7,377.00			23,511.00 7,377.00	26,484.00 525.00
	Supplies-Maple View-Naintenance	23,590.00			23,590.00	27,871.00
	Supplies-Maple View-Housekeeping	41,943.00			41,943.00	32,001.00
	Supplies-Maple View-Laundry	685.00			685.00	1,470.00
	Supplies-Maple View-Dietary Supplies-Maple View-Nursing	39,054.00 100,541.00			39,054.00 100,541.00	25,051.00 68,727.00
	Supplies-Maple View-Narketing	11,194.00			11,194.00	3,456.00
410000-0105-23-000-0	Supplies-Maple View-Rehab Tpy and Ancllry	177.00			177.00	0.00
	Supplies COVID-Maple View-Fiscal Operations	1,426.00			1,426.00	1,917.00
	Supplies COVID-Maple View-Maintenance Supplies COVID-Maple View-Housekeeping	136.00 1,192.00			136.00 1,192.00	57.00 2,810.00
	Supplies COVID-Maple View-Dietary	540.00			540.00	0.00
	Supplies COVID-Maple View-Nursing	21,400.00			21,400.00	70,241.00
	Supplies COVID-Maple View-Marketing	289.00			289.00	425.00
	Flu Vaccine-Maplev-Medical Services	12,506.00 344,113.00			12,506.00 344,113.00	4,920.00 341,114.00
	Drugs Medicare Pt A-Maple View-Rehab Tpy and Ancl House Drugs (OTC)-Maplev-Medical Services	10,338.00			10,338.00	13,129.00
	Food-Maple View-Dietary	346,901.00			346,901.00	292,940.00
	Food Supplements-Maple View-Dietary	38,653.00			38,653.00	34,038.00
	Oxygen Non Billable-Maple View-Rehab Tpy and Ancll IV Thy Supplies-Maple View-Rehab Tpy and Ancllry	3,802.00 7,913.00			3,802.00 7,913.00	2,482.00 3,315.00
	Diapers-Maple View-Laundry	45,506.00			45,506.00	52,834.00
	Linen-Maple View-Laundry	1,135.00			1,135.00	19.00
	Minor Equip-Maple View-Fiscal Operations	446.00			446.00	58.00
	Minor Equip-Maple View-Maintenance Minor Equip-Maple View-Nursing	431.00 3,039.00			431.00 3,039.00	1,714.00 4,027.00
	Consulting Fees-Maple View-Administration	219.00			219.00	10,838.00
	Consulting Fees-Maple View-Fiscal Operations	4,137.00		(4,137.00)	0.00	0.00
	Consulting Fees-Maple View-Nursing	13,454.00			13,454.00	8,412.00
	Consulting Fees-Maple View-Medical Services Consulting Fees-Maple View-Respiratory	0.00 110.00			0.00 110.00	58,702.00 0.00
	Pharmacy fees-Maplev-Rehab Tpy and Ancliry	12,794.00			12,794.00	13,654.00
	Accounting Fees-Maple View-Administration	33,560.00			33,560.00	39,570.00
	Legal Fees-Maple View-Administration	115.00			115.00	0.00
	Legal Fees - Labor-Maple View-Administration Legal Fees - Collections-Maple View-Administration	9,186.00 13,427.00			9,186.00 13,427.00	42,606.00 27,002.00
	Legal Fees - Non-reimbursable-Maple View-Admin	2,463.00			2,463.00	2,617.00
	Shared Services-Maple View-Administration	674,673.00		4,137.00	678,810.00	603,050.00
	IT ServicesAdministration-Maple View-Administratio	81,804.00			81,804.00	78,141.00
	IT Rental-Maple View-Administration Medical Director Fees-Maple View-Medical Services	47,298.00 30,000.00		(6,576.00)	40,722.00 30,000.00	41,750.00 30,000.00
	Podiatrist Fees-Maplev-Medical Services	26.00			26.00	0.00
	Dental Fees-Maple View-Medical Services	7,116.00			7,116.00	7,083.00
	Physician Fees-Maplev-Medical Services-	57,987.00			57,987.00	527.00
	PT Fees-Maplev-Rehab Tpy and Ancllry OT Fees-Maplev-Rehab Tpy and Ancllry	310,286.00 413,897.00			310,286.00 413,897.00	284,228.00 317,293.00
	Speech Fees-Maplev-Rehab Tpy and Ancilry	101,694.00			101,694.00	95,721.00
	Radiology Fees-Maple View-Laboratory	0.00			0.00	195.00
	X-Maple View-Laboratory	23,478.00			23,478.00	13,296.00
	Lab Fees-Maple View-Laboratory Purch Services-Maple View-Admin Staff	29,090.00			29,090.00	25,421.00
	Purch Services-Maple View-Admin Stail Purch Services-Maple View-Administration	0.00 160.00			0.00 160.00	15,600.00 235.00
	Purch Services-Maple View-Fiscal Operations	34,044.00			34,044.00	37,543.00
	Purch Services-Maple View-Rec Therapy	11,185.00			11,185.00	2,159.00
	Purch Services Maple View Laundry	84,619.00			84,619.00	61,000.00
	Purch Services-Maple View-Laundry Purch Services-Maple View-Security	558.00 1,122.00			558.00 1,122.00	0.00 982.00
	Purch Services-Maple View-Dietary	8,397.00			8,397.00	20,070.00
440000-0105-15-000-0	Purch Services-Maple View-Nursing	2,647.00			2,647.00	0.00
	Ground Services-Maple View-Maintenance	10,418.00			10,418.00	11,455.00
	Purch Services Ambulance-Maple View-Nursing Cable Expense-Maple View-Rec Therapy	9,984.00 17,001.00			9,984.00 17,001.00	11,638.00 15,711.00
. 10000 0 100-01-000-0	Salls Expense maple from Nee Hierapy	17,001.00			17,501.00	10,711.00

Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
		9/30/2023			9/30/2023	9/30/2022
442000-0105-08-000-	Pest Control-Maplev-Maintenance	3,664.00			3,664.00	3,635.00
443000-0105-08-000-0	Carting-Maple View-Maintenance	31,972.00			31,972.00	29,802.00
	Rental Expenses-Maple View-Maintenance	1,235.00			1,235.00	1,140.00
	D Equip Rental-Maple View-Fiscal Operations	11,467.00			11,467.00	8,435.00
	Equip Rental-Maple View-Nursing Equip Rental-Maple View-Rehab Tpy and Ancllry	3,572.00 10,154.00			3,572.00 10,154.00	4,212.00 10,166.00
	D Equip Rental-Maple View-Respiratory	14,344.00			14,344.00	11,818.00
	Telephone-Maple View-Administration	24,797.00			24,797.00	29,372.00
	Telephone - Cell-Maple View-Administration	4,203.00			4,203.00	3,879.00
	Electric-Maple View-Property	83,248.00			83,248.00	83,557.00
	O Gas-Maple View-Property	37,790.00			37,790.00	42,305.00
	O Oil-Maple View-Property	3,557.00			3,557.00	1,041.00
	0 Water-Maple View-Property 0 Rent-Maple View-Property	24,044.00 1,026,000.00		(192,669.00)	24,044.00 833,331.00	34,606.00 360,270.00
	Personal Property Taxes-Maple View-Property	12,207.00		(132,003.00)	12,207.00	11,049.00
	Depe Exp LHI-Maple View	80,393.00		9,633.00	90,026.00	78,787.00
	D Depr Exp MME-Maple View	51,428.00		(9,633.00)	41,795.00	47,417.00
491000-0105-03-000-0	Dues-Maple View-Administration	10,440.00		(1,592.00)	8,848.00	9,646.00
	O Subscriptions-Maple View-Administration	8,261.00		350.00	8,611.00	6,846.00
	Licenses and Permits-Maple View-Administration Advantage of Transport Maple View Administration	1,598.00		1,242.00	2,840.00	2,917.00
	O Advertising Employment-Maple View-Administration O Advertising Promotional-Maple View-Administration	1,600.00			1,600.00	2,600.00
	O Advertising Promotional-Maplev-Marketing	6,773.00 39,420.00			6,773.00 39,420.00	532.00 40,587.00
	O Penalties-Maple View-Administration	94.00			94.00	150.00
	O Interest-Maple View-Administration	1,434.00			1,434.00	300.00
	Interest on Commputer Loan-Maplev-Administrati	1,945.00			1,945.00	2,824.00
503200-0105-03-000-0	Bank Charges-Maple View-Administration	49,437.00			49,437.00	43,280.00
	Postage-Maple View-Administration	2,508.00			2,508.00	4,742.00
	Background Check-Maple View-Administration	2,657.00			2,657.00	3,191.00
	O Revenue Assessment-Maple View-Administration	660,323.00 20,632.00			660,323.00	632,156.00
	Bad Debt Expense-Maple View-Administration Bad Debt Mdcr-Maple View-Administration	20,386.00			20,632.00 20,386.00	17,859.00 0.00
	O Seminars-Maple View-Administration	309.00			309.00	65.00
	Control of the Contro	87,128.00			87,128.00	85,117.00
511000-0105-03-000-0	O Auto Ins-Maple View-Administration	0.00			0.00	454.00
	Crime Ins-Maple View-Administration	3,882.00			3,882.00	5,523.00
	O Auto Expense-Maple View-Administration	760.00			760.00	0.00
	O Auto Expense W/ Lease-Maple View-Administration	5,916.00			5,916.00	4,509.00
	7 Travel Expense-Maple View-Administration	1,026.00			1,026.00	864.00
	Emp Benefits-Maple View-Administration Employee Benefits Other COVID-Maple View-Administr	23,295.00 331.00			23,295.00 331.00	13,275.00 1,375.00
	O Pool RNs-Maple View-Nursing	189,568.00			189,568.00	119,028.00
	O Pool LPNs-Maple View-Nursing	177,512.00			177,512.00	144,728.00
	Pool CNA-Maple View-Nursing	251,031.00			251,031.00	146,952.00
533000-0105-10-000-0	O Outside Services-Maplev-Laundry	168,282.00			168,282.00	146,172.00
	O Strike Expense-Maplev-Administration	0.00			0.00	259,113.00
	Donations-Maple View-Administration	200.00			200.00	0.00
	Misc. Expense-Mapley-Administration -	9,707.00 0.00			9,707.00	6,358.00
	Political Contributions -Maplev-Administration Prior Period Expense-Maple View-Administration	15,085.00			0.00 15,085.00	1,250.00 2,448.00
	O Corporate Tax - State-Maplev-Administration	16,000.00			16,000.00	62,800.00
	CT PET Tax Expense-Maple View-Administration	15,270.00			15,270.00	11,471.00
Marcum 103	Chamber Dues	0.00			0.00	675.00
Marcum 202	MDS Coordinator	0.00		134,805.00	134,805.00	119,716.00
Marcum 203	Infection Control	0.00		70,110.00	70,110.00	129,278.00
Marcum 204	Property Insurance	0.00		21,803.00	21,803.00	24,106.00
Marcum 205	Real Estate Taxes	0.00		170,866.00	170,866.00	167,616.00 12,110.00
Marcum 206 Marcum 207	Staff Development Admin Equipment Rental	0.00 0.00		98,811.00 6,576.00	98,811.00 6,576.00	5,962.00
Total	Admin Equipment Nentur	0.00		0.00	0.00	0.00
	Net (Income) Loss	17,001.00		0.00	17,001.00	15,711.00

Client: Engagement: Period Ending: Trial Balance: Workpaper:

National Health Care Associates, Inc. (CT)
Medicaid - Maple View Health & Rehab
9/30/2023
A.01 - TB-CCNH
A.03 - Grouping Report
Description

Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
		9/30/2023			9/30/2023	9/30/2022
Group : [10-A]	Salaries and Wages					
Subgroup : [1] 400000-0105-01-073-0	Operators/Owners Salary-Maplev-Operator-Owner-	26,800.00		0.00	26,800.00	0.00
Subtotal [1] Operators/Owners		26,800.00		0.00	26,800.00	0.00
Subgroup : [2]	Administrators					
40000-0105-03-009-0 400050-0105-03-009-0	Salary-Maplev-Administration-Administrator- Salary - PTO-Maplev-Administration-Administrator-	184,588.00 0.00		0.00 0.00	184,588.00 0.00	184,104.00 (5,408.00)
Subtotal [2] Administrators	•	184,588.00		0.00	184,588.00	178,696.00
Subgroup : [4]	Other Administrative Salaries					
40000-0105-03-007-0 40000-0105-04-007-0	Salary-Maplev-Administration-Administrative Asst- Salary-Maplev-Fiscal Operations-Administrative A-	94,073.00 80,684.00		0.00 0.00	94,073.00 80,684.00	86,021.00 75,245.00
400000-0105-05-065-0	Salary-Maplev-Medical Records-Medical Records-	47,807.00		0.00	47,807.00	47,658.00
400000-0105-21-040-0 400050-0105-03-007-0	Salary-Maplev-Human Resources-Dir of Human Resou- Salary - PTO-Maplev-Administration-Administrativ-	63,927.00 (735.00)		0.00 0.00	63,927.00 (735.00)	55,543.00 (1,563.00)
400050-0105-04-007-0 400050-0105-21-040-0	Salary - PTO-Maplev-Fiscal Operations-Administra- Salary - PTO-Maplev-Human Resources-Dir of Human-	4,111.00 (652.00)		0.00 0.00	4,111.00 (652.00)	3,282.00 1,468.00
Subtotal [4] Other Administrative Salaries	Galary - 1 10-wapiev-riaman resources-bit of riaman-	289,215.00		0.00	289,215.00	267,654.00
Subgroup : [5A]	Head Dietitian					
40000-0105-13-035-0 400050-0105-13-035-0	Salary-Maplev-Dietary-Dietician- Salary - PTO-Maplev-Dietary-Dietician-	29,124.00 127.00		0.00 0.00	29,124.00 127.00	26,498.00 0.00
Subtotal [5A] Head Dietitian	,	29,251.00		0.00	29,251.00	26,498.00
Subgroup : [5B]	Food Service Supervisor					
40000-0105-13-101-0 400050-0105-13-101-0	Salary-Maplev-Dietary-Supervisor- Salary - PTO-Maplev-Dietary-Supervisor-	65,322.00 302.00		0.00 0.00	65,322.00 302.00	64,010.00 1,122.00
Subtotal [5B] Food Service Supervisor	calary 1.10 maples bloadly capersion	65,624.00		0.00	65,624.00	65,132.00
Subgroup : [5C]	Dietary Workers					
40000-0105-13-013-0 40000-0105-13-031-0	Salary-Maplev-Dietary-Aide- Salary-Maplev-Dietary-Cook-	356,841.00 160,117.00		0.00 0.00	356,841.00 160,117.00	351,071.00 138,950.00
400050-0105-13-013-0	Salary - PTO-Maplev-Dietary-Aide-	(3,102.00)		0.00	(3,102.00)	(148.00)
400050-0105-13-031-0 Subtotal [5C] Dietary Workers	Salary - PTO-Maplev-Dietary-Cook-	2,436.00 516,292.00		0.00	2,436.00 516,292.00	1,574.00 491,447.00
	Head Herreleann					
Subgroup : [6A] 400000-0105-09-101-0	Head Housekeeper Salary-Maplev-Housekeeping-Supervisor-	48,250.00		0.00	48,250.00	41,923.00
400050-0105-09-101-0 Subtotal [6A] Head Housekeeper	Salary - PTO-Maplev-Housekeeping-Supervisor-	(2,993.00) 45,257.00		0.00	(2,993.00) 45,257.00	3,160.00 45,083.00
	· · · · · · · · · · · · · · · · · ·	40,207100		0.00	40,207100	40,000.00
Subgroup : [6B] 400000-0105-09-048-0	Other Housekeeping Workers Salary-Maplev-Housekeeping-Housekeeper-	344,678.00		0.00	344,678.00	330,654.00
400050-0105-09-048-0 Subtotal [6B] Other Housekeeping Workers	Salary - PTO-Maplev-Housekeeping-Housekeeper-	(1,168.00) 343,510.00		0.00	(1,168.00) 343,510.00	(457.00) 330,197.00
		0.10,0.10.00		0.00	0.10,010.00	000,101.00
Subgroup : [7A] 400000-0105-08-101-0	Engineer or Chief of Maintenance Salary-Maplev-Maintenance-Supervisor-	72,115.00		0.00	72,115.00	71,894.00
400050-0105-08-101-0 Subtotal [7A] Engineer or Chief of Maintena	Salary - PTO-Maplev-Maintenance-Supervisor-	1,761.00 73,876.00		0.00	1,761.00 73,876.00	569.00 72,463.00
		75,576.00		0.00	75,076.00	72,400.00
Subgroup : [7B] 400000-0105-08-058-0	Other Maintenance Workers Salary-Maplev-Maintenance-Maintenance Worker-	88,577.00		0.00	88,577.00	84,486.00
400050-0105-08-058-0 Subtotal [7B] Other Maintenance Workers	Salary - PTO-Maplev-Maintenance-Maintenance Work-	(242.00) 88,335.00		0.00	(242.00) 88,335.00	169.00 84,655.00
		00,000.00		0.00	00,000.00	04,000.00
Subgroup : [12A] 400000-0105-14-012-0	Director of Nurses/Assistant Director Salary-Maplev-Nursing Admin-ADNS-	108,645.00		0.00	108,645.00	108,340.00
40000-0105-14-044-0 400050-0105-14-012-0	Salary-Maplev-Nursing Admin-DNS- Salary - PTO-Maplev-Nursing Admin-ADNS-	155,888.00 (4,784.00)		0.00 0.00	155,888.00 (4,784.00)	143,504.00 (1,701.00)
400050-0105-14-044-0	Salary - PTO-Maplev-Nursing Admin-DNS-	1,639.00		0.00	1,639.00	1,507.00
Subtotal [12A] Director of Nurses/Assistant	Director	261,388.00		0.00	261,388.00	251,650.00
Subgroup : [12B1] 400000-0105-15-092-0	RNs - Direct Care Salary-Maplev-Nursing-RN-	771,137.00		(303,726.00)	467,411.00	449,423.00
			RJE - 1	(303,726.00)		
400050-0105-15-092-0 Subtotal [12B1] RNs - Direct Care	Salary - PTO-Maplev-Nursing-RN-	(11,838.00) 759,299.00		(303,726.00)	(11,838.00) 455,573.00	4,484.00 453,907.00
Subgroup : [12B2]	RNs - Administrative					
400000-0105-14-028-0	Salary-Maplev-Nursing Admin-Clerical-	73,194.00		0.00	73,194.00	84,106.00
400050-0105-14-028-0 Marcum 202	Salary - PTO-Maplev-Nursing Admin-Clerical- MDS Coordinator	(7,086.00) 0.00		0.00 134,805.00	(7,086.00) 134,805.00	3,914.00 119,716.00
Marcum 203	Infection Control	0.00	RJE - 1	134,805.00 70.110.00		129.278.00
			RJE - 1	70,110.00	70,110.00	.,
Marcum 206	Staff Development	0.00	RJE - 1	98,811.00 98,811.00	98,811.00	12,110.00
Subtotal [12B2] RNs - Administrative		66,108.00		303,726.00	369,834.00	349,124.00
Subgroup : [12C1]	LPNs - Direct Care					
40000-0105-15-052-0 400050-0105-15-052-0	Salary-Maplev-Nursing-LPN- Salary - PTO-Maplev-Nursing-LPN-	1,200,369.00 (1,550.00)		0.00 0.00	1,200,369.00 (1,550.00)	1,154,300.00 (140.00)
Subtotal [12C1] LPNs - Direct Care	, · · · - · · · · · · · · · · · · ·	1,198,819.00		0.00	1,198,819.00	1,154,160.00
Subgroup : [12D]	Aides and Attendants					
400000-0105-15-021-0 400000-0105-35-021-0	Salary-Maplev-Nursing-CNA- Salary-Maplev-Nursing-CNA-	1,908,348.00 0.00		0.00 0.00	1,908,348.00 0.00	1,680,214.00 11.00
400050-0105-15-021-0	Salary - PTO-Maplev-Nursing-CNA-	7,733.00		0.00	7,733.00	(939.00)
400050-0105-35-021-0 Subtotal [12D] Aides and Attendants	Salary - PTO-Maplev-Nursing-CNA-	0.00 1,916,081.00		0.00	0.00 1,916,081.00	262.00 1,679,548.00
Subgroup : [12H]	Recreation Workers					
400000-0105-07-038-0	Salary-Maplev-Rec Therapy-Dir-	93,081.00		0.00	93,081.00	50,570.00
400000-0105-07-085-0 400000-0105-07-086-0	Salary-Maplev-Rec Therapy-Rec Asst- Salary-Maplev-Rec Therapy-Rec Therapist-	(560.00) 103,612.00		0.00 0.00	(560.00) 103,612.00	560.00 64,576.00
400050-0105-07-038-0 400050-0105-07-086-0	Salary - PTO-Maplev-Rec Therapy-Dir-	5,742.00 3.586.00		0.00	5,742.00	(1,970.00)
400050-0105-07-086-0 Subtotal [12H] Recreation Workers	Salary - PTO-Maplev-Rec Therapy-Rec Therapist-	3,586.00 205,461.00		0.00 0.00	3,586.00 205,461.00	(1,008.00) 112,728.00
Subgroup : [12M]	Social Workers/Case Management					
400000-0105-06-038-0	Salary-Maplev-Social service-Dir-	65,537.00		0.00	65,537.00	64,507.00
400000-0105-06-096-0 400050-0105-06-038-0	Salary-Maplev-Social service-Social Worker- Salary - PTO-Maplev-Social service-Dir-	63,260.00 1,190.00		0.00 0.00	63,260.00 1,190.00	17,967.00 (5,702.00)
400050-0105-06-096-0	Salary - PTO-Maplev-Social service-Social Worker-	3,071.00		0.00	3,071.00	277.00

National Health Care Associates, Inc. (CT) Medicaid - Maple View Health & Rehab

Engagement: Medicaid - Maple View I
Period Ending: 9/30/2023
Trial Balance: A.01 - TB-CCNH
Workpaper: A.03 - Grouping Report

Client:

Description ΔD.I JE Ref# RJE FINΔI 1st PP-FINAL 9/30/2023 133,058.00 9/30/2022 77,049.00 9/30/2023 133,058.00 0.00 Subtotal [12M] Social Workers/Case Management Subgroup : [120] 400000-0105-11-011-0 400000-0105-11-038-0 Other Salary-Maplev-Admissions-Admis Salary-Maplev-Admissions-Dir-12,615.00 31,545.00 96,923.00 0.00 96,923.00 97,396.00 1,044.00 400000-0105-24-139-0 Salary-Maplev-Respiratory- -0.00 0.00 3,355.00 400000-0105-24-157-0 Salary-Maplev-Respiratory- -Salary - PTO-Mapley-Admissions-Admissions Coordi-0.00 634.00 400050-0105-11-011-0 482.00 0.00 482.00 (62.00) (804.00) 0.00 0.00 0.00 0.00 400050-0105-11-038-0 Salary - PTO-Maplev-Admissions-Dir-Salary - PTO-Maplev-Respiratory- -(693.00) (693.00) (452.00) 129,301.00 5,769,292.00 Subtotal [120] Other Total [10-A] Salaries and Wages 112,682.00 6,315,644.00 112,682.00 6,315,644.00 Group : [13-B1 Professional Fees Subgroup : [2] 436200-0105-22-000-0 Dentist
Dental Fees-Maple View-Medical Services 7,116.00 **7,116.00** 0.00 7,083.00 **7,083.00** Subtotal [2] Dentis Subgroup : [3] 431010-0105-23-000-0 Pharmacy fees-Maplev-Rehab Tpy and Ancliry-12,794.00 12,794.00 0.00 12,794.00 12,794.00 Subtotal [3] Pharmacist 13.654.00 Subgroup : [5A] 437000-0105-23-000-0 Subtotal [5A] PT - Resident Care PT - Resident Care
PT Fees-Maplev-Rehab Tpy and Ancllry- -310,286.00 **310,286.00** Subgroup: [8A] 436000-0105-22-000-0 Medical Director
Medical Director Fees-Maple View-Medical Services 30,000.00 0.00 30,000.00 Subtotal [8A] Medical Director 30,000.00 Subgroup : [8C] 436300-0105-22-000-0 Subtotal [8C] Resident Care Resident Care
Physician Fees-Maplev-Medical Services-57,987.00 **57,987.00** 57,987.00 **57,987.00** 527.00 **527.00** Subgroup: [9A] 437200-0105-23-000-0 ST - Resident Care Speech Fees-Maplev-Rehab Tpy and Ancllry- -0.00 101.694.00 95,721.00 **95,721.00** Subtotal [9A] ST - Resident Care 101,694.00 101,694.00 Subgroup : [10A] 437100-0105-23-000-0 Subtotal [10A] OT - Resident Care OT - Resident Care
OT Fees-Maplev-Rehab Tpy and Ancllry-413,897.00 **413,897.00** 0.00 413,897.00 413,897.00 Subgroup : [11A1] RN's - Direct Care 530000-0105-15-000-0 Pool RNs-Maple View-Nursing 189,568.00 189,568.00 0.00 189,568.00 189,568.00 119,028.00 119,028.00 Subtotal [11A1] RN's - Direct Care Subgroup : [11B1] 531000-0105-15-000-0 Subtotal [11B1] LPN's - Direct Care LPN's - Direct Care
Pool LPNs-Maple View-Nursing 144,728.00 0.00 177.512.00 177.512.00 144,728,00 Subgroup : [11C] 532000-0105-15-000-0 Subtotal [11C] Aides 146,952.00 146,952.00 Pool CNA-Maple View-Nursing 251,031.00 **251,031.00** 0.00 251,031.00 **Subgroup : [12]** 431000-0105-15-000-0 431000-0105-22-000-0 Consulting Fees-Maple View-Nursing 13,454.00 0.00 13,454.00 8,412.00 Consulting Fees-Maple View-Medical Services
Consulting Fees-Maple View-Respiratory 0.00 0.00 0.00 58.702.00 431000-0105-24-000-0 110.00 0.00 **67.114.00** Subtotal [12] Other Total [13-B] Professional Fees 0.00 1,565,449.00 1,226,328.00 1,565,449.00 Group : [15] **Expenditures Other than Salaries** Subgroup: [1A1] 401400-0105-29-000-0 Workmen's Compensation
Workers Compensation-Maplev-Emp Benefits-210.194.00 0.00 210.194.00 208.154.00 401450-0105-29-000-0 Workers Comp Retro Exp-Maplev-Emp Benefits-0.00 **210,194.00** 32,364.00 **240,518.00** 0.00 **210,194.00** Subtotal [1A1] Workmen's Compensation Subgroup : [1A3] 401100-0105-29-000-0 401200-0105-29-000-0 Unemployment Insurance FUI-Maplev-Emp Benefits-SUI-Maplev-Emp Benefits-9,313.00 0.00 9,313.00 5,896.00 35,192.00 44,505.00 0.00 35,192.00 **44,505.00** 35,437.00 **41,333.00** Subtotal [1A3] Unemployment Insurance Subgroup : [1A4] 401000-0105-29-000-0 Subtotal [1A4] Social Security (FICA) Social Security (FICA) FICA-Maplev-Emp Benefits-466,181.00 466,181.00 431,157.00 431,157.00 0.00 Subgroup : [1A5] **Health Insurance** 401300-0105-29-000-0 Health Ins-Maplev-Emp Benefits- -968,816.00 968,816.00 0.00 968,816.00 968,816.00 Subtotal [1A5] Health Insurance 627,743.00 Subgroup : [1A7] 401700-0105-29-000-0 Subtotal [1A7] Pensions Pension-Maplev-Emp Benefits- -377,509.00 377,509.00 0.00 377,509.00 377,509.00 136,359.00 136,359.00 Subgroup : [1A9] Other Union Training and Upgrading-Maplev-Emp Benefi-Background Check-Maple View-Administration Employee Benefits Other COVID-Maple View-Administr 27.366.00 401830-0105-29-000-0 505000-0105-03-000-0 0.00 27.366.00 23 655 00 2 657 00 0.00 2 657 00 3,191.00 523019-0105-03-000-0 Subtotal [1A9] Other 331.00 30,354.00 0.00 331.00 30,354.00 28,221.00 Subgroup : [1C] 508000-0105-03-000-0 **Bad Debts** Bad Debt Expense-Maple View-Administration 20.632.00 0.00 20.632.00 17.859.00 Bad Debt Mdcr-Maple View-Administration 508010-0105-03-000-0 20.386.00 0.00 20.386.00 0.00 17,859.00 Subtotal [1C] Bad Debts 41,018.00 0.00 41,018.00 Subgroup: [1D] 432000-0105-03-000-0 Subtotal [1D] Accounting and Auditing Accounting and Auditing
Accounting Fees-Maple View-Administration 33,560.00 33,560.00 0.00 33,560.00 33,560.00 39,570.00 **39,570.00** Subgroup : [1E] Legal Fees-Maple View-Administration
Legal Fees - Labor-Maple View-Administration
Legal Fees - Collections-Maple View-Administration
Legal Fees - Non-reimbursable-Maple View-Admin 433000-0105-03-000-0 433100-0105-03-000-0 115.00 0.00 115.00 0.00 0.00 0.00 0.00 0.00 42,606.00 27,002.00 2,617.00 **72,225.00** 9,186.00 13,427.00 9,186.00 13,427.00 433200-0105-03-000-0 433200-0105-03-000-0 433300-0105-03-000-0 Subtotal [1E] Legal 2,463.00 **25,191.00** 2,463.00 **25,191.00** Subgroup : [1G] Office Supplies

Client: Engagement: Period Ending: Trial Balance: Workpaper: National Health Care Associates, Inc. (CT) Medicald - Maple View Health & Rehab 9/30/2023 A.01 - TB-CCNH A.03 - Grouping Report

Workpaper:	A.01 - TB-CCNH A.03 - Grouping Report					
Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
410000-0105-03-000-0	Supplies-Maple View-Administration	9/30/2023 1,737.00		0.00	9/30/2023 1,737.00	9/30/2022 0.00
410000-0105-04-000-0 410019-0105-04-000-0	Supplies-Maple View-Fiscal Operations Supplies COVID-Maple View-Fiscal Operations	23,511.00 1,426.00		0.00 0.00	23,511.00 1,426.00	26,484.00 1,917.00
420000-0105-04-000-0	Minor Equip-Maple View-Fiscal Operations	446.00		0.00	446.00	58.00
Marcum 207	Admin Equipment Rental	0.00	RJE - 4	6,576.00 6,576.00	6,576.00	5,962.00
Subtotal [1G] Office Supplies		27,120.00		6,576.00	33,696.00	34,421.00
Subgroup : [1H1] 461000-0105-03-000-0	Telephone and Telegraph Telephone-Maple View-Administration	24,797.00		0.00	24,797.00	29,372.00
Subtotal [1H1] Telephone and Telegraph	тобрионе-марю чем-жаниначаноп	24,797.00		0.00	24,797.00	29,372.00
Subgroup : [1H2]	Cellular Phones and Beepers					
461100-0105-03-000-0 Subtotal [1H2] Cellular Phones and Beepers	Telephone - Cell-Maple View-Administration	4,203.00 4,203.00		0.00	4,203.00 4,203.00	3,879.00 3,879.00
Subgroup : [1J]	Corporation Business Taxes					
542000-0105-03-000-0	Corporate Tax - State-Maplev-Administration	16,000.00		0.00	16,000.00	62,800.00
Subtotal [1J] Corporation Business Taxes		16,000.00		0.00	16,000.00	62,800.00
Subgroup : [1K1] 391900-0105-00-000-0	Other Taxes - Income Long- Term CT PET Tax Income-Maplev	50,186.00		0.00	50,186.00	(4,542.00)
542900-0105-03-000-0 Subtotal [1K1] Other Taxes - Income	CT PET Tax Expense-Maple View-Administration	15,270.00 65,456.00		0.00	15,270.00 65,456.00	11,471.00 6,929.00
Subgroup : [1K3]	Resident Day User Fee					
507000-0105-03-000-0	Revenue Assessment-Maple View-Administration	660,323.00		0.00	660,323.00	632,156.00
Subtotal [1K3] Resident Day User Fee Total [15] Expenditures Other than Salaries		2,995,227.00		0.00 6,576.00	660,323.00 3,001,803.00	632,156.00 2,404,542.00
Group : [16]	Expenditures Other than Salaries (cont'd) - Admin. and Gener.	al				
Subgroup : [3] 523000-0105-03-000-0	Gifts to Staff and Residents Emp Benefits-Maple View-Administration	23,295.00		0.00	23,295.00	13,275.00
Subtotal [3] Gifts to Staff and Residents	Emp benefits-wapie view-Administration	23,295.00		0.00	23,295.00	13,275.00
Subgroup : [4]	Employee Travel					
521000-0105-03-000-0 Subtotal [4] Employee Travel	Travel Expense-Maple View-Administration	1,026.00 1,026.00		0.00	1,026.00 1,026.00	864.00 864.00
Subgroup : [5]	Education Expense				<u> </u>	
509000-0105-03-000-0 Subtotal [5] Education Expense	Seminars-Maple View-Administration	309.00		0.00	309.00	65.00
		309.00		0.00	309.00	65.00
Subgroup : [6] 520000-0105-03-000-0	Automobile Expense Auto Expense-Maple View-Administration	760.00		0.00	760.00	0.00
520006-0105-03-000-0 Subtotal [6] Automobile Expense	Auto Expense W/ Lease-Maple View-Administration	5,916.00 6,676.00		0.00	5,916.00 6,676.00	4,509.00 4,509.00
	Advertising Help Wented	5,0.0.00		0.00	5,5.5.55	4,000.00
Subgroup : [M1] 501000-0105-03-000-0	Advertising Help Wanted Advertising Employment-Maple View-Administration	1,600.00		0.00	1,600.00	2,600.00
Subtotal [M1] Advertising Help Wanted		1,600.00		0.00	1,600.00	2,600.00
Subgroup : [M3] 410000-0105-18-000-0	Advertising Other Supplies-Maple View-Marketing	11,194.00		0.00	11,194.00	3,456.00
410019-0105-18-000-0	Supplies COVID-Maple View-Marketing	289.00 6,773.00		0.00	289.00	425.00 532.00
501100-0105-03-000-0 501100-0105-18-000-0	Advertising Promotional-Maple View-Administration Advertising Promotional-Maplev-Marketing	39,420.00		0.00 0.00	6,773.00 39,420.00	40,587.00
Subtotal [M3] Advertising Other		57,676.00		0.00	57,676.00	45,000.00
Subgroup : [M7] 504000-0105-03-000-0	Postage Postage-Maple View-Administration	2,508.00		0.00	2,508.00	4,742.00
Subtotal [M7] Postage		2,508.00		0.00	2,508.00	4,742.00
Subgroup : [M8]	Dues and Membership Fees to Professional Associations	40.440.00		(4.500.00)		
491000-0105-03-000-0	Dues-Maple View-Administration	10,440.00	RJE - 2	(1,592.00) (1,592.00)	8,848.00	9,646.00
Subtotal [M8] Dues and Membership Fees to	Professional Associations	10,440.00		(1,592.00)	8,848.00	9,646.00
Subgroup : [M8A] Marcum 103	Dues to Chamber of Commerce Chamber Dues	0.00		0.00	0.00	675.00
Subtotal [M8A] Dues to Chamber of Commer		0.00		0.00	0.00	675.00
Subgroup : [M9]	Subscriptions					
491001-0105-03-000-0	Subscriptions-Maple View-Administration	8,261.00	RJE - 2	350.00 350.00	8,611.00	6,846.00
Subtotal [M9] Subscriptions		8,261.00		350.00	8,611.00	6,846.00
Subgroup : [M10] 540000-0105-03-000-0	Contributions Donations-Maple View-Administration	200.00		0.00	200.00	0.00
541001-0105-03-000-0	Political Contributions -Maplev-Administration	0.00		0.00	0.00	1,250.00 1,250.00
Subtotal [M10] Contributions		200.00		0.00	200.00	1,250.00
Subgroup : [M11] 431000-0105-03-000-0	Services Provided by Contract Consulting Fees-Maple View-Administration	219.00		0.00	219.00	10,838.00
431000-0105-04-000-0	Consulting Fees-Maple View-Fiscal Operations	4,137.00	RJE - 3	(4,137.00) (4,137.00)	0.00	0.00
435200-0105-03-000-0 440000-0105-02-000-0	IT ServicesAdministration-Maple View-Administratio Purch Services-Maple View-Admin Staff	81,804.00 0.00		0.00 0.00	81,804.00 0.00	78,141.00 15.600.00
440000-0105-03-000-0	Purch Services-Maple View-Administration	160.00		0.00	160.00	235.00
440000-0105-04-000-0 440000-0105-12-000-0	Purch Services-Maple View-Fiscal Operations Purch Services-Maple View-Security	34,044.00 1,122.00		0.00 0.00	34,044.00 1,122.00	37,543.00 982.00
Subtotal [M11] Services Provided by Contrac	et	121,486.00		(4,137.00)	117,349.00	143,339.00
Subgroup : [M12] 434000-0105-03-000-0	Administrative Management Services Shared Services-Maple View-Administration	674,673.00		4,137.00	678,810.00	603,050.00
Subtotal [M12] Administrative Management S		674,673.00	RJE - 3	4,137.00 4,137.00	678,810.00	603,050.00
		014,013.00		4,137.00	070,010.00	003,030.00
Subgroup : [M13] 500000-0105-03-000-0	Other Licenses and Permits-Maple View-Administration	1,598.00		1,242.00	2,840.00	2,917.00
503000-0105-03-000-0	Penalties-Maple View-Administration	94.00	RJE - 2	1,242.00 0.00	94.00	150.00
503200-0105-03-000-0 535000-0105-03-000-0	Bank Charges-Maple View-Administration Strike Expense-Maplev-Administration	49,437.00 0.00		0.00 0.00	49,437.00 0.00	43,280.00 259,113.00
541000-0105-03-000-0	Misc. Expense-Maplev-Administration	9,707.00		0.00	9,707.00	6,358.00
541050-0105-03-000-0 Subtotal [M13] Other	Prior Period Expense-Maple View-Administration	15,085.00 75,921.00		0.00 1,242.00	15,085.00 77,163.00	2,448.00 314,266.00

Client: National Health Care Associates, Inc. (CT)
Engagement: Medicaid - Maple View Health & Rehab

Engagement: Medicaid - Maple View.
Period Ending: 9/30/2023
Trial Balance: A.01 - TB-CCNH
Workpaper: A.03 - Grouping Report

A.03 - Grouping Report Description ΔD.I JE Ref# RJE FINΔI 1st PP-FINAL 9/30/2023 984,071.00 9/30/2023 984,071.00 9/30/2022 1,150,127.00 0.00 Total [16] Expenditures Other than Salaries (cont'd) - Admin, and General Group : [18] Subgroup : [2A1] 412000-0105-13-000-0 412100-0105-13-000-0 Raw Food Food-Maple View-Dietary Food Supplements-Maple View-Dietary 346.901.00 0.00 346.901.00 292.940.00 0.00 38,653.00 385,554.00 34,038.00 326,978.00 38,653.00 385,554.00 Subtotal [2A1] Raw Food Subgroup : [2A2] 410000-0105-13-000-0 410019-0105-13-000-0 Subtotal [2A2] Non-Food Supplies Non-Food Supplies Supplies-Maple View-Dietary Supplies COVID-Maple View-Dietary 25,051.00 540.00 **39,594.00** 0.00 540.00 **39,594.00** 0.00 **25,051.00** Purchased Services
Purch Services-Maple View-Dietary Subgroup : [2B] 440000-0105-13-000-0 8,397.00 8,397.00 20 070 00 Subtotal [2B] Purchased Services
Total [18] Dietary Basis for Allocation of Costs 433,545.00 433,545.00 372,099.00 Group: [19] Laundry-Basis for Allocation of Costs Subgroup : [3B] 440000-0105-10-000-0 533000-0105-10-000-0 Subtotal [3B] Purchased Services Purchased Services
Purch Services-Maple View-Laundry
Outside Services-Maplev-Laundry-558 00 0.00 558.00 0.00 168,282.00 168,840.00 168,282.00 168,840.00 146,172.00 146,172.00 Subgroup : [3C] Supplies-Maple View-Laundry 410000-0105-10-000-0 414000-0105-10-000-0 1,470.00 685.00 0.00 685.00 Diapers-Maple View-Laundry Linen-Maple View-Laundry 45.506.00 0.00 45.506.00 52.834.00 1,135.00 47,326.00 216,166.00 19.00 54,323.00 200,495.00 414100-0105-10-000-0 1.135.00 Subtotal [3C] Other
Total [19] Laundry-Basis for Allocation of Costs 0.00 47,326.00 216,166.00 Housekeeping and Resident Care Basis for Allocation of Costs Group: [20] Subgroup : [4A1] 410000-0105-09-000-0 410019-0105-09-000-0 Subtotal [4A1] In-House Care Supplies In-House Care Supplies
Supplies-Maple View-Housekeeping
Supplies COVID-Maple View-Housel 41,943.00 0.00 41.943.00 32.001.00 1,192.00 **43,135.00** 1,192.00 **43,135.00** 2,810.00 **34,811.00** Own Pharmacy
Flu Vaccine-Maplev-Medical Services- Drugs Medicare Pt A-Maple View-Rehab Tpy and Ancl Subgroup : [5A1] 411010-0105-22-000-0 12.506.00 0.00 12.506.00 4.920.00 411200-0105-23-000-0 344,113.00 356,619.00 0.00 344,113.00 356.619.00 341,114.00 346,034.00 Subtotal [5A1] Own Pharmacy Subgroup : [5B] 411700-0105-22-000-0 Subtotal [5B] Medicine Cabinet Drugs Medicine Cabinet Drugs House Drugs (OTC)-Maplev-Medical Services-10,338.00 10,338.00 Subgroup : [5C] Medical and Therapeutic Supplies 410000-0105-15-000-0 Supplies-Maple View-Nursing 100,541.00 100,541.00 0.00 100,541.00 100,541.00 68,727.00 **68,727.00** Subtotal [5C] Medical and Thera Subgroup : [5D] 440010-0105-15-000-0 Subtotal [5D] Ambulance/Limo Ambulance/Limousine
Purch Services Ambulance-Maple View-Nursing 11,638.00 **11,638.00** 0.00 9,984.00 **9,984.00** 9,984.00 **9,984.00** Subgroup : [5E2] Oxygen - Other Oxygen Non Billable-Maple View-Rehab Tpy and Ancll Equip Rental-Maple View-Respiratory 413001-0105-23-000-0 452000-0105-24-000-0 3.802.00 0.00 3.802.00 2.482.00 0.00 11,818.00 14,300.00 14.344.00 Subtotal [5E2] Oxygen - Other 18,146.00 18,146.00 Subgroup : [5F] 438020-0105-27-000-0 X-Rays and related radiological X-Maple View-Laboratory 23,478.00 0.00 23,478.00 13,296.00 Subtotal [5F] X-Rays and related radiological 23,478.00 0.00 23,478.00 13,296.00 Subgroup : [5H] 438010-0105-27-000-0 438030-0105-27-000-0 Subtotal [5H] Laboratory Laboratory Radiology Fees-Maple View-Laboratory Lab Fees-Maple View-Laboratory 0.00 195.00 29,090.00 **29,090.00** 29,090.00 **29,090.00** 25,421.00 **25,616.00** 0.00 Subgroup : [5I] 410000-0105-07-000-0 Recreation Supplies-Maple View-Rec Therapy
Purch Services-Maple View-Rec Therapy 7.377.00 0.00 7.377.00 525.00 11,185.00 18,562.00 0.00 440000-0105-07-000-0 2,159.00 2,684.00 18,562.00 Subtotal [5I] Recreation Subgroup : [5L] 440050-0105-07-000-0 Subtotal [5L] Cable Television Cable Television
Cable Expense-Maple View-Rec Therapy 15,711.00 15,711.00 0.00 17,001.00 17,001.00 17,001.00 Subgroup: [5M] 410000-0105-23-000-0 410019-0105-15-000-0 413500-0105-23-000-0 420000-0105-15-000-0 Other Other
Supplies-Maple View-Rehab Tpy and Ancliry
Supplies COVID-Maple View-Nursing
IV Thy Supplies-Maple View-Rehab Tpy and Ancliry
Minor Equip-Maple View-Nursing
Podiatrist Fees-Maplev-Medical Services -0.00 0.00 0.00 0.00 177.00 177.00 0.00 21,400.00 7,913.00 3,039.00 21,400.00 7,913.00 3,039.00 70,241.00 3,315.00 4,027.00 436100-0105-22-000-0 26.00 0.00 26.00 0.00 Purch Services-Maple View-Nursing Equip Rental-Maple View-Nursing Equip Rental-Maple View-Rehab Tpy and Ancllry 440000-0105-15-000-0 2 647 00 0.00 2 647 00 0.00 452000-0105-15-000-0 3 572 00 0.00 3 572 00 4 212 00 4,212.00 10,166.00 91,961.00 637,907.00 452000-0105-23-000-0 10,154.00 0,154.00 Subtotal [20] Housekeeping and Resident Care Basis for Allocation of Costs 48,928.00 675,822.00 48,928.00 675,822.00 Maintenance and Property Group: [22] Sloup : [22] Subgroup : [6B] 463000-0105-25-000-0 465000-0105-25-000-0 Subtotal [6B] Heat Heat Gas-Maple View-Property 37 790 00 0.00 37 790 00 42 305 00 Oil-Maple View-Property 1,041.00 **43,346.00** 3,557.00 **41,347.00** 3,557.00 **41,347.00** Subgroup : [6C] Light & Power Electric-Maple View-Property 462000-0105-25-000-0 83,248.00 83,248.00 0.00 83,248.00 83,248.00 83,557.00 83,557.00 Subtotal [6C] Light & Power Subgroup : [6D] 466000-0105-25-000-0 Subtotal [6D] Water Water-Maple View-Property 24,044.00 24,044.00 34,606.00 34,606.00 0.00 Subgroup : [6E] 435210-0105-03-000-0 **Equipment Lease** IT Rental-Maple View-Administration 47.298.00 (6.576.00) 40.722.00 41.750.00 RJE - 4 (6,576.00)

National Health Care Associates, Inc. (CT) Medicald - Maple View Health & Rehab 9/30/2023 A.01 - TB-CCNH A.03 - Grouping Report Client: Engagement: Period Ending: Trial Balance: Workpaper:

Workpaper:	A.01 - TB-CCNH A.03 - Grouping Report					
Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
7,000am	2000.151.011	9/30/2023			9/30/2023	9/30/2022
452000-0105-04-000-0	Equip Rental-Maple View-Fiscal Operations	11,467.00		0.00	11,467.00	8,435.00
Subtotal [6E] Equipment Lease		58,765.00		(6,576.00)	52,189.00	50,185.00
Subgroup : [6F]	Other					
410000-0105-08-000-0 410019-0105-08-000-0	Supplies-Maple View-Maintenance Supplies COVID-Maple View-Maintenance	23,590.00 136.00		0.00	23,590.00 136.00	27,871.00 57.00
420000-0105-08-000-0	Minor Equip-Maple View-Maintenance	431.00		0.00 0.00	431.00	1,714.00
440000-0105-08-000-0	Purch Services-Maple View-Maintenance	84,619.00		0.00	84,619.00	61,000.00
440001-0105-08-000-0	Ground Services-Maple View-Maintenance	10,418.00		0.00	10,418.00	11,455.00
442000-0105-08-000-0 443000-0105-08-000-0	Pest Control-Maplev-Maintenance - Carting-Maple View-Maintenance	3,664.00 31,972.00		0.00 0.00	3,664.00 31,972.00	3,635.00 29,802.00
450000-0105-08-000-0	Rental Expenses-Maple View-Maintenance	1,235.00		0.00	1,235.00	1,140.00
Subtotal [6F] Other		156,065.00		0.00	156,065.00	136,674.00
Subgroup : [7D]	Movable Equipment					
486000-0105-25-000-0	Depr Exp MME-Maple View	51,428.00		(9,633.00)	41,795.00	47,417.00
Subtotal [7D] Movable Equipment		51,428.00	RJE - 6	(9,633.00) (9,633.00)	41,795.00	47,417.00
Cubicital [75] movable Equipment		01,420.00		(3,000.00)	41,730.00	47,417.00
Subgroup : [8C]	Leasehold Improvements					
484000-0105-25-000-0	Depe Exp LHI-Maple View	80,393.00	RJE - 6	9,633.00 9,633.00	90,026.00	78,787.00
Subtotal [8C] Leasehold Improvements		80,393.00		9,633.00	90,026.00	78,787.00
Cubaraua - [0]	Pontal Paymenta					
Subgroup : [9] 471000-0105-25-000-0	Rental Payments Rent-Maple View-Property	1,026,000.00		(192,669.00)	833,331.00	360,270.00
	,		RJE - 5	(192,669.00)		
Subtotal [9] Rental Payments		1,026,000.00		(192,669.00)	833,331.00	360,270.00
Subgroup : [10B]	Real estate taxes paid by lessor					
Marcum 205	Real Estate Taxes	0.00		170,866.00	170,866.00	167,616.00
Subtatal (40P) Paul actata tayan naid by lange		0.00	RJE - 5	170,866.00	470 966 00	467 646 00
Subtotal [10B] Real estate taxes paid by less	UI .	0.00	•	170,866.00	170,866.00	167,616.00
Subgroup : [10C]	Personal property taxes					
472000-0105-25-000-0 Subtotal [10C] Personal property taxes	Personal Property Taxes-Maple View-Property	12,207.00 12,207.00		0.00	12,207.00 12,207.00	11,049.00 11,049.00
Total [22] Maintenance and Property		1,533,497.00		(28,379.00)	1,505,118.00	1,013,507.00
			:			
Group : [27] Subgroup : [12D]	Interest and Insurance Other Interest Expense					
503100-0105-03-000-0	Interest-Maple View-Administration	1,434.00		0.00	1,434.00	300.00
503130-0105-03-000-0	Interest on Commputer Loan-Maplev-Administrati	1,945.00		0.00	1,945.00	2,824.00
Subtotal [12D] Other Interest Expense		3,379.00		0.00	3,379.00	3,124.00
Subgroup : [14A]	Insurance on Property					
Marcum 204	Property Insurance	0.00		21,803.00	21,803.00	24,106.00
Subtatal (44A) Incurance on Branastu		0.00	RJE - 5	21,803.00	24 902 00	24 406 00
Subtotal [14A] Insurance on Property		0.00		21,803.00	21,803.00	24,106.00
Subgroup : [14B]	Insurance of Automobiles					
511000-0105-03-000-0	Auto Ins-Maple View-Administration	0.00		0.00	0.00	454.00
Subtotal [14B] Insurance of Automobiles		0.00		0.00	0.00	454.00
Subgroup : [14C3]	Other					
510000-0105-03-000-0 513000-0105-03-000-0	Liability Ins-Maple View-Administration	87,128.00 3,882.00		0.00	87,128.00 3,882.00	85,117.00 5,523.00
Subtotal [14C3] Other	Crime Ins-Maple View-Administration	91,010.00	-	0.00	91,010.00	90,640.00
Total [27] Interest and Insurance		94,389.00		21,803.00	116,192.00	118,324.00
Croup : [20]	Statement of Bayenia					
Group : [30] Subgroup : [1A]	Statement of Revenue Medicaid Residents (CT only)					
311000-0105-00-000-0	Medicaid Room & Board-Maple View	(11,681,299.00)		0.00	(11,681,299.00)	(10,220,812.00)
Subtotal [1A] Medicaid Residents (CT only)		(11,681,299.00)		0.00	(11,681,299.00)	(10,220,812.00)
Subgroup : [1B]	Medicaid room and board contractual allowance					
311005-0105-00-000-0	Medicaid Room & Board Contra-Maple View	4,179,559.00		0.00	4,179,559.00	3,968,204.00
313005-0105-00-000-0 Subtotal [1B] Medicaid room and board cont	Medicaid Contra Other-Maple View	0.00		0.00	0.00	3,968,360.00
Subtotal [16] Medicald room and board cont	ractual allowance	4,179,559.00	-	0.00	4,179,559.00	3,960,360.00
Subgroup : [3A]	Medicare Residents (All inclusive)					
321000-0105-00-000-0 329000-0105-00-000-0	Medicare Pt A Room & Board-Maple View	(1,708,408.00) (12,398.00)		0.00 0.00	(1,708,408.00) (12,398.00)	(1,949,455.00) 0.00
Subtotal [3A] Medicare Residents (All inclus	Medicare Pt A Settlement-Maple View ive)	(1,720,806.00)	-	0.00	(1,720,806.00)	(1,949,455.00)
	,		•			
Subgroup : [3B]	Medicare room and board contractual allowance	1,329,875.00		0.00	1,329,875.00	1,539,315.00
321005-0105-00-000-0 323005-0105-00-000-0	Medicare Pt A R and B Contra-Maple View Medicare Pt A Contra Other-Maple View	36,754.00		0.00	36,754.00	31,646.00
328000-0105-00-000-0	Medicare Pt A Sequestration-Maple View	44,531.00		0.00	44,531.00	20,277.00
Subtotal [3B] Medicare room and board cont	ractual allowance	1,411,160.00	· =	0.00	1,411,160.00	1,591,238.00
Subgroup : [4A]	Private-pay residents and other					
303100-0105-00-000-0	Hospice Revenue-Maple View	(397,055.00)		0.00	(397,055.00)	(976,320.00)
341000-0105-00-000-0 351000-0105-00-000-0	Private Room & Board-Maple View Comm Ins Room & Board-Maple View	(2,459,999.00) (97,870.00)		0.00 0.00	(2,459,999.00) (97,870.00)	(2,294,887.00) (193,180.00)
371000-0105-00-000-0	Mgd Medicare Room and Board-Maple View	(1,814,847.00)		0.00	(1,814,847.00)	(1,409,039.00)
Subtotal [4A] Private-pay residents and othe	r	(4,769,771.00)		0.00	(4,769,771.00)	(4,873,426.00)
Subgroup : [4B]	Private-pay room and board contractual allowance					
303700-0105-00-000-0	Hospice C/A-Maple View	142,679.00		0.00	142,679.00	380,418.00
341005-0105-00-000-0	Private Room & Board Contra-Maple View	48,572.00		0.00	48,572.00	78,803.00
351005-0105-00-000-0 353005-0105-00-000-0	Comm Ins Room & Board Contra-Maple View Comm Ins Contra Other-Maple View	3,868.00 4,558.00		0.00 0.00	3,868.00 4,558.00	(9,951.00) 3,552.00
371005-0105-00-000-0	Mgd Medicare Room & Board Contra-Maple View	410,360.00		0.00	410,360.00	266,765.00
373005-0105-00-000-0	Mgd Medicare Contra Other-Maple View	46,213.00		0.00	46,213.00	30,402.00
Subtotal [4B] Private-pay room and board co	ontractual allowance	656,250.00		0.00	656,250.00	749,989.00
Subgroup : [5A]	Prescription Drugs - Medicare					
324100-0105-00-000-0	Medicare Pt A Pharmacy-Maple View	(306,898.00)		0.00	(306,898.00)	(297,303.00)
Subtotal [5A] Prescription Drugs - Medicare		(306,898.00)		0.00	(306,898.00)	(297,303.00)
Subgroup : [5B]	Prescription Drugs - Medicare Contractual Allowance					
324105-0105-00-000-0 Subtotal [5B] Prescription Drugs - Medicare	Medicare Pt A Pharmacy Contra-Maple View	324,512.00		0.00	324,512.00	325,751.00 325,751.00
ouprotai [ob] r rescription brugs - medicare	Contracted Allowalice	324,512.00		0.00	324,512.00	325,751.00
Subgroup : [5C]	Prescription Drugs - Non-medicare	,			,,,	/4m
314100-0105-00-000-0	Medicaid Pharmacy-Maple View	(41,962.00)		0.00	(41,962.00)	(47,850.00)

Client: Engagement: Period Ending: Trial Balance: Workpaper: National Health Care Associates, Inc. (CT) Medicaid - Maple View Health & Rehab 9/30/2023 A.01 - TB-CCNH A.03 - Grouping Report

Workpaper:	A.03 - Grouping Report					
Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
Account	Description		JE Kei #	NJE		
	B B	9/30/2023			9/30/2023	9/30/2022
344100-0105-00-000-0	Private Pharmacy-Maple View	(1,054.00)		0.00	(1,054.00)	(1,708.00)
354100-0105-00-000-0	Comm Ins Pharmacy-Maple View	(9,016.00)		0.00	(9,016.00)	(29,599.00)
374100-0105-00-000-0	Mgd Medicare Pharmacy-Maple View	(279,649.00)		0.00	(279,649.00)	(239,618.00)
375700-0105-00-000-0	Mgd Medicare Flu/Pneumonia-Maple View	(2,990.00)		0.00	(2,990.00)	(2,485.00)
Subtotal [5C] Prescription Drugs - Non-medi	care	(334,671.00)		0.00	(334,671.00)	(321,260.00)
Subgroup : [5D]	Prescription Drugs - Non-medicare Contractual Allowance					
314105-0105-00-000-0	Medicaid Pharmacy Contra-Maple View	41,962.00		0.00	41,962.00	47,850.00
354105-0105-00-000-0	Comm Ins Pharmacy Contra-Maple View	26,012.00		0.00	26,012.00	29,599.00
374105-0105-00-000-0	Mgd Medicare Pharmacy Contra-Maple View	284,172.00		0.00	284,172.00	253,256.00
Subtotal [5D] Prescription Drugs - Non-medi	care Contractual Allowance	352,146.00		0.00	352,146.00	330,705.00
						
Subgroup : [7A]	Physical Therapy - Medicare					
324300-0105-00-000-0	Medicare Pt A PT-Maple View	(276,713.00)		0.00	(276,713.00)	(237,665.00)
334300-0105-00-000-0	Medicare Pt B PT-Maple View	(146,080.00)		0.00	(146,080.00)	(38.459.00)
Subtotal [7A] Physical Therapy - Medicare	Wedicare 1 t B 1 1-Wapie view	(422,793.00)		0.00	(422,793.00)	(276,124.00)
oubtotal [7A] i flysical Therapy - medicare		(422,730.00)		0.00	(422,730.00)	(270,124.00)
Subgroup : [7B]	Physical Therapy - Medicare Contractual Allowance					
321006-0105-00-000-0	Medicare A PT Contra-Maple View	(348,434.00)		0.00	(348,434.00)	(396,986.00)
324305-0105-00-000-0	Medicare Pt A PT Contra-Maple View	276,713.00		0.00	276,713.00	237,665.00
334305-0105-00-000-0	Medicare Pt B PT Contra-Maple View	85,896.00		0.00	85,896.00	11,519.00
Subtotal [7B] Physical Therapy - Medicare C		14,175.00		0.00	14,175.00	(147,802.00)
Subtotal [/ b] Filysical Therapy - Medicale C	ond actual Allowance	14,175.00		0.00	14,175.00	(147,802.00)
Subaraun - [7C]	Physical Therapy - Non-medicare					
Subgroup : [7C] 304100-0105-00-000-0		(2,226.00)		0.00	(2,226.00)	(250.00)
304300-0105-00-000-0	Hospice Pharmacy-Maple View Hospice PT-Maple View	(27.00)		0.00	(27.00)	0.00
314300-0105-00-000-0	Medicaid PT-Maple View	(57,096.00)		0.00	(57,096.00)	(30,205.00)
337300-0105-00-000-0	Mgd Medicare Pt B PT-Maple View	(4,740.00)		0.00	(4,740.00)	(912.00)
337305-0105-00-000-0	Mgd Medicare Pt B PT Contra-Maple View	2,553.00		0.00	2,553.00	4,247.00
344300-0105-00-000-0	Private PT-Maple View	0.00		0.00	0.00	(1,631.00)
354300-0105-00-000-0	Comm Ins PT-Maple View	(24,454.00)		0.00	(24,454.00)	(29,491.00)
374300-0105-00-000-0	Mgd Medicare PT-Maple View	(397,688.00)		0.00	(397,688.00)	(200,385.00)
378100-0105-00-000-0	Medicare Mgd Care Pt B PT-Maple View	(117,780.00)		0.00	(117,780.00)	(44,827.00)
Subtotal [7C] Physical Therapy - Non-medic	are	(601,458.00)		0.00	(601,458.00)	(303,454.00)
Subgroup : [7D]	Physical Therapy - Non-medicare Contractual Allowance					
304105-0105-00-000-0	Hospice Pharmacy Contra-Maple View	2,226.00		0.00	2,226.00	250.00
304305-0105-00-000-0	Hospice PT Contra-Maple View	27.00		0.00	27.00	0.00
314305-0105-00-000-0	Medicaid PT Contra-Maple View	57,096.00		0.00	57,096.00	30,205.00
354305-0105-00-000-0	Comm Ins PT Contra-Maple View	24,454.00		0.00	24,454.00	29,491.00
371006-0105-00-000-0	Mgd Medicare PT Contra-Maple View	(59,731.00)		0.00	(59,731.00)	(28,247.00)
374305-0105-00-000-0	Mgd Medicare PT Contra-Maple View	397,613.00		0.00	397,613.00	200,927.00
378105-0105-00-000-0	Medicare Mgd Pt B PT Contra-Maple View	51,450.00		0.00	51,450.00	12,212.00
Subtotal [7D] Physical Therapy - Non-medic		473,135.00		0.00	473,135.00	244,838.00
Subgroup : [8A]	Speech Therapy - Medicare					
324400-0105-00-000-0	Medicare Pt A ST-Maple View	(159,152.00)		0.00	(159,152.00)	(142,264.00)
334400-0105-00-000-0	Medicare Pt B ST-Maple View	(35,265,00)		0.00	(35,265.00)	(13,354.00)
Subtotal [8A] Speech Therapy - Medicare	'	(194,417.00)		0.00	(194,417.00)	(155,618.00)
Subgroup : [8B]	Speech Therapy - Medicare Contractual Allowance					
321008-0105-00-000-0	Medicare A ST Contra-Maple View	(188,279.00)		0.00	(188,279.00)	(223,469.00)
324405-0105-00-000-0	Medicare Pt A ST Contra-Maple View	159,152.00		0.00	159,152.00	142,264.00
334405-0105-00-000-0	Medicare Pt B ST Contra-Maple View	17,822.00		0.00	17,822.00	2,874.00
Subtotal [8B] Speech Therapy - Medicare Co		(11,305.00)		0.00	(11,305.00)	(78,331.00)
Castotal [02] Opocoli Thorapy inculous oc	The dotted is the first of the	(11,000.00)		0.00	(11,000.00)	(10,001.00)
Subgroup : [8C]	Speech Therapy - Non-medicare					
314400-0105-00-000-0	Medicaid ST-Maple View	(21,611.00)		0.00	(21,611.00)	(13,769.00)
354400-0105-00-000-0	Comm Ins ST-Maple View	(1,661.00)		0.00	(1,661.00)	(11,962.00)
374400-0105-00-000-0	Mgd Medicare ST-Maple View	(176,715.00)		0.00	(176,715.00)	(99,250.00)
378120-0105-00-000-0	Medicare Mgd Care Pt B ST-Maple View	(65,262.00)		0.00	(65,262.00)	(19,211.00)
Subtotal [8C] Speech Therapy - Non-medica		(265,249.00)		0.00	(265,249.00)	(144,192.00)
oubtotal [00] opecol metapy - Non-medica		(200,243.00)		0.00	(200,240.00)	(144,132.00)
Subgroup : [8D]	Speech Therapy - Non-medicare Contractual Allowance					
314405-0105-00-000-0	Medicaid ST Contra-Maple View	21,611.00		0.00	21,611.00	13,769.00
354405-0105-00-000-0	Comm Ins ST Contra-Maple View	1,661.00		0.00	1,661.00	11,962.00
371008-0105-00-000-0	Mgd Medicare ST Contra-Maple View	(25,467.00)		0.00	(25,467.00)	(20,465.00)
374405-0105-00-000-0	Mgd Medicare ST Contra-Maple View	176,715.00		0.00	176,715.00	99,250.00
378125-0105-00-000-0	Medicare Mgd Pt B STContra-Maple View	40,873.00		0.00	40,873.00	11,873.00
Subtotal [8D] Speech Therapy - Non-medical		215,393.00		0.00	215,393.00	116,389.00
Subtotal [ob] Speech Therapy - Non-medica	re Contractual Allowance	210,353.00		0.00	210,393.00	110,369.00
Subgroup : [9A]	Occupational Therapy - Medicare					
324800-0105-00-000-0	Medicare Pt A OT-Maple View	(390,486.00)		0.00	(390,486.00)	(296, 156.00)
334800-0105-00-000-0	Medicare Pt B OT-Maple View	(207,782.00)		0.00	(207,782.00)	(71,748.00)
Subtotal [9A] Occupational Therapy - Medica		(598,268.00)		0.00	(598,268.00)	(367,904.00)
oubtotal [5A] occupational Therapy - medici	are and a second a	(030,200.00)		0.00	(030,200.00)	(507,504.00)
Subgroup : [9B]	Occupational Therapy - Medicare Contractual Allowance					
321007-0105-00-000-0	Medicare A OT Contra-Maple View	(325,447.00)		0.00	(325,447.00)	(370,531.00)
324805-0105-00-000-0	Medicare Pt A OT Contra-Maple View	390,486.00		0.00	390.486.00	296.156.00
	Medicare Pt B OT Contra-Maple View					
334805-0105-00-000-0 Subtotal [9B] Occupational Therapy - Medica		122,326.00 187,365.00		0.00	122,326.00 187,365.00	27,722.00 (46,653.00)
Subtotal [96] Occupational Therapy - Medica	are Contractual Allowance	107,305.00		0.00	107,303.00	(46,653.00)
Subaraum - IOC1	Occupational Thorony, Non-madicare					
Subgroup : [9C]	Occupational Therapy - Non-medicare	(70 504 00)		0.00	(70 504 00)	(00 704 00)
314800-0105-00-000-0	Medicaid OT-Maple View	(73,564.00)		0.00	(73,564.00)	(39,761.00)
337800-0105-00-000-0	Mgd Medicare Pt B OT-Maple View	(5,157.00)		0.00	(5,157.00)	(686.00)
337805-0105-00-000-0	Mgd Medicare Pt B OT Contra-Maple View	3,029.00		0.00	3,029.00	(154.00)
344800-0105-00-000-0	Private OT-Maple View	0.00		0.00	0.00	(1,098.00)
354800-0105-00-000-0	Comm Ins OT-Maple View	(32,164.00)		0.00	(32,164.00)	(31,096.00)
374800-0105-00-000-0	Mgd Medicare OT-Maple View	(509,800.00)		0.00	(509,800.00)	(222,596.00)
378130-0105-00-000-0	Medicare Mgd Care Pt B OT-Maple View	(209,395.00)		0.00	(209,395.00)	(54,698.00)
Subtotal [9C] Occupational Therapy - Non-m	edicare	(827,051.00)		0.00	(827,051.00)	(350,089.00)
Subgroup : [9D]	Occupational Therapy - Non-medicare Contractual Allowance	mc			ma	
314805-0105-00-000-0	Medicaid OT Contra-Maple View	73,564.00		0.00	73,564.00	39,761.00
354805-0105-00-000-0	Comm Ins OT Contra-Maple View	32,164.00		0.00	32,164.00	31,096.00
371007-0105-00-000-0	Mgd Medicare OT Contra-Maple View	(55,632.00)		0.00	(55,632.00)	(46,756.00)
374805-0105-00-000-0	Mgd Medicare OT Contra-Maple View	509,800.00		0.00	509,800.00	222,596.00
378135-0105-00-000-0	Medicare Mgd Pt B OT Contra-Maple View	147,837.00		0.00	147,837.00	28,288.00
Subtotal [9D] Occupational Therapy - Non-m	edicare Contractual Allowance	707,733.00		0.00	707,733.00	274,985.00
Subgroup : [10A]	Other - Medicare					
321009-0105-00-000-0	Medicare A NTA Contra-Maple View	(501,839.00)		0.00	(501,839.00)	(553,847.00)
321010-0105-00-000-0	Medicare A Nsng Comp Contra-Maple View	(834,076.00)		0.00	(834,076.00)	(879,080.00)
324200-0105-00-000-0	MCR Pt A Chargeable Med Supp-Maple View	(1,832.00)		0.00	(1,832.00)	(362.00)
324205-0105-00-000-0	MCR Pt A Charge Med Supp Contra-Maple View	1,832.00		0.00	1,832.00	362.00
324500-0105-00-000-0	Medicare Pt A IV Therapy-Maple View	(17,614.00)		0.00	(17,614.00)	(28,447.00)
324600-0105-00-000-0	Medicare Pt A Lab-Maple View	(18,006.00)		0.00	(18,006.00)	(19,900.00)

National Health Care Associates, Inc. (CT) Medicaid - Maple View Health & Rehab 9/30/2023 A.01 - TB-CCNH A.03 - Grouping Report

Client: Engagement: Period Ending: Trial Balance: Workpaper:

Workpaper:	A.03 - Grouping Report					
Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
	·	9/30/2023			9/30/2023	9/30/2022
325000-0105-00-000-0	Medicare Pt A X-Maple View	(18,748.00)		0.00	(18,748.00)	(11,747.00)
338000-0105-00-000-0	Medicare Pt B Prior Period-Maple View	2,738.00		0.00	2,738.00	499.00
Subtotal [10A] Other - Medicare		(1,387,545.00)		0.00	(1,387,545.00)	(1,492,522.00)
Subgroup : [10B]	Other - Non-medicare					
314600-0105-00-000-0	Medicaid Lab-Maple View	0.00		0.00	0.00	(156.00)
335700-0105-00-000-0	Medicare Pt B Flu/Pneumonia-Maple View	(4,770.00)		0.00	(4,770.00)	(4,182.00)
344105-0105-00-000-0	Private Pharmacy Contra-Maple View	1,913.00		0.00	1,913.00	0.00
354500-0105-00-000-0	Comm Ins IV Therapy-Maple View	(16,996.00)		0.00	(16,996.00)	0.00
354600-0105-00-000-0	Comm Ins Lab-Maple View	(2,179.00)		0.00	(2,179.00)	(2,384.00)
355000-0105-00-000-0	Comm Ins X-Maple View	(2,380.00)		0.00	(2,380.00)	(1,168.00)
371009-0105-00-000-0	Mgd Medicare NTA Contra-Maple View	(84,607.00)		0.00	(84,607.00)	(68,398.00)
371010-0105-00-000-0 374200-0105-00-000-0	Mgd Medicare Nsng Comp Contra-Maple View Mgd Medicare Chargeable Medical Supplies-Maple Vie	(125,319.00) 0.00		0.00 0.00	(125,319.00) 0.00	(111,859.00) (4,097.00)
374205-0105-00-000-0	Mgd Medicare Chargeable Med Supp Contra-Maple View	0.00		0.00	0.00	4,097.00
374500-0105-00-000-0	Mgd Medicare IV Therapy-Maple View	(5,985.00)		0.00	(5,985.00)	(14,118.00)
374600-0105-00-000-0	Mgd Medicare Lab-Maple View	(18,947.00)		0.00	(18,947.00)	(21,058.00)
374900-0105-00-000-0	Mgd Medicare Specialty Beds-Maple View	(1,259.00)		0.00	(1,259.00)	(89.00)
375000-0105-00-000-0	Mgd Medicare X-Maple View	(26,007.00)		0.00	(26,007.00)	(9,254.00)
378000-0105-00-000-0	Mgd Medicare Prior Period-Maple View	10,011.00		0.00	10,011.00	1,819.00
389010-0105-00-000-0	Patient Revenue Capitation -Maple View	(203,655.00)		0.00	(203,655.00)	(153,450.00)
Subtotal [10B] Other - Non-medicare		(480,180.00)		0.00	(480,180.00)	(384,297.00)
Subgroup : [15]	Interest Income					
391100-0105-00-000-0	Interest Income-Maple View	(9,409.00)		0.00	(9,409.00)	(724.00)
Subtotal [15] Interest Income		(9,409.00)		0.00	(9,409.00)	(724.00)
Subgroup : [18]	Other Revenue					
391500-0105-00-000-0	Misc. Other Income-Maple View	(10,621.00)		0.00	(10,621.00)	(232,402.00)
391600-0105-00-000-0 Subtotal [18] Other Revenue	Transcription Income-Maple View	(353.00) (10,974.00)		0.00	(353.00) (10,974.00)	(594.00) (232,996.00)
Total [30] Statement of Revenue		(15,100,666.00)		0.00	(15,100,666.00)	(14,040,707.00)
rotal [00] otatomont or Noronao		(10,100,000.00)		0.00	(10,100,000.00)	(14,040,101.00)
Group : [31-32]	Assets					
Subgroup : [A1]	Cash					
101005-0105-00-000-0	Cash Operating-Maple View	159,121.00		0.00	159,121.00	190,854.00
102000-0105-00-000-0	Cash - Payroll-Maple View	9,752.00		0.00	9,752.00	13,183.00
104000-0105-00-000-0	Cash - Savings-Maple View	1,033,565.00		0.00	1,033,565.00	1,069,922.00
105000-0105-00-000-0	Cash - Savings Patients-Maple View	59,768.00		0.00	59,768.00	63,612.00
106000-0105-00-000-0	Petty Cash-Maple View	1,500.00		0.00	1,500.00	1,500.00
106100-0105-00-000-0 Subtotal [A1] Cash	Petty Cash - Resident Funds-Maple View	1,264,306.00		0.00	1,264,306.00	1,339,671.00
Subtotal [A1] Cash		1,264,306.00		0.00	1,264,306.00	1,339,671.00
Subgroup : [A2]	Resident Accounts Receivable					
110000-0105-00-000-0	Accounts Receivable-Maple View	259,986.00		0.00	259,986.00	253,695.00
111000-0105-00-000-0	A/R Private-Maple View	888,687.00		0.00	888,687.00	856,159.00
111200-0105-00-000-0	A/R Comm Ins-Maple View	(40,963.00)		0.00	(40,963.00)	(3,316.00)
111300-0105-00-000-0	AR Hospice-Maple View	69,492.00		0.00	69,492.00	181,744.00
111400-0105-00-000-0	A/R Mgd Medicare-Maple View	95,398.00		0.00	95,398.00	(37,622.00)
112000-0105-00-000-0	A/R Medicare Pt A-Maple View	19,810.00		0.00	19,810.00	173,416.00
112500-0105-00-000-0 113000-0105-00-000-0	A/R Medicare Pt B-Maple View A/R Medicaid-Maple View	13,880.00 496,322.00		0.00 0.00	13,880.00 496,322.00	9,729.00 290,199.00
114000-0105-00-000-0	A/R Patient Pticipation-Maple View	(196,710.00)		0.00	(196,710.00)	(183,888.00)
116100-0105-00-000-0	Medicare Colns Bad Debt-Maple View	13,251.00		0.00	13,251.00	0.00
116200-0105-00-000-0	Allowance for Doubtful Accounts-Maple View	(233,436.00)		0.00	(233,436.00)	(247,183.00)
Subtotal [A2] Resident Accounts Receivable		1,385,717.00		0.00	1,385,717.00	1,292,933.00
Subgroup : [A3]	Other Accounts Receivable					
141600-0105-00-000-0	Due from Related-Maple View	2,078,336.00		0.00	2,078,336.00	1,825,164.00
Subtotal [A3] Other Accounts Receivable		2,078,336.00		0.00	2,078,336.00	1,825,164.00
Subgroup : [A4]	Inventories					
130000-0105-00-000-0	Inventory-Maple View	18,641.00		0.00	18,641.00	20,216.00
Subtotal [A4] Inventories	intendry maple view	18,641.00		0.00	18,641.00	20,216.00
Ç., ,		,			,	
Subgroup : [A5]	Prepaid Expenses					
121400-0105-00-000-0	Prepaid Workers Comp-Maple View	15,905.00		0.00	15,905.00	15,734.00
122200-0105-00-000-0	Prepaid Gen. Ins-Maple View	29,984.00		0.00	29,984.00	28,035.00
129000-0105-00-000-0	Prepaid Expense Other-Maple View Prepaid Personal Property Taxes-Maple View	14,998.00		0.00	14,998.00	5,100.00
129110-0105-00-000-0 129300-0105-00-000-0	Prepaid Mgmt Assets-Maple View	9,026.00 19,317.00		0.00 0.00	9,026.00 19,317.00	7,728.00 13,703.00
Subtotal [A5] Prepaid Expenses	Frepaid Wight Assets-Wapie View	89,230.00		0.00	89,230.00	70,300.00
Oublotai [A5] i Tepaid Expenses		03,200.00		0.00	03,230.00	10,000.00
Subgroup : [A8]	Other Current Assets					
129900-0105-00-000-0	CT PET Deferred Tax-Maple View	0.00		0.00	0.00	50,186.00
141400-0105-00-000-0	Due from Realty-Maple View	0.00		0.00	0.00	70,138.00
141900-0105-00-000-0	CT PET Tax Receivable-Maple View	47,700.00		0.00	47,700.00 47,700.00	47,700.00
Subtotal [A8] Other Current Assets		47,700.00		0.00	47,700.00	168,024.00
Subgroup : [B4]	Leasehold Improvements					
154000-0105-00-000-0	Lease hold Improvements-Maple View	1,623,027.00		87,101.00	1,710,128.00	1,620,320.00
		.,==0,021.00	RJE - 6	87,101.00	.,5,125.00	.,,0_0.00
154100-0105-00-000-0	Leasehold Improvement Mgmt-Maple View	8,128.00		0.00	8,128.00	8,128.00
164000-0105-00-000-0	Accum Depr LHI-Maple View	(1,180,450.00)		0.00	(1,180,450.00)	(1,100,057.00)
Subtotal [B4] Leasehold Improvements		450,705.00		87,101.00	537,806.00	528,391.00
Subgroup : [B6]	Movable Equipment	27 202 22		0.00	27 222 22	27 222 22
155000-0105-00-000-0 156000-0105-00-000-0	Fixed Equipment-Maple View Major Movable Equip-Maple View	27,332.00 835,494.00		0.00 (87,101.00)	27,332.00 748,393.00	27,332.00 704,131.00
130000-0103-00-000-0	wajor wovabie Equip-wapie view	000,454.00	RJE - 6	(87,101.00)	740,353.00	704,131.00
166000-0105-00-000-0	Accum Depr MME-Maple View	(537,659.00)	* 0	0.00	(537,659.00)	(486,231.00)
Subtotal [B6] Movable Equipment	A Section	325,167.00		(87,101.00)	238,066.00	245,232.00
Subgroup : [D7]	Other Assets					
141000-0105-00-000-0	Loans and Exchange-Maple View	200,000.00		0.00	200,000.00	200,000.00
145000-0105-00-000-0	Security Deposits-Maple View	11,826.00		0.00	11,826.00	11,826.00
159000-0105-00-000-0 Subtotal [D7] Other Assets	Operating Lease Right of Use Asset	2,590,218.00		0.00	2,590,218.00	0.00
Total [31-32] Assets		2,802,044.00 8,461,846.00		0.00	2,802,044.00 8,461,846.00	211,826.00 5,701,757.00
		3,-31,040.00		0.00	5,-57,040.00	5,. 5 .,1 01.00
Group : [33-34]	Liabilities					
Subgroup : [A1]	Trade Accounts Payable					
210000-0105-00-000-0	Accounts Payable-Maple View	(618,372.00)		0.00	(618,372.00)	(505,648.00)
Subtotal [A1] Trade Accounts Payable	•	(618,372.00)		0.00	(618,372.00)	(505,648.00)
Subgroup: [A3]	Loans Payable for Equipment					,
211400-0105-00-000-0	Equipment Obligation ST-Maple View	(17,709.00)		0.00	(17,709.00)	(16,781.00)

National Health Care Associates, Inc. (CT) Medicaid - Maple View Health & Rehab 9/30/2023 A.01 - TB-CCNH A.03 - Grouping Report

Client: Engagement: Period Ending: Trial Balance: Workpaper:

Account	Description	ADJ	JE Ref#	RJE	FINAL	1st PP-FINAL
		9/30/2023	_		9/30/2023	9/30/2022
Subtotal [A3] Loans Payable for Equipme	nt	(17,709.00)	_	0.00	(17,709.00)	(16,781.00)
Subgroup : [A4]	Accrued Payroll					
250100-0105-00-000-0	Accrued Payroll-Maple View	(107,837.00)		0.00	(107,837.00)	(83,702.00)
252000-0105-00-000-0	Accrued Vacation-Maple View	(320,199.00)		0.00	(320,199.00)	(313,117.00)
Subtotal [A4] Accrued Payroll		(428,036.00)	_	0.00	(428,036.00)	(396,819.00)
Subgroup : [A12]	Other Current Liabilities					
220200-0105-00-000-0	Unclaimed ADP checks-Maple View	(10,712.00)		0.00	(10,712.00)	(9,907.00)
226200-0105-00-000-0	Patients Fund-Maple View	(59,768.00)		0.00	(59,768.00)	(63,612.00)
226300-0105-00-000-0	Patient Recreation Fund-Maple View	(680.00)		0.00	(680.00)	0.00
231100-0105-00-000-0	Operating Lease Liability - Current	(91,209.00)		0.00	(91,209.00)	0.00
236000-0105-00-000-0	Union Dues payable-Maple View	(8.00)		0.00	(8.00)	0.00
242100-0105-00-000-0	Volunteersuntary Ded. Exchange-Maple View	6.00		0.00	6.00	6.00
250000-0105-00-000-0	Accrued Expenses-Maple View	(228,229.00)		0.00	(228,229.00)	(290,806.00)
250020-0105-00-000-0	Accrued Pension-Maple View	(302,948.00)		0.00	(302,948.00)	(136,359.00)
250030-0105-00-000-0	Accrued Worker's Comp-Maple View	(66,225.00)		0.00	(66,225.00)	(46,719.00)
254900-0105-00-000-0	CT PET Tax Accrued Expense-Maple View	(58,544.00)		0.00	(58,544.00)	0.00
Subtotal [A12] Other Current Liabilities		(818,317.00)	_	0.00	(818,317.00)	(547,397.00)
Subgroup : [B1]	Loans Payable - Equipment					
211411-0105-00-000-0	Equipment Obligation LT 1-Maple View	(8,251.00)		0.00	(8,251.00)	(25,959.00)
Subtotal [B1] Loans Payable - Equipment		(8,251.00)		0.00	(8,251.00)	(25,959.00)
Subgroup : [B3]	Loans from Owners or Related Parties					
221400-0105-00-000-0	Due to Realty-Maple View	(564,851.00)		0.00	(564,851.00)	0.00
271500-0105-00-000-0	Due to Related-Maple View	(1,034,058.00)		0.00	(1,034,058.00)	(1,107,715.00)
274000-0105-00-000-0	Due to Other-Maple View	(38,888.00)		0.00	(38,888.00)	(38,888.00)
Subtotal [B3] Loans from Owners or Rela	ted Parties	(1,637,797.00)		0.00	(1,637,797.00)	(1,146,603.00)
Subgroup : [B4]	Other Long-Term Liabilities					
221800-0105-00-000-0	Due to HMS-Maple View	(29.404.00)		0.00	(29,404.00)	0.00
231200-0105-00-000-0	Operating Lease Liability - Noncurrent	(2,499,009.00)		0.00	(2,499,009.00)	0.00
271000-0105-00-000-0	Due to Aging in Amer-Maple View	47.00		0.00	47.00	0.00
Subtotal [B4] Other Long-Term Liabilities	,	(2,528,366.00)	_	0.00	(2,528,366.00)	0.00
Total [33-34] Liabilities		(6,056,848.00)	_	0.00	(6,056,848.00)	(2,639,207.00)
Group : [35]	Equity					
Subgroup : [B5]	Cumulated Earnings					
280000-0105-00-000-0	Capital-Maple View	537,077.00		0.00	537.077.00	537.077.00
286000-0105-00-000-0	Ptner Drawings-Maple View	1.500.000.00		0.00	1.500.000.00	0.00
295000-0105-00-000-0	Retained Earnings-Maple View	(4,155,219.00)		0.00	(4,155,219.00)	(2,451,541.00)
Subtotal [B5] Cumulated Earnings	• •	(2,118,142.00)	_	0.00	(2,118,142.00)	(1,914,464.00)
Total [35] Equity		(2,118,142.00)	_	0.00	(2,118,142.00)	(1,914,464.00)
	Sum of Account Groups	17,001.00		0.00	17,001.00	15,711.00
	•	•			•	•
	Net (Income) Loss	17,001.00		0.00	17,001.00	15,711.00

National Health Care Associates, Inc. (CT) Medicaid - Maple View Health & Rehab 9/30/2023 Client:

Engagement:
Period Ending:
Trial Balance:

A.01 - TB-CCNH H.02 - Reclassifying Journal Entries Report Workpaper:

Account	Description	W/P Ref	Debit	Credit
Reclassifying Journal E To reclass MDS, Staff De line of cost report	ntries JE # 1 velopment and Infection Control salaries into correct	N.01a		
•	S Coordinator		134,805.00	
	ection Control		70,110.00	
	iff Development		98,811.00	
400000-0105-15-092-Sa	ary-Maplev-Nursing-RN-			303,726.00
Total			303,726.00	303,726.00
Reclassifying Journal E	ntries JE # 2	D.01 - Tab Q		
To reclass Licenses and	subscriptionss into the correct line of the cost report			
491001-0105-03-000-(Sub	oscriptions-Maple View-Administration		350.00	
	enses and Permits-Maple View-Administration es-Maple View-Administration		1,242.00	1,592.00
Total	so maple view Administration		1,592.00	1,592.00
Reclassifying Journal E		J.01a		
To reclass management f	ees into correct line of cost report			
	ared Services-Maple View-Administration		4,137.00	
431000-0105-04-000-(Cor Total	nsulting Fees-Maple View-Fiscal Operations		4,137.00	4,137.00 4,137.00
			 =	
Reclassifying Journal E To reclass admin equipm	ent rental into correct line of the cost report	D.01 - Tab V		
	nin Equipment Rental		6,576.00	
	Rental-Maple View-Administration			6,576.00
Total			6,576.00	6,576.00
Reclassifying Journal E	ntries JE # 5 es and property insurance to correct lines of cost	G.01		
report.				
Marcum 204 Pro	perty Insurance		21,803.00	
	al Estate Taxes		170,866.00	
	nt-Maple View-Property		400.000.00	192,669.00
Total			192,669.00	192,669.00
Reclassifying Journal E		D.01		
To reciass fixed assets in	to correct line of cost report.			
154000-0105-00-000-(Lea	se hold Improvements-Maple View		87,101.00	
484000-0105-25-000-(Dep			9,633.00	
	or Movable Equip-Maple View			87,101.00
486000-0105-25-000-(Dep	or Exp MiME-Maple View		96,734.00	9,633.00 96,734.00
Total			30,734.00	30,134.0U



Workpaper Index: Prepared By: Reviewed By:

Name of Workpaper:

Workpaper Date: 2/7/2024

Run Date: 2/7/2024

VHCL CKLST

Provider Name: Provider Number: Maple View Health & Rehab

Period Ended: 9/30/23

VEHICLE COMPLIANCE CHECKLIST

PURPOSE: To determine that vehicles comply with the published February 15, 2000 guidelines developed to assist providers in understanding what transportation costs are allowable and how the costs must be documented.

		Yes	No	Support Filed at?	Finding Issued?
1	Are all vehicles registered and insured in the facility's name? Request insurance cards and current vehicle registration.				
2	Are all purchase and lease agreements made in the facility's name?				
3	Were mileage logs obtained for facility vehicles claimed for reimbursement				
4	Were the number of vehicles allowed for reimbursement determined?				
5	Was personal use of the facility vehicles determined?				
6	Has the maximum cost allowed for depreciation purposes or the maximum allowablemonthly lease expense been determined?				
7	Were all newly acquired vehicle additions for the cost years specified to supporting invoices and cancelled checks verified?				
8	Were all motor vehicle additions physically inspected?				

Conclusion: