

**Short Form**  
**AVERAGE COST OF CARE**  
**Some members receive care at an outside facility**

*Enter the appropriate amounts from your institute's financial statements in the blue shaded boxes. The other lines have formulas to calculate the cost of care.*

**When you have completed the worksheet, transfer the numbers from lines I, M and N to the Cost of Care tab on the Direct Care Assistance Application.**

<b>WORKSHEET FOR CALCULATING COST OF CARE</b>			
			<b>Sample</b>
A	<b>Total Expenses</b> for Fiscal Year (Less Expenses that apply only to the elderly)		35,000
B	<b>Excluded Items:</b> Education, Formation/Vocation, Development, Charity, Ministry expenses (e.g. altar breads, prayer enrollments, fruit cakes, etc.), FICA payments, depreciation, mortgage and loan payments.		5,000
C	Total Cost of Living for all members (A minus B)	\$ -	30,000
D	Total Census (excluding those in nursing facilities)		15
E	Average Cost of Care (C divided by D)	#DIV/0!	2,000
F	Cost of Direct Care of Elderly in Own Facility (e.g. Home Health) (Do not include this amount on Line A.)		3,000
G	<b>Census of members Age 70 and over</b> (excluding those in skilled nursing facilities).		10
H	Average Direct Care Cost in Own Facility (F divided by G)	#DIV/0!	300
I	<b>Average Total Cost for Members over 70 in Own Facility</b> (E plus H)	#DIV/0!	2,300
J	Total Cost of Care for Members Age 70 & over (I times G)	#DIV/0!	23,000
K	Total Cost of Care for those receiving skilled nursing care at an outside facility. (Do not include this amount on Line A.)		25,000
L	Census of members receiving skilled nursing care.		1
M	<b>Average Cost of Care for Skilled Nursing</b> (K divided by L)	#DIV/0!	25,000
N	<b>Weighted Average Cost of Care</b> (J+K) / (G+L)	#DIV/0!	4,364