BRISTOL HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION

	REPORT 100 - HOSPITAL BAI	LANGE SHEET INFOR	MATION		
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
l.	<u>ASSETS</u>				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$9,376,449	\$12,810,191	\$3,433,742	37%
2	Short Term Investments	\$96,452	\$96,526	\$74	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$16,562,143	\$16,887,452	\$325,309	2%
4	Current Assets Whose Use is Limited for Current Liabilities	\$458,932	\$444,904	(\$14,028)	-3%
5	Due From Affiliates	\$3,142,097	\$1,022,462	(\$2,119,635)	-67%
6	Due From Third Party Payers	\$1,964,075	\$2,757,898	\$793,823	40%
7	Inventories of Supplies	\$1,592,222	\$1,445,186	(\$147,036)	-9%
8	Prepaid Expenses	\$811,642	\$808,566	(\$3,076)	0%
9	Other Current Assets	\$4,999,472	\$2,653,347	(\$2,346,125)	-47%
	Total Current Assets	\$39,003,484	\$38,926,532	(\$76,952)	0%
- В	Nameurrant Accete Wheel Heel I imited				
	Noncurrent Assets Whose Use is Limited:	# 0	Φ0	ФО.	00/
	Held by Trustee	\$0	\$0 \$0,000,472	\$0	0%
	Board Designated for Capital Acquisition	\$6,662,023	\$6,966,473	\$304,450	5%
	Funds Held in Escrow	\$0	\$0	\$0	0%
	Other Noncurrent Assets Whose Use is Limited	\$12,919,018	\$13,815,840	\$896,822	7%
	Total Noncurrent Assets Whose Use is Limited:	\$19,581,041	\$20,782,313	\$1,201,272	6%
5	Interest in Net Assets of Foundation	\$6,708,565	\$6,180,143	(\$528,422)	-8%
6	Long Term Investments	\$7,231,860	\$6,800,181	(\$431,679)	-6%
7	Other Noncurrent Assets	\$2,364,559	\$2,483,304	\$118,745	5%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$141,381,699	\$147,266,902	\$5,885,203	4%
2	Less: Accumulated Depreciation	\$105,453,829	\$111,762,978	\$6,309,149	6%
	Property, Plant and Equipment, Net	\$35,927,870	\$35,503,924	(\$423,946)	-1%
				•	
	Construction in Progress	\$1,836,659	\$3,256,357	\$1,419,698	77%
	Total Net Fixed Assets	\$37,764,529	\$38,760,281	\$995,752	3%
	Total Assets	\$112,654,038	\$113,932,754	\$1,278,716	1%
II.	<u>LIABILITIES AND NET ASSETS</u>				
Α.	Current Liabilities:				
	Accounts Payable and Accrued Expenses	\$9,975,800	\$12,607,684	\$2,631,884	26%
2	Salaries, Wages and Payroll Taxes	\$12,922,514	\$10,500,617	(\$2,421,897)	-19%

BRISTOL HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION

	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION							
(1)	(2)	(3)	(4)	(5)	(6)			
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE			
LINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
3	Due To Third Party Payers	\$0	\$0	\$0	0%			
4	Due To Affiliates	\$0	\$0	\$0	0%			
5	Current Portion of Long Term Debt	\$489,222	\$654,266	\$165,044	34%			
6	Current Portion of Notes Payable	\$7,826	\$8,226	\$400	5%			
7	Other Current Liabilities	\$3,375,000	\$3,125,000	(\$250,000)	-7%			
	Total Current Liabilities	\$26,770,362	\$26,895,793	\$125,431	0%			
В.	Long Term Debt:							
1	Bonds Payable (Net of Current Portion)	\$25,729,951	\$26,016,613	\$286,662	1%			
2	Notes Payable (Net of Current Portion)	\$290,135	\$281,910	(\$8,225)	-3%			
	Total Long Term Debt	\$26,020,086	\$26,298,523	\$278,437	1%			
3	Accrued Pension Liability	\$30,446,134	\$18,682,813	(\$11,763,321)	-39%			
4	Other Long Term Liabilities	\$18,786,121	\$15,583,354	(\$3,202,767)	-17%			
	Total Long Term Liabilities	\$75,252,341	\$60,564,690	(\$14,687,651)	-20%			
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%			
C.	Net Assets:							
1	Unrestricted Net Assets or Equity	(\$376,115)	\$15,896,282	\$16,272,397	-4326%			
2	Temporarily Restricted Net Assets	\$4,079,847	\$3,555,410	(\$524,437)	-13%			
3	Permanently Restricted Net Assets	\$6,927,603	\$7,020,579	\$92,976	1%			
	Total Net Assets	\$10,631,335	\$26,472,271	\$15,840,936	149%			
	Total Liabilities and Net Assets	\$112,654,038	\$113,932,754	\$1,278,716	1%			

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2013 REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION** (1) (2) (4) (5) (6)FY 2012 FY 2013 **AMOUNT** LINE DESCRIPTION **ACTUAL ACTUAL DIFFERENCE** DIFFERENCE **Operating Revenue:** Total Gross Patient Revenue \$385.913.045 \$427,704,210 \$41.791.165 11% 2 Less: Allowances \$251,770,594 \$290,680,238 \$38,909,644 15% 40% 3 Less: Charity Care \$3,781,958 \$5,306,456 \$1,524,498 Less: Other Deductions \$0 0% \$0 \$0 1% **Total Net Patient Revenue** \$130.360.493 \$131.717.516 \$1.357.023 0% 5 Provision for Bad Debts \$0 \$4,909,425 \$4,909,425 Net Patient Service Revenue less provision for bad debts \$130.360.493 \$126.808.091 (\$3.552.402) -3% 6 Other Operating Revenue \$5.173.982 \$4,242,269 -18% (\$931,713)7 Net Assets Released from Restrictions \$0 \$0 \$0 0% \$135,534,475 \$131,050,360 -3% **Total Operating Revenue** (\$4,484,115) **Operating Expenses:** Salaries and Wages 0% 1 \$54,926,060 \$54,725,468 (\$200,592)2 Fringe Benefits \$15,078,189 \$14,819,444 (\$258,745)-2% 3 Physicians Fees \$7,870,257 \$9.064.475 \$1.194.218 15% 4 Supplies and Drugs \$17,934,966 \$18,039,840 \$104,874 1% Depreciation and Amortization 1% 5 \$6,320,576 \$6,363,743 \$43,167 **Bad Debts** -100% 6 \$6,470,291 \$0 (\$6,470,291)Interest Expense \$1,641,972 \$1,421,576 (\$220,396)-13% (\$168,825)-58% 8 Malpractice Insurance Cost (\$399,676)\$230,851 Other Operating Expenses \$24,643,668 \$25,437,953 \$794,285 3% -4% **Total Operating Expenses** \$134,486,303 \$129,703,674 (\$4,782,629) Income/(Loss) From Operations \$1,048,172 \$1,346,686 \$298,514 28% C. **Non-Operating Revenue:** Income from Investments \$355.214 \$288,208 (\$67.006)-19% \$0 0% 2 Gifts, Contributions and Donations \$0 \$0 3 Other Non-Operating Gains/(Losses) \$897,940 \$555,862 (\$342,078)-38% **Total Non-Operating Revenue** \$1,253,154 \$844,070 (\$409,084)-33% Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$2,301,326 \$2,190,756 (\$110,570)-5% Other Adjustments: Unrealized Gains/(Losses) \$0 \$0 \$0 0%

	BRISTOL HOSPITAL							
	TWELVE	MONTHS ACTUAL FII	LING					
	F	ISCAL YEAR 2013						
	REPORT 150 - HOSPITAL ST	TATEMENT OF OPER	ATIONS INFORMA	ATION				
(1)	(2)	(3)	(4)	(5)	(6)			
		FY 2012	FY 2013	AMOUNT	%			
LINE	DESCRIPTION	ACTUAL	ACTUAL	<u>DIFFERENCE</u>	DIFFERENCE			
	All Other Adjustments	\$0	\$0	\$0	0%			
	Total Other Adjustments	\$0	\$0	\$0	0%			
	Excess/(Deficiency) of Revenue Over Expenses	\$2,301,326	\$2,190,756	(\$110,570)	-5%			
	Principal Payments	\$797,743	\$776,377	(\$21,366)	-3%			

MEDICARE MANAGED CARE	1					
TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER		D	DISTOL HOSDITAL			
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER				INC		
(1) (2) (3) (4) (6) (6) FY 2012 FY 2013 AMOUNT WE DIFFERNCE DIFFE				ING		
(1) (2) (3) (4) (5) (6) FY 2012 FY 2013 AMOUNT DIFFERENCE LINE DESCRIPTION ACTUAL ACTUAL ACTUAL DIFFERENCE DIFFERENCE FY 2013 AMOUNT DIFFERENCE						
LINE DESCRIPTION		REPORT 165 - HOSPITAL GROSS RE	VENUE, NET REVENU	JE AND STATISTIC	CS BY PAYER	
LINE DESCRIPTION	(4)	(0)	(0)	(4)	(5)	(0)
LINE DESCRIPTION	(1)	(2)	(3)	(4)	(5)	
A. NPATIENT GROSS REVENUE			FY 2012	FY 2013	AMOUNT	%
A. INPATIENT GROSS REVENUE Sp. 29.371 Sp. 29.3721 Sp. 29	LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A. INPATIENT GROSS REVENUE Sp. 29.371 Sp. 29.3721 Sp. 29						
A. INPATIENT GROSS REVENUE Sp. 29.371 Sp. 29.3721 Sp. 29						
MEDICARE TRADITIONAL \$62,592,371 \$67,634,700 \$5,042,329 89 MEDICARE MANAGED CARE \$16,552,440 \$21,033,335 \$4,568,495 289 380 MEDICAID \$22,132,724 \$28,359,389 \$6,226,665 289 \$1,045,399 \$1,000	I.	GROSS REVENUE BY PAYER				
MEDICARE TRADITIONAL \$62,592,371 \$67,634,700 \$5,042,329 89 MEDICARE MANAGED CARE \$16,552,440 \$21,033,335 \$4,568,495 289 380 MEDICAID \$22,132,724 \$28,359,389 \$6,226,665 289 \$1,045,399 \$1,000						
MEDICARE MANAGED CARE	A.					
MEDICAID \$22,132,724 \$28,399,399 \$6,226,665 287				\$67,634,700	\$5,042,329	8%
MEDICAID MANAGED CARE \$1,845,390 \$0 \$1,645,390 100** CHAMPUSTRICARE \$2,269,030 \$214,150 \$54,879,21 \$3,678,950 100** COMMERCIAL INSURANCE \$21,198,971 \$24,877,921 \$3,678,950 .179** NON-GOVERNMENT MANAGED CARE \$15,385,117 \$16,282,00 \$899,203 69** WORKER'S COMPENSATION \$1,209,366 \$951,567 \$(8266,799) 21** SELF-PAY/UNINSURED \$1,729,349 \$2,026,255 \$305,886 18** OSAGA \$0 \$50 \$50 \$0 00** TOTAL INPATIENT GROSS REVENUE \$142,677,758 \$161,442,217 \$18,764,459 13** MEDICARE MANAGED CARE \$22,230,841 \$23,346,076 \$5,117,235 28** MEDICARE MANAGED CARE \$49,6346 \$50 \$5,117,235 28** MEDICARE MANAGED CARE \$49,6346 \$50 \$6,4976,345 -100** CHAMPUSTRICARE \$557,685 \$562,300 \$134,615 -25** CHAMPUSTRICARE \$35,408,293 \$56,242,349 \$2,834,056 55** CHAMPUSTRICARE \$36,906,213 \$304,421,68 \$340,405 -17** MON-GOVERNMENT MANAGED CARE \$35,408,293 \$56,242,349 \$2,834,056 55** WORKER'S COMPENSATION \$4,575,439 \$3,702,007 \$1,800,405 -17** OSAGA \$50				\$21,093,935		28%
6 CHAMPUSTRICARE \$269,030 \$214,150 (\$\$4,880) -20° 6 COMMERCIAL INSURANCE \$21,198,971 \$24,877,921 \$3,678,950 17° 7 NON-GOVERNMENT MANAGED CARE \$15,385,117 \$16,284,320 \$899,203 6° 8 WORKER SCOMPENSATION \$1,203,366 \$951,567 (\$286,799) -21° 9 SELF-PAYIVININSURED \$1,203,496 \$90 \$0 \$0 90 10 SAGA \$0 \$0 \$0 \$0 \$0 \$0 \$0 10 TOTIL INPATIENT GROSS REVENUE \$12,677,758 \$161,442,217 \$18,764,459 13° 11 MEDICARE TRADITIONAL \$69,913,177 \$78,682,721 \$8,769,544 13° 2 MEDICARE MANAGED CARE \$22,230,841 \$28,348,076 \$8,117,225 28° 3 MEDICAL INSURANCE \$43,050,338 \$53,507,154 \$10,456,816 24° 4 MEDICAR MANAGED CARE \$44,976,345 \$0 (\$44,976,345) 100° 5 CHAMPUSTRICARE \$557,685 \$672,300 \$134,615 28° 6 COMMERCIAL INSURANCE		-	\$22,132,724	\$28,359,389		28%
6 COMMERCIAL INSURANCE \$21,198,971 \$24,877,291 \$3,678,950 179 7 NON-GOVERNMENT MANAGED CARE \$15,385,117 \$16,284,320 \$899,203 66 8 WORKER'S COMPENSATION \$1,208,366 \$951,567 (\$256,799)219 9 SELF-PAY/UNINSURED \$1,720,349 \$2,026,235 \$305,886 189 10 SAGA \$0 \$0 \$0 \$0 11 OTHER \$0 \$0 \$0 \$0 11 OTHER \$0 \$0 \$0 \$0 12 \$16,422,217 \$18,764,459 139 13 MEDICARE TRADITIONAL \$69,913,177 \$79,682,721 \$8,769,544 139 14 MEDICARE MANAGED CARE \$22,230,841 \$28,346,076 \$6,117,235 289 15 MEDICARE MANAGED CARE \$44,976,345 \$0 \$44,976,345 1-1009 16 CHAMPUSTRICARE \$43,000,338 \$53,607,165 \$13,618,450 1-1009 17 OTAL INSURANCE \$44,976,345 \$0 \$44,976,345 1-1009 18 COMMERCIAL INSURANCE \$55,408,293 \$58,242,349 \$2,834,056 599 18 WORKER'S COMPENSATION \$4,976,345 \$0 \$44,976,345 1-209 19 SELF-PAY/UNINSURED \$55,408,293 \$58,242,349 \$2,834,056 599 10 CHAMPUSTRICARE \$336,800,213 \$306,442,168 \$44,045 1-199 10 SAGA \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0				'		-100%
TON-GOVERNMENT MANAGED CARE \$15,385,117 \$16,243.20 \$899.203 69						-20%
8 WORKER'S COMPENSATION \$1.208.366 \$951.567 (\$256.799) -2.19 9 SELF- PAY/UNINSURED \$1,720,349 \$2,026,235 \$305,886 189 10 SAGA \$0 \$0 \$0 \$0 \$0 .09 11 OTHER \$0 \$0 \$0 \$0 \$0 .09 13 OTHER \$1,720,349 \$2,026,235 \$305,886 189 14 OTHER \$0 \$0 \$0 \$0 .09 15 OTHER \$1,720,349 \$2,026,235 \$305,886 189 16 OTHER \$0 \$0 \$0 \$0 .09 17 OTAL INPATIENT GROSS REVENUE \$142,677,758 \$161,442,217 \$18,764,459 133 18 OUTPATIENT GROSS REVENUE \$142,677,758 \$161,442,217 \$18,764,459 133 18 OUTPATIENT GROSS REVENUE \$142,677,758 \$161,442,217 \$18,764,459 133 29 MEDICARE MANAGED CARE \$22,230,841 \$28,348,076 \$6,117,235 289 30 MEDICAID \$43,050,338 \$53,071,154 \$10,456,816 244 31 MEDICAID MANAGED CARE \$43,050,338 \$53,071,154 \$10,456,816 244 32 MEDICAID MANAGED CARE \$43,050,338 \$53,071,154 \$10,456,816 244 33 MEDICAID MANAGED CARE \$43,050,338 \$53,071,154 \$10,456,816 244 34 MEDICAID MANAGED CARE \$43,050,338 \$53,242,345 .07 (34,976,345) -100 35 CHAMPUSTRICARE \$55,408,293 \$58,242,340,566 55 36 COMMERCIAL INSURANCE \$55,408,293 \$38,242,340,566 55 37 NON-GOVERNMENT MANAGED CARE \$36,906,213 \$36,442,168 \$464,045) -119 38 WORKER'S COMPENSATION \$4,575,439 \$3,772,067 \$873,372 -19 39 SELF- PAY/UNINSURED \$55,636,956 \$6,665,563 \$1,028,607 188 10 SAGA \$0 \$0 \$0 \$0 .09 10 TOTAL OUTPATIENT GROSS REVENUE \$243,235,287 \$266,262,398 \$23,027,111 99 20 MEDICAID UTPATIENT GROSS REVENUE \$243,235,287 \$266,262,398 \$23,027,111 99 21 MEDICARE MANAGED CARE \$38,756,281 \$49,442,011 \$10,685,730 288 31 MEDICAID MANAGED CARE \$56,607,264 \$83,120,270 \$6,513,006 99 70 TOTAL GROSS REVENUE \$56,607,264 \$83,120,270 \$6,513,006 99 71 NON-GOVERNMENT MANAGED CARE \$56,607,264 \$83,120,270 \$6,513,006 99 72 NON-GOVERNMENT MANAGED CARE \$56,607,264 \$83,120,270 \$6,513,006 99 73 NON-GOVERNMENT MANAGED CARE \$56,607,264 \$83,120,270 \$6,513,006 99 74 NON-GOVERNMENT MANAGED CARE \$56,607,264 \$83,120,270 \$6,513,006 99 75 NON-GOVERNMENT MANAGED CARE \$56,607,264 \$83,120,270 \$6,513,006 99 75 NON-GOVERNMENT MANAGED CARE \$56,607,264 \$83,120,270 \$6,513,006 99 76 NON-GOVERNMENT MANAGED CARE	_					17%
SELF-PAYUNINSURED				. , ,	+ ,	6%
10 SAGA \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$					\' ' '	-21%
11 OTHER			\$1,720,349	\$2,026,235		18%
TOTAL INPATIENT GROSS REVENUE \$142,677,758 \$161,442,217 \$18,764,459 138	10		т -			0%
B. DUTPATIENT GROSS REVENUE					\$0	0%
MEDICARE TRADITIONAL \$69,913,177 \$78,682,721 \$8,769,544 139 200 MEDICARE MANAGED CARE \$22,20,841 \$29,346,076 \$6,117,235 293 MEDICAID \$43,050,338 \$55,507,154 \$10,456,816 244 MEDICAID MANAGED CARE \$4,976,345 \$0 (\$4,976,345) -1009 \$10,440,440		TOTAL INPATIENT GROSS REVENUE	\$142,677,758	\$161,442,217	\$18,764,459	13%
MEDICARE MANAGED CARE \$22,230,841 \$28,348,076 \$6,117,235 289 348,076 \$43,050,338 \$53,507,154 \$10,456,816 249 MEDICAID MANAGED CARE \$43,976,345 \$0 (\$4,976,345) -1000 \$5 CHAMPUS/TIRCARE \$537,685 \$672,300 \$134,615 269 \$6 COMMERCIAL INSURANCE \$55,408,293 \$52,422,349 \$2,834,056 579 \$7 NON-GOVERNMENT MANAGED CARE \$36,906,213 \$36,442,168 (\$464,045) -179 \$8 WORKER'S COMPENSATION \$4,575,439 \$3,702,067 (\$873,372) -199 \$9 SELF-PAY/UNINSURED \$5,636,965 \$6,665,563 \$1,028,607 188 \$10 SAGA \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$10	B.	OUTPATIENT GROSS REVENUE				
MEDICAID	1	MEDICARE TRADITIONAL	\$69,913,177	\$78,682,721	\$8,769,544	13%
MEDICAID MANAGED CARE \$4,976,345 \$0 (\$4,976,345) -100°	2	MEDICARE MANAGED CARE	\$22,230,841	\$28,348,076	\$6,117,235	28%
5 CHAMPUSTRICARE \$537,685 \$672,300 \$134,615 259 6 COMMERCIAL INSURANCE \$55,408,293 \$58,242,349 \$2,834,056 57 7 NON-GOVERNMENT MANAGED CARE \$36,906,213 \$36,442,168 (\$464,045) -19 8 WORKER'S COMPENSATION \$4,575,439 \$3,702,067 (\$873,372) -199 9 SELF- PAY/UNINSURED \$5,636,956 \$6,665,563 \$1,028,607 189 10 SAGA \$0 \$0 \$0 00 11 OTHER \$0 \$0 \$0 00 11 OTHER \$0 \$0 \$0 09 TOTAL OUTPATIENT GROSS REVENUE \$243,235,287 \$266,262,398 \$23,027,111 99 C. TOTAL GROSS REVENUE \$132,505,548 \$146,317,421 \$13,811,873 109 2 MEDICARE TRADITIONAL \$132,505,548 \$146,317,421 \$13,811,873 109 3 MEDICAID \$65,133,062 \$81,866,543 \$16,683,481 269 <	3		\$43,050,338	\$53,507,154	\$10,456,816	24%
6 COMMERCIAL INSURANCE \$55,408,293 \$58,242,349 \$2,834,056 59 7 NON-GOVERNMENT MANAGED CARE \$36,906,213 \$36,442,168 (\$464,045) -19 8 WORKER'S COMPENSATION \$4,575,439 \$3,702,067 (\$873,372) -199 9 SELF- PAY/UNINSURED \$5,636,956 \$6,665,563 \$1,028,607 1887 10 SAGA \$0 \$0 \$0 \$0 11 OTHER \$0 \$0 \$0 \$0 11 OTHER \$0 \$0 \$0 \$0 12 MEDICARE MANAGED CARE \$38,756,281 \$49,442,011 \$10,685,730 2887 13 MEDICAID MANAGED CARE \$66,621,735 \$0 \$6,621,735 \$100 15 CHAMPUSTRICARE \$806,715 \$886,450 \$79,735 100 16 COMMERCIAL INSURANCE \$67,607,264 \$83,102,700 \$6,513,006 99 17 NON-GOVERNMENT MANAGED CARE \$52,91,330 \$52,726,488 \$435,158 119 18 WORKER'S COMPENSATION \$5,783,805 \$4,653,634 (\$1,130,171) -207 19 SELF- PAY/UNINSURED \$73,575,305 \$8,691,798 \$1,334,493 188 100 \$40 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	4	MEDICAID MANAGED CARE	\$4,976,345		(\$4,976,345)	-100%
Total Ross Revenue	5	CHAMPUS/TRICARE	\$537,685	\$672,300	\$134,615	25%
WORKER'S COMPENSATION	6		\$55,408,293	\$58,242,349	\$2,834,056	5%
9 SELF- PAY/UNINSURED \$5,636,956 \$6,665,563 \$1,028,607 189 10 SAGA \$0 \$0 \$0 0 11 OTHER \$0 \$0 \$0 90 TOTAL OUTPATIENT GROSS REVENUE \$243,235,287 \$266,262,398 \$23,027,111 99 C. TOTAL GROSS REVENUE TOTAL GROSS REVENUE ***	7	NON-GOVERNMENT MANAGED CARE	\$36,906,213	\$36,442,168		-1%
10 SAGA		WORKER'S COMPENSATION			(\$873,372)	-19%
OTHER		SELF- PAY/UNINSURED	\$5,636,956	\$6,665,563	\$1,028,607	18%
TOTAL OUTPATIENT GROSS REVENUE \$243,235,287 \$266,262,398 \$23,027,111 999	10					0%
C. TOTAL GROSS REVENUE MEDICARE TRADITIONAL \$132,505,548 \$146,317,421 \$13,811,873 107			<u> </u>			0%
MEDICARE TRADITIONAL \$13,505,548 \$146,317,421 \$13,811,873 107,		TOTAL OUTPATIENT GROSS REVENUE	\$243,235,287	\$266,262,398	\$23,027,111	9%
MEDICARE TRADITIONAL \$13,505,548 \$146,317,421 \$13,811,873 107,						
MEDICARE MANAGED CARE \$38,756,281 \$49,442,011 \$10,685,730 289			\$422 F0F F40	£4.4C 247 424	¢42.044.072	400/
MEDICAID						
MEDICAID MANAGED CARE \$6,621,735 \$0 (\$6,621,735) -1009					·	
5 CHAMPUS/TRICARE \$806,715 \$886,450 \$79,735 109 6 COMMERCIAL INSURANCE \$76,607,264 \$83,120,270 \$6,513,006 99 7 NON-GOVERNMENT MANAGED CARE \$52,291,330 \$52,726,488 \$435,158 19 8 WORKER'S COMPENSATION \$5,783,805 \$4,653,634 (\$1,130,171) -209 9 SELF- PAY/UNINSURED \$7,357,305 \$8,691,798 \$1,334,493 189 10 SAGA \$0 \$0 \$0 \$0 11 OTHER \$0 \$0 \$0 \$0 10 TOTAL GROSS REVENUE \$385,913,045 \$427,704,615 \$41,791,570 119 II. NET REVENUE BY PAYER \$25,401,334 \$22,673,728 (\$2,727,606) -119 1 MEDICARE TRADITIONAL \$25,401,334 \$22,673,728 (\$2,727,606) -119 2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772)						
6 COMMERCIAL INSURANCE \$76,607,264 \$83,120,270 \$6,513,006 99 7 NON-GOVERNMENT MANAGED CARE \$52,291,330 \$52,726,488 \$435,158 19 8 WORKER'S COMPENSATION \$5,783,805 \$4,653,634 (\$1,130,171) -209 9 SELF- PAY/UNINSURED \$7,357,305 \$8,691,798 \$1,334,493 189 10 SAGA \$0 \$0 \$0 \$0 09 11 OTHER \$0 \$0 \$0 \$0 09 11 OTHER \$385,913,045 \$427,704,615 \$41,791,570 119 II. NET REVENUE BY PAYER A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$25,401,334 \$22,673,728 (\$2,727,606) -119 2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59						
7 NON-GOVERNMENT MANAGED CARE \$52,291,330 \$52,726,488 \$435,158 19 8 WORKER'S COMPENSATION \$5,783,805 \$4,653,634 (\$1,130,171) -209 9 SELF- PAY/UNINSURED \$7,357,305 \$8,691,798 \$1,334,493 189 10 SAGA \$0 \$0 \$0 \$0 11 OTHER \$0 \$0 \$0 \$0 TOTAL GROSS REVENUE \$385,913,045 \$427,704,615 \$41,791,570 119 II. NET REVENUE BY PAYER *** <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td></t<>						
8 WORKER'S COMPENSATION \$5,783,805 \$4,653,634 (\$1,130,171) -209 9 SELF- PAY/UNINSURED \$7,357,305 \$8,691,798 \$1,334,493 189 10 SAGA \$0 \$0 \$0 09 11 OTHER \$0 \$0 \$0 09 10 TOTAL GROSS REVENUE \$385,913,045 \$427,704,615 \$41,791,570 119 II. NET REVENUE BY PAYER INPATIENT NET REVENUE INPATIENT NET REVENUE \$25,401,334 \$22,673,728 (\$2,727,606) -119 2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59						9%
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10 SAGA \$0					•	-20%
11 OTHER \$0 \$0 \$0 TOTAL GROSS REVENUE \$385,913,045 \$427,704,615 \$41,791,570 119 II. NET REVENUE BY PAYER PAYER \$25,401,334 \$22,673,728 \$2727,606 -119 1 MEDICARE TRADITIONAL \$25,401,334 \$22,673,728 \$2727,606 -119 2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 \$223,772 -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59						18%
TOTAL GROSS REVENUE \$385,913,045 \$427,704,615 \$41,791,570 119						0%
II. NET REVENUE BY PAYER A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$25,401,334 \$22,673,728 (\$2,727,606) -119 2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59	11	OTHER	\$0	\$0	\$0	0%
A. INPATIENT NET REVENUE S25,401,334 \$22,673,728 (\$2,727,606) -119 1 MEDICARE TRADITIONAL \$25,401,334 \$22,673,728 (\$2,727,606) -119 2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59		TOTAL GROSS REVENUE	\$385,913,045	\$427,704,615	\$41,791,570	11%
A. INPATIENT NET REVENUE S25,401,334 \$22,673,728 (\$2,727,606) -119 1 MEDICARE TRADITIONAL \$25,401,334 \$22,673,728 (\$2,727,606) -119 2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59	II.	NET REVENUE BY PAYER				
1 MEDICARE TRADITIONAL \$25,401,334 \$22,673,728 (\$2,727,606) -119 2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59						
2 MEDICARE MANAGED CARE \$6,046,789 \$7,311,029 \$1,264,240 219 3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59	A.					
3 MEDICAID \$6,059,905 \$6,716,915 \$657,010 119 4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59					(\$2,727,606)	-11%
4 MEDICAID MANAGED CARE \$223,772 \$0 (\$223,772) -1009 5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59					' ' '	21%
5 CHAMPUS/TRICARE \$67,500 \$70,785 \$3,285 59				\$6,716,915	\$657,010	11%
						-100%
6 COMMERCIAL INSURANCE \$12,927,217 \$10,899,954 (\$2,027,263) -16%						5%
	6	COMMERCIAL INSURANCE	\$12,927,217	\$10,899,954	(\$2,027,263)	-16%

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	RP	ISTOL HOSPITAL			
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	REPORT 165 - HOSPITAL GROSS REV		IE AND STATISTIC	C BY DAVED	
	REPORT 103 - HOSPITAL GROSS REV	ENUE, NET REVENU	DE AND STATISTIC	SOIPAIER	
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		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$9,052,381	\$9,416,163	\$363,782	4%
8	WORKER'S COMPENSATION	\$1,208,365	\$951,567	(\$256,798)	-21%
9	SELF- PAY/UNINSURED	\$13,248	\$10,370	(\$2,878)	-22%
10	SAGA	\$0	\$0 \$0	\$0 \$0	0%
11	OTHER TOTAL INPATIENT NET REVENUE	\$0 \$61,000,511	\$0 \$58,050,511	\$0 (\$2,950,000)	0% -5%
B.	OUTPATIENT NET REVENUE	\$61,000,511	\$56,050,511	(\$2,950,000)	-370
<u>в.</u> 1	MEDICARE TRADITIONAL	\$13,327,132	¢12 774 020	(\$552,212)	-4%
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$4,635,036	\$12,774,920 \$5,134,737	\$499,701	-4% 11%
3	MEDICARE MANAGED CARE MEDICAID	\$9,412,836	\$11,283,345	\$1,870,509	20%
4	MEDICAID MANAGED CARE	\$635,338	\$0	(\$635,338)	-100%
5	CHAMPUS/TRICARE	\$151,700	\$205,727	\$54,027	36%
6	COMMERCIAL INSURANCE	\$18,611,186	\$24,102,734	\$5,491,548	30%
7	NON-GOVERNMENT MANAGED CARE	\$11,724,603	\$10,925,766	(\$798,837)	-7%
8	WORKER'S COMPENSATION	\$4,575,439	\$3,702,067	(\$873,372)	-19%
9	SELF- PAY/UNINSURED	\$36,556	\$75,205	\$38,649	106%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$63,109,826	\$68,204,501	\$5,094,675	8%
	TOTAL NET BEVENUE				
C.	TOTAL NET REVENUE	\$00.700.400	* 05 440 640	(\$0.070.040)	00/
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$38,728,466	\$35,448,648	(\$3,279,818)	
3	MEDICARE MANAGED CARE MEDICAID	\$10,681,825 \$15,472,741	\$12,445,766 \$18,000,260	\$1,763,941 \$2,527,519	16%
4	MEDICAID MEDICAID MANAGED CARE	\$859,110	\$18,000,200	(\$859,110)	-100%
5	CHAMPUS/TRICARE	\$219,200	\$276,512	\$57,312	26%
6	COMMERCIAL INSURANCE	\$31,538,403	\$35,002,688	\$3,464,285	11%
7	NON-GOVERNMENT MANAGED CARE	\$20,776,984	\$20,341,929	(\$435,055)	-2%
8	WORKER'S COMPENSATION	\$5,783,804	\$4,653,634	(\$1,130,170)	-20%
9	SELF- PAY/UNINSURED	\$49,804	\$85,575	\$35,771	72%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$124,110,337	\$126,255,012	\$2,144,675	2%
	TOTAL NET KEVENGE	Ψ12 4 ,110,331	Ψ120,233,012	Ψ2,144,073	270
III.	STATISTICS BY PAYER				
Α.	DISCHARGES				
1	MEDICARE TRADITIONAL	2,875	2,740	(135)	-5%
2	MEDICARE MANAGED CARE	690	844	154	22%
3	MEDICAID	1,499	1,646	147	10%
4	MEDICAID MANAGED CARE	126	0	(126)	-100%
5	CHAMPUS/TRICARE	25	16	(9)	-36%
6	COMMERCIAL INSURANCE	1,295	1,217	(78)	-6%
7	NON-GOVERNMENT MANAGED CARE	905	837	(68)	-8%
8	WORKER'S COMPENSATION	31	16	(15)	-48%
9	SELF- PAY/UNINSURED	119	132	13	11%
10	SAGA	0	0	0	0%
11	OTHER TOTAL DISCHARGES	7,565	7,448	0 (117)	0% -2%
B.	PATIENT DAYS	7,303	7,448	(117)	-2%
<u>в.</u>	MEDICARE TRADITIONAL	12,803	12,730	(73)	-1%
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	3,116	3,776	(73) 660	21%
3	MEDICAID	5,689	5,997	308	5%
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	REPORT 165 - HOSPITAL GROSS REVE	CAL YEAR 2013	IE AND STATISTIC	C DV DAVED	
	REPORT 103 - HOSPITAL GROSS REVE	INUE, NEI KEVENU	E AND STATISTIC	SOFFATER	
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	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
4	MEDICAID MANAGED CARE	420	0	(420)	-100%
5	CHAMPUS/TRICARE	65	43	(22)	-34%
6	COMMERCIAL INSURANCE	3,997	4,100	103	3%
7	NON-GOVERNMENT MANAGED CARE	2,848	2,635	(213)	-7%
8	WORKER'S COMPENSATION	75	61	(14)	-19%
9	SELF- PAY/UNINSURED	370	368	(2)	-1%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	29,383	29,710	327	1%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	56,763	58,334	1,571	3%
2	MEDICARE MANAGED CARE	14,543	16,975	2,432	17%
3	MEDICAID	34,953	39,669	4,716	13%
4	MEDICAID MANAGED CARE	4,240	0	(4,240)	-100%
5	CHAMPUS/TRICARE	437	498	61	14%
6 7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	44,986	43,179	(1,807)	-4% -10%
8	WORKER'S COMPENSATION	29,964 3,715	27,018 2,745	(2,946) (970)	-10% -26%
9	SELF- PAY/UNINSURED	4,577	4,942	365	8%
10	SAGA	4,577	4,942	0	0%
11	OTHER	0	0	0	0%
<u> </u>	TOTAL OUTPATIENT VISITS	194,178	193,360	(818)	0%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
Α.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$5,994,603	\$6,109,952	\$115,349	2%
2	MEDICARE MANAGED CARE	\$1,544,716	\$2,126,203	\$581,487	38%
3	MEDICAID	\$11,395,844	\$15,145,449	\$3,749,605	33%
4	MEDICAID MANAGED CARE	\$1,591,944	\$0	(\$1,591,944)	-100%
5	CHAMPUS/TRICARE	\$153,258	\$155,410	\$2,152	1%
6	COMMERCIAL INSURANCE	\$6,222,781	\$7,028,198	\$805,417	13%
7	NON-GOVERNMENT MANAGED CARE	\$4,283,859	\$4,348,206	\$64,347	2%
8 9	WORKER'S COMPENSATION	\$510,541	\$492,976	(\$17,565)	-3% 10%
10	SELF- PAY/UNINSURED SAGA	\$2,751,561 \$0	\$3,037,565 \$0	\$286,004 \$0	10% 0%
11	OTHER	\$0	\$0 \$0	\$0 \$0	0%
- ' '	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	ΨΟ	ΨΟ	ΨΟ	0 70
	GROSS REVENUE	\$34,449,107	\$38,443,959	\$3,994,852	12%
	EMERGENCY DEPARTMENT OUTPATIENT NET	ψ34,443,107	ψ30,773,333	ψ3,33 4 ,032	12/0
В.	REVENUE				
1	MEDICARE TRADITIONAL	\$1,142,715	\$992,011	(\$150,704)	-13%
2	MEDICARE MANAGED CARE	\$322,067	\$385,123	\$63,056	20%
3	MEDICAID	\$2,491,669	\$3,193,803	\$702,134	28%
4	MEDICAID MANAGED CARE	\$203,246	\$0	(\$203,246)	-100%
5	CHAMPUS/TRICARE	\$43,240	\$47,556	\$4,316	10%
6	COMMERCIAL INSURANCE	\$2,090,180	\$2,908,516	\$818,336	39%
7	NON-GOVERNMENT MANAGED CARE	\$1,360,924	\$1,303,640	(\$57,284)	-4%
8	WORKER'S COMPENSATION	\$510,541	\$492,976	(\$17,565)	-3%
9	SELF- PAY/UNINSURED	\$17,844	\$34,272	\$16,428	92%
10	SAGA OTHER	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
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OFFICE	OF HEALTH CARE ACCESS TWELVE	MONTHS ACTUAL FILING			BRISTOL HOSPITA
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	REPORT 165 - HOSPITAL GROSS REVI	****	IF AND STATISTIC	CS BY PAYER	
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(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$8,182,426	\$9,357,897	\$1,175,471	14%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	4,968	4,533	(435)	-9%
2	MEDICARE MANAGED CARE	1,270	1,554	284	22%
3	MEDICAID	11,612	13,957	2,345	20%
4	MEDICAID MANAGED CARE	1,696	0	(1,696)	-100%
5	CHAMPUS/TRICARE	133	139	6	5%
6	COMMERCIAL INSURANCE	5,680	5,674	(6)	0%
7	NON-GOVERNMENT MANAGED CARE	3,892	3,619	(273)	-7%
8	WORKER'S COMPENSATION	513	455	(58)	-11%
9	SELF- PAY/UNINSURED	2,478	2,651	173	7%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	32,242	32,582	340	1%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
	Calcuina 9 Marca				
A .	Salaries & Wages: Nursing Salaries	\$20,544,785	\$21,078,367	\$533,582	3%
2	Physician Salaries	\$320,735	\$348,650	\$27,915	9%
3	Non-Nursing, Non-Physician Salaries	\$34,060,540	\$33,298,451	(\$762,089)	-2%
_	Total Salaries & Wages	\$54,926,060	\$54,725,468	(\$200,592)	0%
В.	Frings Danefita				
1	Fringe Benefits: Nursing Fringe Benefits	\$5,639,912	\$5,707,940	\$68,028	1%
2	Physician Fringe Benefits	\$88,048	\$94,413	\$6,365	7%
3	Non-Nursing, Non-Physician Fringe Benefits	\$9,350,229	\$9,017,091	(\$333,138)	-4%
	Total Fringe Benefits	\$15,078,189	\$14,819,444	(\$258,745)	-2%
	Contractual Labor Force				
<u>C.</u>	Contractual Labor Fees: Nursing Fees	\$270.700	¢200,022	\$19,300	E0/
2	Physician Fees	\$379,722 \$7,870,257	\$399,022 \$9,064,475	\$1,194,218	5% 15%
3	Non-Nursing, Non-Physician Fees	\$641,547	\$795,267	\$153,720	24%
<u> </u>	Total Contractual Labor Fees	\$8,891,526	\$10,258,764	\$1,367,238	15%
D.	Medical Supplies and Pharmaceutical Cost:	£40.504.040	# 40,000,004	\$75,000	40/
2	Medical Supplies Pharmaceutical Costs	\$10,584,242 \$7,350,724	\$10,660,064 \$7,379,776	\$75,822 \$29,052	1% 0%
	Total Medical Supplies and Pharmaceutical Cost	\$17,934,966	\$18,039,840	\$104,874	1%
<u>Е.</u> 1	Depreciation and Amortization:	\$2,160,045	¢0.400.040	(\$28,035)	40/
2	Depreciation-Building Depreciation-Equipment	\$4,105,937	\$2,132,010 \$4,177,139	\$71,202	-1% 2%
3	Amortization	\$54,594	\$54,594	\$71,202	0%
	Total Depreciation and Amortization	\$6,320,576	\$6,363,743	\$43,167	1%
	D. 10.14				
<u>F.</u> 1	Bad Debts:	fc 470 204	\$0	(¢c 470 204)	1000/
1	Bad Debts	\$6,470,291	\$0	(\$6,470,291)	-100%
G.	Interest Expense:				
1	Interest Expense	\$1,641,972	\$1,421,576	(\$220,396)	-13%
Н.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	(\$399,676)	(\$168,825)	\$230,851	-58%
l.	Utilities:	+			
	Water	\$59,970	\$69,074	\$9,104	15%
2	Natural Gas	\$683,094	\$695,677	\$12,583	2%
3	Oil	\$5,557	\$12,478	\$6,921	125%
4	Electricity	\$1,460,795	\$1,452,433	(\$8,362)	-1%
5	Telephone	\$222,485	\$392,335	\$169,850	76%
6	Other Utilities	\$184,311	\$37,418	(\$146,893)	-80%
	Total Utilities	\$2,616,212	\$2,659,415	\$43,203	2%
J.	Business Expenses:				
1	Accounting Fees	\$152,353	\$171,312	\$18,959	12%
2	Legal Fees	\$756,903	\$807,095	\$50,192	7%
3	Consulting Fees	\$1,226,968	\$1,770,585	\$543,617	44%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	ACTUAL	DIFFERENCE	DIFFERENCE
4	Dues and Membership	\$280,608	\$135,537	(\$145,071)	-52%
5	Equipment Leases	\$1,326,236	\$1,261,778	(\$64,458)	-5%
6	Building Leases	\$905,894	\$799,040	(\$106,854)	-12%
7	Repairs and Maintenance	\$733,462	\$331,185	(\$402,277)	-55%
8	Insurance	\$1,341,717	\$1,351,873	\$10,156	1%
9	Travel	\$241,530	\$186,771	(\$54,759)	-23%
10	Conferences	\$1,433	\$513	(\$920)	-64%
11	Property Tax	\$72,985	\$194,997	\$122,012	167%
12	General Supplies	\$227,699	\$434,178	\$206,479	91%
13	Licenses and Subscriptions	\$588	\$2,750	\$2,162	368%
14	Postage and Shipping	\$179,786	\$146,268	(\$33,518)	-19%
15	Advertising	\$851,838	\$864,419	\$12,581	1%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$1,723,852	\$1,960,189	\$236,337	14%
18	Computer hardware & small equipment	\$79,946	\$0	(\$79,946)	-100%
19	Dietary / Food Services	\$694,305	\$895,021	\$200,716	29%
20	Lab Fees / Red Cross charges Billing & Collection / Bank Fees	\$2,360,953	\$1,756,306 \$4,560,347	(\$604,647)	-26%
21 22		\$1,177,987	\$1,569,347 \$288,697	\$391,360 \$235,538	33%
23	Recruiting / Employee Education & Recognition	\$53,159 \$104,050		\$235,538 (\$179)	443% 0%
23	Laundry / Linen Professional / Physician Fees	\$104,050 \$0	\$103,871 \$0	(\$179 <u>)</u> \$0	0%
25	Waste disposal	\$212,486	\$195,988	(\$16,498)	-8%
26	Purchased Services - Medical	\$371,186	\$443,956	\$72,770	20%
27	Purchased Services - Medical	\$271,857	\$262,218	(\$9,639)	-4%
28	Other Business Expenses	\$5,656,406	\$5,650,355	(\$6,051)	0%
	Total Business Expenses	\$21,006,187	\$21,584,249	\$578,062	3%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$134,486,303	\$129,703,674	(\$4,782,629)	-4%
	*AK.The total operating expenses amount above mus	st agree with the to	otal operating expe	enses amount on R	eport 150
II.	OPERATING EXPENSE BY DEPARTMENT				
	General Services:				
A.	General Administration	\$2.274.606	¢2 402 670	¢210.072	7%
2	General Accounting	\$3,274,606 \$1,533,538	\$3,493,679 \$1,699,882	\$219,073 \$166,344	11%
3	Patient Billing & Collection	\$2,260,372	\$2,520,003	\$259,631	11%
4	Admitting / Registration Office	\$751,684	\$790,858	\$39,174	5%
5	Data Processing	\$4,122,221	\$4,265,069	\$142,848	3%
6	Communications	\$226,123	\$240,268	\$14,145	6%
7	Personnel	\$749,526	\$908,171	\$158,645	21%
8	Public Relations	\$1,201,673	\$1,296,926	\$95,253	8%
9	Purchasing	\$664,289	\$480,556	(\$183,733)	-28%
10	Dietary and Cafeteria	\$1,641,499	\$1,685,454	\$43,955	3%
11	Housekeeping	\$1,580,551	\$1,591,295	\$10,744	1%
12	Laundry & Linen	\$537,804	\$545,270	\$7,466	1%
13	Operation of Plant	\$5,574	\$62,044	\$56,470	1013%
14	Security	\$390,234	\$379,593	(\$10,641)	-3%
15	Repairs and Maintenance	\$4,808,127	\$4,811,924	\$3,797	0%
16	Central Sterile Supply	\$447,642	\$427,906	(\$19,736)	

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
17	Pharmacy Department	\$8,827,328	\$8,937,896	\$110,568	1%
18	Other General Services	\$1,440,548	\$1,700,104	\$259,556	18%
	Total General Services	\$34,463,339	\$35,836,898	\$1,373,559	4%
D	Professional Services				
B.	Professional Services: Medical Care Administration	\$1,885,173	\$2,071,021	\$185,848	10%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,668,183	\$1,656,938	(\$11,245)	-1%
4	Medical Records	\$1,858,801	\$1,340,929	(\$517,872)	-28%
5	Social Service	\$1,044,000	\$1,208,248	\$164,248	16%
6	Other Professional Services	\$216,754	\$224,716	\$7,962	4%
	Total Professional Services	\$6,672,911	\$6,501,852	(\$171,059)	-3%
C.	Special Services:				
1	Operating Room	\$7,969,509	\$8,101,532	\$132,023	2%
2	Recovery Room	\$728,785	\$8,011	(\$720,774)	-99%
3	Anesthesiology	\$293,016	\$333,821	\$40,805	14%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$3,045,284	\$2,354,399	(\$690,885)	-23%
6	Diagnostic Ultrasound	\$457,872	\$456,308	(\$1,564)	0%
7	Radiation Therapy	\$5,321	\$149	(\$5,172)	-97%
8	Radioisotopes	\$512,257	\$489,696	(\$22,561)	-4%
9	CT Scan	\$616,758	\$735,597	\$118,839	19%
10	Laboratory	\$7,607,400	\$7,332,065	(\$275,335)	-4%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$617,472	\$597,683	(\$19,789)	-3%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$24,368	\$23,488	(\$880)	-4%
15	Occupational Therapy	\$232,728	\$154,886	(\$77,842)	-33%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$875,391	\$867,463	(\$7,928)	-1%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$211,999	\$206,308	(\$5,691)	-3%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0 \$4,734,167	\$0 \$4,741,652	\$0 \$7,485	0% 0%
24 25	Emergency Room MRI	\$377,606		\$7,485 \$70,944	19%
26	PET Scan	\$225,182	\$448,550 \$206,530	(\$18,652)	-8%
27	PET/CT Scan	\$0	\$200,330	\$0	0%
28	Endoscopy	\$1,127,851	\$808,208	(\$319,643)	-28%
29	Sleep Center	\$1,127,851	\$173,329	\$30,019	21%
30	Lithotripsy	\$143,310	\$173,329	\$30,019	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0 \$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,630,184	\$1,713,970	\$83,786	5%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,177,288	\$3,096,907	\$919,619	42%
	Total Special Services	\$33,613,748	\$32,850,552	(\$763,196)	-2%
D.	Routine Services:				
	Medical & Surgical Units	\$7,568,545	\$7,985,829	\$417,284	6%
2	Intensive Care Unit	\$2,886,011	\$2,805,887	(\$80,124)	-3%
3	Coronary Care Unit	\$2,880,011	\$2,805,887	(\$80,124)	-3%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
4	Psychiatric Unit	\$2,300,302	\$2,222,380	(\$77,922)	-3%
5	Pediatric Unit	\$87,805	\$39,142	(\$48,663)	-55%
6	Maternity Unit	\$2,759,236	\$2,682,811	(\$76,425)	-3%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$782,877	\$772,086	(\$10,791)	-1%
11	Home Care	\$3,133,305	\$3,262,074	\$128,769	4%
12	Outpatient Clinics	\$2,951,530	\$3,556,877	\$605,347	21%
13	Other Routine Services	\$216,781	\$243,892	\$27,111	13%
	Total Routine Services	\$22,686,392	\$23,570,978	\$884,586	4%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$37,049,913	\$30,943,394	(\$6,106,519)	-16%
	Total Operating Expenses - All Departments*	\$134,486,303	\$129,703,674	(\$4,782,629)	-4%
	*A E. The total operating expenses amount above	must agree with the to	otal operating exp	enses amount on	Report 150.

	BRI	STOL HOSPITAL								
	TWELVE MONTHS ACTUAL FILING									
	FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS									
										(1)
		ACTUAL	ACTUAL	ACTUAL						
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013						
A.	Statement of Operations Summary									
1	Total Net Patient Revenue	\$125,941,019	\$130,360,493	\$126,808,091						
2	Other Operating Revenue	6,100,777	5,173,982	4,242,269						
3	Total Operating Revenue	\$132,041,796	\$135,534,475	\$131,050,360						
4	Total Operating Expenses	131,894,527	134,486,303	129,703,674						
5	Income/(Loss) From Operations	\$147,269	\$1,048,172	\$1,346,686						
6	Total Non-Operating Revenue	2,043,267	1,253,154	844,070						
7	Excess/(Deficiency) of Revenue Over Expenses	\$2,190,536	\$2,301,326	\$2,190,756						
В.	Profitability Summary									
1	Hospital Operating Margin	0.11%	0.77%	1.02%						
2	Hospital Non Operating Margin	1.52%	0.92%	0.64%						
3	Hospital Total Margin	1.63%	1.68%	1.66%						
4	Income/(Loss) From Operations	\$147,269	\$1,048,172	\$1,346,686						
5	Total Operating Revenue	\$132,041,796	\$135,534,475	\$131,050,360						
6	Total Non-Operating Revenue	\$2,043,267	\$1,253,154	\$844,070						
7	Total Revenue	\$134,085,063	\$136,787,629	\$131,894,430						
8	Excess/(Deficiency) of Revenue Over Expenses	\$2,190,536	\$2,301,326	\$2,190,756						
C.	Net Assets Summary									
1	Hospital Unrestricted Net Assets	\$427,122	(\$376,115)	\$15,896,282						
2	Hospital Total Net Assets	\$8,015,688	\$10,631,335	\$26,472,271						
3	Hospital Change in Total Net Assets	(\$204,845)	\$2,615,647	\$15,840,936						
4	Hospital Change in Total Net Assets %	97.5%	32.6%	149.0%						
D.	Cost Data Summary									
1	Ratio of Cost to Charges	0.38	0.34	0.30						
2	Total Operating Expenses	\$131,894,527	\$134,486,303	\$129,703,674						
3	Total Gross Revenue	\$345,045,491	\$385,913,045	\$427,704,615						
4	Total Other Operating Revenue	\$6,100,777	\$5,173,982	\$4,242,269						

	В	RISTOL HOSPITAL					
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)			
(1)	(2)	ACTUAL	ACTUAL	ACTUAL			
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013			
5	Private Payment to Cost Ratio	1.07	1.25	1.42			
6	Total Non-Government Payments	\$50,073,303	\$58,148,995	\$60,083,826			
7	Total Uninsured Payments	\$288,037	\$49,804	\$85,575			
8	Total Non-Government Charges	\$129,411,845	\$142,039,704	\$149,192,190			
9	Total Uninsured Charges	\$5,962,563	\$7,357,305	\$8,691,798			
10	Medicare Payment to Cost Ratio	0.85	0.84	0.81			
11	Total Medicare Payments	\$47,069,698	\$49,410,291	\$47,894,414			
12	Total Medicare Charges	\$147,497,330	\$171,261,829	\$195,759,432			
13	Medicaid Payment to Cost Ratio	0.72	0.66	0.73			
14	Total Medicaid Payments	\$18,244,907	\$16,331,851	\$18,000,260			
15	Total Medicaid Charges	\$67,117,976	\$71,804,797	\$81,866,543			
16	Uncompensated Care Cost	\$3,782,697	\$3,525,525	\$3,067,593			
17	Charity Care	\$223,751	\$3,781,958	\$5,306,456			
18	Bad Debts	\$9,847,024	\$6,470,291	\$4,909,425			
19	Total Uncompensated Care	\$10,070,775	\$10,252,249	\$10,215,881			
20	Uncompensated Care % of Total Expenses	2.9%	2.6%	2.4%			
21	Total Operating Expenses	\$131,894,527	\$134,486,303	\$129,703,674			
E.	Liquidity Measures Summary						
1	Current Ratio	1	1	1			
2	Total Current Assets	\$32,740,835	\$39,003,484	\$38,926,532			
3	Total Current Liabilities	\$27,546,189	\$26,770,362	\$26,895,793			
4	Days Cash on Hand	13	27	38			
5	Cash and Cash Equivalents	\$4,272,881	\$9,376,449	\$12,810,191			
6	Short Term Investments	96,343	96,452	96,526			

	BRISTOL I	HOSPITAL					
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013						
	REPORT 185 - HOSPITAL FINANCIAL	AND STATISTICAL D	ATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)			
		ACTUAL	ACTUAL	ACTUAL			
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	FY 2013			
7	Total Cash and Short Term Investments	\$4,369,224	\$9,472,901	\$12,906,717			
8	Total Operating Expenses	\$131,894,527	\$134,486,303	\$129,703,674			
9	Depreciation Expense	\$5,714,642	\$6,320,576	\$6,363,743			
10	Operating Expenses less Depreciation Expense	\$126,179,885	\$128,165,727	\$123,339,931			
11	Days Revenue in Patient Accounts Receivable	66	52	57			
12	Net Patient Accounts Receivable	\$20,427,829	\$16,562,143	\$16,887,452			
13	Due From Third Party Payers	\$2,379,937	\$1,964,075	\$2,757,898			
14	Due To Third Party Payers	\$0	\$0	\$0			
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$22,807,766	\$18,526,218	\$19,645,350			
16	Total Net Patient Revenue	\$125,941,019	\$130,360,493	\$126,808,091			
17	Average Payment Period	80	76	80			
18	Total Current Liabilities	\$27,546,189	\$26,770,362	\$26,895,793			
19	Total Operating Expenses	\$131,894,527	\$134,486,303	\$129,703,674			
20	Depreciation Expense	\$5,714,642	\$6,320,576	\$6,363,743			
21	Total Operating Expenses less Depreciation Expense	\$126,179,885	\$128,165,727	\$123,339,931			
F.	Solvency Measures Summary						
1	Equity Financing Ratio	7.8	9.4	23.2			
2	Total Net Assets	\$8,015,688	\$10,631,335	\$26,472,271			
3	Total Assets	\$103,125,741	\$112,654,038	\$113,932,754			
4	Cash Flow to Total Debt Ratio	14.6	16.3	16.1			
5	Excess/(Deficiency) of Revenues Over Expenses	\$2,190,536	\$2,301,326	\$2,190,756			
6	Depreciation Expense	\$5,714,642	\$6,320,576	\$6,363,743			
7	Excess of Revenues Over Expenses and Depreciation Expense	\$7,905,178	\$8,621,902	\$8,554,499			
8	Total Current Liabilities	\$27,546,189	\$26,770,362	\$26,895,793			
9	Total Long Term Debt	\$26,550,048	\$26,020,086	\$26,298,523			
10	Total Current Liabilities and Total Long Term Debt	\$54,096,237	\$52,790,448	\$53,194,316			

	BRISTO	DL HOSPITAL					
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
			/ 0				
(1)	(2)	(3)	(4)	(5)			
LINE	DESCRIPTION	ACTUAL EV 2014	ACTUAL EV 2012	ACTUAL EV 2012			
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013			
11	Long Term Debt to Capitalization Ratio	76.8	71.0	49.8			
12	Total Long Term Debt	\$26,550,048	\$26,020,086	\$26,298,523			
13	Total Net Assets	\$8,015,688	\$10,631,335	\$26,472,271			
14	Total Long Term Debt and Total Net Assets	\$34,565,736	\$36,651,421	\$52,770,794			
15	Debt Service Coverage Ratio	3.7	4.2	4.5			
16	Excess Revenues over Expenses	2,190,536	\$2,301,326	\$2,190,756			
17	Interest Expense	1,833,355	\$1,641,972	\$1,421,576			
18	Depreciation and Amortization Expense	5,714,642	\$6,320,576	\$6,363,743			
19	Principal Payments	789,832	\$797,743	\$776,377			
G.	Other Financial Ratios						
20	Average Age of Plant	17.4	16.7	17.6			
21	Accumulated Depreciation	99,185,736	105,453,829	111,762,978			
22	Depreciation and Amortization Expense	5,714,642	6,320,576	6,363,743			
Н.	Utilization Measures Summary						
1	Patient Days	28,670	29,383	29,710			
2	Discharges	7,316	7,565	7,448			
3	ALOS	3.9	3.9	4.0			
4	Staffed Beds	132	132	115			
5	Available Beds	-	154	154			
6	Licensed Beds	154	154	154			
7	Occupancy of Staffed Beds	59.5%	61.0%	70.8%			
8	Occupancy of Available Beds	51.0%	52.3%	52.9%			
9	Full Time Equivalent Employees	860.8	863.7	855.0			
I.	Hospital Gross Revenue Payer Mix Percentage						
1 2	Non-Government Gross Revenue Payer Mix Percentage Medicare Gross Revenue Payer Mix Percentage	35.8% 42.7%	34.9% 44.4%	32.8% 45.8%			

	BRISTOL	HOSPITAL					
TWELVE MONTHS ACTUAL FILING							
	FISCAL	_ YEAR 2013					
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)			
		ACTUAL	ACTUAL	ACTUAL			
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013			
3	Medicaid Gross Revenue Payer Mix Percentage	19.5%	18.6%	19.1%			
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%			
5	Uninsured Gross Revenue Payer Mix Percentage	1.7%	1.9%	2.0%			
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.2%	0.2%			
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%			
8	Non-Government Gross Revenue (Charges)	\$123,449,282	\$134,682,399	\$140,500,392			
9	Medicare Gross Revenue (Charges)	\$147,497,330	\$171,261,829	\$195,759,432			
10	Medicaid Gross Revenue (Charges)	\$67,117,976	\$71,804,797	\$81,866,543			
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0			
12	Uninsured Gross Revenue (Charges)	\$5,962,563	\$7,357,305	\$8,691,798			
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,018,340	\$806,715	\$886,450			
14	Total Gross Revenue (Charges)	\$345,045,491	\$385,913,045	\$427,704,615			
J.	Hospital Net Revenue Payer Mix Percentage						
1	Non-Government Net Revenue Payer Mix Percentage	43.0%	46.8%	47.5%			
2	Medicare Net Revenue Payer Mix Percentage	40.7%	39.8%	37.9%			
3	Medicaid Net Revenue Payer Mix Percentage	15.8%	13.2%	14.3%			
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%			
5	Uninsured Net Revenue Payer Mix Percentage	0.2%	0.0%	0.1%			
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.2%	0.2%			
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%			
8	Non-Government Net Revenue (Payments)	\$49,785,266	\$58,099,191	\$59,998,251			
9	Medicare Net Revenue (Payments)	\$47,069,698	\$49,410,291	\$47,894,414			
10	Medicaid Net Revenue (Payments)	\$18,244,907	\$16,331,851	\$18,000,260			
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0			
12	Uninsured Net Revenue (Payments)	\$288,037	\$49,804	\$85,575			
13	CHAMPUS / TRICARE Net Revenue Payments)	\$277,948	\$219,200	\$276,512			
14	Total Net Revenue (Payments)	\$115,665,856	\$124,110,337	\$126,255,012			
K.	<u>Discharges</u>						
1	Non-Government (Including Self Pay / Uninsured)	2,320	2,350	2,202			
2	Medicare	3,378	3,565	3,584			
3	Medical Assistance	1,593	1,625	1,646			
4	Medicaid	1,593	1,625	1,646			
5	Other Medical Assistance	-	-	-			
6	CHAMPUS / TRICARE	25	25	16			

	BRISTOL HOSPITAL							
	TWELVE MO	ONTHS ACTUAL FILING						
	FI	SCAL YEAR 2013						
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	FY 2013				
7	Uninsured (Included In Non-Government)	38	119	132				
8	Total	7,316	7,565	7,448				
L.	Case Mix Index							
1	Non-Government (Including Self Pay / Uninsured)	0.97450	0.96520	1.02400				
2	Medicare	1.29240	1.29960	1.25110				
3	Medical Assistance	0.93070	0.94250	0.94910				
4	Medicaid	0.93070	0.94250	0.94910				
5	Other Medical Assistance	0.00000	0.00000	0.00000				
6	CHAMPUS / TRICARE	1.16130	0.73570	0.74550				
7	Uninsured (Included In Non-Government)	0.82960	0.94000	1.08870				
8	Total Case Mix Index	1.11238	1.11715	1.11613				
M.	Emergency Department Visits							
1	Emergency Room - Treated and Admitted	5,363	5,787	5,77				
2	Emergency Room - Treated and Discharged	34,497	32,242	32,582				
3	Total Emergency Room Visits	39,860	38,029	38,353				

	BRISTOL HOSPITAL							
	TWELVE MONTHS ACTUAL FILING							
	FISCAL YEAR 2013							
	REPORT 200 - HOSPITAL ME	DICARE MANAGED (CARE ACTIVITY					
(4)	(0)	(0)	(4)	(5)	(0)			
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %			
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
I.	MEDICARE MANAGED CARE				1			
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT							
1	Inpatient Charges	\$582,821	\$852,621	\$269,800	46%			
2	Inpatient Payments	\$257,889	\$273,691	\$15,802	6%			
3	Outpatient Charges	\$995,843	\$859,784	(\$136,059)	-14%			
4	Outpatient Payments	\$290,002	\$215,989	(\$74,013)	-26%			
5	Discharges	31	38	7	23%			
6	Patient Days	75	171	96	128%			
7	Outpatient Visits (Excludes ED Visits)	598	649	51	9%			
8	Emergency Department Outpatient Visits	65	65	0	0%			
9	Emergency Department Inpatient Admissions	16	36	20	125%			
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,578,664 \$547,891	\$1,712,405 \$489,680	\$133,741 (\$58,211)	8% -11%			
	TOTAL INPATIENT & OUTPATIENT PATMENTS	\$547,091	\$409,000	(\$50,211)	-1170			
B.	CIGNA HEALTHCARE							
1	Inpatient Charges	\$0	\$0	\$0	0%			
2	Inpatient Payments	\$0	\$0	\$0	0%			
3	Outpatient Charges	\$0	\$0	\$0	0%			
4	Outpatient Payments	\$0	\$0	\$0	0%			
5	Discharges	0	0	0	0%			
6	Patient Days	0	0	0	0%			
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%			
8	Emergency Department Outpatient Visits	0	0	0	0% 0%			
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	\$ 0	0 \$0	0%			
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%			
		40	Ψ.	Ψ.	0,0			
C.	CONNECTICARE, INC.							
1	Inpatient Charges	\$4,522,539	\$5,474,841	\$952,302	21%			
2	Inpatient Payments	\$1,448,611	\$2,021,995	\$573,384	40%			
3	Outpatient Charges	\$7,202,175	\$9,355,259	\$2,153,084	30%			
4	Outpatient Payments	\$1,411,615	\$1,590,401	\$178,786	13%			
5	Discharges	197	221	24	12%			
<u>6</u> 7	Patient Days Outpatient Visits (Excludes ED Visits)	561 3,917	953 4,254	392 337	70% 9%			
8	Emergency Department Outpatient Visits	3,917	4,254 395	111	39%			
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	124	193	69	56%			
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$11,724,714	\$14,830,100	\$3,105,386	26%			
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,860,226	\$3,612,396	\$752,170	26%			
D.	HEALTHNET OF CONNECTICUT							
1	Inpatient Charges	\$0	\$0	\$0	0%			
2	Inpatient Payments	\$0	\$0	\$0	0%			
3 4	Outpatient Charges Outpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%			
5	Discharges	0	90	0	0%			
6	Patient Days	0	0	0	0%			
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%			
8	Emergency Department Outpatient Visits	0	0	0	0%			
9	Emergency Department Inpatient Admissions	0	0	0	0%			
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%			
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%			

	BRISTOI	HOSPITAL						
		S ACTUAL FILING	ì					
	FISCAL YEAR 2013							
	REPORT 200 - HOSPITAL MEDIC	CARE MANAGED (CARE ACTIVITY					
(4)	(0)	(2)	(4)	(E)	(0)			
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %			
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
E.	OTHER MEDICARE MANAGED CARE							
1	Inpatient Charges	\$63,954	\$97,778	\$33,824	53%			
3	Inpatient Payments	\$24,682	\$29,538	\$4,856 \$96,326	20% 158%			
4	Outpatient Charges Outpatient Payments	\$60,932 \$10,505	\$157,258 \$16,591	\$6,086	58%			
5	Discharges	\$10,505 1	<u>\$10,591</u>	φ0,000 4	400%			
6	Patient Days	19	14	(5)	-26%			
7	Outpatient Visits (Excludes ED Visits)	14	25	11	79%			
8	Emergency Department Outpatient Visits	14	19	5	36%			
9	Emergency Department Inpatient Admissions	4	5	1	25%			
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$124,886	\$255,036	\$130,150	104%			
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$35,187	\$46,129	\$10,942	31%			
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAG							
1	Inpatient Charges	\$0	\$0	\$0	0%			
2	Inpatient Payments	\$0	\$0	\$0	0%			
3	Outpatient Charges	\$0 \$0	\$0	\$0 \$0	0% 0%			
<u>4</u> 5	Outpatient Payments Discharges	0	\$0 0	φ ₀	0%			
6	Patient Days	0	0	0	0%			
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%			
8	Emergency Department Outpatient Visits	0	0	0	0%			
9	Emergency Department Inpatient Admissions	0	0	0	0%			
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%			
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%			
G.	UNITED HEALTHCARE INSURANCE COMPANY	•		•				
1	Inpatient Charges	\$9,220,720	\$10,100,189	\$879,469	10%			
2	Inpatient Payments	\$3,490,116	\$3,471,836	(\$18,280)	-1%			
3	Outpatient Charges	\$11,329,596	\$12,848,491	\$1,518,895	13%			
<u>4</u> 5	Outpatient Payments Discharges	\$2,376,262 367	\$2,361,637 410	(\$14,625) 43	-1% 12%			
6	Patient Days	1,950	1,857	(93)	-5%			
7	Outpatient Visits (Excludes ED Visits)	7,013	7,731	718	10%			
8	Emergency Department Outpatient Visits	668	693	25	4%			
9	Emergency Department Inpatient Admissions	379	380	1	0%			
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$20,550,316	\$22,948,680	\$2,398,364	12%			
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,866,378	\$5,833,473	(\$32,905)	-1%			
H.	WELLCARE OF CONNECTICUT			*				
1	Inpatient Charges	\$767,385	\$906,040	\$138,655	18%			
2	Inpatient Payments	\$283,876	\$323,612	\$39,736	14%			
3	Outpatient Charges	\$838,936	\$990,015	\$151,079	18%			
<u>4</u> 5	Outpatient Payments	\$135,326	\$182,993	\$47,667 12	35% 46%			
6	Discharges Patient Days	26 243	38 198	(45)	-19%			
7	Outpatient Visits (Excludes ED Visits)	425	692	267	63%			
8	Emergency Department Outpatient Visits	91	138	47	52%			
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	45	37	(8)	-18%			
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,606,321	\$1,896,055	\$289,734	18%			
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$419,202	\$506,605	\$87,403	21%			
I.	AETNA							

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2013** REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY (1) (2) (6) **AMÒÚNT** FY 2012 FY 2013 LINE DESCRIPTION **ACTUAL ACTUAL DIFFERENCE DIFFERENCE** Inpatient Charges \$1,122,170 \$3,205,900 \$2,083,730 186% 1 2 Inpatient Payments \$437,779 \$1,038,135 \$600,356 137% 3 Outpatient Charges \$1,490,990 \$3,932,596 \$2,441,606 164% 4 Outpatient Payments \$336,398 \$731.684 \$395,286 118% 5 Discharges 48 114 66 138% 6 Patient Days 206 485 279 135% 7 Outpatient Visits (Excludes ED Visits) 902 1,744 842 93% 8 **Emergency Department Outpatient Visits** 111 216 105 95% 9 **Emergency Department Inpatient Admissions** 38 101 63 166% TOTAL INPATIENT & OUTPATIENT CHARGES \$2,613,160 \$7,138,496 \$4,525,336 173% TOTAL INPATIENT & OUTPATIENT PAYMENTS \$774,177 \$1,769,819 \$995,642 129% HUMANA J. Inpatient Charges \$26.214 \$60.386 \$34,172 130% 1 2 Inpatient Payments \$15,444 \$21,269 \$5,825 38% 3 Outpatient Charges \$15,375 \$71,451 \$56,076 365% 4 Outpatient Payments \$4,048 \$11,284 179% \$7,236 200% 5 Discharges 3 2 6 Patient Days 11 13 2 18% Outpatient Visits (Excludes ED Visits) 7 25 46 21 84% 16 1500% 8 **Emergency Department Outpatient Visits** 15 1 3 **Emergency Department Inpatient Admissions** 9 3 0 0% TOTAL INPATIENT & OUTPATIENT CHARGES \$41.589 \$131.837 \$90.248 217% TOTAL INPATIENT & OUTPATIENT PAYMENTS \$19,492 \$32,553 \$13,061 67% K. **SECURE HORIZONS** Inpatient Charges \$0 \$0 \$0 0% 1 2 Inpatient Payments \$0 \$0 \$0 0% 3 **Outpatient Charges** \$0 \$0 \$0 0% 4 Outpatient Payments \$0 \$0 \$0 0% 5 Discharges 0 0 0 0% 6 Patient Days 0 0 0 0% Outpatient Visits (Excludes ED Visits) 0 0 0 0% 7 8 **Emergency Department Outpatient Visits** 0 0 0 0% 9 **Emergency Department Inpatient Admissions** 0 0 0 0% **TOTAL INPATIENT & OUTPATIENT CHARGES** \$0 \$0 \$0 0% TOTAL INPATIENT & OUTPATIENT PAYMENTS \$0 \$0 \$0 0% **UNICARE LIFE & HEALTH INSURANCE** L. Inpatient Charges \$0 0% 1 \$0 \$0 2 Inpatient Payments \$0 \$0 \$0 0% 0% 3 **Outpatient Charges** \$0 \$0 \$0 Outpatient Payments 4 \$0 \$0 \$0 0% 5 Discharges 0% 0 0 0 6 Patient Days 0 0 0 0% 7 0% Outpatient Visits (Excludes ED Visits) 0 0 0 8 **Emergency Department Outpatient Visits** 0 0 0 0% 9 **Emergency Department Inpatient Admissions** 0 0 0 0% **TOTAL INPATIENT & OUTPATIENT CHARGES** \$0 \$0 \$0 0% TOTAL INPATIENT & OUTPATIENT PAYMENTS \$0 0% \$0 \$0 М. **UNIVERSAL AMERICAN** Inpatient Charges \$0 \$0 \$0 0% 1 2 Inpatient Payments \$0 \$0 \$0 0%

	DDICTOL	LICCRITAL			
		HOSPITAL			
		IS ACTUAL FILING	<u> </u>		
		YEAR 2013	NADE ACTIVITY	•	
	REPORT 200 - HOSPITAL MEDI	CARE MANAGED C	CARE ACTIVITY		
(4)	(0)	(0)	(4)	(5)	(0)
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	Outration Charges	CO	<u>Ф</u> О	C O	00
<u>3</u>	Outpatient Charges Outpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
5	Discharges	0	0	·	0%
6	Patient Days		0	0	09
7		0		0	
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
<u>8</u> 9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ 0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS		•		09
	TOTAL INPATIENT & OUTPATIENT PATMENTS	\$0	\$0	\$0	09
N.	EVERCARE				
1 1	Inpatient Charges	\$219,637	\$396,180	\$176,543	80%
2	Inpatient Payments	\$88,392	\$130,953	\$42,561	48%
3	Outpatient Charges	\$296,994	\$133,222	(\$163,772)	-55%
4	Outpatient Charges Outpatient Payments	\$70,880	\$24,158	(\$46,722)	-66%
5	Discharges	19	15	(4)	-21%
6	Patient Days	51	85	34	67%
7	Outpatient Visits (Excludes ED Visits)	379	280	(99)	-26%
8	Emergency Department Outpatient Visits	36	12	(24)	-67%
9	Emergency Department Inpatient Admissions	14	15	(24)	7%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$516,631	\$529,402	\$12,771	2%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$159,272	\$155,111	(\$4,161)	-3%
	TOTAL INFATILITY & COTTATILITY FATMLING	Ψ139,212	φ133,111	(φ4,101)	-3 /
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$16,525,440	\$21,093,935	\$4,568,495	28%
	TOTAL INPATIENT PAYMENTS	\$6,046,789	\$7,311,029	\$1,264,240	219
	TOTAL OUTPATIENT CHARGES	\$22,230,841	\$28,348,076	\$6,117,235	28%
	TOTAL OUTPATIENT PAYMENTS	\$4,635,036	\$5,134,737	\$499,701	119
	TOTAL DISCHARGES	690	844	154	22%
	TOTAL PATIENT DAYS	3,116	3,776	660	21%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	13,273	15,421	2,148	16%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	1,270	1,554	284	22%
	TOTAL EMERGENCY DEPARTMENT INPATIENT				
	ADMISSIONS	623	770	147	24%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$38,756,281	\$49,442,011	\$10,685,730	28%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$10,681,825	\$12,445,766	\$1,763,941	179

	P.D.	ISTOL HOSPITAL			
		ISTOL HOSPITAL MONTHS ACTUAL FII	ING		
		FISCAL YEAR 2013	LING		
	REPORT 250 - HOSPITAL		ED CARE ACTIVIT	ГҮ	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
I.	MEDICAID MANAGED CARE				<u> </u>
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
A.	CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8 9	Emergency Department Outpatient Visits	0	0	0	0% 0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	\$ 0	\$0	<u> </u>	
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL INPATIENT & OUTPATIENT PATMENTS	20	\$0	\$ 0	U70
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$1,185,502	\$0	(\$1,185,502)	-100%
2	Inpatient Payments	\$158,380	\$0	(\$158,380)	-100%
3	Outpatient Charges	\$4,114,983	\$0	(\$4,114,983)	-100%
4	Outpatient Payments	\$524,385	\$0	(\$524,385)	-100%
5	Discharges	81	0	(81)	-100%
6	Patient Days	281	0	(281)	-100%
7	Outpatient Visits (Excludes ED Visits)	1,982	0	(1,982)	-100%
8	Emergency Department Outpatient Visits	1,377	0	(1,377)	-100%
9	Emergency Department Inpatient Admissions	25	0	(25)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,300,485	\$0	(\$5,300,485)	
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$682,765	\$0	(\$682,765)	-100%
	LIEAL TUNET OF THE NORTHEADT INC				
C.	HEALTHNET OF THE NORTHEAST, INC.	Φ0	ф о	Φ0	00/
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0 \$0	\$0	0%
3	Outpatient Charges Outpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
5	Discharges	0	\$0 0	<u>\$0</u>	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
_ <u></u>	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	<u> </u>	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TO THE REST OF THE PARTY OF THE	+	Ψ0	Ψ0	370
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$216,381	\$0	(\$216,381)	-100%
2	Inpatient Payments	\$29,132	\$0	(\$29,132)	
3	Outpatient Charges	\$208,233	\$0	(\$208,233)	
4	Outpatient Payments	\$37,055	\$0	(\$37,055)	-100%
5	Discharges	21	0	(21)	-100%
6	Patient Days	73	0	(73)	
7	Outpatient Visits (Excludes ED Visits)	324	0	(324)	
8	Emergency Department Outpatient Visits	3	0	(3)	
9	Emergency Department Inpatient Admissions	19	0	(19)	
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$424,614	\$0	(\$424,614)	-100%

	BRI	STOL HOSPITAL			
		ONTHS ACTUAL F	ILING		
		ISCAL YEAR 2013			
	REPORT 250 - HOSPITAL		SED CARE ACTIVIT	TY	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
	TOTAL INDATIONE O OUTDATIONE DAVMENTO	200 407	* 0	(200407)	4000/
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$66,187	\$0	(\$66,187)	-100%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0 \$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
_	FIRST CHOICE OF CONNECTICUT, PREFERRED				
F.	ONE	ФО.	ФО.	ФО.	00/
1	Inpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
3	Inpatient Payments Outpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
4	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	LINUTED LIE AL TUGADE				
G.	UNITED HEALTHCARE	¢440.500	C O	(\$440 FOO)	4000/
7	Inpatient Charges	\$110,599	\$0 \$0	(\$110,599) (\$17,789)	-100%
3	Inpatient Payments Outpatient Charges	\$17,789 \$344,400	\$0 \$0	(\$344,400)	-100% -100%
4	Outpatient Charges Outpatient Payments	\$40,112	\$0	(\$40,112)	-100%
5	Discharges	13	0	(13)	-100%
6	Patient Days	31	0	(31)	-100%
7	Outpatient Visits (Excludes ED Visits)	180	0	(180)	-100%
8	Emergency Department Outpatient Visits	135	0	(135)	-100%
9	Emergency Department Inpatient Admissions	5	0	(5)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$454,999	\$0	(\$454,999)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$57,901	\$0	(\$57,901)	-100%
Н.	AETNA	# 400.000	# 0	(\$400,000)	4000/
1	Inpatient Charges	\$132,908	\$0	(\$132,908)	-100%
2	Inpatient Payments	\$18,471	\$0	(\$18,471)	-100%
3	Outpatient Charges Outpatient Payments	\$308,729 \$33,786	\$0 \$0	(\$308,729) (\$33,786)	-100% -100%
4 5	Discharges	\$33,760 11	φ ₀	(\$33,766 <u>)</u> (11)	-100%
6	Patient Days	35	0	(35)	-100%
7	Outpatient Visits (Excludes ED Visits)	58	0	(58)	-100%
8	Emergency Department Outpatient Visits	181	0	(181)	-100%
9	Emergency Department Inpatient Admissions	8	0	(8)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$441,637	\$0	(\$441,637)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$52,257	\$0	(\$52,257)	-100%
		,		. , ,	

	BRI	STOL HOSPITAL			
		ONTHS ACTUAL F	ILING		
		ISCAL YEAR 2013			
	REPORT 250 - HOSPITAL		ED CARE ACTIVI	ГҮ	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$1,645,390	\$0	(\$1,645,390)	-100%
	TOTAL INPATIENT PAYMENTS	\$223,772	\$0	(\$223,772)	-100%
	TOTAL OUTPATIENT CHARGES	\$4,976,345	\$0	(\$4,976,345)	-100%
	TOTAL OUTPATIENT PAYMENTS	\$635,338	\$0	(\$635,338)	-100%
	TOTAL DISCHARGES	126	0	(126)	-100%
	TOTAL PATIENT DAYS	420	0	(420)	-100%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	2,544	0	(2,544)	-100%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	1,696	0	(1,696)	-100%
	TOTAL EMERGENCY DEPARTMENT				
	INPATIENT ADMISSIONS	57	0	(57)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,621,735	\$0	(\$6,621,735)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$859,110	\$0	(\$859,110)	-100%

	BRISTOL	HOSPITAL & HEALTH	CARE GROUP, INC.		
	Т	WELVE MONTHS ACTU	JAL FILING		
		FISCAL YEAR 20)13		
	REPORT 300 - PARENT CORI	PORATION CONSOLIDA	ATED BALANCE SHE	ET INFORMATION	
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>
	<u> </u>	71010712	7.010712	<u> </u>	<u> </u>
I.	<u>ASSETS</u>				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$12,928,177	\$16,318,029	\$3,389,852	26%
2	Short Term Investments	\$96,452	\$96,526	\$74	0%
	Accounts Receivable (Less: Allowance for	ψου, που	ψ00,020	Ψ	070
3	Doubtful Accounts)	\$20,476,194	\$20,536,329	\$60,135	0%
4	Current Assets Whose Use is Limited for Current Liabilities	\$650,968	\$636,385	(\$14,583)	-2%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$1,964,075	\$2,757,898	\$793,823	40%
7	Inventories of Supplies	\$1,627,771	\$1,476,432	(\$151,339)	-9%
8	Prepaid Expenses	\$860,601	\$876,588	\$15,987	2%
9	Other Current Assets	\$5,925,593	\$2,790,614	(\$3,134,979)	-53%
	Total Current Assets	\$44,529,831	\$45,488,801	\$958,970	2%
В.	Noncurrent Assets Whose Use is Limited:				
		\$0	\$0	\$0	0%
2	Held by Trustee Board Designated for Capital Acquisition	\$7,458,112	\$7,906,841	\$448,729	6%
3	Funds Held in Escrow	\$7,438,112	\$7,900,841	\$448,729	0%
	Turius Field III Escrow	φυ	φυ	φ0	076
4	Other Noncurrent Assets Whose Use is Limited	\$16,194,282	\$17,520,048	\$1,325,766	8%
	Total Noncurrent Assets Whose Use is Limited:	\$23,652,394	\$25,426,889	\$1,774,495	8%
_					
5	Interest in Net Assets of Foundation	\$2,506,470	\$2,412,864	(\$93,606)	-4%
6	Long Term Investments	\$7,231,860	\$6,800,181	(\$431,679)	-6%
7	Other Noncurrent Assets	\$2,537,453	\$2,633,889	\$96,436	4%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$156,431,776	\$162,494,718	\$6,062,942	4%
2	Less: Accumulated Depreciation	\$116,102,360	\$122,919,544	\$6,817,184	\$0
	Property, Plant and Equipment, Net	\$40,329,416	\$39,575,174	(\$754,242)	-2%
3	Construction in Progress	\$1,841,857	\$3,296,604	\$1,454,747	79%
	Total Net Fixed Assets	\$42,171,273	\$42,871,778	\$700,505	2%
	Total Assets	\$122,629,281	\$125,634,402	\$3,005,121	2%
II.	LIABILITIES AND NET ASSETS				
Α.	Current Liabilities:				

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC. TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2013** REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION (1) (2) (3) (4) (5) (6) FY 2012 FY 2013 AMOUNT DESCRIPTION DIFFERENCE LINE **ACTUAL ACTUAL** DIFFERENCE \$10,947,996 27% Accounts Payable and Accrued Expenses \$13,868,802 \$2,920,806 Salaries, Wages and Payroll Taxes \$14,340,489 \$12,169,328 (\$2,171,161)-15% Due To Third Party Payers \$0 \$0 \$0 0% Due To Affiliates \$0 \$0 \$0 0% Current Portion of Long Term Debt \$990,292 \$190,379 19% \$1,180,671 Current Portion of Notes Payable \$7,826 \$8,226 \$400 5% 7 Other Current Liabilities -7% \$3,774,737 \$3,512,933 (\$261,804)**Total Current Liabilities** \$30,061,340 \$30,739,960 \$678,620 2% В. Long Term Debt: Bonds Payable (Net of Current Portion) \$30,052,808 \$29,816,492 (\$236,316)-1% Notes Payable (Net of Current Portion) \$290,135 \$281,910 (\$8,225)-3% **Total Long Term Debt** \$30,342,943 \$30,098,402 (\$244,541) -1% 3 Accrued Pension Liability \$30,446,134 \$18,682,813 (\$11,763,321) -39% Other Long Term Liabilities \$20,373,037 \$17,505,502 (\$2,867,535)-14% **Total Long Term Liabilities** \$81,162,114 \$66,286,717 -18% (\$14,875,397) Interest in Net Assets of Affiliates or Joint 5 \$0 \$0 \$0 0% Ventures C. **Net Assets:** 1496% Unrestricted Net Assets or Equity \$1,127,653 \$18,001,943 \$16,874,290 Temporarily Restricted Net Assets \$3,585,204 \$234,633 7% \$3,350,571

\$6,927,603

\$11,405,827

\$122,629,281

\$7,020,578

\$28,607,725

\$125,634,402

\$92,975

\$17,201,898

\$3,005,121

1%

2%

151%

Permanently Restricted Net Assets

Total Liabilities and Net Assets

Total Net Assets

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 350 - PARENT	CORPORATION CONSOLIDATED	D STATEMENT OF OPERATIONS INFORMATION	M
REPORT 330 - PAREINT	CORPORATION CONSOLIDATED	J STATEMENT OF OPERATIONS INFORMATIC	JIN

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL		% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$435,147,772	\$477,828,769	\$42,680,997	10%
2	Less: Allowances	\$271,142,564	\$310,870,783	\$39,728,219	15%
3	Less: Charity Care	\$3,781,958	\$5,306,456	\$1,524,498	40%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$160,223,250	\$161,651,530	\$1,428,280	1%
5	Provision for Bad Debts Net Patient Service Revenue less provision for bad	\$0	\$6,182,431	\$6,182,431	0%
	debts	\$160,223,250	\$155,469,099	(\$4,754,151)	-3%
6	Other Operating Revenue	\$7,071,296	\$6,651,756	(\$419,540)	-6%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$167,294,546	\$162,120,855		-3%
В.	Operating Expenses:				
1	Salaries and Wages	\$76,026,760	\$77,499,039	\$1,472,279	2%
2	Fringe Benefits	\$17,641,018	\$18,236,865	\$595,847	3%
3	Physicians Fees	\$1,294,829	\$1,984,011	\$689,182	53%
4	Supplies and Drugs	\$20,892,182	\$21,777,702	\$885,520	4%
5	Depreciation and Amortization	\$7,011,232	\$7,216,365	\$205,133	3%
6	Bad Debts	\$7,606,229	\$0	(\$7,606,229)	-100%
7	Interest Expense	\$1,943,647	\$1,683,295	(\$260,352)	-13%
8	Malpractice Insurance Cost	\$1,844,897	\$2,044,820	\$199,923	11%
9	Other Operating Expenses	\$33,132,110	\$31,341,121	\$42,680,997 \$39,728,219 \$1,524,498 \$0 \$1,428,280 \$6,182,431 (\$4,754,151) (\$419,540) \$0 (\$5,173,691) \$1,472,279 \$595,847 \$689,182 \$885,520 \$205,133 (\$7,606,229) (\$260,352)	-5%
	Total Operating Expenses	\$167,392,904	\$161,783,218	(\$5,609,686)	-3%
	Income/(Loss) From Operations	(\$98,358)	\$337,637	\$435,995	-443%
C.	Non-Operating Revenue:				
1	Income from Investments	\$368,338	\$311,303	(\$57,035)	-15%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$930,385	\$546,500	(\$383,885)	-41%
	Total Non-Operating Revenue	\$1,298,723	\$857,803	(\$440,920)	-34%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$1,200,365	\$1,195,440	(\$4,925)	0%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

		AL & HEALTH CARE				
	IWELVE	MONTHS ACTUAL F	ILING			
	REPORT 350 - PARENT CORPORATION CO	NSOLIDATED STATE	EMENT OF OPERA	TIONS INFORMATI	ON	
(1) (2) (3) (4) (5)						
		FY 2012	FY 2013	AMOUNT	(6) %	
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE	
	All Other Adjustments	\$0	\$0	\$0	0%	
	Total Other Adjustments	\$0	\$0	\$0	0%	
	Excess/(Deficiency) of Revenue Over Expenses	\$1,200,365	\$1,195,440	(\$4,925)	0%	

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
(1)	(2)	ACTUAL	` '	ACTUAL
IINE	<u>DESCRIPTION</u>	FY 2011		FY 2013
LINE	DESCRIPTION	<u>F1 2011</u>	(4) ACTUAL FY 2012 \$160,223,250 7,071,296 \$167,294,546 167,392,904 (\$98,358) 1,298,723 \$1,200,365 -0.06% 0.77% 0.71% (\$98,358) \$167,294,546 \$1,298,723 \$168,593,269 \$1,200,365 \$1,127,653 \$11,405,827 (\$89,587) -0.8%	<u>F1 2013</u>
A.	Parent Corporation Statement of Operations Summary			
1	Net Patient Revenue	\$155,158,705	\$160,223,250	\$155,469,099
2	Other Operating Revenue	8,394,129	7,071,296	6,651,756
3	Total Operating Revenue	\$163,552,834	\$167,294,546	\$162,120,855
4	Total Operating Expenses	164,004,899	167,392,904	161,783,218
5	Income/(Loss) From Operations	(\$452,065)	(\$98,358)	\$337,637
6	Total Non-Operating Revenue	2,170,216	1,298,723	857,803
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,718,151	\$1,200,365	\$1,195,440
В.	Parent Corporation Profitability Summary			
1	Parent Corporation Operating Margin	-0.27%	-0.06%	0.21%
2	Parent Corporation Non-Operating Margin	1.31%	0.77%	0.53%
3	Parent Corporation Total Margin	1.04%	0.71%	0.73%
4	Income/(Loss) From Operations	(\$452,065)	(\$98,358)	\$337,637
5	Total Operating Revenue	\$163,552,834	\$167,294,546	\$162,120,855
6	Total Non-Operating Revenue	\$2,170,216	\$1,298,723	\$857,803
7	Total Revenue	\$165,723,050	\$168,593,269	\$162,978,658
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,718,151	\$1,200,365	\$1,195,440
C.	Parent Corporation Net Assets Summary			
1	Parent Corporation Unrestricted Net Assets	\$2,677,931	\$1,127,653	\$18,001,943
2	Parent Corporation Total Net Assets	\$11,495,414	\$11,405,827	\$28,607,725
3	Parent Corporation Change in Total Net Assets	\$166,638	(\$89,587)	\$17,201,898
4	Parent Corporation Change in Total Net Assets %	101.5%	-0.8%	150.8%
D.	Liquidity Measures Summary			
1	Current Ratio	1.29	1.48	1.48
2	Total Current Assets	\$40,184,352	\$44,529,831	\$45,488,801
3	Total Current Liabilities	\$31,034,808	\$30,061,340	\$30,739,960

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC. TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)	
		ACTUAL	ACTUAL	ACTUAL	
LINE	<u>DESCRIPTION</u>	FY 2011	FY 2012	FY 2013	
4	Days Cash on Hand	21	30	39	
5	Cash and Cash Equivalents	\$9,063,284	\$12,928,177	\$16,318,029	
6	Short Term Investments	\$96,343	\$96,452	\$96,526	
7	Total Cash and Short Term Investments	\$9,159,627	\$13,024,629	\$16,414,555	
8	Total Operating Expenses	\$164,004,899	\$167,392,904	\$161,783,218	
9	Depreciation Expense	\$6,287,283	\$7,011,232	\$7,216,365	
10	Operating Expenses less Depreciation Expense	\$157,717,616	\$160,381,672	\$154,566,853	
11	Days Revenue in Patient Accounts Receivable	62	51	55	
12	Net Patient Accounts Receivable	\$ 24,121,394	\$ 20,476,194	\$ 20,536,329	
13	Due From Third Party Payers	\$2,379,937	\$1,964,075	\$2,757,898	
14	Due To Third Party Payers	\$0	\$0	\$0	
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 26,501,331	\$ 22,440,269	\$ 23,294,227	
16	Total Net Patient Revenue	\$155,158,705	\$160,223,250	\$155,469,099	
17	Average Payment Period	72	68	73	
18	Total Current Liabilities	\$31,034,808	\$30,061,340	\$30,739,960	
19	Total Operating Expenses	\$164,004,899	\$167,392,904	\$161,783,218	
20	Depreciation Expense	\$6,287,283	\$7,011,232	\$7,216,365	
20	Total Operating Expenses less Depreciation Expense	\$157,717,616	\$160,381,672	\$154,566,853	
E.	Solvency Measures Summary				
1	Equity Financing Ratio	9.8	9.3	22.8	
2	Total Net Assets	\$11,495,414	\$11,405,827	\$28,607,725	
3	Total Assets	\$116,763,891	\$122,629,281	\$125,634,402	
4	Cash Flow to Total Debt Ratio	12.8	13.6	13.8	
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,718,151	\$1,200,365	\$1,195,440	

	- OF FIEAETH CARE ACCESS TWEEVE MONTHS ACT			BRISTOLTIOSFITA					
	BRISTOL HOSPITAL & HEALTH	H CARE GROUP, INC.							
	TWELVE MONTHS AC	TUAL FILING							
	FISCAL YEAR	2013							
	REPORT 385 - PARENT CORPORATION CONSO	LIDATED FINANCIAL D	OATA ANALYSIS						
(1)	(1) (2) (3) (4) (5)								
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013					
6	Depreciation Expense	\$6,287,283	\$7,011,232	\$7,216,365					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$8,005,434	\$8,211,597	\$8,411,805					
8	Total Current Liabilities	\$31,034,808	\$30,061,340	\$30,739,960					
9	Total Long Term Debt	\$31,363,489	\$30,342,943	\$30,098,402					
10	Total Current Liabilities and Total Long Term Debt	\$62,398,297	\$60,404,283	\$60,838,362					
11	Long Term Debt to Capitalization Ratio	73.2	72.7	51.3					
12	Total Long Term Debt	\$31,363,489	\$30,342,943	\$30,098,402					
13	Total Net Assets	\$11,495,414	\$11,405,827	\$28,607,725					
14	Total Long Term Debt and Total Net Assets	\$42,858,903	\$41,748,770	\$58,706,127					

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					RISTOL HOSPITA			
					MONTHS ACTUA			
					ISCAL YEAR 201			
			REPORT 40	0 - HOSPITAL INF	PATIENT BED UTI	LIZATION BY DE	PARTMENT	
(4)	(0)	(2)	(2-)	(2F)	(4)	(5)	(0)	/7 \
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
			D100114 D 0 D 0 D				OCCUPANCY	OCCUPANCY
L		PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	CU/CCU # PATIENT		BEDS (A)	<u>BEDS</u>	BEDS (A)	<u>BEDS</u>
1	Adult Medical/Surgical	19,215	5,281	5,285	65	86	81.0%	61.2%
-	Addit Medical/Surgical	19,213	5,261	5,265	00	00	01.070	01.2/0
2	ICU/CCU (Excludes Neonatal ICU)	3,019	304	0	14	14	59.1%	59.1%
		-,		-			001170	
	Psychiatric: Ages 0 to 17	0		0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	4,486		1,003	14	16	87.8%	76.8%
	TOTAL PSYCHIATRIC	4,486	1,001	1,003	14	16	87.8%	76.8%
	Data de West's a	•		0	0	0	0.00/	0.00/
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	1,515	564	565	11	15	37.7%	27.7%
	Iwaterinty	1,010	304	300		10	37.770	21.170
7	Newborn	1,422	571	575	8	20	48.7%	19.5%
		•						
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
							4.00/	4.00/
9	Pediatric	53	31	30	3	3	4.8%	4.8%
10	Other	0	0	0	0	0	0.0%	0.0%
10	Outo			U	U	J	0.070	0.070
	TOTAL EXCLUDING NEWBORN	28,288	6,877	6,883	107	134	72.4%	57.8%
		-,	-,-	-,	-	-		
	TOTAL INPATIENT BED UTILIZATION	29,710	7,448	7,458	115	154	70.8%	52.9%
	TOTAL INPATIENT REPORTED YEAR	29,710		7,458	115	154	70.8%	52.9%
	TOTAL INPATIENT PRIOR YEAR	29,383		7,563	132	154	61.0%	52.3%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	327	-117	-105	-17	0	9.8%	0.6%
	DIFFERENCE W. DEPOSTED VO. DEIOS VEAS	401	601	401	4007	801	4001	407
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	1%	-2%	-1%	-13%	0%	16%	1%
	Total Licensed Beds and Bassinets	154						
	Total Licelised Deus alla Dassillets	104						
(A) T	lnis number may not exceed the number of availa	ble beds for each	h department or in t	total.				
(, , ,	The state of the s							
Note	Total discharges do not include ICU/CCU patier	nts.						

		RISTOL HOSPITAL			
		MONTHS ACTUAL FI	LING		
	REPORT 450 - HOSPITAL INPATIENT ANI	ISCAL YEAR 2013	D SEDVICES LITH	IZATION AND ETE	
	REPORT 430 - HOSPITAL INPATIENT AND	OUTPATIENT OTHE	R SERVICES UTILI	ZATION AND FIES	
(1)	(2)	(3)	(4)	(5)	(6)
		. ,	,	()	. ,
		ACTUAL	ACTUAL	AMOUNT	%
LINE	<u>DESCRIPTION</u>	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
Α.	CT Scans (A)				
1	Inpatient Scans	3,489	3,443	-46	-1%
•	Outpatient Scans (Excluding Emergency Department	0,100	5,115	10	
	Scans)	2,792	3,466	674	24%
	Emergency Department Scans	4,028	4,419	391	10%
4	Other Non-Hospital Providers' Scans (A) Total CT Scans	10 200	0	0	0%
	Total CT Scans	10,309	11,328	1,019	10%
В.	MRI Scans (A)				
	Inpatient Scans	314	415	101	32%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	2,675	2,471	-204	-8%
	Emergency Department Scans	143	88	-55	-38%
4	Other Non-Hospital Providers' Scans (A) Total MRI Scans	0 3,132	0 2,974	<u>0</u> -158	0% - 5%
	Total Milit Godilo	3,132	2,514	100	
C.	PET Scans (A)				
1	Inpatient Scans	1	1	0	0%
_	Outpatient Scans (Excluding Emergency Department				
	Scans)	191	194	3	2% 0%
<u>3</u> 4	Emergency Department Scans Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	192	195	3	2%
D.	PET/CT Scans (A)				
11	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	004
3	Emergency Department Scans	0	0	0	0% 0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	
	Total PET/CT Scans	0	0	0	0%
	(A) If the Hospital is not the primary provider of thes			scal year	
	volume of each of these types of scans from the	primary provider of tr	ne scans.		
E.	Linear Accelerator Procedures				
_ 	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Linear Accelerator Procedures	0	0	0	0%
	Conding Cathotoniumtion Dragaduras				
<u>F.</u> 1	<u>Cardiac Catheterization Procedures</u> Inpatient Procedures	0	0	0	00/
2	Outpatient Procedures	0	0	0	0% 0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G.	Cardiac Angioplasty Procedures				
1	Primary Procedures	0	0	0	0%
2	Elective Procedures Total Cardiac Angioplasty Procedures	0	0	<u> </u>	0% 0 %
	Total Galdiac Aligiopiasty Flocedules	U	U	U	07
Н.	Electrophysiology Studies				
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%

		BRISTOL HOSPITAL			
		MONTHS ACTUAL FIL	ING		
		FISCAL YEAR 2013			
	REPORT 450 - HOSPITAL INPATIENT AN	ID OUTPATIENT OTHE	R SERVICES UTILI	ZATION AND FTES	
·4\	(2)	(0)	/4\	(F)	(0)
(1)	(2)	(3)	(4)	(5)	(6)
			* ***	****	0/
	PERSONAL	ACTUAL	ACTUAL	AMOUNT	%
<u>NE</u>	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
I.	Surgical Procedures				
1	Inpatient Surgical Procedures	1,219	1,173	-46	-4
2	Outpatient Surgical Procedures	3,412	3,464	52	2
	Total Surgical Procedures	4,631	4,637	6	0
J.	Endoscopy Procedures				
1	Inpatient Endoscopy Procedures	490	456	-34	-7
2	Outpatient Endoscopy Procedures	1,701	1,719	18	1
	Total Endoscopy Procedures	2,191	2,175	-16	-1
<.	Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	5,787	5,771	-16	(
2	Emergency Room Visits: Treated and Discharged	32,242	32,582	340	
	Total Emergency Room Visits	38,029	38,353	324	
	Total Emergency Room Visits	30,029	30,333	324	
	Hospital Clinic Visits				
 1	Substance Abuse Treatment Clinic Visits	0	0	0	(
2	Dental Clinic Visits	0	0	0	
3	Psychiatric Clinic Visits	26,892	30,233	3,341	1:
<u>4</u>	Medical Clinic Visits	0	00,200	0,011	
<u>. </u>	Medical Clinic Visits - Pediatric Clinic	0	0	0	
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	1
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	
9	Specialty Clinic Visits	0	0	0	1
0	Specialty Clinic Visits - Cardiac Clinic	0	0	0	
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	
	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	
13	Specialty Clinic Visits - Other Speciality Clinics	0	0	0	(
	Total Hospital Clinic Visits	26,892	30,233	3,341	1
<u>И.</u>	Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	91,757	77,429	-14,328	-1
2	Cardiac Rehabilitation	3,487	3,597	110	
3	Chemotherapy	8,982	9,259	277	
4	Gastroenterology	1,131	1,128	-3	
5	Other Outpatient Visits	3,039	2,967	-72	-:
	Total Other Hospital Outpatient Visits	108,396	94,380	-14,016	-1
٧.	Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	281.4	226.0	-55.4	-2
2	Total Physician FTEs	1.4	1.6	0.2	1.
3	Total Non-Nursing and Non-Physician FTEs	580.9	627.4	46.5	
_	Total Hospital Full Time Equivalent Employees	863.7	855.0	-8.7	-

OTTIC	E OF FILALITY CARL ACCESS	13 ACTUAL FILING			BRISTOLTIOSFITAL
	BRISTOL	HOSPITAL			
	TWELVE MONTH	S ACTUAL FILIN	IG		
	FISCAL Y	/EAR 2013			
RE	PORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPY AND EM	ERGENCY RO	OM SERVICES E	3Y LOCATION
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
Α.	Outpatient Surgical Procedures				
1	Bristol Hospital Campus	3,412	3,464	52	2%
·	Total Outpatient Surgical Procedures(A)	3,412	3,464	52	2%
	-				
B.	Outpatient Endoscopy Procedures				
1	Bristol Hospital Campus	1,701	1,719	18	1%
	Total Outpatient Endoscopy Procedures(B)	1,701	1,719	18	1%
C.	Outpatient Hospital Emergency Room Visits				
1	Bristol Hospital Campus	32,242	32,582	340	1%
	Total Outpatient Hospital Emergency Room Visits(C)	32,242	32,582	340	1%
	(A) Must agree with Total Outpatient Surgical Procedure	 es on Report 450).		<u> </u>
	(2.1) maet agree min retail earpailem eargiear recount		-		
	(B) Must agree with Total Outpatient Endoscopy Proced	dures on Report	450.		
	(C) Must agree with Emergency Room Visits Treated an	d Discharged or	n Report 450.		

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
I.	DATA BY MAJOR PAYER CATEGORY				
Α.	<u>MEDICARE</u>				
	MEDICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$79,117,811	\$88,728,635	\$9,610,824	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$31,448,123	\$29,984,757	(\$1,463,366)	-5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	39.75%	33.79%	-5.95%	-15%
4	DISCHARGES	3,565	3,584	19	1%
5	CASE MIX INDEX (CMI)	1.29960	1.25110	(0.04850)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,633.07400	4,483.94240	(149.13160)	-3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,787.74	\$6,687.14	(\$100.60)	-1%
8	PATIENT DAYS	15,919	16,506	587	4%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,975.51	\$1,816.60	(\$158.91)	-8%
10	AVERAGE LENGTH OF STAY	4.5	4.6	0.1	3%
	MEDICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$92,144,018	\$107,030,797	\$14,886,779	16%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$17,962,168	\$17,909,657	(\$52,511)	0%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	19.49%	16.73%	-2.76%	-14%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	116.46%	120.63%	4.16%	4%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,151.95289	4,323.27598	171.32309	4%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,326.20	\$4,142.61	(\$183.58)	-4%
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
17	TOTAL ACCRUED CHARGES	\$171,261,829	\$195,759,432	\$24,497,603	14%
18	TOTAL ACCRUED PAYMENTS	\$49,410,291	\$47,894,414	(\$1,515,877)	-3%
19	TOTAL ALLOWANCES	\$121,851,538	\$147,865,018	\$26,013,480	21%
B.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)				
	NON-GOVERNMENT INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$39,512,803	\$44,140,043	\$4,627,240	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$23,201,211	\$21,278,054	(\$1,923,157)	-8%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	58.72%	48.21%	-10.51%	-18%
4	DISCHARGES	2,350	2,202	(148)	-6%
5	CASE MIX INDEX (CMI)	0.96520	1.02400	0.05880	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,268.22000	2,254.84800	(13.37200)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,228.82	\$9,436.58	(\$792.24)	-8%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,441.07)	(\$2,749.44)	\$691.64	-20%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$7,805,113)	(\$6,199,567)	\$1,605,546	-21%
10	PATIENT DAYS	7,290	7,164	(126)	-2%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,182.61	\$2,970.14	(\$212.47)	-7%
12	AVERAGE LENGTH OF STAY	3.1	3.3	0.2	5%
	NON-GOVERNMENT OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$102,526,901	\$105,052,147	\$2,525,246	2%
13		Ψ ι υ Ζ , υ Ζ υ , Ό υ Ι	Ψ 1 U U , U U Z , 14 /	w4.J4J.Z4U	
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$34,947,784	\$38,805,772	\$3,857,988	11%

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT

AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT** % LINE DESCRIPTION FY 2012 FY 2013 DIFFERENCE **DIFFERENCE** 16 OUTPATIENT CHARGES / INPATIENT CHARGES 259.48% 238.00% -21.48% -8% -14% 17 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 6,097.72527 5,240.70236 (857.02291)29% 18 **OUTPATIENT ACCRUED PAYMENTS / OPED** \$5.731.28 \$7,404,69 \$1.673.41 19 MEDICARE- NON-GOVERNMENT OP PMT / OPED (\$1,405.08)(\$3,262.08)(\$1,856.99)132% 20 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT 100% (\$8,567,821) (\$17,095,573) (\$8,527,753)NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT) 21 TOTAL ACCRUED CHARGES \$142,039,704 \$149,192,190 \$7,152,486 5% 22 TOTAL ACCRUED PAYMENTS \$58.148.995 \$60.083.826 \$1.934.831 3% 23 TOTAL ALLOWANCES \$83,890,709 \$89,108,364 6% \$5,217,655 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT (\$16.372.933) (\$23,295,140) (\$6.922.206) 42% NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA ACCRUED CHARGES ASSOCIATED WITH NGCA 5% 25 \$128,985,172 \$135,913,793 \$6,928,621 ACCRUED PAYMENTS ASSOCIATED WITH NGCA 26 \$61,783,743 \$64,368,275 \$2,584,532 4% (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES 6% 27 \$67,201,429 \$71,545,518 \$4,344,089 TOTAL ACTUAL DISCOUNT PERCENTAGE 52.10% 52.64% 0.54% **UNINSURED** C. UNINSURED INPATIENT 18% INPATIENT ACCRUED CHARGES \$1,720,349 \$2,026,235 \$305,886 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$13,248 \$10.370 (\$2,878)-22% INPATIENT PAYMENTS / INPATIENT CHARGES 0.51% -0.26% -34% 3 0.77% DISCHARGES 11% 119 132 13 16% CASE MIX INDEX (CMI) 0.94000 1.08870 0.14870 5 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 111.86000 143.70840 31.84840 28% INPATIENT ACCRUED PAYMENT / CMAD \$118.43 \$72.16 (\$46.27)-39% -7% 8 NON-GOVERNMENT - LININSLIRED IP PMT / CMAD \$10,110.38 \$9,364.42 (\$745.96)MEDICARE - UNINSURED IP PMT / CMAD \$6,669.31 \$6,614.98 (\$54.33) -1% q INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$746,029 \$950,628 \$204,599 27% -1% PATIENT DAYS 11 370 368 (2) 12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$35.81 \$28.18 (\$7.63)-21% AVERAGE LENGTH OF STAY -10% (0.3)UNINSURED OUTPATIENT OUTPATIENT ACCRUED CHARGES (OP CHGS) \$5,636,956 \$6,665,563 \$1,028,607 18% 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$36,556 \$75,205 \$38,649 106% 0.48% 74% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 0.65% 1.13% 0% 17 **OUTPATIENT CHARGES / INPATIENT CHARGES** 327.66% 328.96% 1.30% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 389.91958 434.23113 44.31155 11% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$93.75 \$173.19 \$79.44 85% 28% NON-GOVERNMENT - UNINSURED OP PMT / OPED \$5,637.53 \$7,231.50 \$1,593.97 21 MEDICARE - UNINSURED OP PMT / OPED \$4,232.44 \$3,969.42 (\$263.02) -6% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$1,650,313 \$73,333 4% \$1,723,646 UNINSURED TOTALS (INPATIENT AND OUTPATIENT)

\$7,357,305

\$8,691,798

\$1,334,493

18%

23 TOTAL ACCRUED CHARGES

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND BASELINE UNDERPAYMENT				
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
24	TOTAL ACCRUED PAYMENTS	\$49,804	\$85,575	\$35,771	72%
25	TOTAL ALLOWANCES	\$7,307,501	\$8,606,223	\$1,298,722	18%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,396,342	\$2,674,275	\$277,932	12%
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$23,778,114	\$28,359,389	\$4,581,275	19%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,283,677	\$6,716,915	\$433,238	7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.43%	23.68%	-2.74%	-10%
4	DISCHARGES	1,625	1,646	21	1%
5	CASE MIX INDEX (CMI)	0.94250	0.94910	0.00660	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,531.56250	1,562.21860	30.65610	2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,102.79	\$4,299.60	\$196.81	5%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,126.03	\$5,136.98	(\$989.05)	-16%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,684.96	\$2,387.54	(\$297.41)	-11%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,112,178	\$3,729,862	(\$382,316)	-9%
11	PATIENT DAYS	6,109	5,997	(112)	-2%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,028.59	\$1,120.05	\$91.45	9%
13	AVERAGE LENGTH OF STAY	3.8	3.6	(0.1)	-3%
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$48,026,683	\$53,507,154	\$5,480,471	11%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$10,048,174	\$11,283,345	\$1,235,171	12%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.92%	21.09%	0.17%	1%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	201.98%	188.68%		-7%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,282.15097	3,105.59496	(176.55601)	-5%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,061.46	\$3,633.23	\$571.77	19%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$2,669.82	\$3,771.46	\$1,101.64	41%
21	MEDICARE - MEDICAID OP PMT / OPED	\$1,264.74	\$509.38	(\$755.36)	-60%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,151,059	\$1,581,931	(\$2,569,128)	-62%
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$71,804,797	\$81,866,543	\$10,061,746	14%
24	TOTAL ACCRUED PAYMENTS	\$16,331,851	\$18,000,260	\$1,668,409	10%
25	TOTAL ALLOWANCES	\$55,472,946	\$63,866,283	\$8,393,337	15%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,263,237	\$5,311,793	(\$2,951,444)	-36%
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS				
		ACTUAL	ACTUAL	AMOUNT	0/
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$10,228.82	\$9,436.58	(\$792.24)	-8%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$6,787.74	\$6,687.14	(\$100.60)	-1%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	OTHER MEDICAL ASSISTANCE OUTPATIENT			•-	
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
	NON-GOVERNMENT - O.M.A OP PMT / CMAD MEDICARE - O.M.A. OP PMT / CMAD	\$5,731.28	\$7,404.69 \$4,442.64	\$1,673.41	29%
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,326.20 \$0	\$4,142.61 \$0	(\$183.58) \$0	-4% 0%
	OUTFATIENT OFFER LIMIT (OVER) / UNDERFATMENT	ΦΟ	ΨΟ	Φ0	076
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIE	NT)			
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
		00		0.0	201
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICA	L ASSISTANCE	E)		
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$23,778,114	\$28,359,389	\$4,581,275	19%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,283,677	\$6,716,915	\$433,238	7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.43%	23.68%	-2.74%	-10%
	DISCHARGES	1,625	1,646	21	1%
	CASE MIX INDEX (CMI)	0.94250	0.94910	0.00660	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,531.56250	1,562.21860	30.65610	2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,102.79	\$4,299.60	\$196.81	5%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$6,126.03	\$5,136.98	(\$989.05)	-16%
	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,684.96	\$2,387.54	(\$297.41)	-11%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,112,178	\$3,729,862	(\$382,316)	-9%
	PATIENT ACCOUNT PAYABLE (PATIENT PAY	6,109	5,997	(112)	-2%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY AVERAGE LENGTH OF STAY	\$1,028.59	\$1,120.05	\$91.45	9%
13	AVERAGE LENGTH OF STAY	3.8	3.6	(0.1)	-3%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$48,026,683	\$53,507,154	\$5,480,471	11%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$10,048,174	\$11,283,345	\$1,235,171	12%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.92%	21.09%	0.17%	1%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	201.98%	188.68%	-13.30%	-7%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,282.15097	3,105.59496	(176.55601)	-5%

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE	
	<u>BESSKII TION</u>	112012	112010	DITTERCITOE	DITTERENCE	
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,061.46	\$3,633.23	\$571.77	19%	
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,669.82	\$3,771.46	\$1,101.64	41%	
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$1,264.74	\$509.38	(\$755.36)	-60%	
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,151,059	\$1,581,931	(\$2,569,128)	-62%	
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIEN	<u>T)</u>				
23	TOTAL ACCRUED CHARGES	\$71,804,797	\$81,866,543	\$10,061,746	14%	
24	TOTAL ACCRUED PAYMENTS	\$16,331,851	\$18,000,260	\$1,668,409	10%	
25	TOTAL ALLOWANCES	\$55,472,946	\$63,866,283	\$8,393,337	15%	
G.	CHAMPUS / TRICARE					
	CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$269,030	\$214,150	(\$54,880)	-20%	
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$67,500	\$70,785	\$3,285	5%	
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.09%	33.05%	7.96%	32%	
4	DISCHARGES	25	16	(9)	-36%	
5	CASE MIX INDEX (CMI)	0.73570	0.74550	0.00980	1%	
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	18.39250	11.92800	(6.46450)	-35%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,669.97	\$5,934.36	\$2,264.38	62%	
8	PATIENT DAYS	65	43	(22)	-34%	
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,038.46	\$1,646.16	\$607.70	59%	
10	AVERAGE LENGTH OF STAY	2.6	2.7	0.1	3%	
	CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$537,685	\$672,300	\$134,615	25%	
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$151,700	\$205,727	\$54,027	36%	
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
40		\$006.71F	\$00C 4E0	¢70.725	100/	
13	TOTAL ACCRUED CHARGES	\$806,715	\$886,450	\$79,735	10%	
14	TOTAL ALLOWANCES	\$219,200	\$276,512	\$57,312	26%	
15	TOTAL ALLOWANCES	\$587,515	\$609,938	\$22,423	4%	
Н.	OTHER DATA					
1	OTHER OPERATING REVENUE	\$5,173,982	\$4,242,269	(\$931,713)	-18%	
2	TOTAL OPERATING EXPENSES	\$134,486,303	\$129,703,674	(\$4,782,629)	-4%	
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%	
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$3,781,958	\$5,306,456	\$1,524,498	40%	
	BAD DEBTS (CHARGES)	\$6,470,291	\$4,909,425	(\$1,560,866)	-24%	
6	UNCOMPENSATED CARE (CHARGES)	\$10,252,249	\$10,215,881	(\$36,368)	0%	
7	COST OF UNCOMPENSATED CARE	\$3,359,900	\$3,099,757	(\$260,144)	-8%	
	TOTAL MEDICAL ACCIOTANCE UNDERDAVARTE (TACTUME METICAL)	0000				
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOI		#04.000.540	M40.004.740	4.407	
8	TOTAL ACCRUED CHARGES	\$71,804,797	\$81,866,543	\$10,061,746	14%	
9	TOTAL ACCRUED PAYMENTS	\$16,331,851	\$18,000,260	\$1,668,409	10%	
10	COST OF TOTAL MEDICAL ASSISTANCE	\$23,532,100	\$24,840,378	\$1,308,278	6%	

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

ACTUAL ACTUAL ACTUAL AMOUNT INCOME EV 2012 FV 2013 DIFFERENCE EV 2013 EV 2	% DIFFERENCE -5%
INDEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	DIFFERENCE
MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	
II. AGGREGATE DATA	-5%
A. TOTALS - ALL PAYERS 1 TOTAL INPATIENT CHARGES 2 TOTAL INPATIENT CHARGES 3 \$142,677,758 \$161,442,217 \$18,764,459 2 TOTAL INPATIENT PAYMENTS 3 \$61,000,511 \$58,050,511 (\$2,950,000 3 TOTAL INPATIENT PAYMENTS (\$61,000,511 \$58,050,511 (\$2,950,000 3 TOTAL INPATIENT PAYMENTS (\$61,000,511 \$58,050,511 (\$2,950,000 4 TOTAL DISCHARGES 7,565 7,448 (177 5 TOTAL CASE MIX INDEX 1,111715 1,11613 (0,00102 6 TOTAL CASE MIX ADJUSTED DISCHARGES 8,451,24900 8,312,93700 (138,31200 7 TOTAL OUTPATIENT CHARGES \$243,235,287 \$266,262,398 \$23,027,111 8 OUTPATHENT CHARGES (170,400) 1,700,400 1,700	
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TOTAL PAYMENTS \$124,110,337 \$126,255,012 \$2,144,675 \$2,154,1075 \$3,105,105,105 \$3,105,105,105 \$3,105,105,105 \$3,105,105,105 \$3,105,105 \$3,105,105 \$3,105,105 \$3,105,105 \$3,105,105 \$3,	
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PATIENT DAYS 29,383 29,710 327	
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3 GOVT. INPATIENT PAYMENTS / CHARGES 36.64% 31.35% -5.29% 4 DISCHARGES 5,215 5,246 31 5 CASE MIX INDEX 1.18562 1.15480 (0.03082 6 CASE MIX ADJUSTED DISCHARGES 6,183.02900 6,058.08900 (124.94000 7 OUTPATIENT CHARGES \$140,708,386 \$161,210,251 \$20,501,865 8 OUTPATIENT CHARGES / INPATIENT CHARGES 136.39% 137.43% 1.04% 9 OUTPATIENT PAYMENTS \$28,162,042 \$29,398,729 \$1,236,687 10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 20.01% 18.24% -1.78% 11 TOTAL CHARGES \$243,873,341 \$278,512,425 \$34,639,084 12 TOTAL PAYMENTS \$65,961,342 \$66,171,186 \$209,844 13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	
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6 CASE MIX ADJUSTED DISCHARGES 6,183.02900 6,058.08900 (124.94000 7 OUTPATIENT CHARGES \$140,708,386 \$161,210,251 \$20,501,865 8 OUTPATIENT CHARGES / INPATIENT CHARGES 136.39% 137.43% 1.04% 9 OUTPATIENT PAYMENTS \$28,162,042 \$29,398,729 \$1,236,687 10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 20.01% 18.24% -1.78% 11 TOTAL CHARGES \$243,873,341 \$278,512,425 \$34,639,084 12 TOTAL PAYMENTS \$65,961,342 \$66,171,186 \$209,844 13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	1%
7 OUTPATIENT CHARGES \$140,708,386 \$161,210,251 \$20,501,865 8 OUTPATIENT CHARGES / INPATIENT CHARGES 136.39% 137.43% 1.04% 9 OUTPATIENT PAYMENTS \$28,162,042 \$29,398,729 \$1,236,687 10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 20.01% 18.24% -1.78% 11 TOTAL CHARGES \$243,873,341 \$278,512,425 \$34,639,084 12 TOTAL PAYMENTS \$65,961,342 \$66,171,186 \$209,844 13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	-3%
8 OUTPATIENT CHARGES / INPATIENT CHARGES 136.39% 137.43% 1.04% 9 OUTPATIENT PAYMENTS \$28,162,042 \$29,398,729 \$1,236,687 10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 20.01% 18.24% -1.78% 11 TOTAL CHARGES \$243,873,341 \$278,512,425 \$34,639,084 12 TOTAL PAYMENTS \$65,961,342 \$66,171,186 \$209,844 13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	-2%
9 OUTPATIENT PAYMENTS \$28,162,042 \$29,398,729 \$1,236,687 10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 20.01% 18.24% -1.78% 11 TOTAL CHARGES \$243,873,341 \$278,512,425 \$34,639,084 12 TOTAL PAYMENTS \$65,961,342 \$66,171,186 \$209,844 13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	15%
10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 20.01% 18.24% -1.78% 11 TOTAL CHARGES \$243,873,341 \$278,512,425 \$34,639,084 12 TOTAL PAYMENTS \$65,961,342 \$66,171,186 \$209,844 13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	1%
11 TOTAL CHARGES \$243,873,341 \$278,512,425 \$34,639,084 12 TOTAL PAYMENTS \$65,961,342 \$66,171,186 \$209,844 13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	4%
12 TOTAL PAYMENTS \$65,961,342 \$66,171,186 \$209,844 13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	-9%
13 TOTAL PAYMENTS / CHARGES 27.05% 23.76% -3.29% 14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	14%
14 PATIENT DAYS 22,093 22,546 453 15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	0%
15 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	-12%
	2%
C AVERAGE LENGTH OF STAY	19%
	00/
1 MEDICARE 4.5 4.6 0.1	3%
2 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 3.1 3.3 0.2 3 UNINSURED 3.1 2.8 (0.3	
3 UNINSURED 3.1 2.8 (0.3 4 MEDICAID 3.8 3.6 (0.1	
5 OTHER MEDICAL ASSISTANCE	0%
6 CHAMPUS / TRICARE 2.6 2.7 0.1	3%
7 TOTAL AVERAGE LENGTH OF STAY 3.9 4.0 0.1	3%
5.0	370
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION	
1 TOTAL CHARGES \$385,913,045 \$427,704,615 \$41,791,570	11%
2 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240	19%

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE	
	DESCRIPTION	11 2012	1 1 2013	DITTERENCE	DIFFERENCE	
3	UNCOMPENSATED CARE	\$10,252,249	\$10,215,881	(\$36,368)		
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$67,201,429	\$71,545,518	\$4,344,089	6%	
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$4,074,697	\$3,825,586	(\$249,111)	-6%	
6	TOTAL ADJUSTMENTS	\$259,440,374	\$297,928,224	\$38,487,850	15%	
7	TOTAL ACCRUED PAYMENTS	\$126,472,671	\$129,776,391	\$3,303,720	3%	
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%	
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$126,472,671	\$129,776,391	\$3,303,720	3%	
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3277232336	0.3034252763	(0.0242979573)	-7%	
11	COST OF UNCOMPENSATED CARE	\$3,359,900	\$3,099,757	(\$260,144)	-8%	
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$7,200,249	\$6,840,118	(\$360,131)	-5%	
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%	
14	TOTAL COST OF UNCOMPENSATED CARE AND					
	MEDICAL ASSISTANCE UNDERPAYMENT	\$10,560,149	\$9,939,875	(\$620,275)	-6%	
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLO	<u>GY)</u>				
1	MEDICAID	\$4,151,059	\$1,581,931	(\$2,569,128)	-62%	
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%	
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,396,342	\$2,674,275	\$277,932	12%	
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$6,547,401	\$4,256,206	(\$2,291,195)	-35%	
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$6,283,264	\$5,275,587	(\$1,007,677)	-16.04%	
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$6,250,607	\$553,490	(\$5,697,117)	-91.15%	
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$130,360,493	\$126,808,091	(\$3,552,402)	-2.73%	
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	ΦO	ФО.	# 0	0.00%	
		\$0	\$0	\$0	0.00%	
	GROSS REVENUE FROM HOSP AUDIT. FINANCIAL STATEMENTS	\$385,913,045	\$427,704,210	\$41,791,165	10.83%	
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%	
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$10,252,249	\$10,215,881	(\$36,368)	-0.35%	

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2012</u>	ACTUAL <u>FY</u> 2013	AMOUNT DIFFERENCE
T.	ACCRUED CHARGES AND PAYMENTS			
1.	ACCROED CHARGES AND FATMENTS			
	INPATIENT ACCRUED CHARGES	**********	211112212	*
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$39,512,803 \$79,117,811	\$44,140,043 88,728,635	\$4,627,240 \$9,610,824
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$23,778,114	28,359,389	\$4,581,275
	MEDICAID	\$23,778,114	28,359,389	\$4,581,275
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$0 \$269,030	214,150	\$0 (\$54,880)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,720,349	2,026,235	\$305,886
	TOTAL INPATIENT GOVERNMENT CHARGES	\$103,164,955	\$117,302,174	\$14,137,219
	TOTAL INPATIENT CHARGES	\$142,677,758	\$161,442,217	\$18,764,459
	OUTPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$102,526,901	\$105,052,147	\$2,525,246
3	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$92,144,018 \$48,026,683	107,030,797 53,507,154	\$14,886,779 \$5,480,471
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$48,026,683	53,507,154	\$5,480,471
	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$537,685 \$5,636,956	672,300 6,665,563	\$134,615 \$1,028,607
-/	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$140,708,386	\$161,210,251	\$1,026,607 \$20,501,865
	TOTAL OUTPATIENT CHARGES	\$243,235,287	\$266,262,398	\$23,027,111
C.	TOTAL ACCRUED CHARGES			
1	TOTAL ACCROED CHARGES TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$142.039.704	\$149,192,190	\$7,152,486
2	TOTAL MEDICARE	\$171,261,829	\$195,759,432	\$24,497,603
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$71,804,797	\$81,866,543	\$10,061,746
<u>4</u> 5	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$71,804,797 \$0	\$81,866,543 \$0	\$10,061,746 \$0
6	TOTAL CHAMPUS / TRICARE	\$806,715	\$886,450	\$79,735
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,357,305	\$8,691,798	\$1,334,493
	TOTAL GOVERNMENT CHARGES TOTAL CHARGES	\$243,873,341 \$385,913,045	\$278,512,425 \$427,704,615	\$34,639,084 \$41,791,570
	TOTAL CHARGES	\$303,913,043	\$421,104,013	φ 4 1,791,370
D.	INPATIENT ACCRUED PAYMENTS			
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$23,201,211 \$31,448,123	\$21,278,054 29,984,757	(\$1,923,157) (\$1,463,366)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,283,677	6,716,915	\$433,238
4	MEDICAID	\$6,283,677	6,716,915	\$433,238
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$0 \$67,500	70,785	\$0 \$3,285
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$13,248	10.370	(\$2.878)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$37,799,300	\$36,772,457	(\$1,026,843)
	TOTAL INPATIENT PAYMENTS	\$61,000,511	\$58,050,511	(\$2,950,000)
E.	OUTPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$34,947,784	\$38,805,772	\$3,857,988
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$17,962,168 \$10,048,174	17,909,657	(\$52,511) \$1,225,471
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$10,048,174 \$10,048,174	11,283,345 11,283,345	\$1,235,171 \$1,235,171
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
	CHAMPUS / TRICARE	\$151,700	205,727	\$54,027
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$36,556 \$28,162,042	75,205 \$29,398,729	\$38,649 \$1,236,687
	TOTAL OUTPATIENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$63,109,826	\$68,204,501	\$5,094,675
F.	TOTAL ACCRUED PAYMENTS			
	TOTAL ACCROED PATMENTS TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$58,148,995	\$60,083,826	\$1,934,831
2	TOTAL MEDICARE	\$49,410,291	\$47,894,414	(\$1,515,877)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$16,331,851 \$16,331,851	\$18,000,260	\$1,668,409
4 5	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$16,331,851 \$0	\$18,000,260 \$0	\$1,668,409 \$0
	TOTAL CHAMPUS / TRICARE	\$219,200	\$276,512	\$57,312
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$49,804	\$85,575	\$35,771
	TOTAL GOVERNMENT PAYMENTS TOTAL PAYMENTS	\$65,961,342 \$124,110,337	\$66,171,186 \$126,255,012	\$209,844 \$2,144,675
—	TOTAL FATWENTS	\$124,110,337	\$126,255,012	\$2,144,675

TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013

BASELINE UNDERPAYMENT DATA	

(1)	(2)	(3)	(4)	(5)
LINE	<u>DESCRIPTION</u>	ACTUAL FY 2012	ACTUAL <u>FY</u> 2013	AMOUNT DIFFERENCE
II	PAYER MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10.24%	10.32%	0.08%
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	20.50% 6.16%		0.24% 0.47%
	MEDICAID CONTINUE CON	6.16%	6.63%	0.47%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00% 0.07%		0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.45%	0.47%	0.03%
	TOTAL INPATIENT GOVERNMENT PAYER MIX TOTAL INPATIENT PAYER MIX	26.73% 36.97%		0.69% 0.77%
		50.0170	0111078	070
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.57%		-2.01%
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.88% 12.44%	25.02% 12.51%	1.15% 0.07%
4	MEDICAID	12.44%	12.51%	0.07%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00% 0.14%		0.00% 0.02%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.46%		0.02%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	36.46%		1.23%
	TOTAL OUTPATIENT PAYER MIX	63.03%	62.25%	-0.77%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.69%	16.85%	-1.84%
2	MEDICARE	25.34%	23.75%	-1.59%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	5.06% 5.06%	5.32% 5.32%	0.26% 0.26%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.05% 0.01%		0.00%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	30.46%		-1.33%
	TOTAL INPATIENT PAYER MIX	49.15%	45.98%	-3.17%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	28.16%	30.74%	2.58%
2	MEDICARE	14.47%		-0.29%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	8.10% 8.10%		0.84% 0.84%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.12% 0.03%		0.04% 0.03%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	22.69%		0.59%
	TOTAL OUTPATIENT PAYER MIX	50.85%	54.02%	3.17%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIR	RED DATA		
Α.	DISCHARGES			
			0.555	//
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	2,350 3,565		(148) 19
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,625	1,646	21
	MEDICAID OTHER MEDICAL ASSISTANCE	1,625		21
6	CHAMPUS / TRICARE	25	16	(9)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	119		13
	TOTAL GOVERNMENT DISCHARGES TOTAL DISCHARGES	5,215 7,565		31 (117)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
(1)	(4)	, ,	, ,	, ,
		ACTUAL	ACTUAL FY	AMOUNT
LINE	<u>DESCRIPTION</u>	<u>FY 2012</u>	<u>2013</u>	<u>DIFFERENCE</u>
В.	PATIENT DAYS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	7,290 15,919	7,164	(126) 587
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,109	16,506 5,997	(112)
	MEDICAID	6,109	5,997	(112)
	OTHER MEDICAL ASSISTANCE	0	0	-
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	65 370	43 368	(22)
	TOTAL GOVERNMENT PATIENT DAYS	22,093	22,546	453
	TOTAL PATIENT DAYS	29,383	29,710	327
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.3	0.2
2	MEDICARE	4.5	4.6	0.1
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.8	3.6	(0.1)
	MEDICAID OTHER MEDICAL ASSISTANCE	3.8	3.6	(0.1)
	CHAMPUS / TRICARE	2.6	2.7	0.1
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.1	2.8	(0.3)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.2	4.3	0.1
	TOTAL AVERAGE LENGTH OF STAY	3.9	4.0	0.1
D.	CASE MIX INDEX			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.96520	1.02400	0.05880
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.29960 0.94250	1.25110 0.94910	(0.04850) 0.00660
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.94250	0.94910	0.00660
	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
	CHAMPUS / TRICARE	0.73570	0.74550	0.00980
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.94000	1.08870	0.14870
	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX	1.18562 1.11715	1.15480 1.11613	(0.03082) (0.00102)
	TOTAL GAGE WITH INDEX	1.11710	1.11010	(0.00102)
E.	OTHER REQUIRED DATA			
	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$100 OOF 170	¢425.042.702	re 020 e24
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$128,985,172	\$135,913,793	\$6,928,621
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$61,783,743	\$64,368,275	\$2,584,532
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	#07.004.400	Ф74 F4F F40	MADA4000
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE	\$67,201,429 52.10%	\$71,545,518 52.64%	\$4,344,089 0.54%
	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$6,283,264	\$5,275,587	(\$1,007,677)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$4,074,697	\$3,825,586	(\$249,111)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-	\$0	\$0	
	OHCA INPUT)	A		\$0
	CHARITY CARE	\$3,781,958	\$5,306,456 \$4,000,435	\$1,524,498
	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$6,470,291 \$10,252,249	\$4,909,425 \$10.215.881	(\$1,560,866) (\$36,368)
	TOTAL OTHER OPERATING REVENUE	\$5,173,982	\$4,242,269	(\$931,713)
12	TOTAL OPERATING EXPENSES	\$134,486,303	\$129,703,674	(\$4,782,629)
TF 7	DOLLLIDDED DAVMENT LIMIT OALOUL ATIONS			
17.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
Α.	CASE MIX ADJUSTED DISCHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,268.22000	2,254.84800	(13.37200)
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,633.07400	4,483.94240	(149.13160)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	1,531.56250 1,531.56250	1,562.21860 1,562.21860	30.65610 30.65610
	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	18.39250	11.92800	(6.46450)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	111.86000	143.70840	31.84840

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES 8,451,24900 6,586,68800 (124,9400) TOTAL CASE MIX ADJUSTED DISCHARGES 8,451,24900 5,312,33700 (138,3120)	(1)	(2)	(3)	(4)	(5)
DITAL CASE MIX ADJUSTED DISCHARGES 8.491.24900 8.312.93700 (138.31201)	LINE	DESCRIPTION			AMOUNT DIFFERENCE
DITAL CASE MIX ADJUSTED DISCHARGES 8.491.24900 8.312.93700 (138.31201)		TOTAL COVERNMENT CASE MIX AR HISTER RICCHARGES	C 402 02000	C 050 00000	(404.04000)
B. QUIPATIENT EQUIVALENT DISCHARGES CALCULATION REVENUE METHODOLOGY) 5,007 7057 5,30 7020 467 0207				,	(124.94000)
NON-GOVERNMENT (INCLUDING SELF PAY / LININGURED)		TOTAL GAGE MIX ABGGGTED BIGGTATION	3,101121000	5,012.00100	(10010120)
2. MEDICANE 4.151.92289 4.323.27889 171.3282 171.3282 180.07 176.5664 176.5664 176.5664 180.00 180.00 176.5664 176.56	В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
2. MEDICANE 4.151.92289 4.323.27889 171.3282 171.3282 180.07 176.5664 176.5664 176.5664 180.00 180.00 176.5664 176.56	1	NON-GOVERNMENT (INCLUDING SELE PAY / LININGUEED)	6 007 72527	5 240 70236	-857 02201
MEDICAID 3.28.15097 3.105.59496 4.75.5960 0.000000 0.000000 0.000000 0.000000 0.000000 0.000000 0.000000 0.000000 0.000000 0.000000 0.000000 0.000000 0.0000000 0.000000 0.0000000 0.0000000 0.0000000 0.00000000					171.32309
SO THER MEDICAL ASSISTANCE					-176.55601
G. CHAMPUS, TRICARE 49,96016 50,20021 0.28055 1.2017 1.00180000 1.00180000 1.00180000 1.00180000 1.001800000 1.001800000 1.0018000000 1.0018000000000000000000000000000000000	-		· · · · · · · · · · · · · · · · · · ·	ŕ	-176.55601
VUNISURED (INCLUDED IN NON-GOVERNMENT)					0.26506
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE 1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 2 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 4 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 5 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 6 CHAMPUS / TRICABE 1 MON-GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE 5 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 5 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 1 NON-GOVERNMENT (INCLUDING OTHER MEDICAL ASSISTANCE) 2 MEDICAL (INCLUDING OTHER MEDICAL ASSISTANCE) 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 5 MEDICAL (INCLUDING OTHER MEDICAL ASSISTANC				434.23113	44.31155
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE 1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 2 MEDICARE 3 NON-GOVERNMENT (INCLUDING OTHER MEDICAL ASSISTANCE) 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 VA10279 3 VA298 60 3 MEDICAL ASSISTANCE 3 SA0009 3 VA298 60 3 SH96.8 4 MEDICAL ASSISTANCE 3 SA0009 3 VA298 60 3 SH96.8 5 OTHER MEDICAL ASSISTANCE 3 SA0009 3 VA298 60 3 SH96.8 5 OTHER MEDICAL ASSISTANCE 3 SA0009 3 VA298 60 3 SH96.8 5 OTHER MEDICAL ASSISTANCE 3 SA0009 3 VA298 60 3 SH96.8 5 OTHER MEDICAL ASSISTANCE 3 SA0009 3 VA298 60 3 SH96.8 5 OTHER MEDICAL ASSISTANCE 3 SA0009 3 VA298 60 3 VA2					-4.96786
NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$10,228.82 \$9,436.58 \$797.22		TOTAL OUTPATIENT EQUIVALENT DISCHARGES	13,581.79428	12,719.80351	-861.99077
2 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
2 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1	NON COVERNMENT (INCLLIDING SELE DAY / LININGLIDED)	\$10.228.82	¢0.436.59	(\$702.24)
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)				4 - 7	(\$100.60)
SOUND SOUN	3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,102.79	\$4,299.60	\$196.81
6 CHAMPUS / TRICARE \$3,669.97 \$5,934.36 \$2,243.37 TOTAL GOVERNMENT INFATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$6,113.40 \$6,069.98 \$43.47 TOTAL GOVERNMENT INFATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$7,217.93 \$6,983.15 \$(\$23.47) D. OUTPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$7,217.93 \$6,983.15 \$(\$23.47) D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$7,217.93 \$6,983.15 \$(\$23.47) D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$1,000.00 1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$5,731.28 \$7,404.69 \$1,673.47 2 MEDICARE \$4,326.20 \$4,142.61 \$(\$183.51 3 MEDICALA SSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$3,061.46 \$3,633.23 \$571.7 4 MEDICALA SSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$3,061.46 \$3,633.23 \$571.7 5 OTHER MEDICAL ASSISTANCE \$0,00 \$0,00 \$0,00 \$0,00 \$0,00 6 CHAMPUS / TRICARE \$3,306.12 \$4,095.68 \$1,095.65 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$93.75 \$173.19 \$793.4 TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$3,762.93 \$3,390.78 \$167.81 TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$4,646.65 \$5,362.07 \$715.42 MEDICALD \$4,151.099 \$1,581.301 \$2,565.206 \$1,095.50 TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) \$4,256,206 \$2,77,303 TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) \$4,256,206 \$2,271,275 \$277,303 TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT (BASELINE METHODOLOGY) \$4,256,206 \$2,291,191 TOTAL CONCERNMENT DEDUCTIONS \$17,911,999 \$212,341,299 \$34,492,244 TOTAL NON-GOVERNMENT OUTPATIENT EQUIVALENT S \$2,566,472,671 \$2,297,635 \$3,340,381 TOTAL CONCERNMENT OUTPATIENT EQUIVALENT S \$2,506,472,671 \$2,297,635 \$3,340,381 TOTAL CONCERNMENT OUTPATIENT EQUIVALENT S \$2,506,472,671 \$2,297,635 \$3,340,381 TOTAL CONCERNMENT OUTPATIENT EQUIVALENT S \$2,506,472,671 \$2,297,673 \$3,340,381 TOTAL			. ,		\$196.81
T. UNINSURED (INCLUDED IN NON-GOVERNMENT) \$118.43 \$72.16 \$40.25 TOTAL OVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$5,113.40 \$5,069.98 \$43.44 TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$7,217.93 \$6,983.15 \$234.71 D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$7,217.93 \$6,983.15 \$234.71 D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$5,731.28 \$7,404.69 \$1,673.4 D. OUTPATIENT PAYMENT (INCLUDING SELF PAY / UNINSURED) \$5,731.28 \$7,404.69 \$1,673.4 D. OUTPATIENT PAYMENT (INCLUDING SELF PAY / UNINSURED) \$5,731.28 \$7,404.69 \$1,673.4 D. OUTPATIENT PAYMENT (INCLUDING OTHER MEDICAL ASSISTANCE) \$3,061.46 \$3,633.23 \$571.7 D. OTHER MEDICAL ASSISTANCE \$3,061.46 \$3,633.23 \$571.7 D. OTHER MEDICAL ASSISTANCE \$3,061.46 \$3,633.23 \$571.7 D. OTHER MEDICAL ASSISTANCE \$3,001.20 \$0.00 \$0.00 D. OTHER MEDICAL ASSISTANCE \$3,001.20 \$0.00 \$0.00 D. OTHER MEDICAL ASSISTANCE \$3,005.60 \$0.00 \$0.00 D. OTHER MEDICAL ASSISTANCE \$3,005.60 \$0.00 \$0.00 D. OTHER MEDICAL ASSISTANCE \$3,762.93 \$3,930.76 D. OTHER MEDICAL ASSISTANCE \$3,762.93 \$3,930.76 D. OTHER MEDICAL ASSISTANCE \$4,546.65 \$3,562.07 D. OTHER MEDICAL ASSISTANCE \$4,546.65 \$5,362.07 D. OTHER MEDICAL ASSISTANCE \$4,546.65 \$5,362.07 D. OTHER MEDICAL ASSISTANCE \$0.00 \$0.00 D. OTHER MEDICAL ASSISTANCE \$0.00 D. OTHER MEDICAL ASSISTANCE \$0.00 D. OTHER M			*		
TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$1,13.40 \$6,069.98 (\$43.47 \$70.74 INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$7,217.93 \$6,983.15 \$234.77			. ,	+ - /	(\$46.27)
NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$5,731.28 \$7,404.69 \$1,673.42 \$1,673.43 \$2,262.00 \$4,142.61 \$1,673.43 \$3,683.26 \$4,142.61 \$1,673.43 \$4,206.20 \$4,142.61 \$1,673.43 \$4,206.20 \$4,142.61 \$1,673.43 \$4,206.20 \$4,142.61 \$1,673.43 \$4,206.20 \$4,142.61 \$1,673.43 \$1					(\$43.42)
NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$5,731.28 \$7,404.69 \$1,673.4*		TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,217.93	\$6,983.15	(\$234.78)
NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$5,731.28 \$7,404.69 \$1,673.4*	n	OLITPATIENT PAYMENT PER OLITPATIENT FOLIVALENT DISCHARGE			
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MEDICAID			. ,		(\$183.58) ©574.77
SOURCE S					
TOTAL GOVERNMENT DEPORTMENT \$93.75 \$173.19 \$79.44	-		. ,		\$0.00
TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$3,762.93 \$3,930.78 \$167.81 TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$4,646.65 \$5,362.07 \$715.42 V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID	6		. ,		\$1,059.57
S3,762.93 \$3,930.78 \$167.8	7		\$93.75	\$173.19	\$79.44
TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$4,646.65 \$5,362.07 \$715.45		TOTAL GOVERNMENT OUTPATIENT PATMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$3,762,93	\$3.930.78	\$167.85
1 MEDICAID		TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			\$715.42
1 MEDICAID	v.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
OTHER MEDICAL ASSISTANCE		· · · · · · · · · · · · · · · · · · ·			
3 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$2,396,342 \$2,674,275 \$277,937 TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) \$6,547,401 \$4,256,206 (\$2,291,195 VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY) TOTAL CHARGES \$385,913,045 \$427,704,615 \$41,791,577 2 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,244 3 UNCOMPENSATED CARE \$10,252,249 \$10,215,881 (\$36,361 4 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$67,201,429 \$71,545,518 \$4,344,085 5 EMPLOYEE SELF INSURANCE ALLOWANCE \$4,074,697 \$3,825,586 (\$249,11 6 TOTAL ADJUSTMENTS \$259,440,374 \$297,928,224 \$38,487,855 7 TOTAL ACCRUED PAYMENTS \$126,472,671 \$129,776,391 \$3,303,721 8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$3,303,721 10 RATIO OF NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,721 10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3277232336 0.3034252763 (0.024297957: 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 (\$260,144 10,245			- ' ' '		(\$2,569,128)
TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) \$6,547,401 \$4,256,206 (\$2,291,195)					\$0 \$277 932
1 TOTAL CHARGES \$385,913,045 \$427,704,615 \$41,791,577 2 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,244 3 UNCOMPENSATED CARE \$10,252,249 \$10,215,881 \$36,361 4 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$67,201,429 \$71,545,518 \$4,344,081 5 EMPLOYEE SELF INSURANCE ALLOWANCE \$4,074,697 \$3,825,586 \$(\$249,11) 6 TOTAL ADJUSTMENTS \$259,440,374 \$297,928,224 \$38,487,851 7 TOTAL ACCRUED PAYMENTS \$129,776,391 \$3,303,721 8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$0 9 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,721 10 RATIO OF NET REVENUE TO TOTAL CHARGES \$0.3277232336 \$0.3034252763 \$(0.0242979573) 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 \$(\$260,144) 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 \$(\$360,13) 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$					(\$2,291,195)
1 TOTAL CHARGES \$385,913,045 \$427,704,615 \$41,791,577 2 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,244 3 UNCOMPENSATED CARE \$10,252,249 \$10,215,881 \$36,361 4 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$67,201,429 \$71,545,518 \$4,344,081 5 EMPLOYEE SELF INSURANCE ALLOWANCE \$4,074,697 \$3,825,586 \$(\$249,11) 6 TOTAL ADJUSTMENTS \$259,440,374 \$297,928,224 \$38,487,851 7 TOTAL ACCRUED PAYMENTS \$129,776,391 \$3,303,721 8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$0 9 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,721 10 RATIO OF NET REVENUE TO TOTAL CHARGES \$0.3277232336 \$0.3034252763 \$(0.0242979573) 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 \$(\$260,144) 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 \$(\$360,13) 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	X/T	CALCULATED HADEDDAYMENT DEFODE HIDDED LIMIT (DASELINE METHODOL)	2CV)		
2 TOTAL GOVERNMENT DEDUCTIONS \$177,911,999 \$212,341,239 \$34,429,240 3 UNCOMPENSATED CARE \$10,252,249 \$10,215,881 (\$36,360) 4 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$67,201,429 \$71,545,518 \$4,344,080 5 EMPLOYEE SELF INSURANCE ALLOWANCE \$4,074,697 \$3,825,586 (\$249,11) 6 TOTAL ADJUSTMENTS \$259,440,374 \$297,928,224 \$38,487,850 7 TOTAL ACCRUED PAYMENTS \$126,472,671 \$129,776,391 \$3,303,720 8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$0 9 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,720 10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3277232336 0.3034252763 (0.024297957) 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 (\$260,144) 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 (\$360,13) 14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 (\$620,275)	V 1.				
3 UNCOMPENSATED CARE \$10,252,249 \$10,215,881 \$36,366 4 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$67,201,429 \$71,545,518 \$4,344,085 5 EMPLOYEE SELF INSURANCE ALLOWANCE \$4,074,697 \$3,825,586 \$(\$249,11*) 6 TOTAL ADJUSTMENTS \$259,440,374 \$297,928,224 \$38,487,856 7 TOTAL ACCRUED PAYMENTS \$129,776,391 \$3,303,726 8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$0 \$0 9 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,726 10 RATIO OF NET REVENUE TO TOTAL CHARGES \$0.3277232336 \$0.3034252763 \$(0.02429795751) 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 \$(\$260,144) 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 \$(\$360,13) 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 \$(\$620,2756) 15 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 16 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 17 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 18 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 18 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 19 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 10 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 10 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 11 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 12 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 13 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 14 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 15 (\$620,2756) \$10,560,149 \$9,939,875 \$(\$620,2756) 15 (\$620,2756) \$10,560,149 \$10,	1				\$41,791,570
TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$67,201,429 \$71,545,518 \$4,344,085 \$5 EMPLOYEE SELF INSURANCE ALLOWANCE \$4,074,697 \$3,825,586 (\$249,11* \$6 TOTAL ADJUSTMENTS \$259,440,374 \$297,928,224 \$38,487,856 \$7 TOTAL ACCRUED PAYMENTS \$126,472,671 \$129,776,391 \$3,303,726 \$8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$					
6 TOTAL ADJUSTMENTS \$259,440,374 \$297,928,224 \$38,487,856 7 TOTAL ACCRUED PAYMENTS \$126,472,671 \$129,776,391 \$3,303,726 8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$0 9 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,726 10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3277232336 0.3034252763 (0.0242979573 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 (\$260,144 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 (\$360,137 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 (\$620,278			. , , ,		\$4,344,089
7 TOTAL ACCRUED PAYMENTS \$129,776,391 \$3,303,720 8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$0 9 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,720 10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3277232336 0.3034252763 (0.0242979573 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 (\$260,144 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 (\$360,137 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 (\$620,278)					(\$249,111)
8 UCP DSH PAYMENTS (OHCA INPUT) \$0 \$0 \$0 9 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,720 10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3277232336 0.3034252763 (0.0242979573 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 (\$260,144) 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 (\$360,13) 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 \$0 14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 (\$620,275)					\$38,487,850 \$3,303,720
9 NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS \$126,472,671 \$129,776,391 \$3,303,720 10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3277232336 0.3034252763 (0.0242979573 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 (\$260,144 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 (\$360,133 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	8	UCP DSH PAYMENTS (OHCA INPUT)			\$3,303,720
10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3034252763 (0.0242979573 11 COST OF UNCOMPENSATED CARE \$3,359,900 \$3,099,757 (\$260,144) 12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 (\$360,13) 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 (\$620,275)	9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$126,472,671	\$129,776,391	\$3,303,720
12 MEDICAL ASSISTANCE UNDERPAYMENT \$7,200,249 \$6,840,118 (\$360,13°) 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 \$0 14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 (\$620,275)	10	RATIO OF NET REVENUE TO TOTAL CHARGES			(0.0242979573)
13 PLUS OHCA ADJUSTMENT (OHCA INPUT) 14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 (\$620,275)					
14 TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT \$10,560,149 \$9,939,875 (\$620,278)					(\$300,131) \$0
			#40 F00 4 :=		·
VII. RATIOS			\$10,560,149	\$9,939,875	(\$620,275)
	VII.	RATIOS			

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
(1)	\2)	, ,	•	, ,
		ACTUAL	ACTUAL <u>FY</u>	AMOUNT
LINE	<u>DESCRIPTION</u>	<u>FY 2012</u>	<u>2013</u>	<u>DIFFERENCE</u>
Α.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	58.72%	48.21%	-10.51%
	MEDICARE	39.75%	33.79%	-5.95%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	26.43% 26.43%	23.68% 23.68%	-2.74% -2.74%
	MEDICAID OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	25.09%	33.05%	7.96%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.77%	0.51%	-0.26%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	TOTAL DATIC OF INDATIFNE DAVMENTO TO INDATIFNE OLIADOFO	36.64%	31.35%	-5.29%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	42.75%	35.96%	-6.80%
	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	34.09%	36.94%	2.85%
2	MEDICARE	19.49% 20.92%	16.73%	-2.76%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	20.92%	21.09% 21.09%	0.17% 0.17%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	28.21%	30.60%	2.39%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.65%	1.13%	0.48%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
	TOTAL DATIO OF CUITDATIENT DAYMENTS TO CUITDATIENT CUADOES	20.01% 25.95%	18.24% 25.62%	-1.78%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	25.95%	25.62%	-0.33%
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	TIONS		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	5		
1	TOTAL ACCRUED PAYMENTS	\$124,110,337	\$126,255,012	\$2,144,675
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$124,110,337	\$126,255,012	\$2,144,675
			¥	V =,,
	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$6,250,607	\$553,490	(\$5,697,117)
4	CALCULATED NET REVENUE	\$139,039,802	\$126,808,502	(\$12,231,300)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$130,360,493	\$126,808,091	(\$3,552,402)
	REPORTING)	* * * * * * * * * * * * * * * * * * *	V 1=0,000,000	(40,000,000)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$8,679,309	\$411	(\$8,678,898)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
	MEDICAL TO THE STATE OF STATE OF THE STATE O			
	OHCA DEFINED GROSS REVENUE	\$385,913,045	¥ .=. ; . v . ; v	\$41,791,570
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$385,913,045	\$427,704,615	\$41,791,570
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$385,913,045	\$427,704,210	\$41,791,165
	REPORTING)	, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , , , , ,
				*
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$405	\$405
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENT	rs		
	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,252,249	\$10,215,881	(\$36,368)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,252,249	\$10,215,881	(\$36,368)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,252,249	\$10,215,881	(\$36,368)
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	MARIANAE WHIST DE LESS THAN AR FOLIA TO ATTO			*-
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

	BRISTOL HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2013	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(4)		(0)
(1)	(2)	(3)
		ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2013</u>
	ACCRUED CHARGES AND DAVMENTS	
I.	ACCRUED CHARGES AND PAYMENTS	
Α.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$44,140,043
2	MEDICARE	88,728,635
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	28,359,389
4	MEDICAID	28,359,389
5 6	OTHER MEDICAL ASSISTANCE	0
7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	214,150 2,026,235
- '-	TOTAL INPATIENT GOVERNMENT CHARGES	\$117.302.174
	TOTAL INPATIENT CHARGES	\$161,442,217
<u>В.</u> 1	OUTPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$105,052,147
2	MEDICARE	107,030,797
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	53,507,154
4	MEDICAID	53,507,154
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	672,300
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6,665,563
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$161,210,251
	TOTAL OUTPATIENT CHARGES	\$266,262,398
C.	TOTAL ACCRUED CHARGES	
<u> </u>	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$149,192,190
2	TOTAL GOVERNMENT ACCRUED CHARGES	278,512,425
	TOTAL ACCRUED CHARGES	\$427,704,615
D.	INPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$21,278,054
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	29,984,757
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,716,915 6,716,915
5	OTHER MEDICAL ASSISTANCE	0,710,913
6	CHAMPUS / TRICARE	70,785
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,370
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$36,772,457
	TOTAL INPATIENT PAYMENTS	\$58,050,511
<u> </u>	CHIENT ACCRUSE PAYMENTS	
<u>E.</u>	OUTPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	#20 00F 770
2	MEDICARE	\$38,805,772 17,909,657
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11,283,345
4	MEDICAID	11,283,345
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	205,727
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	75,205
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$29,398,729
	TOTAL OUTPATIENT PAYMENTS	\$68,204,501
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$60,083,826
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	66,171,186
	TOTAL ACCRUED PAYMENTS	\$126,255,012
	ACCRUED DISCUADOES CASE MIX INDEX AND CTUED DECLIDED DATA	
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
Α.	ACCRUED DISCHARGES	
Α.	ACCUALD DISCHAUGES	

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2013** REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) (1) **ACTUAL** FY 2013 INE **DESCRIPTION** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 2.202 1 **MEDICARE** 3,584 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 1,646 MEDICAID 1,646 4 OTHER MEDICAL ASSISTANCE 6 CHAMPUS / TRICARE 16 UNINSURED (INCLUDED IN NON-GOVERNMENT) 132 7 **TOTAL GOVERNMENT DISCHARGES** 5.246 **TOTAL DISCHARGES** 7,448 В. **CASE MIX INDEX** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1.02400 2 MEDICARE 1.25110 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 0.94910 **MEDICAID** 0.94910 4 OTHER MEDICAL ASSISTANCE 0.00000 5 CHAMPUS / TRICARE 0.74550 6 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) 1.08870 **TOTAL GOVERNMENT CASE MIX INDEX** 1.15480 **TOTAL CASE MIX INDEX** 1.11613 OTHER REQUIRED DATA C. TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$135,913,793 ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$64,368,275 (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) 3 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$71,545,518 TOTAL ACTUAL DISCOUNT PERCENTAGE 4 52.64% \$5,275,587 EMPLOYEE SELF INSURANCE GROSS REVENUE 5 **EMPLOYEE SELF INSURANCE ALLOWANCE** 6 \$3,825,586 7 UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT) \$0 **CHARITY CARE** 8 \$5,306,456 9 **BAD DEBTS** \$4,909,425 \$10,215,881 10 TOTAL UNCOMPENSATED CARE 11 TOTAL OTHER OPERATING REVENUE \$4,242,269 12 TOTAL OPERATING EXPENSES \$129,703,674 III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS A. TOTAL ACCRUED PAYMENTS \$126,255,012 PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) \$0 **OHCA DEFINED NET REVENUE** \$126,255,012 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE 3 \$553,490 CALCULATED NET REVENUE \$126,808,502 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$126,808,091 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$411 B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED GROSS REVENUE \$427.704.615 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE

OFFICE	OF HEALTH CARE ACCESS	BRISTOL HOSPITA
	BRISTOL HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2013	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
		ACTUAL
LINE	DESCRIPTION	FY 2013
	CALCULATED GROSS REVENUE	\$427,704,615
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$427,704,210
	VARIANCE (MUST BE LEGG THAN OR FOUND TO ASSO)	A 405
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$405
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,215,881
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,215,881
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,215,881
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

		HOSPITAL			
		S ACTUAL FILING			
		/EAR 2013			
	REPORT 650 - HOSPITAL	. UNCOMPENSATED	CARE	I I	
(1)	(2)	(3)	(4)	(5)	(6)
(')	(2)	ACTUAL	ACTUAL	AMOUNT	(0) %
INF	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
	<u> </u>		20.0	<u> </u>	
Α.	Hospital Charity Care (from HRS Report 500)				
1	Number of Applicants	3,402	6,916	3,514	103%
2	Number of Approved Applicants	3,402	6,916	3,514	103%
3	Total Charges (A)	\$3,781,958	\$5,306,456	\$1,524,498	40%
4	Average Charges	\$1,112	\$767	(\$344)	-31%
5	Ratio of Cost to Charges (RCC)	0.375611	0.343878	(0.031733)	-8%
6	Total Cost	\$1,420,545	\$1,824,773	\$404,228	
7	Average Cost	\$418	\$264	(\$154)	-37%
	Average cost	Ψ10	ΨΖΟΤ	(ψ104)	-31 /
8	Charity Care - Inpatient Charges	\$879,504	\$1,177,843	\$298,339	34%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,080,472	1,108,562	(971,910)	-479
10	Charity Care - Emergency Department Charges	821,982	3,020,051	2,198,069	267%
11	Total Charges (A)	\$3,781,958	\$5,306,456	\$1,524,498	40%
12	Charity Care - Number of Patient Days	206	223	17	8%
13	Charity Care - Number of Discharges	64	74	10	16%
14	Charity Care - Number of Outpatient ED Visits	2,044	3,805	1,761	86%
	Charity Care - Number of Outpatient Visits (Excludes ED		,		
15	Visits)	1,173	2,643	1,470	125%
В.	Hospital Bad Debts (from HRS Report 500)				
1	Bad Debts - Inpatient Services	\$1,972,481	\$1,496,638	(\$475,843)	-249
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	4,268,954	3,239,239	(1,029,715)	-249
3	Bad Debts - Emergency Department	228,856	173,548	(55,308)	-249
4	Total Bad Debts (A)	\$6,470,291	\$4,909,425	(\$1,560,866)	-24%
C.	Hospital Uncompensated Care (from HRS Report 500)				
1	Charity Care (A)	\$3,781,958	\$5,306,456	\$1,524,498	40%
2	Bad Debts (A)	6,470,291	4,909,425	(1,560,866)	-249
3	Total Uncompensated Care (A)	\$10,252,249	\$10,215,881	(\$36,368)	0%
4	Uncompensated Care - Inpatient Services	\$2,851,985	\$2,674,481	(\$177,504)	-6%
	Uncompensated Care - Outpatient Services (Excludes ED				
5	Unc. Care)	6,349,426	4,347,801	(2,001,625)	-32%
6	Uncompensated Care - Emergency Department	1,050,838	3,193,599	2,142,761	204%
7	Total Uncompensated Care (A)	\$10,252,249	\$10,215,881	(\$36,368)	0%

		BRISTOL HOSPITA	AL		
		TWELVE MONTHS ACTUA	L FILING		
		FISCAL YEAR 201	<u>- </u>		
	REPORT 685 - HOSPITAL NON			ALLOWANCES,	
	ACCRUI	ED PAYMENTS AND DISCOU	JNT PERCENTAGE		
(4)	(0)	(0)	(4)	(5)	(0)
(1)	(2)	(3) FY 2012	(4) FY 2013	(5)	(6)
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
IINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
LIIVE	<u>DESCRIPTION</u>	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$128,985,172	\$135,913,793	\$6,928,621	5%
2	Total Contractual Allowances	\$67,201,429	\$71,545,518	\$4,344,089	6%
	Total Accrued Payments (A)	\$61,783,743	\$64,368,275	\$2,584,532	4%
	Total Discount Percentage	52.10%	52.64%	0.54%	1%
(A) A	crued Payments associated with Non-Governme	nt Contractual Allowances r	nust exclude any reduction	n for Uncompensated	d Care.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
Α.	Gross and Net Revenue			
1	Inpatient Gross Revenue	\$131,648,635	\$142,677,758	\$161,442,217
2	Outpatient Gross Revenue	\$213,396,856	\$243,235,287	\$266,262,398
3	Total Gross Patient Revenue	\$345,045,491	\$385,913,045	\$427,704,615
4	Net Patient Revenue	\$125,941,019	\$130,360,493	\$126,808,091
В.	Total Operating Expenses			
1	Total Operating Expense	\$131,894,527	\$134,486,303	\$129,703,674
C.	<u>Utilization Statistics</u>			
1	Patient Days	28,670	29,383	29,710
2	Discharges	7,316	7,565	7,448
3	Average Length of Stay	3.9	3.9	4.0
4	Equivalent (Adjusted) Patient Days (EPD)	75,143	79,475	78,710
0	Equivalent (Adjusted) Discharges (ED)	19,175	20,462	19,732
D.	Case Mix Statistics			
1	Case Mix Index	1.11238	1.11715	1.11613
2	Case Mix Adjusted Patient Days (CMAPD)	31,892	32,825	33,160
3	Case Mix Adjusted Discharges (CMAD)	8,138	8,451	8,313
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	83,588	88,785	87,851
5	Case Mix Adjusted Equivalent Discharges (CMAED)	21,330	22,859	22,023
E.	Gross Revenue Per Statistic			
1	Total Gross Revenue per Patient Day	\$12,035	\$13,134	\$14,396
2	Total Gross Revenue per Discharge	\$47,163	\$51,013	\$57,425
3	Total Gross Revenue per EPD	\$4,592	\$4,856	\$5,434
4	Total Gross Revenue per ED	\$17,995	\$18,860	\$21,676
5	Total Gross Revenue per CMAEPD	\$4,128	\$4,347	\$4,869
6	Total Gross Revenue per CMAED	\$16,177	\$16,882	\$19,421
7	Inpatient Gross Revenue per EPD	\$1,752	\$1,795	\$2,051
8	Inpatient Gross Revenue per ED	\$6,866	\$6,973	\$8,182

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
LINE	<u>BESCKII TION</u>	112011	112012	1 1 2013
F.	Net Revenue Per Statistic			
1	Net Patient Revenue per Patient Day	\$4,393	\$4,437	\$4,268
2	Net Patient Revenue per Discharge	\$17,214	\$17,232	\$17,026
3	Net Patient Revenue per EPD	\$1,676	\$1,640	\$1,611
4	Net Patient Revenue per ED	\$6,568	\$6,371	\$6,427
5	Net Patient Revenue per CMAEPD	\$1,507	\$1,468	\$1,443
6	Net Patient Revenue per CMAED	\$5,904	\$5,703	\$5,758
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$4,600	\$4,577	\$4,366
2	Total Operating Expense per Discharge	\$18,028	\$17,777	\$17,415
3	Total Operating Expense per EPD	\$1,755	\$1,692	\$1,648
4	Total Operating Expense per ED	\$6,878	\$6,573	\$6,573
5	Total Operating Expense per CMAEPD	\$1,578	\$1,515	\$1,476
6	Total Operating Expense per CMAED	\$6,184	\$5,883	\$5,889
Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$20,534,294	\$20,544,785	\$21,078,367
2	Nursing Fringe Benefits Expense	\$6,098,801	\$5,639,912	\$5,707,940
3	Total Nursing Salary and Fringe Benefits Expense	\$26,633,095	\$26,184,697	\$26,786,307
l.	Physician Salary and Fringe Expense			
1	Physician Salary Expense	\$427,269	\$320,735	\$348,650
2	Physician Fringe Benefits Expense	\$126,901	\$88,048	\$94,413
3	Total Physician Salary and Fringe Benefits Expense	\$554,170	\$408,783	\$443,063
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense			
1	Non-Nursing, Non-Physician Salary Expense	\$32,130,283	\$34,060,540	\$33,298,451
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$9,542,875	\$9,350,229	\$9,017,091
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$41,673,158	\$43,410,769	\$42,315,542

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
<u>енче</u> К.	Total Salary and Fringe Benefits Expense	112011	112012	112010
1	Total Salary Expense	\$53,091,846	\$54,926,060	\$54,725,468
2	Total Fringe Benefits Expense	\$15,768,577	\$15,078,189	\$14,819,444
3	Total Salary and Fringe Benefits Expense	\$68,860,423	\$70,004,249	\$69,544,912
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	278.2	281.4	226.0
2	Total Physician FTEs	1.9	1.4	1.6
3	Total Non-Nursing, Non-Physician FTEs	580.7	580.9	627.4
4	Total Full Time Equivalent Employees (FTEs)	860.8	863.7	855.0
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$73,811	\$73,009	\$93,267
2	Nursing Fringe Benefits Expense per FTE	\$21,922	\$20,042	\$25,256
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$95,734	\$93,052	\$118,523
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$224,878	\$229,096	\$217,906
2	Physician Fringe Benefits Expense per FTE	\$66,790	\$62,891	\$59,008
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$291,668	\$291,988	\$276,914
Ο.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense	per FTE		
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$55,330	\$58,634	\$53,074
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$16,433	\$16,096	\$14,372
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$71,764	\$74,730	\$67,446
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$61,677	\$63,594	\$64,006
2	Total Fringe Benefits Expense per FTE	\$18,319	\$17,458	\$17,333
3	Total Salary and Fringe Benefits Expense per FTE	\$79,996	\$81,052	\$81,339
Q.	Total Salary and Fringe Ben. Expense per Statistic			

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL FY 2012	ACTUAL FY 2013
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,402	\$2,382	\$2,341
2	Total Salary and Fringe Benefits Expense per Discharge	\$9,412	\$9,254	\$9,337
3	Total Salary and Fringe Benefits Expense per EPD	\$916	\$881	\$884
4	Total Salary and Fringe Benefits Expense per ED	\$3,591	\$3,421	\$3,525
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$824	\$788	\$792
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,228	\$3,062	\$3,158