	WILLIAM W. BACKUS	HOSPITAL			
	TWELVE MONTHS ACT	UAL FILING			
	FISCAL YEAR	2011			
	REPORT 100 - HOSPITAL BALANCE	SHEET INFORM	ATION	I	
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
		AOTOAL	AOTOAL	DITTERCITOE	DIFFERENCE
l.	<u>ASSETS</u>				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$72,131,779	\$93,136,217	\$21,004,438	29%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$30,758,941	\$32,373,122	\$1,614,181	5%
4	Current Assets Whose Use is Limited for Current Liabilities	\$7,931,590	\$5,885,482	(\$2,046,108)	-26%
5	Due From Affiliates	\$647,255	\$161,210	(\$486,045)	-75%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$3,799,896	\$3,704,067	(\$95,829)	-3%
8	Prepaid Expenses	\$1,271,686	\$1,608,996	\$337,310	27%
9	Other Current Assets	\$185,866	\$101,211	(\$84,655)	-46%
	Total Current Assets	\$116,727,013	\$136,970,305	\$20,243,292	17%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$26,988,802	\$28,078,427	\$1,089,625	4%
2	Board Designated for Capital Acquisition	\$88,694,819	\$99,552,920	\$10,858,101	12%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$115,683,621	\$127,631,347	\$11,947,726	10%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$3,537,228	\$3,384,622	(\$152,606)	-4%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$231,218,906	\$229,404,094	(\$1,814,812)	-1%
2	Less: Accumulated Depreciation	\$132,727,325	\$140,786,203	\$8,058,878	6%
	Property, Plant and Equipment, Net	\$98,491,581	\$88,617,891	(\$9,873,690)	-10%
3	Construction in Progress	\$630,806	\$1,365,773	\$734,967	117%
	Total Net Fixed Assets	\$99,122,387	\$89,983,664	(\$9,138,723)	-9%
<u> </u>	Total Assets	\$335,070,249	\$357,969,938	\$22,899,689	7%

	WILLIAM W. BA	CKUS HOSPITAL				
	TWELVE MONTH	IS ACTUAL FILING				
	FISCAL YEAR 2011					
	REPORT 100 - HOSPITAL BA	LANCE SHEET INFORM	ATION			
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6) %	
LINE	DESCRIPTION	<u>ACTUAL</u>	ACTUAL	DIFFERENCE	DIFFERENCE	
II.	LIABILITIES AND NET ASSETS					
	Communit Link Hiting					
Α.	Current Liabilities:	\$40.400.440	#0.040.450	(\$040.007)	00/	
1	Accounts Payable and Accrued Expenses	\$10,129,146	\$9,918,459	(\$210,687)	-2%	
2	Salaries, Wages and Payroll Taxes	\$6,206,054	\$6,666,138	\$460,084	7%	
3	Due To Third Party Payers	\$2,614,222	\$4,683,178	\$2,068,956	79%	
4	Due To Affiliates	\$0	\$0	\$0	0%	
5	Current Portion of Long Term Debt	\$1,895,000 \$137,691	\$1,965,000	\$70,000	9%	
6 7	Current Portion of Notes Payable Other Current Liabilities	\$8,966,442	\$150,360 \$9,676,707	\$12,669 \$710,265	8%	
- /	Total Current Liabilities	\$29,948,555	\$33,059,842	\$3,111,287	10%	
	Total Current Liabilities	\$29,940,000	\$33,039,642	Ψ3,111,20 7	1076	
B.	Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$61,987,072	\$59,976,971	(\$2,010,101)	-3%	
2	Notes Payable (Net of Current Portion)	\$2,604,759	\$2,412,742	(\$192,017)	-7%	
	Total Long Term Debt	\$64,591,831	\$62,389,713	(\$2,202,118)	-3%	
	A 10 1111111111111111111111111111111111	#50.007.000	# 00.040.770	0.10.0.10.7.10	050/	
	Accrued Pension Liability	\$50,267,036	\$62,916,776	\$12,649,740	25%	
4	Other Long Term Liabilities Total Long Term Liabilities	\$31,337,809 \$146,196,676	\$37,427,574	\$6,089,765	19%	
	Total Long Term Liabilities	\$140,190,070	\$162,734,063	\$16,537,387	11%	
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%	
C.	Net Assets:					
1	Unrestricted Net Assets or Equity	\$147,348,055	\$153,327,362	\$5,979,307	4%	
2	Temporarily Restricted Net Assets	\$4,101,543	\$1,399,547	(\$2,701,996)	-66%	
3	Permanently Restricted Net Assets	\$7,475,420	\$7,449,124	(\$26,296)	0%	
	Total Net Assets	\$158,925,018	\$162,176,033	\$3,251,015	2%	
	Total Liabilities and Net Assets	\$335,070,249	\$357,969,938	\$22,899,689	7%	

	WILLIAM W. R.	ACKUS HOSPITAL			
		HS ACTUAL FILING			
		L YEAR 2011			
	REPORT 150 - HOSPITAL STATEM		NS INFORMATION		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
<u>LINE</u>	DESCRIPTION	<u>ACTUAL</u>	ACTUAL	DIFFERENCE	DIFFERENCE
A.	Operating Revenue:				
1	Total Gross Patient Revenue	\$585,390,725	\$604,060,585	\$18,669,860	3%
2	Less: Allowances	\$308,845,388	\$327,123,232	\$18,277,844	6%
3	Less: Charity Care	\$6,496,622	\$5,004,135	(\$1,492,487)	-23%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$270,048,715	\$271,933,218	\$1,884,503	1%
5	Other Operating Revenue	\$4,283,716	\$4,436,092	\$152,376	4%
6	Net Assets Released from Restrictions	\$91,211	\$673,194	\$581,983	638%
	Total Operating Revenue	\$274,423,642	\$277,042,504	\$2,618,862	1%
В.	Operating Expenses:				
1	Salaries and Wages	\$107,381,105	\$108,402,879	\$1,021,774	1%
2	Fringe Benefits	\$27,181,443	\$25,655,346	(\$1,526,097)	-6%
3	Physicians Fees	\$1,797,921	\$1,766,978	(\$30,943)	-2%
4	Supplies and Drugs	\$41,645,421	\$41,588,424	(\$56,997)	0%
5	Depreciation and Amortization	\$17,480,126	\$16,971,187	(\$508,939)	-3%
6	Bad Debts	\$14,409,876	\$12,522,978	(\$1,886,898)	-13%
7	Interest	\$3,185,038	\$3,247,715	\$62,677	2%
8	Malpractice	\$2,443,084	\$1,344,246	(\$1,098,838)	-45%
9	Other Operating Expenses	\$46,578,269	\$40,573,982	(\$6,004,287)	-13%
-	Total Operating Expenses	\$262,102,283	\$252,073,735	(\$10,028,548)	-4%
	Income/(Loss) From Operations	\$12,321,359	\$24,968,769	\$12,647,410	103%
C.	Non-Operating Revenue:				
1	Income from Investments	\$1,643,710	\$6,395,778	\$4,752,068	289%
2	Gifts, Contributions and Donations	\$328,840	\$158,300	(\$170,540)	-52%
3	Other Non-Operating Gains/(Losses)	(\$116,761)	(\$565,873)	(\$449,112)	385%
	Total Non-Operating Revenue	\$1,855,789	\$5,988,205	\$4,132,416	223%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$14,177,148	\$30,956,974	\$16,779,826	118%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$4,574,637	(\$5,813,831)	(\$10,388,468)	-227%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$4,574,637	(\$5,813,831)	(\$10,388,468)	-227%
				,	
	Excess/(Deficiency) of Revenue Over Expenses	\$18,751,785	\$25,143,143	\$6,391,358	34%
	Principal Payments	\$1,838,414	\$1,948,410	\$109,996	6%

REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	GROSS REVENUE BY PAYER				
Α.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$104,808,985	\$108,699,152	\$3,890,167	4%
2	MEDICARE MANAGED CARE	\$13,902,503	\$13,962,365	\$59,862	0%
3	MEDICAID	\$15,008,569	\$24,905,056	\$9,896,487	66%
4	MEDICAID MANAGED CARE	\$10,021,003	\$12,299,595	\$2,278,592	23%
5	CHAMPUS/TRICARE	\$2,330,732	\$2,882,913	\$552,181	24%
6	COMMERCIAL INSURANCE	\$4,190,681	\$3,189,114	(\$1,001,567)	-24%
7	NON-GOVERNMENT MANAGED CARE	\$66,232,519	\$69,645,010	\$3,412,491	5%
8	WORKER'S COMPENSATION	\$3,904,478	\$4,002,610	\$98,132	3%
9	SELF- PAY/UNINSURED	\$3,827,835	\$3,268,265	(\$559,570)	-15%
10	SAGA	\$7,076,404	\$0	(\$7,076,404)	-100%
11	OTHER	\$1,093,969	\$1,325,716	\$231,747	21%
	TOTAL INPATIENT GROSS REVENUE	\$232,397,678	\$244,179,796	\$11,782,118	5%
В.	OUTPATIENT GROSS REVENUE	#00 00F 00 t	# 00 050 04 4	(#40.000)	00/
1	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$93,695,394	\$93,652,314	(\$43,080)	0%
2		\$13,298,536	\$14,343,367	\$1,044,831	8%
3	MEDICAID MEDICAID MANAGED CARE	\$21,296,695 \$27,669,680	\$35,205,445	\$13,908,750	65% 8%
5	CHAMPUS/TRICARE		\$29,955,194	\$2,285,514	-5%
6	COMMERCIAL INSURANCE	\$7,195,831 \$7,953,487	\$6,860,374 \$8,165,337	(\$335,457) \$211,850	3%
7	NON-GOVERNMENT MANAGED CARE	\$153,736,614	\$153,689,229	(\$47,385)	0%
8	WORKER'S COMPENSATION	\$6,585,599	\$6,894,331	\$308,732	5%
9	SELF- PAY/UNINSURED	\$10,114,453	\$10,017,380	(\$97,073)	-1%
10	SAGA	\$10,114,433	\$10,017,380	(\$10,447,321)	-100%
11	OTHER	\$999,437	\$1,097,818	\$98,381	10%
	TOTAL OUTPATIENT GROSS REVENUE	\$352,993,047	\$359,880,789	\$6,887,742	2%
	TOTAL GOTT ATILITY GROUP REVERGE	ψ332,333,041	ψ333,000,103	ψ0,001,142	270
C.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$198,504,379	\$202,351,466	\$3,847,087	2%
2	MEDICARE MANAGED CARE	\$27,201,039	\$28,305,732	\$1,104,693	4%
3	MEDICAID	\$36,305,264	\$60,110,501	\$23,805,237	66%
4	MEDICAID MANAGED CARE	\$37,690,683	\$42,254,789	\$4,564,106	12%
5	CHAMPUS/TRICARE	\$9,526,563	\$9,743,287	\$216,724	2%
6	COMMERCIAL INSURANCE	\$12,144,168	\$11,354,451	(\$789,717)	-7%
7	NON-GOVERNMENT MANAGED CARE	\$219,969,133	\$223,334,239	\$3,365,106	2%
8	WORKER'S COMPENSATION	\$10,490,077	\$10,896,941	\$406,864	4%
9	SELF- PAY/UNINSURED	\$13,942,288	\$13,285,645	(\$656,643)	-5%
10	SAGA	\$17,523,725	\$0	(\$17,523,725)	-100%
11	OTHER	\$2,093,406	\$2,423,534	\$330,128	16%
	TOTAL GROSS REVENUE	\$585,390,725	\$604,060,585	\$18,669,860	3%
II.	NET REVENUE BY PAYER				
	INDATIONS NOT DEVENUE				
A.	INPATIENT NET REVENUE	\$44,095,808	Ф4F 740 000	¢4 ¢47 470	40/
	MEDICARE TRADITIONAL		\$45,743,280	\$1,647,472	4%
3	MEDICARE MANAGED CARE MEDICAID	\$5,928,822 \$3,703,768	\$5,790,541 \$7,327,731	(\$138,281) \$3,623,963	-2% 98%
4	MEDICAID MANAGED CARE	\$3,703,768	\$3,598,585	\$3,623,963	26%
5	CHAMPUS/TRICARE	\$909,649	\$1,160,549	\$250,900	28%
6	COMMERCIAL INSURANCE	\$3,677,597	\$2,824,803	(\$852,794)	-23%
7	NON-GOVERNMENT MANAGED CARE	\$49,832,566	\$53,889,334	\$4,056,768	8%
8	WORKER'S COMPENSATION	\$2,805,303	\$3,003,982	\$198,679	7%
9	SELF- PAY/UNINSURED	\$928,196	\$702,521	(\$225,675)	-24%
10	SAGA	\$817,534	\$0	(\$817,534)	-100%
11	OTHER	\$268,241	\$284,954	\$16,713	6%
<u> </u>	<u> </u>	Ψ200,2+1	Ψ=0 1,00 π	Ψ.ο,. ιο	© 70

REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	• • • • • • • • • • • • • • • • • • • •	(5)	
		FY 2010	FY 2011	AMOUNT	%
LINE DE	ESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$115,832,216	\$124,326,280	\$8,494,064	7%
	UTPATIENT NET REVENUE				
	IEDICARE TRADITIONAL	\$23,828,711	\$23,798,621	(\$30,090)	0%
	IEDICARE MANAGED CARE	\$3,116,078	\$3,294,352	\$178,274	6%
	MEDICAID MANAGER CARE	\$4,906,489	\$7,120,642	\$2,214,153	45%
	MEDICAID MANAGED CARE	\$8,443,104	\$8,411,984	(\$31,120)	0%
	HAMPUS/TRICARE	\$2,206,442	\$1,906,524	(\$299,918)	-14%
	OMMERCIAL INSURANCE	\$6,671,868 \$84,818,735	\$6,778,292	\$106,424	2%
	ION-GOVERNMENT MANAGED CARE VORKER'S COMPENSATION	\$4,947,566	\$84,378,495 \$4,965,320	(\$440,240) \$17,754	-1% 0%
	ELF- PAY/UNINSURED	\$2,171,511	\$2,365,301	\$193,790	9%
	AGA	\$1,407,561	\$2,365,301	(\$1,407,561)	-100%
	AGA DTHER	\$272,332	\$285,216	\$12,884	5%
11 0	TOTAL OUTPATIENT NET REVENUE	\$142,790,397	\$143,304,747	\$514,350	0%
	TOTAL GOTT ATIENT HET REVENUE	ψ14 <u>2,</u> 130,031	Ψ140,004,141	ψο1-4,000	070
с. то	OTAL NET REVENUE				
	IEDICARE TRADITIONAL	\$67,924,519	\$69,541,901	\$1,617,382	2%
2 M I	IEDICARE MANAGED CARE	\$9,044,900	\$9,084,893	\$39,993	0%
3 M I	IEDICAID	\$8,610,257	\$14,448,373	\$5,838,116	68%
4 M I	IEDICAID MANAGED CARE	\$11,307,836	\$12,010,569	\$702,733	6%
5 C l	HAMPUS/TRICARE	\$3,116,091	\$3,067,073	(\$49,018)	-2%
6 C (OMMERCIAL INSURANCE	\$10,349,465	\$9,603,095	(\$746,370)	-7%
7 N C	ON-GOVERNMENT MANAGED CARE	\$134,651,301	\$138,267,829	\$3,616,528	3%
8 W	VORKER'S COMPENSATION	\$7,752,869	\$7,969,302	\$216,433	3%
9 SE	ELF- PAY/UNINSURED	\$3,099,707	\$3,067,822	(\$31,885)	-1%
10 S	AGA	\$2,225,095	\$0	(\$2,225,095)	-100%
11 0	THER	\$540,573	\$570,170	\$29,597	5%
ТО	OTAL NET REVENUE	\$258,622,613	\$267,631,027	\$9,008,414	3%
l l					
III. ST	FATISTICS BY PAYER				
A. DIS	SCHARGES				
	IEDICARE TRADITIONAL	4,635	4,617	(18)	0%
	MEDICARE MANAGED CARE	594	583	(11)	-2%
	MEDICAID	783	1,205	422	54%
	EDICAID MANAGED CARE	1,108	1,113	5	0%
	HAMPUS/TRICARE	217	237	20	9%
	OMMERCIAL INSURANCE	171	146	(25)	-15%
	ON-GOVERNMENT MANAGED CARE	3,964	3,730	(234)	
	VORKER'S COMPENSATION	129	130	1	1%
	ELF- PAY/UNINSURED	176	172	(4)	-2%
	AGA	333	0	(333)	-100%
	OTHER	65	66	1	2%
	TOTAL DISCHARGES	12,175	11,999	(176)	-1%
B. PA	ATIENT DAYS	,	•	, ,,	
	IEDICARE TRADITIONAL	22,838	22,778	(60)	0%
	IEDICARE MANAGED CARE	2,655	2,805	150	6%
	IEDICAID	3,877	5,833	1,956	50%
4 MI	IEDICAID MANAGED CARE	2,783	3,236	453	16%
5 Ch	HAMPUS/TRICARE	549	617	68	12%
6 C0	OMMERCIAL INSURANCE	776	487	(289)	-37%
7 NO	ON-GOVERNMENT MANAGED CARE	12,659	12,482	(177)	-1%
8 W	VORKER'S COMPENSATION	474	353	(121)	-26%
9 SE	ELF- PAY/UNINSURED	878	697	(181)	-21%
	AGA	1,467	0	(1,467)	-100%
11 0	THER	140	366	226	161%
		40.000	40 CE 4	558	1%
C. OU	TOTAL PATIENT DAYS UTPATIENT VISITS	49,096	49,654	336	1 /0

REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
1	MEDICARE TRADITIONAL	104,707	105,292	585	1%
2	MEDICARE MANAGED CARE	15,073	11,042	(4,031)	-27%
3	MEDICAID	29,696	39,951	10,255	35%
4	MEDICAID MANAGED CARE	26,045	26,245	200	1%
5	CHAMPUS/TRICARE	7,821	6,874	(947)	-12%
6	COMMERCIAL INSURANCE	7,170	6,696	(474)	-7%
7	NON-GOVERNMENT MANAGED CARE	179,433	168,142	(11,291)	-6%
8	WORKER'S COMPENSATION	5,176	4,807	(369)	-7%
9	SELF- PAY/UNINSURED	15,029	13,040	(1,989)	-13%
10	SAGA	9,465	0	(9,465)	-100%
11	OTHER	935	896	(39)	-4%
	TOTAL OUTPATIENT VISITS	400,550	382,985	(17,565)	-4%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				T
Α.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVE	NIIE			
A.	MEDICARE TRADITIONAL	\$16,718,378	\$17,550,451	\$832,073	5%
2	MEDICARE MANAGED CARE	\$2,400,868	\$1,965,971	(\$434,897)	-18%
3	MEDICAID MANAGED CARE	\$7,996,302	\$13,918,040	\$5,921,738	74%
4	MEDICAID MANAGED CARE	\$14,646,020	\$14,749,904	\$103,884	1%
5	CHAMPUS/TRICARE	\$2,225,253	\$2,255,077	\$29,824	1%
6	COMMERCIAL INSURANCE	\$2,730,836	\$2,717,199	(\$13,637)	0%
7	NON-GOVERNMENT MANAGED CARE	\$31,020,170	\$29,791,455	(\$1,228,715)	-4%
8	WORKER'S COMPENSATION	\$1,597,415	\$1,618,152	\$20,737	1%
9	SELF- PAY/UNINSURED	\$7,398,856	\$6,946,245	(\$452,611)	-6%
10	SAGA	\$4,813,725	\$0	(\$4,813,725)	-100%
11	OTHER	\$710,030	\$853,351	\$143,321	20%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	¢02 257 952	\$00 26E 04E	¢407.002	00/
D	GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENU	\$92,257,853	\$92,365,845	\$107,992	0%
В. 1	MEDICARE TRADITIONAL	\$4,464,376	\$4,349,618	(\$114,758)	-3%
2	MEDICARE MANAGED CARE	\$662,926	\$499,465	(\$163,461)	-25%
3	MEDICAID MAINAGED CARE	\$1,764,584	\$3,096,918	\$1,332,334	76%
4	MEDICAID MANAGED CARE	\$4,416,586	\$4,108,415	(\$308,171)	-7%
5	CHAMPUS/TRICARE	\$950,228	\$841,599	(\$108,629)	-11%
6	COMMERCIAL INSURANCE	\$2,249,243	\$2,213,340	(\$35,903)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$22,604,197	\$23,193,904	\$589,707	3%
8	WORKER'S COMPENSATION	\$1,322,542	\$1,276,781	(\$45,761)	-3%
9	SELF- PAY/UNINSURED	\$1,587,794	\$1,639,314	\$51,520	3%
10	SAGA	\$746,355	\$0	(\$746,355)	-100%
11	OTHER	\$176,547	\$170,793	(\$5,754)	-3%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	440.045.000	****		401
	NET REVENUE	\$40,945,378	\$41,390,147	\$444,769	1%
-	EMERGENCY DEPARTMENT OUTPATIENT VISITS MEDICARE TRADITIONAL	0.400	0.604	20.4	20/
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	8,420 1,176	8,684 875	264 (301)	3% -26%
3	MEDICARE MANAGED CARE MEDICAID	5,384	8,701	3,317	-26% 62%
4	MEDICAID MEDICAID MANAGED CARE	12,493	11.713	(780)	-6%
5	CHAMPUS/TRICARE	1,672	1,569	(103)	-6%
6	COMMERCIAL INSURANCE	1,242	1,378	136	11%
7	NON-GOVERNMENT MANAGED CARE	18,714	17,078	(1,636)	-9%
8	WORKER'S COMPENSATION	1,312	1,133	(179)	-14%
9	SELF- PAY/UNINSURED	5,308	4,773	(535)	-10%
10	SAGA	3,051	0	(3,051)	-100%
11	OTHER	398	448	50	13%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT			,,,	3,7
	VISITS	59,170	56,352	(2,818)	-5%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
т т	OPERATING EXPENSE BY CATEGORY				
I.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$40,612,798	\$39,914,015	(\$698,783)	-2%
2	Physician Salaries	\$11,850,977	\$11,095,920	(\$755,057)	-6%
3	Non-Nursing, Non-Physician Salaries	\$54,917,330	\$57,392,944	\$2,475,614	5%
	Total Salaries & Wages	\$107,381,105	\$108,402,879	\$1,021,774	1%
В.	Fringe Benefits:				
1	Nursing Fringe Benefits	\$7,936,981	\$7,696,604	(\$240,377)	-3%
2	Physician Fringe Benefits	\$1,934,151	\$1,266,332	(\$667,819)	-35%
3	Non-Nursing, Non-Physician Fringe Benefits	\$17,310,311	\$16,692,410	(\$617,901)	-4%
	Total Fringe Benefits	\$27,181,443	\$25,655,346	(\$1,526,097)	-6%
C.	Contractual Labor Fees:				
1	Nursing Fees	\$0	\$947,879	\$947,879	0%
2	Physician Fees	\$1,797,921	\$1,766,978	(\$30,943)	-2%
3	Non-Nursing, Non-Physician Fees	\$3,950,873	\$3,605,001	(\$345,872)	-9%
	Total Contractual Labor Fees	\$5,748,794	\$6,319,858	\$571,064	10%
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies	\$30,933,870	\$30,858,845	(\$75,025)	0%
2	Pharmaceutical Costs	\$10,711,551	\$10,729,579	\$18,028	0%
	Total Medical Supplies and Pharmaceutical Cost	\$41,645,421	\$41,588,424	(\$56,997)	0%
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$8,588,369	\$8,840,289	\$251,920	3%
2	Depreciation-Equipment	\$8,528,880	\$8,039,864	(\$489,016)	-6%
3	Amortization	\$362,877	\$91,034	(\$271,843)	-75%
	Total Depreciation and Amortization	\$17,480,126	\$16,971,187	(\$508,939)	-3%
F.	Bad Debts:				
1	Bad Debts	\$14,409,876	\$12,522,978	(\$1,886,898)	-13%
G.	Interest Expense:				
1	Interest Expense	\$3,185,038	\$3,247,715	\$62,677	2%
H.	Malpractice Insurance Cost:	CO 440 004	¢4 244 24C	(¢4,000,000)	450/
1	Malpractice Insurance Cost	\$2,443,084	\$1,344,246	(\$1,098,838)	-45%
I.	Utilities:				
1	Water	\$262,233	\$270,390	\$8,157	3%
2	Natural Gas	\$1,396,469	\$1,325,484	(\$70,985)	-5%
3	Oil	\$36,248	\$42,600	\$6,352	18%
4	Electricity	\$2,410,521	\$2,983,942	\$573,421	24%
5	Telephone Other Utilities	\$473,261	\$483,724	\$10,463	2% 5%
6	Total Utilities	\$37,600 \$4,616,332	\$39,471 \$5,145,611	\$1,871 \$529,279	11%
				,	
J .	Business Expenses: Accounting Fees	\$161,316	\$158,170	(\$3,146)	-2%
2	Legal Fees	\$1,687,711	\$972,377	(\$715,334)	-42%
3	Consulting Fees	\$13,152,134	\$3,750,121	(\$9,402,013)	-71%
4	Dues and Membership	\$1,077,356	\$1,069,580	(\$7,776)	-1%
5	Equipment Leases	\$374,971	\$362,177	(\$12,794)	-3%
6	Building Leases	\$1,133,067	\$961,720	(\$171,347)	-15%
7	Repairs and Maintenance	\$1,038,117	\$1,091,451	\$53,334	5%
8	Insurance	\$626,528	\$534,189	(\$92,339)	-15%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	T1	# 00.000	#440.000	\$50.004	0.40/
9	Travel Conferences	\$60,286 \$373,852	\$110,680 \$369,607	\$50,394 (\$4,245)	84% -1%
11	Property Tax	\$168,754	\$135,241	(\$33,513)	-1% -20%
12	General Supplies	\$1,697,869	\$2,046,634	\$348,765	21%
13	Licenses and Subscriptions	\$61,340	\$68,833	\$7,493	12%
14	Postage and Shipping	\$671,315	\$749,678	\$78,363	12%
15	Advertising	\$154,483	\$194,970	\$40,487	26%
16	Other Business Expenses	\$15,571,965	\$18,300,063	\$2,728,098	18%
	Total Business Expenses	\$38,011,064	\$30,875,491	(\$7,135,573)	-19%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$262,102,283	\$252,073,735	(\$10,028,548)	-4%
	*A K. The total operating expenses amount above	ve must agree with	the total operation	ng expenses amou	nt on Report 150
	ODED ATING EVDENICE BY DED ADTMENT				
II.	OPERATING EXPENSE BY DEPARTMENT				
_	O-manual Compileration				
Α.	General Services:	#50.747.005	#45.000.000	(\$4.4.05.4.000)	050/
1	General Administration General Accounting	\$59,747,025	\$45,092,393	(\$14,654,632)	-25%
3	Patient Billing & Collection	\$1,255,493 \$2,658,979	\$1,220,190 \$2,773,551	(\$35,303) \$114,572	-3% 4%
4	Admitting / Registration Office	\$2,556,979	\$2,768,080	\$168,279	6%
5	Data Processing	\$7,446,721	\$8,908,110	\$1,461,389	20%
6	Communications	\$392,539	\$227,608	(\$164,931)	-42%
7	Personnel	\$29,525,066	\$30,500,666	\$975,600	3%
8	Public Relations	\$1,109,444	\$1,217,313	\$107,869	10%
9	Purchasing	\$1,159,243	\$985,191	(\$174,052)	-15%
10	Dietary and Cafeteria	\$3,261,812	\$3,243,831	(\$17,981)	-1%
11	Housekeeping	\$2,703,461	\$2,593,379	(\$110,082)	-4%
12	Laundry & Linen	\$148,927	\$131,283	(\$17,644)	-12%
13	Operation of Plant	\$5,846,025	\$6,025,261	\$179,236	3%
14	Security	\$1,243,640	\$1,278,567	\$34,927	3%
15	Repairs and Maintenance	\$2,340,698	\$2,240,585	(\$100,113)	-4%
16	Central Sterile Supply	\$1,650,375	\$1,605,071	(\$45,304)	-3%
17	Pharmacy Department	\$13,368,665	\$13,346,562	(\$22,103)	0%
18	Other General Services	\$0	\$0	\$0	0%
	Total General Services	\$136,457,914	\$124,157,641	(\$12,300,273)	-9%
B.	Professional Services:				
1	Medical Care Administration	\$364,534	\$472,710	\$108,176	30%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,447,097	\$2,115,775	\$668,678	46%
4	Medical Records	\$2,934,730	\$2,984,509	\$49,779	2%
5	Social Service	\$1,726,596	\$1,870,074	\$143,478	8%
6	Other Professional Services	\$1,475,915	\$1,458,337	(\$17,578)	-1%
	Total Professional Services	\$7,948,872	\$8,901,405	\$952,533	12%
C.	Special Services:	A			
1	Operating Room	\$10,064,234	\$9,298,879	(\$765,355)	-8%
2	Recovery Room	\$2,206,514	\$2,126,059	(\$80,455)	-4%
3	Anesthesiology	\$1,229,735	\$1,155,436	(\$74,299)	-6%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$7,948,548	\$8,748,643	\$800,095	10%
6	Diagnostic Ultrasound	\$1,190,662	\$1,401,204	\$210,542	18%
7	Radiation Therapy	\$3,052,516	\$3,195,481	\$142,965	5%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
8	Radioisotopes	\$1,110,460	\$1,099,386	(\$11,074)	-1%
9	CT Scan	\$2,003,193	\$2,007,427	\$4,234	0%
10	Laboratory	\$10,780,296	\$11,024,380	\$244,084	2%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$1,397,799	\$1,298,385	(\$99,414)	-7%
13	Electrocardiology	\$225,326	\$235,781	\$10,455	5%
14	Electroencephalography	\$136,933	\$148,588	\$11,655	9%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,971,534	\$1,874,778	(\$96,756)	-5%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$1,144,312	\$1,103,572	(\$40,740)	-4%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,993,786	\$1,589,580	(\$404,206)	-20%
23	Renal Dialysis	\$523,255	\$615,670	\$92,415	18%
24	Emergency Room	\$14,824,028	\$14,607,816	(\$216,212)	-1%
25	MRI	\$2,516,057	\$2,887,133	\$371,076	15%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$751,571	\$680,941	(\$70,630)	-9%
28	Endoscopy	\$1,280,992	\$1,139,984	(\$141,008)	-11%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$321,828	\$241,131	(\$80,697)	-25%
31	Cardiac Catheterization/Rehabilitation	\$1,499,554	\$1,350,207	(\$149,347)	-10%
32	Occupational Therapy / Physical Therapy	\$1,801,026	\$2,140,351	\$339,325	19%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$15,838,336	\$16,556,406	\$718,070	5%
	Total Special Services	\$85,812,495	\$86,527,218	\$714,723	1%
D.	Routine Services:				
1	Medical & Surgical Units	\$18,299,070	\$18,937,783	\$638,713	3%
2	Intensive Care Unit	\$3,107,920	\$3,156,837	\$48,917	2%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,094,332	\$2,107,786	\$13,454	1%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,067,894	\$4,014,654	(\$53,240)	-1%
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	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$3,880,055	\$3,790,047	(\$90,008)	-2%
13	Other Routine Services	\$433,731	\$480,364	\$46,633	11%
	Total Routine Services	\$31,883,002	\$32,487,471	\$604,469	2%
	Total Notatino Col Visco	\$0.1,000,002	402 , 101, 111	ψου 1, 100	
E.	Other Departments:				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Initiochalieous Other Departificitis	Φ0	φυ	φυ	076
	Total Operating Expenses - All Departments*	\$262,102,283	\$252,073,735	(\$10,028,548)	-4%
	Total Operating Expenses - All Departments	φ ∠ υ∠,1∪∠,∠03	φευε,013,133	(φ10,020,340)	-470
	*A 0 The total energing expenses expenses	ove much caree with	the total angustin	a avnances em :::	nt on Bonost 451
	*A 0. The total operating expenses amount about	ove must agree with	i ilie total operatir	ig expenses amou	iii oii keport 150

	WILLIAM	W. BACKUS HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2011								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2009	FY 2010	FY 2011					
A.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$259,652,271 \$	270,048,715	\$271,933,218					
2	Other Operating Revenue	3,773,294	4,374,927	5,109,286					
3	Total Operating Revenue	\$263,425,565	\$274,423,642	\$277,042,504					
4	Total Operating Expenses	250,646,571	262,102,283	252,073,735					
5	Income/(Loss) From Operations	\$12,778,994	\$12,321,359	\$24,968,769					
6	Total Non-Operating Revenue	(1,302,635)	6,430,426	174,374					
7	Excess/(Deficiency) of Revenue Over Expenses	\$11,476,359	\$18,751,785	\$25,143,143					
В.	Profitability Summary								
1	Hospital Operating Margin	4.88%	4.39%	9.01%					
2	Hospital Non Operating Margin	-0.50%	2.29%	0.06%					
3	Hospital Total Margin	4.38%	6.68%	9.07%					
4	Income/(Loss) From Operations	\$12,778,994	\$12,321,359	\$24,968,769					
5	Total Operating Revenue	\$263,425,565	\$274,423,642	\$277,042,504					
6	Total Non-Operating Revenue	(\$1,302,635)	\$6,430,426	\$174,374					
7	Total Revenue	\$262,122,930	\$280,854,068	\$277,216,878					
8	Excess/(Deficiency) of Revenue Over Expenses	\$11,476,359	\$18,751,785	\$25,143,143					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	\$102,294,307	\$147,348,055	\$153,327,362					
2	Hospital Total Net Assets	\$112,603,569	\$158,925,018	\$162,176,033					
3	Hospital Change in Total Net Assets	(\$28,184,517)	\$46,321,449	\$3,251,015					
4	Hospital Change in Total Net Assets %	80.0%	41.1%	2.0%					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.44	0.44	0.41					
2	Total Operating Expenses	\$250,646,571	\$262,102,283	\$252,073,735					
3	Total Gross Revenue	\$560,641,054	\$585,390,725	\$604,060,585					
4	Total Other Operating Revenue	\$3,773,294	\$4,374,927	\$5,109,286					
5	Private Payment to Cost Ratio	1.41	1.42	1.53					
6	Total Non-Government Payments	\$150,719,597	\$155,853,342	\$158,908,048					

	TWELVE MO	ONTHS ACTUAL FILING						
	FISCAL YEAR 2011 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2009	FY 2010	FY 2011				
7	Total Uninsured Payments	\$3,277,704	\$3,099,707	\$3,067,822				
8	Total Non-Government Charges	\$251,836,372	\$256,545,666	\$258,871,276				
9	Total Uninsured Charges	\$16,187,524	\$13,942,288	\$13,285,645				
10	Medicare Payment to Cost Ratio	0.73	0.77	0.8				
11	Total Medicare Payments	\$71,175,892	\$76,969,419	\$78,626,79				
12	Total Medicare Charges	\$218,476,625	\$225,705,418	\$230,657,198				
13	Medicaid Payment to Cost Ratio	0.62	0.61	0.62				
14	Total Medicaid Payments	\$16,337,157	\$19,918,093	\$26,458,942				
15	Total Medicaid Charges	\$59,096,666	\$73,995,947	\$102,365,290				
16	Uncompensated Care Cost	\$10,540,405	\$9,257,065	\$7,184,927				
17	Charity Care	\$6,641,717	\$6,321,367	\$4,672,730				
18	Bad Debts	\$17,093,520	\$14,508,284	\$12,690,600				
19	Total Uncompensated Care	\$23,735,237	\$20,829,651	\$17,363,336				
20	Uncompensated Care % of Total Expenses	4.2%	3.5%	2.9%				
21	Total Operating Expenses	\$250,646,571	\$262,102,283	\$252,073,735				
E.	Liquidity Measures Summary							
1	Current Ratio	3.69	3.90	4.14				
2	Total Current Assets	\$108,982,983	\$116,727,013	\$136,970,305				
3	Total Current Liabilities	\$29,558,387	\$29,948,555	\$33,059,842				
4	Days Cash on Hand	90	108	145				
5	Cash and Cash Equivalents	\$57,570,735	\$72,131,779	\$93,136,217				
6	Short Term Investments	0	0	C				
7	Total Cash and Short Term Investments	\$57,570,735	\$72,131,779	\$93,136,217				
8	Total Operating Expenses	\$250,646,571	\$262,102,283	\$252,073,735				
9	Depreciation Expense	\$16,939,369	\$17,480,126	\$16,971,187				
10	Operating Expenses less Depreciation Expense	\$233,707,202	\$244,622,157	\$235,102,548				
11	Days Revenue in Patient Accounts Receivable	48.19	38.04	37.17				

	WILLIAM W. BACKUS HOSPITAL							
	TWELVE MONTHS ACTUAL FILING							
	FISCAL YEAR 2011							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
	NET ON TOO THOU THE THINKS							
(1)	(2)	(3)	(4)	(5)				
(.,	(-)	ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011				
12	Net Patient Accounts Receivable	\$ 36,111,295	\$ 30,758,941	\$ 32,373,122				
13	Due From Third Party Payers	\$0	, ,					
14	Due To Third Party Payers	\$1,831,013						
	Total Net Patient Accounts Receivable and Third Party Payer	. , ,						
15	Activity	\$ 34,280,282		\$ 27,689,944				
16	Total Net Patient Revenue	\$259,652,271	\$ 270,048,715	\$ 271,933,218				
17	Average Payment Period	46.16	44.69	51.33				
18	Total Current Liabilities	\$29,558,387	11100	\$33,059,842				
19	Total Operating Expenses	\$29,556,587	\$29,946,333					
20	Depreciation Expense	\$16,939,369		\$252,073,735 \$16,971,187				
21	Total Operating Expenses less Depreciation Expense	\$233,707,202		\$235,102,548				
21	Total Operating Expenses less Depredation Expense	φ233,707,202	\$244,022,137	\$235,102,346				
F.	Solvency Measures Summary							
	Sort Silvey medical Co Carimital y							
1	Equity Financing Ratio	36.1	47.4	45.3				
2	Total Net Assets	\$112,603,569	\$158,925,018	\$162,176,033				
3	Total Assets	\$312,091,820	\$335,070,249	\$357,969,938				
4	Cash Flow to Total Debt Ratio	30.4	38.3	44.1				
5	Excess/(Deficiency) of Revenues Over Expenses	\$11,476,359	\$18,751,785	\$25,143,143				
6	Depreciation Expense	\$16,939,369	\$17,480,126	\$16,971,187				
7	Excess of Revenues Over Expenses and Depreciation Expense	\$28,415,728	\$36,231,911	\$42,114,330				
8	Total Current Liabilities	\$29,558,387	\$29,948,555	\$33,059,842				
9	Total Long Term Debt	\$63,931,536	\$64,591,831	\$62,389,713				
10	Total Current Liabilities and Total Long Term Debt	\$93,489,923	\$94,540,386	\$95,449,555				
11	Long Term Debt to Capitalization Ratio	36.2	28.9	27.8				
12	Total Long Term Debt	\$63,931,536	\$64,591,831	\$62,389,713				
13	Total Net Assets	\$112,603,569	\$158,925,018	\$162,176,033				
14	Total Long Term Debt and Total Net Assets	\$176,535,105	\$223,516,849	\$224,565,746				
15	Debt Service Coverage Ratio	6.5	7.8	8.7				
16	Excess Revenues over Expenses	\$11,476,359	\$18,751,785	\$25,143,143				
17	Interest Expense	\$3,091,298	\$3,185,038	\$3,247,715				
18	Depreciation and Amortization Expense	\$16,939,369	\$17,480,126	\$16,971,187				

	WILLIAM W. BA	CKUS HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2011 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2009	FY 2010	FY 2011					
19	Principal Payments	\$1,755,000	\$1,838,414	\$1,948,410					
G.	Other Financial Ratios								
20	Average Age of Plant	6.8	7.6	8.3					
21	Accumulated Depreciation	\$114,398,504	\$132,727,325	\$140,786,203					
22	Depreciation and Amortization Expense	\$16,939,369	\$17,480,126	\$16,971,187					
н.	<u>Utilization Measures Summary</u>								
1	Patient Days	50,032	49,096	49,654					
2	Discharges	11,885	12,175	11,999					
3	ALOS	4.2	4.0	4.1					
4	Staffed Beds	202	202	202					
 5	Available Beds		233	233					
6	Licensed Beds	233	233	233					
6	Occupancy of Staffed Beds	67.9%	66.6%	67.3%					
7	Occupancy of Available Beds	58.8%	57.7%	58.4%					
8	Full Time Equivalent Employees	1,583.5	1,542.1	1,513.9					
l.	Hospital Gross Revenue Payer Mix Percentage								
1	Non-Government Gross Revenue Payer Mix Percentage	42.0%	41.4%	40.7%					
2	Medicare Gross Revenue Payer Mix Percentage	39.0%	38.6%	38.2%					
3	Medicaid Gross Revenue Payer Mix Percentage	10.5%	12.6%	16.9%					
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	3.9%	3.4%	0.4%					
<u>5</u> 6	Uninsured Gross Revenue Payer Mix Percentage CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	2.9% 1.7%	2.4% 1.6%	2.2% 1.6%					
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Gross Revenue (Charges)	\$235,648,848	\$242,603,378	\$245,585,631					
9	Medicare Gross Revenue (Charges)	\$218,476,625	\$225,705,418	\$230,657,198					
10	Medicaid Gross Revenue (Charges)	\$59,096,666	\$73,995,947	\$102,365,290					
11 12	Other Medical Assistance Gross Revenue (Charges) Uninsured Gross Revenue (Charges)	\$21,859,421 \$16,187,524	\$19,617,131 \$13,942,288	\$2,423,534 \$13,285,645					
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$16,187,524 \$9,371,970	\$13,942,288 \$9,526,563	\$13,285,645 \$9,743,287					
14	Total Gross Revenue (Charges)	\$560,641,054	\$585,390,725	\$604,060,585					
J.	Hospital Net Revenue Payer Mix Percentage								
1	Non-Government Net Revenue Payer Mix Percentage	60.0%	59.1%	58.2%					

	WILLIAM W. BAC	CKUS HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2011								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
(.,	(-)	ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011					
2	Medicare Net Revenue Payer Mix Percentage	29.0%	29.8%	29.49					
3	Medicaid Net Revenue Payer Mix Percentage	6.7%	7.7%	9.99					
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.5%	1.1%	0.29					
5	Uninsured Net Revenue Payer Mix Percentage	1.3%	1.2%	1.19					
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	1.5%	1.2%	1.19					
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.09					
8	Non-Government Net Revenue (Payments)	\$147,441,893	\$152,753,635	\$155,840,226					
9	Medicare Net Revenue (Payments)	\$71,175,892	\$76,969,419	\$78,626,794					
10	Medicaid Net Revenue (Payments)	\$16,337,157	\$19,918,093	\$26,458,942					
11	Other Medical Assistance Net Revenue (Payments)	\$3,702,257	\$2,765,668	\$570,170					
12	Uninsured Net Revenue (Payments)	\$3,277,704	\$3,099,707	\$3,067,822					
13	CHAMPUS / TRICARE Net Revenue Payments)	\$3,695,292	\$3,116,091	\$3,067,073					
14	Total Net Revenue (Payments)	\$245,630,195	\$258,622,613	\$267,631,027					
K.	<u>Discharges</u>								
1	Non-Government (Including Self Pay / Uninsured)	4,461	4,440	4,178					
2	Medicare	5,039	5,229	5,200					
3	Medical Assistance	2,148	2,289	2,384					
4	Medicaid	1,764	1,891	2,318					
5	Other Medical Assistance	384	398	66					
6	CHAMPUS / TRICARE	237	217	237					
7	Uninsured (Included In Non-Government)	265	176	172					
8	Total	11,885	12,175	11,999					
L.	Case Mix Index								
1	Non-Government (Including Self Pay / Uninsured)	1.315100	1.216000	1.257400					
2	Medicare	1.459000	1.417000	1.450700					
3	Medical Assistance	0.961921	0.934102	1.001294					
4	Medicaid	0.894400	0.886200	0.996500					
5	Other Medical Assistance	1.272100	1.161700	1.169700					
6	CHAMPUS / TRICARE	0.940800	0.787400	0.839800					
7	Uninsured (Included In Non-Government)	1.184800	1.011900	1.020200					
8	Total Case Mix Index	1.304816	1.241688	1.282038					
M.	Emergency Department Visits								
1	Emergency Room - Treated and Admitted	6,343	6,391	6,846					
2	Emergency Room - Treated and Discharged	57,305	59,170	56,352					
3	Total Emergency Room Visits	63,648	65,561	63,198					

(1)	(2)	(3)	(4)	(5)	(6)
	,	FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$979,350	\$444,399	(\$534,951)	-55%
2	Inpatient Payments	\$420,710	\$244,260	(\$176,450)	-42%
3	Outpatient Charges	\$934,602	\$694,010	(\$240,592)	-26%
4	Outpatient Payments	\$224,671	\$172,546	(\$52,125)	-23%
5	Discharges	47	21	(26)	-55%
6	Patient Days	240	93	(147)	-61%
7	Outpatient Visits (Excludes ED Visits)	705	334	(371)	-53%
8	Emergency Department Outpatient Visits	59	35	(24)	-41%
9	Emergency Department Inpatient Admissions	41	19	(22)	-54%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,913,952	\$1,138,409	(\$775,543)	-41%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$645,381	\$416,806	(\$228,575)	-35%
В.	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%
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%
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$2,997,090	\$5,845,085	\$2,847,995	95%
2	Inpatient Payments	\$1,242,698	\$2,486,438	\$1,243,740	100%
3	Outpatient Charges	\$2,862,650	\$7,146,797	\$4,284,147	150%
4	Outpatient Charges Outpatient Payments	\$645,809	\$1,621,038	\$975,229	151%
5	Discharges	114	248	134	118%
6	Patient Days	563	1,129	566	101%
7	Outpatient Visits (Excludes ED Visits)	1,888	5,053	3,165	168%
8	Emergency Department Outpatient Visits	1,000	348	246	241%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	66	168	102	155%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,859,740	\$12,991,882	\$7,132,142	122%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,888,507	\$4,107,476	\$2,218,969	117%
	IOTAL INFATIENT & OUTFATIENT FATMENTS	\$1,000,307	\$4,107,476	\$∠,∠10,969	117%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$6,616,255	\$1,765,932	(\$4,850,323)	-73%
2	Inpatient Payments	\$2,870,799	\$726,270	(\$2,144,529)	-75%
3	Outpatient Charges	\$7,454,236	\$2,045,059	(\$5,409,177)	-73%
4	Outpatient Payments	\$1,769,876	\$441,479	(\$1,328,397)	-75%
5	Discharges	284	77	(207)	-73%
6	Patient Days	1,359	402	(957)	-70%
7	Outpatient Visits (Excludes ED Visits)	5,809	1,544	(4,265)	-73%
8	Emergency Department Outpatient Visits	422	108	(314)	-74%
9	Emergency Department Inpatient Admissions	212	47	(165)	-78%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$14,070,491	\$3,810,991	(\$10,259,500)	-73%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,640,675	\$1,167,749	(\$3,472,926)	-75%
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$1,805,617	\$1,803,407	(\$2,210)	0%
2	Inpatient Payments	\$776,208	\$662,697	(\$113,511)	-15%
3	Outpatient Charges	\$790,277	\$757,398	(\$32,879)	-4%
4	Outpatient Payments	\$192,655	\$216,000	\$23,345	12%
5	Discharges	86	72	(14)	-16%
6	Patient Days	189	360	171	90%
7	Outpatient Visits (Excludes ED Visits)	4,707	432	(4,275)	-91%
8	Emergency Department Outpatient Visits	492	95	(397)	-81%
9	Emergency Department Inpatient Admissions	70	67	(3)	-4%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,595,894	\$2,560,805	(\$35,089)	-1%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$968,863	\$878,697	(\$90,166)	-9%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN		^- 4 400	A- 4.400	201
1	Inpatient Charges	\$0	\$71,126	\$71,126	0%
2	Inpatient Payments	\$0	\$34,822	\$34,822	0%
3	Outpatient Charges	\$2,473	\$17,230	\$14,757	597%
4	Outpatient Payments	\$500	\$4,115	\$3,615	723%
5	Discharges	0	4	4	0%
6	Patient Days	0	20	20	0%
7	Outpatient Visits (Excludes ED Visits)	0	5	5	0%
8	Emergency Department Outpatient Visits	2	4	2	100%
9	Emergency Department Inpatient Admissions	0	4	4	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,473	\$88,356	\$85,883	3473%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$500	\$38,937	\$38,437	7687%

REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
	•	FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$1,257,505	\$3,850,403	\$2,592,898	206%
2	Inpatient Payments	\$487,333	\$1,556,890	\$1,069,557	219%
3	Outpatient Charges	\$996,103	\$3,600,656	\$2,604,553	261%
4	Outpatient Payments	\$218,977	\$818,427	\$599,450	274%
5	Discharges	47	151	104	221%
6	Patient Days	252	762	510	202%
7	Outpatient Visits (Excludes ED Visits)	644	2,708	2,064	320%
8	Emergency Department Outpatient Visits	78	273	195	250%
9	Emergency Department Inpatient Admissions	28	118	90	321%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,253,608	\$7,451,059	\$5,197,451	231%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$706,310	\$2,375,317	\$1,669,007	236%
Н.	WELLCARE OF 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	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%
I.	AETNA				
1	Inpatient Charges	\$26,266	\$128,404	\$102,138	389%
2	Inpatient Payments	\$11,855	\$60,121	\$48,266	407%
3	Outpatient Charges	\$126,607	\$53,421	(\$73,186)	-58%
4	Outpatient Payments	\$30,825	\$12,498	(\$18,327)	-59%
5	Discharges	2	7	5	250%
6	Patient Days	3	29	26	867%
7	Outpatient Visits (Excludes ED Visits)	98	66	(32)	-33%
8	Emergency Department Outpatient Visits	10	6	(4)	-40%
9	Emergency Department Inpatient Admissions	2	6	4	200%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$152,873	\$181,825	\$28,952	19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$42,680	\$72,619	\$29,939	70%

REPORT 200 17 of 56 7/26/2012,8:19 AM

(1)	(2)	(3)	(4)	(5)	(6)
	•	FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J.	HUMANA				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	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%
17					
K.	SECURE HORIZONS				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
	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				
<u>L.</u>	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Charges Inpatient Payments	\$0	\$0 \$0	\$0	0%
	Outpatient Charges	\$0	\$0 \$0	\$0	0%
	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0 \$0	0%
	Discharges	90	<u>\$0</u>	90	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ 0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL INFATIENT & OUTFATIENT PATINENTS	\$0	Φ U	D	U%

REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
М.	UNIVERSAL AMERICAN				
	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%
	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 TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	0 \$0	\$0	0% 0%
-	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0	0%
	TOTAL INFATIENT & COTFATIENT FATMENTS	\$ 0	ΨU	\$ 0	U 70
N.	EVERCARE				
1	Inpatient Charges	\$220,420	\$53,609	(\$166,811)	-76%
2	Inpatient Payments	\$119,219	\$19,043	(\$100,176)	-84%
3	Outpatient Charges	\$131,588	\$28,796	(\$102,792)	-78%
4	Outpatient Payments	\$32,765	\$8,249	(\$24,516)	-75%
5	Discharges	14	3	(11)	-79%
	Patient Days	49	10	(39)	-80%
7	Outpatient Visits (Excludes ED Visits)	46	25	(21)	-46%
8	Emergency Department Outpatient Visits	11	6	(5)	-45%
9	Emergency Department Inpatient Admissions	7	3	(4)	-57%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$352,008	\$82,405	(\$269,603)	-77%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$151,984	\$27,292	(\$124,692)	-82%
II.	TOTAL MEDICARE MANAGED CARE			T	T
	TOTAL INDATIONS CHARGES	#40 000 F00	* 40.000.005	#50.000	00/
	TOTAL INPATIENT CHARGES TOTAL INPATIENT PAYMENTS	\$13,902,503	\$13,962,365	\$59,862	0%
	TOTAL INPATIENT PAYMENTS TOTAL OUTPATIENT CHARGES	\$5,928,822 \$42,208,526	\$5,790,541	(\$138,281)	-2% 8%
		\$13,298,536 \$3,116,078	\$14,343,367 \$3,294,352	\$1,044,831 \$178,274	
	TOTAL OUTPATIENT PAYMENTS TOTAL DISCHARGES	594	\$3,294,352 583	\$176,274	6% -2%
	TOTAL DISCHARGES TOTAL PATIENT DAYS	2,655	2,805	150	6%
	TOTAL PATIENT DATS TOTAL OUTPATIENT VISITS (EXCLUDES ED	2,000	۷,005	130	0%
	VISITS)	13,897	10,167	(3,730)	-27%
-	TOTAL EMERGENCY DEPARTMENT	15,091	10,107	(3,730)	-21 /0
	OUTPATIENT VISITS	1,176	875	(301)	-26%
	TOTAL EMERGENCY DEPARTMENT	1,170	0/3	(501)	25/0
	INPATIENT ADMISSIONS	426	432	6	1%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$27,201,039	\$28,305,732	\$1,104,693	4%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$9,044,900	\$9,084,893	\$39,993	0%

REPORT 200 19 of 56 7/26/2012,8:19 AM

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICAID MANAGED CARE				
	MEDIO NO				
A.	ANTHEM BLUE CROSS AND BLUE SHIELD OF 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	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%
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$7,104,022	\$7,968,729	\$864,707	12%
2	Inpatient Payments	\$2,189,631	\$2,278,846	\$89,215	4%
3	Outpatient Charges	\$19,870,665	\$21,294,421	\$1,423,756	7%
4	Outpatient Payments	\$6,180,688	\$6,137,666	(\$43,022)	-1%
5	Discharges	868	778	(90)	-10%
6	Patient Days	1,969	1,957	(12)	-1%
7	Outpatient Visits (Excludes ED Visits)	10,360	10,819	459	4%
8	Emergency Department Outpatient Visits	8,828	8,224	(604)	-7%
9	Emergency Department Inpatient Admissions	155	138	(17)	-11%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$26,974,687	\$29,263,150	\$2,288,463	8%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$8,370,319	\$8,416,512	\$46,193	1%
_	LIEAL TUNET OF THE NORTHEAST INC				
<u>C.</u>	HEALTHNET OF THE NORTHEAST, INC.	ф <u>о</u>	ф о	ф 2	00/
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0 \$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5 6	Discharges Patient Days	0	0	0	0% 0%
7	Outpatient Visits (Excludes ED Visits)		0	0	
8		0	0	0	0%
	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0			0%
9	TOTAL INPATIENT & OUTPATIENT	0	0	0	0%
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT	φυ	φυ	ψU	U76
	PAYMENTS	\$0	\$0	\$0	0%
	PATIVIENTO	\$0	\$0	\$0	(

(1)	(2)	(3)	(4)	(5)	(6)
\-/	(-)	FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$2,008,176	\$3,071,506	\$1,063,330	53%
2	Inpatient Payments	\$485,946	\$1,028,637	\$542,691	112%
3	Outpatient Charges	\$3,836,416	\$4,515,139	\$678,723	18%
4	Outpatient Payments	\$1,167,599	\$1,194,953	\$27,354	2%
5	Discharges	177	271	94	53%
6	Patient Days	605	1,029	424	70%
7	Outpatient Visits (Excludes ED Visits)	1,718	2,141	423	25%
8	Emergency Department Outpatient Visits	1,618	1,723	105	6%
9	Emergency Department Inpatient Admissions	70	95	25	36%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$5,844,592	\$7,586,645	\$1,742,053	30%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$1,653,545	\$2,223,590	\$570,045	34%
E.	WELLCARE OF 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	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,				
F.	PREFERRED ONE	Φ.	Φ.	^	00/
1	Inpatient Charges	\$0 \$0	\$0	\$0 \$0	0%
2	Inpatient Payments		\$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%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
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				
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%
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%
Н.	AETNA				
1	Inpatient Charges	\$908,805	\$1,259,360	\$350,555	39%
2	Inpatient Payments	\$189,155	\$291,102	\$101,947	54%
3	Outpatient Charges	\$3,962,599	\$4,145,634	\$183,035	5%
4	Outpatient Payments	\$1,094,817	\$1,079,365	(\$15,452)	-1%
5	Discharges	63	64	1	2%
6	Patient Days	209	250	41	20%
7	Outpatient Visits (Excludes ED Visits)	1,474	1,572	98	7%
8	Emergency Department Outpatient Visits	2,047	1,766	(281)	-14%
9	Emergency Department Inpatient Admissions	36	39	3	8%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$4,871,404	\$5,404,994	\$533,590	11%
	TOTAL INPATIENT & OUTPATIENT	A4 000 070	A4 070 407	200 105	- 0./
	PAYMENTS	\$1,283,972	\$1,370,467	\$86,495	7%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$10,021,003	\$12,299,595	\$2,278,592	23%
	TOTAL INPATIENT PAYMENTS	\$2,864,732	\$3,598,585	\$733,853	26%
	TOTAL OUTPATIENT CHARGES	\$27,669,680	\$29,955,194	\$2,285,514	8%
	TOTAL DISCUARGES	\$8,443,104	\$8,411,984	(\$31,120)	0%
	TOTAL DISCHARGES TOTAL PATIENT DAYS	1,108	1,113	5	0%
	TOTAL PATIENT DAYS TOTAL OUTPATIENT VISITS	2,783	3,236	453	16%
	(EXCLUDES ED VISITS)	13,552	14,532	980	7%
	TOTAL EMERGENCY DEPARTMENT	13,332	14,332	900	1 70
	OUTPATIENT VISITS	12,493	11,713	(780)	-6%
	TOTAL EMERGENCY DEPARTMENT	12,433	11,713	(100)	-0 /6
	INPATIENT ADMISSIONS	261	272	11	4%
	TOTAL INPATIENT & OUTPATIENT	201	LIL	- 11	7/0
	CHARGES	\$37,690,683	\$42,254,789	\$4,564,106	12%
	TOTAL INPATIENT & OUTPATIENT	, , , , , , , , , , , , , , , , , , , ,	, , ,	, ,,	70
	PAYMENTS	\$11,307,836	\$12,010,569	\$702,733	6%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE

	ВАС	KUS CORPORATION			
	TWELVE	MONTHS ACTUAL FILIN	lG		
		FISCAL YEAR 2011			
	REPORT 300 - HOSP	TAL BALANCE SHEET I	NFORMATION		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
<u>LINE</u>	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
I.	<u>ASSETS</u>				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$74,929,624	\$95,434,551	\$20,504,927	27%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$32,546,895	\$34,428,013	\$1,881,118	6%
4	Current Liabilities	¢7.024.500	¢E 00E 402	(\$2.046.409)	260/
4	Current Liabilities Due From Affiliates	\$7,931,590	\$5,885,482	(\$2,046,108)	-26%
5		\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$3,885,317	\$3,704,067	(\$181,250)	-5%
8	Prepaid Expenses	\$1,303,628	\$1,634,141	\$330,513	25%
9	Other Current Assets	\$185,866	\$101,211	(\$84,655)	-46%
	Total Current Assets	\$120,782,920	\$141,187,465	\$20,404,545	17%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$26,988,802	\$28,078,427	\$1,089,625	4%
2	Board Designated for Capital Acquisition	\$88,694,819	\$99,552,920	\$10,858,101	12%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
4	Total Noncurrent Assets Whose Use is	Φ0	ΦΟ	Φ0	0%
	Limited:	\$115,683,621	\$127,631,347	\$11,947,726	10%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$4,347,241	\$3,979,554	(\$367,687)	-8%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$232,092,918	\$230,357,085	(\$1,735,833)	-1%
2	Less: Accumulated Depreciation	\$132,954,480	\$141,087,085	\$8,132,605	\$0
	Property, Plant and Equipment, Net	\$99,138,438	\$89,270,000	(\$9,868,438)	-10%
3	Construction in Progress	\$630,806	\$1,365,773	\$734,967	117%
	Total Net Fixed Assets	\$99,769,244	\$90,635,773	(\$9,133,471)	-9%
	Total Assets	\$340,583,026	\$363,434,139	\$22,851,113	7%
		Ţ==-, 000,0	Ţ===, . ., . 	Ţ==,55·,·.•	1 70

	BACKUS CORPORATION						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011						
	REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION						
(1)	(2) DESCRIPTION	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % <u>DIFFERENCE</u>		
II.	LIABILITIES AND NET ASSETS						
A.	Current Liabilities:						
1	Accounts Payable and Accrued Expenses	\$10,942,326	\$10,347,081	(\$595,245)	-5%		
2	Salaries, Wages and Payroll Taxes	\$6,905,328	\$7,383,760	\$478,432	7%		
3	Due To Third Party Payers	\$2,963,415	\$5,023,840	\$2,060,425	70%		
4	Due To Affiliates	\$0	\$0	\$0	0%		
5	Current Portion of Long Term Debt	\$1,895,000	\$1,965,000	\$70,000	4%		
6	Current Portion of Notes Payable	\$137,691	\$150,360	\$12,669	9%		
7	Other Current Liabilities	\$10,711,877	\$9,900,034	(\$811,843)	-8%		
	Total Current Liabilities	\$33,555,637	\$34,770,075	\$1,214,438	4%		
В.	Long Term Debt:						
1	Bonds Payable (Net of Current Portion)	\$61,987,072	\$59,976,971	(\$2,010,101)	-3%		
2	Notes Payable (Net of Current Portion)	\$2,604,759	\$2,412,742	(\$192,017)	-7%		
	Total Long Term Debt	\$64,591,831	\$62,389,713	(\$2,202,118)	-3%		
3	Accrued Pension Liability	\$50,267,036	\$62,916,776	\$12,649,740	25%		
4	Other Long Term Liabilities	\$31,337,809	\$40,594,961	\$9,257,152	30%		
	Total Long Term Liabilities	\$146,196,676	\$165,901,450	\$19,704,774	13%		
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%		
C.	Net Assets:						
1	Unrestricted Net Assets or Equity	\$149,253,750	\$153,913,943	\$4,660,193	3%		
2	Temporarily Restricted Net Assets	\$4,101,543	\$1,399,547	(\$2,701,996)	-66%		
3	Permanently Restricted Net Assets	\$7,475,420	\$7,449,124	(\$26,296)	0%		
	Total Net Assets	\$160,830,713	\$162,762,614	\$1,931,901	1%		
	Total Liabilities and Net Assets	\$340,583,026	\$363,434,139	\$22,851,113	7%		

		KUS CORPORATIO							
		MONTHS ACTUAL FISCAL YEAR 2011							
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION									
(1)	(2)	(3)	(4)	(5)	(6)				
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE				
LINE	DESCRIPTION	ACTOAL	ACTUAL	DIFFERENCE	DIFFERENCE				
Α.	Operating Revenue:								
1	Total Gross Patient Revenue	\$604,461,491	\$624,460,853	\$19,999,362	3%				
2	Less: Allowances	\$315,063,365	\$334,249,153	\$19,185,788	6%				
3	Less: Charity Care	\$6,496,622	\$5,004,135	(\$1,492,487)	-23%				
4	Less: Other Deductions	\$0	\$0	\$0	0%				
	Total Net Patient Revenue	\$282,901,504	\$285,207,565	\$2,306,061	1%				
5	Other Operating Revenue	\$4,357,277	\$4,307,817	(\$49,460)	-1%				
6	Net Assets Released from Restrictions	\$91,211	\$673,194	\$581,983	638%				
	Total Operating Revenue	\$287,349,992	\$290,188,576	\$2,838,584	1%				
В.	Operating Expenses:								
1	Salaries and Wages	\$116,197,349	\$117,877,797	\$1,680,448	1%				
2	Fringe Benefits	\$29,622,058	\$27,854,316	(\$1,767,742)	-6%				
3	Physicians Fees	\$1,512,971	\$1,766,978	\$254,007	17%				
4	Supplies and Drugs	\$91,569,467	\$84,999,001	(\$6,570,466)	-7%				
5	Depreciation and Amortization	\$17,534,609	\$17,045,582	(\$489,027)	-3%				
6	Bad Debts	\$14,462,163	\$12,767,930	(\$1,694,233)	-12%				
7	Interest	\$3,185,038	\$3,247,715	\$62,677	2%				
8	Malpractice	\$2,653,793	\$3,088,438	\$434,645	16%				
9	Other Operating Expenses	\$0	\$0	\$0	0%				
	Total Operating Expenses	\$276,737,448	\$268,647,757	(\$8,089,691)	-3%				
	Income/(Loss) From Operations	\$10,612,544	\$21,540,819	\$10,928,275	103%				
C.	Non-Operating Revenue:								
1	Income from Investments	\$8,486,755	\$8,259,609	(\$227,146)	-3%				
2	Gifts, Contributions and Donations	\$328,840	\$158,300	(\$170,540)	-52%				
3	Other Non-Operating Gains/(Losses)	\$77,066	(\$565,873)	(\$642,939)	-834%				
	Total Non-Operating Revenue	\$8,892,661	\$7,852,036	(\$1,040,625)	-12%				
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$19,505,205	\$29,392,855	\$9,887,650	51%				
	Other Adjustments:								
	Unrealized Gains/(Losses)	\$0	(\$5,813,831)	(\$5,813,831)	0%				
	All Other Adjustments	\$0	\$0	\$0	0%				
	Total Other Adjustments	\$0	(\$5,813,831)	(\$5,813,831)	0%				
	Excess/(Deficiency) of Revenue Over Expenses	\$19,505,205	\$23,579,024	\$4,073,819	21%				

TWELVE MONTHS ACTUAL FILING OFFICE OF HEALTH CARE ACCESS BACKUS CORPORATION **BACKUS CORPORATION TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS** (1) (2) (3) (4) (5) **ACTUAL ACTUAL** ACTUAL LINE DESCRIPTION FY 2009 FY 2010 FY 2011 Parent Corporation Statement of Operations Summary 1 Net Patient Revenue \$271,765,388 \$282,901,504 \$285,207,565 4,981,011 Other Operating Revenue 4.498.687 4,448,488 Total Operating Revenue \$276,264,075 \$287,349,992 \$290,188,576 Total Operating Expenses 268,287,931 276,737,448 268,647,757 Income/(Loss) From Operations \$7,976,144 \$10,612,544 \$21,540,819 Total Non-Operating Revenue 5,607,279 2,038,205 8,892,661 Excess/(Deficiency) of Revenue Over Expenses \$13,583,423 \$19,505,205 \$23,579,024 **Parent Corporation Profitability Summary** Parent Corporation Operating Margin 2.83% 3.58% 7.37% Parent Corporation Non-Operating Margin 1.99% 3.00% 0.70% Parent Corporation Total Margin 4.82% 6.58% 8.07% Income/(Loss) From Operations \$7,976,144 \$10,612,544 \$21,540,819 Total Operating Revenue \$276,264,075 \$287,349,992 \$290,188,576

\$5,607,279

\$281,871,354

\$13,583,423

\$104,776,463

\$115,085,725

(\$30,015,876)

79.3%

\$8,892,661

\$296,242,653

\$19,505,205

\$149,253,750

\$160,830,713

\$45,744,988

39.7%

\$2,038,205

\$292,226,781

\$23,579,024

\$153,913,943

\$162,762,614

\$1,931,901

1.2%

Total Non-Operating Revenue

Excess/(Deficiency) of Revenue Over Expenses

Parent Corporation Net Assets Summary Parent Corporation Unrestricted Net Assets

Parent Corporation Change in Total Net Assets

Parent Corporation Change in Total Net Assets %

Parent Corporation Total Net Assets

Total Revenue

C.

1

3

OFFICE OF HEALTH CARE ACCESS TWELVE MONTHS ACTUAL FILING BACKUS CORPORATION **BACKUS CORPORATION TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS** (1) (2) (3) (4) (5) **ACTUAL ACTUAL** ACTUAL LINE DESCRIPTION FY 2009 FY 2010 FY 2011 D. Liquidity Measures Summary **Current Ratio** 3.32 3.60 4.06 **Total Current Assets** \$112,352,984 \$120,782,920 \$141,187,465 **Total Current Liabilities** \$33,811,045 \$33,555,637 \$34,770,075 **Days Cash on Hand** 90 106 138 5 Cash and Cash Equivalents \$62,155,067 \$74,929,624 \$95,434,551 6 Short Term Investments 0 0 Total Cash and Short Term Investments \$62,155,067 \$74,929,624 \$95,434,551 **Total Operating Expenses** \$268,287,931 \$276,737,448 \$268,647,757 8 Depreciation Expense \$17,335,024 \$17,534,609 \$17,045,582 10 Operating Expenses less Depreciation Expense \$250,952,907 \$259,202,839 \$251,602,175 48 38 11 Days Revenue in Patient Accounts Receivable 38 12 Net Patient Accounts Receivable \$ 38,032,269 \$ 32,546,895 \$ 34,428,013 \$0 13 Due From Third Party Payers \$0 \$0 14 Due To Third Party Payers \$2.310.804 \$2.963.415 \$5.023.840 Total Net Patient Accounts Receivable and Third Party Payer Activity \$ 35,721,465 29,583,480 29,404,173 15 16 Total Net Patient Revenue \$271,765,388 \$282,901,504 \$285,207,565 49

47

\$33,555,637

\$276,737,448

\$259,202,839

\$17,534,609

\$33,811,045

\$268,287,931

\$250,952,907

\$17,335,024

50

\$34,770,075

\$268,647,757

\$251,602,175

\$17,045,582

Average Payment Period

18 Total Current Liabilities

19 Total Operating Expenses

Depreciation Expense

Total Operating Expenses less Depreciation Expense

17

20

	BACKUS CORPORA								
	TWELVE MONTHS ACTU	-							
	FISCAL YEAR								
	REPORT 385 - PARENT CORPORATION CONSOLI	DATED FINANCIAL DA	ATA ANALYSIS						
(1)	1) (2) (3) (4)								
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011					
E.	Solvency Measures Summary								
1	Equity Financing Ratio	36.0	47.2	44.8					
2	Total Net Assets	\$115,085,725	\$160,830,713	\$162,762,614					
3	Total Assets	\$319,898,277	\$340,583,026	\$363,434,139					
4	Cash Flow to Total Debt Ratio	31.3	37.7	41.8					
5	Excess/(Deficiency) of Revenues Over Expenses	\$13,583,423	\$19,505,205	\$23,579,024					
6	Depreciation Expense	\$17,335,024	\$17,534,609	\$17,045,582					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$30,918,447	\$37,039,814	\$40,624,606					
8	Total Current Liabilities	\$33,811,045	\$33,555,637	\$34,770,075					
9	Total Long Term Debt	\$64,995,680	\$64,591,831	\$62,389,713					
10	Total Current Liabilities and Total Long Term Debt	\$98,806,725	\$98,147,468	\$97,159,788					
11	Long Term Debt to Capitalization Ratio	36.1	28.7	27.7					
12	Total Long Term Debt	\$64,995,680	\$64,591,831	\$62,389,713					
13	Total Net Assets	\$115,085,725	\$160,830,713	\$162,762,614					
14	Total Long Term Debt and Total Net Assets	\$180,081,405	\$225,422,544	\$225,152,327					

		WILLIA	M W. BACKUS HOS	SPITAL				
		TWELVE	MONTHS ACTUAL	_ FILING				
			FISCAL YEAR 20	11				
	REPORT 40	- HOSPITAL IN	PATIENT BED UTIL	IZATION BY DEP	PARTMENT			
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
			DISCHARGES				OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	<u>DAYS</u>	# PATIENT		BEDS (A)	<u>BEDS</u>	BEDS (A)	<u>BEDS</u>
1	Adult Medical/Surgical	37,427	9,471	9,568	139	166	73.8%	61.8%
2	ICU/CCU (Excludes Neonatal ICU)	3,304	190	0	12	12	75.4%	75.4%
2	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
	Psychiatric: Ages 0 to 17 Psychiatric: Ages 18+	4,597	634	629	18	20	70.0%	63.0%
	TOTAL PSYCHIATRIC	4,597	634	629	18	20	70.0%	
	TOTALTOTOMATICO	4,007	004	023	10	20	70.070	03.070
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
	rondomation	J			J	J	0.070	0.070
6	Maternity	2,200	946	853	15	15	40.2%	40.2%
		,						
7	Newborn	2,126	948	942	18	20	32.4%	29.1%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
		_	_			_		
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.00/
10	Other	U	U	U	U	U	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	47,528	11,051	11,050	184	213	70.8%	61.1%
	TOTAL EXCEODING NEWBORN	47,320	11,031	11,030	104	213	70.070	01.170
	TOTAL INPATIENT BED UTILIZATION	49,654	11,999	11,992	202	233	67.3%	58.4%
		10,001	11,000	,002	202	200	011070	33.170
	TOTAL INPATIENT REPORTED YEAR	49,654	11,999	11,992	202	233	67.3%	58.4%
	TOTAL INPATIENT PRIOR YEAR	49,096	0	0	202	233	66.6%	
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	558	11,999	11,992	0	0	0.8%	
			,,,,,	,,,,,				533.75
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	1%	0%	0%	0%	0%	1%	1%
	Total Licensed Beds and Bassinets	233						
(A) T	his number may not exceed the number of avail	able beds for each	ch department or in	total.				

		M W. BACKUS HOSPI E MONTHS ACTUAL FI			
		FISCAL YEAR 2011			
	REPORT 450 - HOSPITAL INPATIENT AN		R SERVICES UTIL	IZATION AND FTE	 S
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
<u>LINE</u>	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
	07.0 (4)				
A. 1	CT Scans (A) Inpatient Scans	7,598	7,810	212	3%
- 1	Outpatient Scans (Excluding Emergency Department	7,396	7,010	212	37
2	Scans)	14,217	13,339	-878	-69
	Emergency Department Scans	11,534	10,882	-652	-69
4	Other Non-Hospital Providers' Scans (A)	0	0	0	09
	Total CT Scans	33,349	32,031	-1,318	-49
		,	·	·	
В.	MRI Scans (A)				
1	Inpatient Scans	965	1,087	122	139
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	8,969	9,259	290	39
	Emergency Department Scans	268	310	42	169
4	Other Non-Hospital Providers' Scans (A)	0	0	0	00
	Total MRI Scans	10,202	10,656	454	49
C.	PET Scans (A)				
	Inpatient Scans	0	0	0	0°
	Outpatient Scans (Excluding Emergency Department	0	0	U	0
2	Scans)	0	0	0	09
	Emergency Department Scans	0	0	0	0'
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0,
	Total PET Scans	0	0	0	0'
D.	PET/CT Scans (A)				
1	Inpatient Scans	11	11	0	0,
_	Outpatient Scans (Excluding Emergency Department	000	704	07	0.0
3	Scans) Emergency Department Scans	808	781 0	-27 0	-3°
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0'
	Total PET/CT Scans	819	792	-27	-3'
			_		
	(A) If the Hospital is not the primary provider of the	se scans, the Hospital	I must obtain the fis	scal year	
	volume of each of these types of scans from the				
E.	Linear Accelerator Procedures				
1	Inpatient Procedures	536	426	-110	-219
2	Outpatient Procedures	10,620	9,767	-853	-89
	Total Linear Accelerator Procedures	11,156	10,193	-963	-9
_	Couding Cathotoxination Proceedings				
F	Cardiac Catheterization Procedures Inpatient Procedures	112	110		
<u>1</u> 2	Outpatient Procedures	113 209	119 217	6 8	5° 4°
	Total Cardiac Catheterization Procedures	322	336	14	4'
	Total Gardiao Garrieterization i 100caures	022	000		
G.	Cardiac Angioplasty Procedures				
	Primary Procedures	0	0	0	0,
2	Elective Procedures	0	0	0	0'
	Total Cardiac Angioplasty Procedures	0	0	0	0
Н.	Electrophysiology Studies				
1	Inpatient Studies	47	28	-19	-40
2	Outpatient Studies	29	40	11	38
	Total Electrophysiology Studies	76	68	-8	-11
	Curried Dressdores				
	Surgical Procedures	3,246	0.450	0.4	
I.	Unnotiont Curainal Dropodures	3 7/16	3,152	-94	-3
1	Inpatient Surgical Procedures		7 2/17	100	10
	Outpatient Surgical Procedures	7,453	7,347 10.499	-106 -200	-1°
1	1 0		7,347 10,499	-106 -200	

	TIA/EL \/E				
	IWELVE	MONTHS ACTUAL FI	LING		
		FISCAL YEAR 2011			
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTHE	R SERVICES UTILI	ZATION AND FTES	<u> </u>
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
	Inpatient Endoscopy Procedures	489	518	29	6%
2	Outpatient Endoscopy Procedures	2,127	2,069	-58	-3%
	Total Endoscopy Procedures	2,616	2,587	-29	-1%
K.	Hospital Emergency Room Visits				
	Emergency Room Visits: Treated and Admitted	6,391	6,846	455	7%
	Emergency Room Visits: Treated and Discharged	59,170	56,352	-2,818	-5%
	Total Emergency Room Visits	65,561	63,198	-2,363	-4%
	Total Emergency Room Visits	00,301	03,130	-2,303	- /(
L.	Hospital Clinic Visits				
	Substance Abuse Treatment Clinic Visits	0	0	0	0%
	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	22,179	19,490	-2,689	-12%
	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	46,023	56,774	10,751	23%
	Total Hospital Clinic Visits	68,202	76,264	8,062	12%
M.	Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	13,032	15,315	2,283	18%
2	Cardiology	6,176	6,015	-161	-3%
3	Chemotherapy	2,214	2,364	150	7%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	195,522	172,664	-22,858	-12%
	Total Other Hospital Outpatient Visits	216,944	196,358	-20,586	-9%
N.	Hospital Full Time Equivalent Employees				
1 1	Total Nursing FTEs	450.8	455.6	4.8	1%
	Total Physician FTEs	450.8 36.7	455.6 36.3	4.8 -0.4	-1%
	Total Non-Nursing and Non-Physician FTEs	1,054.6	1,022.0	-0.4	-1%
3	Total Hospital Full Time Equivalent Employees	1,054.6	1,513.9	-32.6 -28.2	-3% -2%
	Total Hospital Full Tillie Equivalent Employees	1,342.1	1,513.9	-20.2	-270

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2011** REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION (1) (2) (3) (4) (5) (6) ACTUAL ACTUAL **AMOUNT** % DIFFERENCE DIFFERENCE LINE DESCRIPTION FY 2010 FY 2011 A. **Outpatient Surgical Procedures** BACKUS HOSPITAL 7,453 7,347 -106 -1% Total Outpatient Surgical Procedures(A) 7,347 -106 -1% 7,453 В. **Outpatient Endoscopy Procedures BACKUS HOSPITAL** 2,127 2,069 -58 -3% Total Outpatient Endoscopy Procedures(B) 2,069 -3% 2,127 -58 **Outpatient Hospital Emergency Room Visits** C. -2,818 BACKUS HOSPITAL 59,170 56,352 -5% **Total Outpatient Hospital Emergency Room Visits(** 59,170 56,352 -2,818 -5% (A) Must agree with Total Outpatient Surgical Procedures on Report 450. (B) Must agree with Total Outpatient Endoscopy Procedures on Report 450. (C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS								
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>				
I.	DATA BY MAJOR PAYER CATEGORY								
A.	MEDICARE								
	MEDICARE INPATIENT								
	INPATIENT ACCRUED CHARGES	\$118,711,488	\$122,661,517	\$3,950,029	3%				
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$50,024,630	\$51,533,821	\$1,509,191	3%				
_	INPATIENT PAYMENTS / INPATIENT CHARGES	42.14%	42.01%	-0.13%	0%				
	DISCHARGES	5,229	5,200	(29)	-1%				
	CASE MIX INDEX (CMI)	1.41700	1.45070	0.03370	2%				
	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,409.49300	7,543.64000	134.14700	2%				
	INPATIENT ACCRUED PAYMENT / CMAD	\$6,751.42	\$6,831.43	\$80.00	1%				
-	PATIENT DAYS	25,493	25,583	90	0%				
-	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,962.29	\$2,014.38	\$52.09	3%				
10	AVERAGE LENGTH OF STAY	4.9	4.9	0.0	1%				
	MEDICARE OUTPATIENT								
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$106,993,930	\$107,995,681	\$1,001,751	1%				
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$26,944,789	\$27,092,973	\$148,184	1%				
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.18%	25.09%	-0.10%	0%				
14	OUTPATIENT CHARGES / INPATIENT CHARGES	90.13%	88.04%	-2.09%	-2%				
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,712.86536	4,578.26998	(134.59538)	-3%				
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,717.28	\$5,917.73	\$200.45	4%				
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)								
17	TOTAL ACCRUED CHARGES	\$225,705,418	\$230,657,198	\$4,951,780	2%				
18	TOTAL ACCRUED PAYMENTS	\$76,969,419	\$78,626,794	\$1,657,375	2%				
19	TOTAL ALLOWANCES	\$148,735,999	\$152,030,404	\$3,294,405	2%				

REPORT 500 34 of 56 7/26/2012, 8:19 AM

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

	AND BASELINE UNDERPATIMENT DATA. COMPARATIVE ANALTSIS								
		4071141	4071141	****					
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE				
B.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)								
	NON-GOVERNMENT INPATIENT								
1	INPATIENT ACCRUED CHARGES	\$78,155,513	\$80,104,999	\$1,949,486	2%				
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$57,243,662	\$60,420,640	\$3,176,978	6%				
3	INPATIENT PAYMENTS / INPATIENT CHARGES	73.24%	75.43%	2.18%	3%				
4	DISCHARGES	4,440	4,178	(262)	-6%				
5	CASE MIX INDEX (CMI)	1.21600	1.25740	0.04140	3%				
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,399.04000	5,253.41720	(145.62280)	-3%				
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,602.56	\$11,501.21	\$898.64	8%				
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,851.14)	(\$4,669.78)	(\$818.64)	21%				
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$20,792,453)	(\$24,532,307)	(\$3,739,854)	18%				
10	PATIENT DAYS	14,787	14,019	(768)	-5%				
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,871.22	\$4,309.91	\$438.70	11%				
12	AVERAGE LENGTH OF STAY	3.3	3.4	0.0	1%				
	NON-GOVERNMENT OUTPATIENT								
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$178,390,153	\$178,766,277	\$376,124	0%				
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$98,609,680	\$98.487.408	(\$122,272)	0%				
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	55.28%	55.09%	-0.18%	0%				
16	OUTPATIENT CHARGES / INPATIENT CHARGES	228.25%	223.16%	-5.09%	-2%				
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	10,134.31105	9.323.83140	(810.47965)	-8%				
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,730.28	\$10,562.98	\$832.70	9%				
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$4,013.00)	(\$4,645.24)	(\$632.25)	16%				
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$40,668,947)	(\$43,311,476)	(\$2,642,529)	6%				
		(+10,000,011)	(+ , , ,	(+=,0 :=,0=0)					
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)								
21	TOTAL ACCRUED CHARGES	\$256,545,666	\$258,871,276	\$2,325,610	1%				
22	TOTAL ACCRUED PAYMENTS	\$155,853,342	\$158,908,048	\$3,054,706	2%				
23	TOTAL ALLOWANCES	\$100,692,324	\$99,963,228	(\$729,096)	-1%				
		***************************************	400,000,==0	(4: =0,000)	.,,				
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$61,461,400)	(\$67,843,784)	(\$6,382,383)	10%				
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA								
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$224,385,117	\$231,352,289	\$6,967,172	3%				
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$150,780,057	\$154,670,107	\$3,890,050	3%				
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)								
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$73,605,060	\$76,682,182	\$3,077,122	4%				
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	32.80%	33.15%	0.34%					

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$3,827,835	\$3,268,265	(\$559,570)	-15%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$928,196	\$702,521	(\$225,675)	-24%
	INPATIENT PAYMENTS / INPATIENT CHARGES	24.25%	21.50%	-2.75%	-11%
•	DISCHARGES	176	172	(4)	-2%
	CASE MIX INDEX (CMI)	1.01190	1.02020	0.00830	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	178.09440	175.47440	(2.62000)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,211.82	\$4,003.55	(\$1,208.27)	-23%
	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$5,390.74	\$7,497.65	\$2,106.91	39%
	MEDICARE - UNINSURED IP PMT / CMAD	\$1,539.60	\$2,827.87	\$1,288.27	84%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$274,195	\$496,219	\$222,025	81%
	PATIENT DAYS	878	697	(181)	-21%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,057.17	\$1,007.92	(\$49.25)	-5%
13	AVERAGE LENGTH OF STAY	5.0	4.1	(0.9)	-19%
	UNINSURED OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$10,114,453	\$10,017,380	(\$97,073)	-1%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,171,511	\$2,365,301	\$193,790	9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.47%	23.61%	2.14%	10%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	264.23%	306.50%	42.27%	16%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	465.05237	527.18778	62.13541	13%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,669.39	\$4,486.64	(\$182.75)	-4%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,060.89	\$6,076.34	\$1,015.45	20%
21	MEDICARE - UNINSURED OP PMT / OPED	\$1,047.89	\$1,431.09	\$383.20	37%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$487,325	\$754,455	\$267,129	55%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$13,942,288	\$13,285,645	(\$656,643)	-5%
24	TOTAL ACCRUED PAYMENTS	\$3,099,707	\$3,067,822	(\$31,885)	-1%
25	TOTAL ALLOWANCES	\$10,842,581	\$10,217,823	(\$624,758)	-6%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$761,520	\$1,250,674	\$489,154	64%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2011 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$25,029,572	\$37,204,651	\$12,175,079	499
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,568,500	\$10,926,316	\$4,357,816	669
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.24%	29.37%	3.13%	129
4	DISCHARGES	1,891	2,318	427	239
5	CASE MIX INDEX (CMI)	0.88620	0.99650	0.11030	129
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,675.80420	2,309.88700	634.08280	389
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,919.61	\$4,730.24	\$810.63	219
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,682.95	\$6,770.97	\$88.02	19
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,831.81	\$2,101.19	(\$730.63)	-269
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,745,565	\$4,853,507	\$107,942	29
11	PATIENT DAYS	6,660	9,069	2,409	369
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$986.26	\$1,204.80	\$218.54	229
13	AVERAGE LENGTH OF STAY	3.5	3.9	0.4	119
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$48,966,375	\$65,160,639	\$16,194,264	339
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$13,349,593	\$15,532,626	\$2,183,033	169
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.26%	23.84%	-3.43%	-139
17	OUTPATIENT CHARGES / INPATIENT CHARGES	195.63%	175.14%	-20.49%	-109
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,699.44061	4,059.77095	360.33034	109
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,608.54	\$3,825.99	\$217.44	69
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$6,121.74	\$6,736.99	\$615.25	109
	MEDICARE - MEDICAID OP PMT / OPED	\$2,108.74	\$2,091.75	(\$16.99)	-19
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,801,159	\$8,492,009	\$690,850	9
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$73,995,947	\$102,365,290	\$28,369,343	389
24	TOTAL ACCRUED PAYMENTS	\$19,918,093	\$26,458,942	\$6,540,849	339
25	TOTAL ALLOWANCES	\$54,077,854	\$75,906,348	\$21,828,494	409
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$12,546,724	\$13,345,516	\$798,792	69

REPORT 500 37 of 56 7/26/2012, 8:19 AM

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
LINE	DESCRIPTION	<u> </u>	F1 2011	DIFFERENCE	DIFFERENCE
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$8,170,373	\$1,325,716	(\$6,844,657)	-84%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,085,775	\$284.954	(\$800.821)	-74%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	13.29%	21,49%	8.21%	62%
4	DISCHARGES	398	66	(332)	-83%
5	CASE MIX INDEX (CMI)	1.16170	1.16970	0.00800	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	462.35660	77.20020	(385.15640)	-83%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,348.35	\$3,691.10	\$1,342.75	57%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$8,254,21	\$7.810.10	(\$444.11)	-5%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$4,403.07	\$3,140.32	(\$1,262.75)	-29%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,035,791	\$242,433	(\$1,793,357)	-88%
11	PATIENT DAYS	1,607	366	(1,241)	-77%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$675.65	\$778.56	\$102.91	15%
13	AVERAGE LENGTH OF STAY	4.0	5.5	1.5	37%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$11,446,758	\$1,097,818	(\$10,348,940)	-90%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,679,893	\$285,216	(\$1,394,677)	-83%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.68%	25.98%	11.30%	77%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	140.10%	82.81%	-57.29%	-41%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	557.60119	54.65423	(502.94696)	-90%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,012.71	\$5,218.55	\$2,205.84	73%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$6,717.57	\$5,344.42	(\$1,373.14)	-20%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$2,704.57	\$699.18	(\$2,005.39)	-74%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,508,071	\$38,213	(\$1,469,858)	-97%
	OTHER MEDICAL ACCIOTANCE TOTAL C (INDATIENT, CUITO (TITLE)				
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)	040.047.404	A0 100 E0 1	(0.17.100.507)	200
23	TOTAL ACCRUED CHARGES	\$19,617,131	\$2,423,534	(\$17,193,597)	-88%
24	TOTAL ACCRUED PAYMENTS	\$2,765,668	\$570,170	(\$2,195,498)	-79%
25	TOTAL ALLOWANCES	\$16,851,463	\$1,853,364	(\$14,998,099)	-89%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$3,543,862	\$280,647	(\$3,263,215)	-92%

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

AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
	ACTUAL	ACTUAL	AMOUNT	%	
DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE	
TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL	ASSISTANCE)				
TOTAL MEDICAL ASSISTANCE INPATIENT					
INPATIENT ACCRUED CHARGES	\$33,199,945	\$38,530,367	\$5,330,422	16%	
INPATIENT ACCRUED PAYMENTS (IP PMT)	\$7,654,275	\$11,211,270	\$3,556,995	46%	
INPATIENT PAYMENTS / INPATIENT CHARGES	23.06%	29.10%	6.04%	26%	
DISCHARGES	2,289	2,384	95	4%	
CASE MIX INDEX (CMI)	0.93410	1.00129	0.06719	7%	
CASE MIX ADJUSTED DISCHARGES (CMAD)	2,138.16080	2,387.08720	248.92640	12%	
INPATIENT ACCRUED PAYMENT / CMAD	\$3,579.84	\$4,696.63	\$1,116.79	31%	
NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$7,022.72	\$6,804.58	(\$218.15)	-3%	
MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,171.58	\$2,134.79	(\$1,036.79)	-33%	
INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,781,355	\$5,095,940	(\$1,685,415)	-25%	
PATIENT DAYS	8,267	9,435	1,168	14%	
INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$925.88	\$1,188.26	\$262.38	28%	
AVERAGE LENGTH OF STAY	3.6	4.0	0.3	10%	
TOTAL MEDICAL ACCIOTANCE CUTDATIENT					
	000 110 100	****	05.045.004	400/	
				10%	
,			+,	5%	
				-4%	
				-5%	
			, ,	-3%	
				9%	
				8%	
				-5%	
OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,309,230	\$8,530,222	(\$779,008)	-8%	
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OLITPATIENT)					
	\$93,613,078	\$104 788 824	\$11 175 746	12%	
				19%	
				10%	
1017127122077111020	\$70,929,517	ψ11,100,112	ψ3,030,333	1070	
	DESCRIPTION TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL TOTAL MEDICAL ASSISTANCE INPATIENT INPATIENT ACCRUED CHARGES INPATIENT ACCRUED PAYMENTS (IP PMT) INPATIENT PAYMENTS / INPATIENT CHARGES DISCHARGES CASE MIX INDEX (CMI) CASE MIX ADJUSTED DISCHARGES (CMAD) INPATIENT ACCRUED PAYMENT / CMAD NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD INPATIENT UPTAL MEDICAL ASSISTANCE IP PMT / CMAD INPATIENT DAYS INPATIENT DAYS INPATIENT DAYS INPATIENT DAYS INPATIENT ACCRUED PAYMENT / PATIENT DAY	ACTUAL	ACTUAL ACTUAL	ACTUAL ACTUAL AMOUNT	

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

	AND BASELINE UNDERPAYMENT DA	ATA: COMPARAT	IVE ANAL 13	13	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
G.	CHAMPUS / TRICARE				
	CHAMPUS / TRICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$2,330,732	\$2,882,913	\$552,181	24%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$909,649	\$1,160,549	\$250,900	28%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	39.03%	40.26%	1.23%	3%
4	DISCHARGES	217	237	20	9%
5	CASE MIX INDEX (CMI)	0.78740	0.83980	0.05240	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	170.86580	199.03260	28.16680	16%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,323.76	\$5,830.95	\$507.19	10%
8	PATIENT DAYS	549	617	68	12%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,656.92	\$1,880.95	\$224.03	14%
10	AVERAGE LENGTH OF STAY	2.5	2.6	0.1	3%
	CHAMPUS / TRICARE OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,195,831	\$6,860,374	(\$335,457)	-5%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,206,442	\$1,906,524	(\$299,918)	-14%
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)				
	TOTAL ACCRUED CHARGES	\$9,526,563	\$9,743,287	\$216,724	2%
	TOTAL ACCRUED PAYMENTS	\$3,116,091	\$3,067,073	(\$49.018)	-2%
	TOTAL ALLOWANCES	\$6,410,472	\$6,676,214	\$265,742	4%
-	OTHER DATA				
H.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$4,374,927	\$5,109,286	\$734,359	17%
	TOTAL OPERATING EXPENSES	\$262,102,283	\$252,073,735	(\$10,028,548)	-4%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$2,166,356	\$0	(\$2,166,356)	-100%
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
	CHARITY CARE (CHARGES)	\$6,321,367	\$4,672,730	(\$1,648,637)	-26%
	BAD DEBTS (CHARGES)	\$14,508,284	\$12,690,606	(\$1,817,678)	-13%
	UNCOMPENSATED CARE (CHARGES)	\$20,829,651	\$17,363,336	(\$3,466,315)	-17%
	COST OF UNCOMPENSATED CARE	\$9,279,517	\$7,692,883	(\$1,586,634)	-17%
	TOTAL MEDICAL ACCIOTANCE LINDEDDAYMENT (DAGELINE METICOCCIONO				
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)	Ann 010	0101 700:	0444===	
	TOTAL ACCRUED CHARGES	\$93,613,078	\$104,788,824	\$11,175,746	12%
	TOTAL ACCRUED PAYMENTS COST OF TOTAL MEDICAL ASSISTANCE	\$22,683,761	\$27,029,112	\$4,345,351	19%
		\$41,704,211	\$46,427,033	\$4,722,822	11%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$19,020,450	\$19,397,921	\$377,471	2%

REPORT 500 40 of 56 7/26/2012, 8:19 AM

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
II.	AGGREGATE DATA				
11.	AGGREGATE DATA				
A.	TOTALS - ALL PAYERS				
1	TOTAL INPATIENT CHARGES	\$232,397,678	\$244,179,796	\$11,782,118	59
2	TOTAL INPATIENT PAYMENTS	\$115,832,216	\$124,326,280	\$8,494,064	7'
3	TOTAL INPATIENT PAYMENTS / CHARGES	49.84%	50.92%	1.07%	2
4	TOTAL DISCHARGES	12,175	11,999	(176)	-1
5	TOTAL CASE MIX INDEX	1.24169	1.28204	0.04035	3'
6	TOTAL CASE MIX ADJUSTED DISCHARGES	15,117.55960	15,383.17700	265.61740	2
7	TOTAL OUTPATIENT CHARGES	\$352,993,047	\$359,880,789	\$6,887,742	20
8	OUTPATIENT CHARGES / INPATIENT CHARGES	151.89%	147.38%	-4.51%	-39
9	TOTAL OUTPATIENT PAYMENTS	\$142,790,397	\$143,304,747	\$514,350	0,
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	40.45%	39.82%	-0.63%	-29
11	TOTAL CHARGES	\$585,390,725	\$604,060,585	\$18,669,860	39
12	TOTAL PAYMENTS	\$258,622,613	\$267,631,027	\$9,008,414	3'
13	TOTAL PAYMENTS / TOTAL CHARGES	44.18%	44.31%	0.13%	0
14	PATIENT DAYS	49,096	49,654	558	1'
В.	TOTALS - ALL GOVERNMENT PAYERS				
1	INPATIENT CHARGES	\$154,242,165	\$164.074.797	\$9.832.632	6°
2	INPATIENT PAYMENTS	\$58,588,554	\$63,905,640	\$5,317,086	9
3	GOVT. INPATIENT PAYMENTS / CHARGES	37.98%	38.95%	0.96%	3'
4	DISCHARGES	7.735	7.821	86	1
5	CASE MIX INDEX	1.25643	1.29520	0.03877	3
	CASE MIX ADJUSTED DISCHARGES	9,718.51960	10,129.75980	411.24020	4
7	OUTPATIENT CHARGES	\$174,602,894	\$181,114,512	\$6,511,618	4'
8	OUTPATIENT CHARGES / INPATIENT CHARGES	113.20%	110.39%	-2.82%	-20
9	OUTPATIENT PAYMENTS	\$44,180,717	\$44,817,339	\$636,622	
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.30%	24.75%	-0.56%	-2'
11	TOTAL CHARGES	\$328,845,059	\$345,189,309	\$16,344,250	5
12	TOTAL PAYMENTS	\$102,769,271	\$108,722,979	\$5,953,708	6'
13	TOTAL PAYMENTS / CHARGES	31.25%	31.50%	0.25%	11
	PATIENT DAYS	34,309	35,635	1,326	4'
15	TOTAL GOVERNMENT DEDUCTIONS	\$226,075,788	\$236,466,330	\$10,390,542	5
C.	AVERAGE LENGTH OF STAY				
1	MEDICARE	4.9	4.9	0.0	1'
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.3	3.4	0.0	1'
	UNINSURED	5.0	4.1	(0.9)	-19 ⁱ
-	MEDICAID	3.5	3.9	0.4	11'
	OTHER MEDICAL ASSISTANCE	4.0	5.5	1.5	37
	CHAMPUS / TRICARE	2.5	2.6	0.1	3
7	TOTAL AVERAGE LENGTH OF STAY	4.0	4.1	0.1	3

REPORT 500 41 of 56 7/26/2012, 8:19 AM

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT

	AND BASELINE UNDERPAYMENT DAT	A: COMPARAT	IVE ANALYS	VE ANALYSIS		
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	<u>DIFFERENCE</u>	
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
	TOTAL OLUBOSO					
1	TOTAL CHARGES	\$585,390,725	\$604,060,585	\$18,669,860	3%	
2	TOTAL GOVERNMENT DEDUCTIONS	\$226,075,788	\$236,466,330	\$10,390,542	5%	
_	UNCOMPENSATED CARE	\$20,829,651	\$17,363,336	(\$3,466,315)	404	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$73,605,060	\$76,682,182	\$3,077,122	4%	
_	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,257,612	\$5,917,710	(\$339,902)	-5%	
6	TOTAL ADJUSTMENTS	\$326,768,111	\$336,429,558	\$9,661,447	3%	
	TOTAL ACCRUED PAYMENTS	\$258,622,614	\$267,631,027	\$9,008,413	3%	
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$2,166,356	\$0	(\$2,166,356)	-100%	
	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$260,788,970	\$267,631,027	\$6,842,057	3%	
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4454955620	0.4430532858	(0.0024422762)	-1%	
	COST OF UNCOMPENSATED CARE	\$9,279,517	\$7,692,883	(\$1,586,634)	-17%	
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$19,020,450	\$19,397,921	\$377,471	2%	
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%	
	TOTAL COST OF UNCOMPENSATED CARE AND					
	MEDICAL ASSISTANCE UNDERPAYMENT	\$28,299,967	\$27,090,804	(\$1,209,163)	-4%	
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$7,801,159	\$8,492,009	\$690.850	9%	
2	OTHER MEDICAL ASSISTANCE	\$3,543,862	\$280,647	(\$3,263,215)	-92%	
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$761,520	\$1,250,674	\$489,154	64%	
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$12,106,541	\$10,023,330	(\$2,083,211)	-17%	
	(**************************************	, , , , , , , ,	, ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$11,330,897	\$10,155,651	(\$1,175,246)	-10.37%	
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$9,259,746	\$4,302,191	(\$4,957,555)	-53.54%	
	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$270,048,715	\$271,933,218	\$1,884,503	0.70%	
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%	
	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$585,390,725	\$604,060,585	\$18,669,860	3.19%	
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$76,847	\$163,776	\$86,929	113.12%	
_	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$20,906,498	\$17,527,112	(\$3,379,386)	-16.16%	
				, , , , , , , , , , , , , , , , , , , ,		

REPORT 500 42 of 56 7/26/2012, 8:19 AM

	WILLIAM W. BACKUS HOSPITAL	-	U.	
	TWELVE MONTHS ACTUAL FILIN	G		
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PA	YMENT LIMIT AND		
	BASELINE UNDERPAYMENT DAT	Ά		
40	(0)	(2)	(1)	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
Α.	INPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$78,155,513	\$80,104,999	\$1,949,486
	MEDICARE	\$118,711,488	122,661,517	\$3,950,029
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$33,199,945 \$25,029,572	38,530,367 37,204,651	\$5,330,422 \$12,175,079
	OTHER MEDICAL ASSISTANCE	\$8,170,373	1,325,716	(\$6,844,657)
	CHAMPUS / TRICARE	\$2,330,732	2,882,913	\$552,181
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT CHARGES	\$3,827,835	3,268,265	(\$559,570)
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$154,242,165 \$232,397,678	\$164,074,797 \$244,179,796	\$9,832,632 \$11,782,118
			. , . , . ,	. , . ,
	OUTPATIENT ACCRUED CHARGES	¢470 000 450	\$170 700 077	Ф070 404
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$178,390,153 \$106,993,930	\$178,766,277 107,995,681	\$376,124 \$1,001,751
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$60,413,133	66,258,457	\$5,845,324
	MEDICAID	\$48,966,375	65,160,639	\$16,194,264
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$11,446,758 \$7,195,831	1,097,818 6,860,374	(\$10,348,940) (\$335,457)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,114,453	10,017,380	(\$97,073)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$174,602,894	\$181,114,512	\$6,511,618
	TOTAL OUTPATIENT CHARGES	\$352,993,047	\$359,880,789	\$6,887,742
C.	TOTAL ACCRUED CHARGES			
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$256,545,666	\$258,871,276	\$2,325,610
2	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$225,705,418	\$230,657,198	\$4,951,780
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$93,613,078 \$73,995,947	\$104,788,824 \$102,365,290	\$11,175,746 \$28,369,343
5	TOTAL OTHER MEDICAL ASSISTANCE	\$19,617,131	\$2,423,534	(\$17,193,597)
6	TOTAL CHAMPUS / TRICARE	\$9,526,563	\$9,743,287	\$216,724
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CHARGES	\$13,942,288 \$328,845,059	\$13,285,645 \$345,189,309	(\$656,643) \$16,344,250
	TOTAL CHARGES	\$585,390,725	\$604,060,585	\$18,669,860
_	INDATIENT ACCOURD DAYMENTS			
	INPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$57,243,662	\$60,420,640	\$3,176,978
2	MEDICARE	\$50,024,630	51,533,821	\$1,509,191
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$7,654,275	11,211,270	\$3,556,995 \$4,357,816
	OTHER MEDICAL ASSISTANCE	\$6,568,500 \$1,085,775	10,926,316 284,954	(\$800,821)
	CHAMPUS / TRICARE	\$909,649	1,160,549	\$250,900
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$928,196	702,521	(\$225,675)
	TOTAL INPATIENT GOVERNMENT PAYMENTS TOTAL INPATIENT PAYMENTS	\$58,588,554 \$115,832,216	\$63,905,640 \$124,326,280	\$5,317,086 \$8,494,064
		V ::0,002,2:0	V.2. ,020,200	\$0,101,001
E.	OUTPATIENT ACCRUED PAYMENTS	#00 000 000	¢00 407 405	(0400 070)
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$98,609,680 \$26,944,789	\$98,487,408 27,092,973	(\$122,272) \$148,184
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$15,029,486	15,817,842	\$788,356
	MEDICAID	\$13,349,593	15,532,626	\$2,183,033
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$1,679,893 \$2,206,442	285,216 1,906,524	(\$1,394,677) (\$299,918)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,206,442	2,365,301	\$193,790
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$44,180,717	\$44,817,339	\$636,622
<u> </u>	TOTAL OUTPATIENT PAYMENTS	\$142,790,397	\$143,304,747	\$514,350
F.	TOTAL ACCRUED PAYMENTS			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$155,853,342	\$158,908,048	\$3,054,706
3	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$76,969,419 \$22,683,761	\$78,626,794 \$27,029,112	\$1,657,375 \$4,345,351
4	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$19,918,093	\$26,458,942	\$6,540,849
5	TOTAL OTHER MEDICAL ASSISTANCE	\$2,765,668	\$570,170	(\$2,195,498)
7	TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,116,091	\$3,067,073	(\$49,018)
	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT PAYMENTS	\$3,099,707 \$102,769,271	\$3,067,822 \$108,722,979	(\$31,885) \$5,953,708
	TOTAL PAYMENTS	\$258,622,613	\$267,631,027	\$9,008,414

	WILLIAM W. BACKUS HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT I IMIT AND		
	BASELINE UNDERPAYMENT DATA	LIVI LIMIT AND		
	BACEINE ONDER! ATMENT DATA			
(1)	(2)	(3)	(4)	(5)
(')	(2)	(0)	(4)	(0)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
II.	PAYER MIX			
A.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
4	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	42.250/	42.260/	0.000
2	MEDICARE	13.35% 20.28%	13.26% 20.31%	-0.09% 0.03%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.67%	6.38%	0.03%
4	MEDICAID	4.28%	6.16%	1.88%
5	OTHER MEDICAL ASSISTANCE	1.40%	0.22%	-1.18%
6	CHAMPUS / TRICARE	0.40%	0.48%	0.08%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.65%	0.54%	-0.11%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	26.35%	27.16%	0.81%
	TOTAL INPATIENT PAYER MIX	39.70%	40.42%	0.72%
_	OUTDATIENT BAVED MIX DACED ON ACCOURT CHARGES			
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	30.47%	29.59%	-0.88%
2	MEDICARE	18.28%	17.88%	-0.40%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10.32%	10.97%	0.65%
4	MEDICAID	8.36%	10.79%	2.42%
5	OTHER MEDICAL ASSISTANCE	1.96%	0.18%	-1.77%
6	CHAMPUS / TRICARE	1.23%	1.14%	-0.09%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.73%	1.66%	-0.07%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	29.83%	29.98%	0.16%
	TOTAL OUTPATIENT PAYER MIX	60.30%	59.58%	-0.72%
	TOTAL BAYER MIN BAGER ON AGORDIER GUARDOSO		400 0004	
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
G.	IN ATIENT LATER WILL BAGED ON AGGREED LATWIENTO			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	22.13%	22.58%	0.44%
2	MEDICARE	19.34%	19.26%	-0.09%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.96%	4.19%	1.23%
4	MEDICAID	2.54%	4.08%	1.54%
5	OTHER MEDICAL ASSISTANCE	0.42%	0.11%	-0.31%
6	CHAMPUS / TRICARE	0.35%	0.43%	0.08%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.36%	0.26%	-0.10%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	22.65%	23.88%	1.22%
	TOTAL INPATIENT PAYER MIX	44.79%	46.45%	1.67%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
υ.	J			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	38.13%	36.80%	-1.33%
2	MEDICARE	10.42%	10.12%	-0.30%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.81%	5.91%	0.10%
4	MEDICAID	5.16%	5.80%	0.64%
5	OTHER MEDICAL ASSISTANCE	0.65%	0.11%	-0.54%
6	CHAMPUS / TRICARE	0.85%	0.71%	-0.14%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.84%	0.88%	0.04%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	17.08%	16.75%	-0.34%
	TOTAL OUTPATIENT PAYER MIX	55.21%	53.55%	-1.67%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

	WILLIAM W BACKLIS HOSPITAL			
	WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	D DATA		
Α.	<u>DISCHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,440	4,178	(262)
	MEDICARE	5,229	5,200	(29)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	2,289 1,891	2,384 2,318	95 427
	OTHER MEDICAL ASSISTANCE	398	66	(332)
	CHAMPUS / TRICARE	217	237	20
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT DISCHARGES	176 7,735	172 7,821	(4) 86
	TOTAL GOVERNMENT DISCHARGES TOTAL DISCHARGES	12,175	11,999	(176)
		,0	,550	(.70)
B.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14,787	14,019	(768)
	MEDICARE	25,493	25,583	90
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,267	9,435	1,168
	MEDICAID OTHER MEDICAL ASSISTANCE	6,660 1,607	9,069 366	2,409 (1,241)
	CHAMPUS / TRICARE	549	617	(1,241)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	878	697	(181)
	TOTAL GOVERNMENT PATIENT DAYS	34,309	35,635	1,326
	TOTAL PATIENT DAYS	49,096	49,654	558
C.	AVERAGE LENGTH OF STAY (ALOS)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	3.3 4.9	3.4 4.9	0.0
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.6	4.9	0.0
	MEDICAID	3.5	3.9	0.4
	OTHER MEDICAL ASSISTANCE	4.0	5.5	1.5
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.5 5.0	2.6 4.1	(0.9)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.4	4.6	0.1
	TOTAL AVERAGE LENGTH OF STAY	4.0	4.1	0.1
D.	CASE MIX INDEX			
- Б.	CASE MIX INDEX			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.21600	1.25740	0.04140
	MEDICARE	1.41700	1.45070	0.03370
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	0.93410 0.88620	1.00129 0.99650	0.06719 0.11030
5	OTHER MEDICAL ASSISTANCE	1.16170	1.16970	0.00800
6	CHAMPUS / TRICARE	0.78740	0.83980	0.05240
			'	
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	1.01190	1.02020 1.29520	
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX		1.02020 1.29520 1.28204	0.03877
	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX	1.01190 1.25643	1.29520	0.03877
	TOTAL GOVERNMENT CASE MIX INDEX	1.01190 1.25643	1.29520	0.03877
	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX	1.01190 1.25643	1.29520	0.03877 0.04035
E .	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA	1.01190 1.25643 1.24169	1.29520 1.28204	0.03877 0.04035 \$6,967,172
E .	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	1.01190 1.25643 1.24169 \$224,385,117	1.29520 1.28204 \$231,352,289	0.03877 0.04035 \$6,967,172
E .	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	1.01190 1.25643 1.24169 \$224,385,117	1.29520 1.28204 \$231,352,289	\$6,967,172 \$3,890,050
E. 1 2 3 4	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE	1.01190 1.25643 1.24169 \$224,385,117 \$150,780,057 \$73,605,060 32.80%	\$231,352,289 \$154,670,107 \$76,682,182 33.15%	\$6,967,172 \$3,890,050 \$3,077,122 0.34%
E. 1 2 3 4 5	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE	1.01190 1.25643 1.24169 \$224,385,117 \$150,780,057 \$73,605,060 32.80% \$11,330,897	\$231,352,289 \$154,670,107 \$76,682,182 33.15% \$10,155,651	\$6,967,172 \$3,890,050 \$3,077,122 0.34% (\$1,175,246)
E. 1 2 3 4	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	1.01190 1.25643 1.24169 \$224,385,117 \$150,780,057 \$73,605,060 32,80% \$11,330,897 \$6,257,612	\$231,352,289 \$154,670,107 \$76,682,182 33.15% \$10,155,651 \$5,917,710	\$6,967,172 \$3,890,050 \$3,077,122 0.34% (\$1,175,246)
E. 1 2 3 4 5 6	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE	1.01190 1.25643 1.24169 \$224,385,117 \$150,780,057 \$73,605,060 32.80% \$11,330,897	\$231,352,289 \$154,670,107 \$76,682,182 33.15% \$10,155,651	\$6,967,172 \$3,890,050 \$3,077,122 0.34% (\$1,175,246) (\$339,902)
E. 1 2 3 4 5 6 7	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT	1.01190 1.25643 1.24169 \$224,385,117 \$150,780,057 \$73,605,060 32,80% \$11,330,897 \$6,257,612	\$231,352,289 \$154,670,107 \$76,682,182 33.15% \$10,155,651 \$5,917,710	\$6,967,172 \$3,890,050 \$3,077,122 0.34% (\$1,175,246) (\$339,902)
E. 1 2 3 4 5 6 7 8 9	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT) CHARITY CARE BAD DEBTS	1.01190 1.25643 1.24169 \$224,385,117 \$150,780,057 \$73,605,060 32.80% \$11,330,897 \$6,257,612 \$2,166,356 \$6,321,367 \$14,508,284	\$231,352,289 \$154,670,107 \$76,682,182 \$31,155,651 \$5,917,710 \$0 \$4,672,730 \$12,690,606	\$6,967,172 \$3,890,050 \$3,077,122 0.34% (\$1,175,246) (\$339,902) (\$2,166,356) (\$1,648,637) (\$1,817,678)
E. 1 2 3 4 5 6 7 7 8 9 10	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE	1.01190 1.25643 1.24169 \$224,385,117 \$150,780,057 \$73,605,060 32.80% \$11,330,897 \$6,257,612 \$2,166,356 \$6,321,367 \$14,508,284 \$20,829,651	\$231,352,289 \$154,670,107 \$76,682,182 33.15% \$10,155,651 \$5,917,710 \$0 \$4,672,730 \$12,690,606 \$17,363,336	\$3,890,050 \$3,077,122 0.34% (\$1,175,246) (\$339,902) (\$2,166,356) (\$1,648,637) (\$1,817,678) (\$3,466,315)
E. 1 2 3 4 5 6 7 8 9 10 11	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT) CHARITY CARE BAD DEBTS	1.01190 1.25643 1.24169 \$224,385,117 \$150,780,057 \$73,605,060 32.80% \$11,330,897 \$6,257,612 \$2,166,356 \$6,321,367 \$14,508,284	\$231,352,289 \$154,670,107 \$76,682,182 \$31,155,651 \$5,917,710 \$0 \$4,672,730 \$12,690,606	\$6,967,172 \$3,890,050 \$3,077,122 0.34% (\$1,175,246) (\$339,902) (\$2,166,356) (\$1,648,637) (\$1,817,678)

	WILLIAM W. BACKUS HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	
	DECODIFICAL			AMOUNT
LINE	DESCRIPTION	<u>FY 2010</u>	<u>FY 2011</u>	DIFFERENCE
TX/	DELI LIDDED DAVMENT LIMIT CALCUL ATIONS			
17.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
Α.	CASE MIX ADJUSTED DISCHARGES			
	Grote min ribusores signification			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,399.04000	5,253.41720	(145.62280
	MEDICARE	7,409.49300	7,543.64000	134.14700
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,138.16080	2,387.08720	248.92640
	MEDICAID	1,675.80420	2,309.88700	634.08280
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	462.35660 170.86580	77.20020 199.03260	(385.15640 28.16680
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	178.09440	175.47440	(2.62000
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	9,718.51960	10,129.75980	411.24020
	TOTAL CASE MIX ADJUSTED DISCHARGES	15,117.55960	15,383.17700	265.61740
	TOTAL ONCE MIN ABOUTED STOCKMOLD	10,111100000	10,000117700	200.017.10
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,134.31105	9,323.83140	-810.4796
	MEDICARE	4,712.86536	4,578.26998	-134.5953
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,257.04180	4,114.42518	-142.6166
	MEDICAID	3,699.44061	4,059.77095	360.3303
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	557.60119 669.95919	54.65423 563.98117	-502.9469 -105.9780
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	465.05237	527.18778	62.1354
,	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	9,639.86635	9,256.67633	-383.1900
	TOTAL GOVERNMENT CON ATTENT EQUIVALENT DISCHARGES	19,774.17741	18,580.50773	-1,193.6696
		,	,	.,
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,602.56	\$11,501.21	\$898.64
	MEDICARE	\$6,751.42	\$6,831.43	\$80.00
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,579.84	\$4,696.63	\$1,116.79
	MEDICAID OTHER MEDICAL ASSISTANCE	\$3,919.61 \$2,348.35	\$4,730.24 \$3,691.10	\$810.63 \$1,342.75
	CHAMPUS / TRICARE	\$5,323.76	\$5,830.95	\$507.19
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,211.82	\$4,003.55	(\$1,208.27
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,028.55	\$6,308.70	\$280.16
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,662.10	\$8,081.96	\$419.87
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
	NOVED WEEK WAS A SELECT OF THE PARK A SELECT OF THE	A0 =00 5	040 700 65	A005
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,730.28	\$10,562.98	\$832.70
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,717.28 \$3,530.50	\$5,917.73	\$200.45 \$313.98
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$3,530.50 \$3,608.54	\$3,844.48 \$3,825.99	\$313.98 \$217.44
5	OTHER MEDICAL ASSISTANCE	\$3,012.71	\$5,218.55	\$2,205.84
6	CHAMPUS / TRICARE	\$3,293.40	\$3,380.47	\$87.08
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,669.39	\$4,486.64	(\$182.75
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	÷ 1,000.00	Ţ., 100.01	(4.52.7)
		\$4,583.13	\$4,841.62	\$258.50
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,221.05	\$7,712.64	\$491.59

1				
- 1	WILLIAM W. BACKUS HOSPITAL		l	
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
INE	<u>DESCRIPTION</u>	<u>FY 2010</u>	FY 2011	DIFFERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
•	ONE COLOR TO STORE THE STORE THE COLOR TO STORE THE			
1	MEDICAID	\$7,801,159	\$8,492,009	\$690,8
	OTHER MEDICAL ASSISTANCE	\$3,543,862	\$280,647	(\$3,263,2
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$761,520	\$1,250,674	\$489,15
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$12,106,541	\$10,023,330	(\$2,083,21
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	DLOGY)		
	TOTAL CHARGES	\$585,390,725	\$604,060,585	\$18,669,86
	TOTAL GOVERNMENT DEDUCTIONS	\$226,075,788	\$236,466,330	\$10,390,54
	UNCOMPENSATED CARE	\$20,829,651	\$17,363,336	(\$3,466,31
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES EMPLOYEE SELF INSURANCE ALLOWANCE	\$73,605,060 \$6,257,612	\$76,682,182 \$5,917,710	\$3,077,12 (\$339,90
	TOTAL ADJUSTMENTS	\$326,768,111	\$336,429,558	\$9,661,44
	TOTAL ADJUSTMENTS TOTAL ACCRUED PAYMENTS	\$258,622,614	\$267,631,027	\$9,008,4
8	UCP DSH PAYMENTS (OHCA INPUT)	\$2,166,356	\$0	(\$2,166,3
	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$260,788,970	\$267,631,027	\$6,842,05
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4454955620	0.4430532858	(0.002442276
	COST OF UNCOMPENSATED CARE	\$9,279,517	\$7,692,883	(\$1,586,63
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$19,020,450	\$19,397,921	\$377,47
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	(
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$28,299,967	\$27,090,804	(\$1,209,16
\$7 TT	RATIOS			
V 11.	KATIO5			
Α.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	73.24%	75.43%	2.18
	MEDICARE	42.14%	42.01%	-0.13
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.06%	29.10%	6.04
_	MEDICAID	26.24%	29.37%	3.10
5	OTHER MEDICAL ASSISTANCE	13.29%	21.49%	8.2
	CHAMPUS / TRICARE	39.03%	40.26%	1.23
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	24.25%	21.50%	-2.7
ľ	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
		37.98%	38.95%	0.90
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	49.84%	50.92%	1.07
В	DATIO OF QUITDATIENT DAYMENTS TO QUITDATIENT SUAPSES			
	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	55.28%	55.09%	-0.18
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	25.18%	25.09%	-0.18
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	24.88%	23.87%	-0.1
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27.26%	23.84%	-3.4
	OTHER MEDICAL ASSISTANCE	14.68%	25.98%	11.3
	CHAMPUS / TRICARE	30.66%	27.79%	-2.8
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	21.47%	23.61%	2.1
Ì	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
		25.30%	24.75%	-0.5
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	40.45%	39.82%	-0.6

	WILLIAM W. BACKUS HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA	ENI LIMII AND		
	BASELINE UNDERPAYMENT DATA			
		(0)	40	(=)
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	TIONS		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	3		
1	TOTAL ACCRUED PAYMENTS	\$258,622,613	\$267,631,027	\$9,008,414
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$2,166,356	\$0	(\$2,166,35
	OHCA DEFINED NET REVENUE	\$260,788,969	\$267,631,027	\$6,842,05
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$9.259.746	\$4.302.191	(\$4,957,55
4	CALCULATED NET REVENUE	\$270,048,715	\$271,933,218	\$1,884,50
	OREGULATED NET REVENUE	ψ <u>Σ</u> 1 0,040,1 10	Ψ27 1,000,210	ψ1,00-1,00
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$270,048,715	\$271,933,218	\$1,884,50
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
1	OHCA DEFINED GROSS REVENUE	# 505 000 705	\$604,060,585	\$18,669,86
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$585,390,725 \$0	\$004,060,585	\$10,009,80
	CALCULATED GROSS REVENUE	\$585,390,725	\$604,060,585	\$18,669,86
		+++++++++++++++++++++++++++++++++++++	+++++++++++++++++++++++++++++++++++++	*************************************
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$585,390,725	\$604,060,585	\$18,669,86
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$
	VARIANCE (MOST BE EESS THAN ON EQUAL TO \$500)	ΨΟ	ΨΟ	Ψ
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	TS .		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$20,829,651	\$17,363,336	(\$3,466,31
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$76,847	\$163,776	\$86,92
_	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$20,906,498	\$17,527,112	(\$3,379,38
				1. 2/2 2/22
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$20,906,498	\$17,527,112	(\$3,379,38
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$

	WILLIAM W. BACKUS HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2011	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
		ACTUAL
LINE	DESCRIPTION	<u>FY 2011</u>
	ACCRUIED CHARGES AND DAVMENTS	
I.	ACCRUED CHARGES AND PAYMENTS	
A.	INPATIENT ACCRUED CHARGES	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$80,104,999
	MEDICARE	122,661,517
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	38,530,367
	OTHER MEDICAL ASSISTANCE	37,204,651 1,325,716
6	CHAMPUS / TRICARE	2,882,913
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,268,265
	TOTAL INPATIENT GOVERNMENT CHARGES	\$164,074,797
	TOTAL INPATIENT CHARGES	\$244,179,796
_	OUTPATIENT ACCRUED CHARGES	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$178,766,277
	MEDICARE	107,995,681
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	66,258,457
4	MEDICAID	65,160,639
	OTHER MEDICAL ASSISTANCE	1,097,818
	CHAMPUS / TRICARE	6,860,374
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,017,380
	TOTAL OUTPATIENT GOVERNMENT CHARGES TOTAL OUTPATIENT CHARGES	\$181,114,512 \$359,880,789
	TOTAL GOTFATIENT CHARGES	\$339,000,709
	TOTAL ACCRUED CHARGES	
	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$258,871,276
	TOTAL GOVERNMENT ACCRUED CHARGES	345,189,309
	TOTAL ACCRUED CHARGES	\$604,060,585
D.	INPATIENT ACCRUED PAYMENTS	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$60,420,640
	MEDICARE	51,533,821
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11,211,270
	MEDICAID	10,926,316
	OTHER MEDICAL ASSISTANCE	284,954
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,160,549
7	TOTAL INPATIENT GOVERNMENT PAYMENTS	702,521 \$63,905,640
	TOTAL INPATIENT PAYMENTS TOTAL INPATIENT PAYMENTS	\$124,326,280
		Ţ := :,==3; 2 00
	OUTPATIENT ACCRUED PAYMENTS	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$98,487,408
	MEDICARE MEDICAL ACCIOTANCE (INCLUDING OTHER MEDICAL ACCIOTANCE)	27,092,973
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	15,817,842 15,532,626
	OTHER MEDICAL ASSISTANCE	285,216
	CHAMPUS / TRICARE	1,906,524
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,365,301
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$44,817,339
	TOTAL OUTPATIENT PAYMENTS	\$143,304,747
-	TOTAL ACCRUED PAYMENTS	
	TOTAL ACCRUED PAYMENTS TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$158,908,048
	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAT / UNINSURED)	108,722,979
_	TOTAL ACCRUED PAYMENTS	\$267,631,027
		+===,===1,===

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND** BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (1) (2)(3) **ACTUAL** FY 2011 LINE **DESCRIPTION** II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA A. **ACCRUED DISCHARGES** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 4,178 1 **MEDICARE** 5,200 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 2,384 2,318 **MEDICAID** OTHER MEDICAL ASSISTANCE 5 66 CHAMPUS / TRICARE 237 UNINSURED (INCLUDED IN NON-GOVERNMENT) 172 7 **TOTAL GOVERNMENT DISCHARGES** 7,821 TOTAL DISCHARGES 11,999 В. CASE MIX INDEX NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1.25740 1.45070 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 1.00129 **MEDICAID** 0.99650 4 OTHER MEDICAL ASSISTANCE 5 1.16970 CHAMPUS / TRICARE 0.83980 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) 1.02020 **TOTAL GOVERNMENT CASE MIX INDEX** 1.29520 TOTAL CASE MIX INDEX 1.28204 OTHER REQUIRED DATA C. TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES 1 \$231,352,289 ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES 2 \$154,670,107 (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) 3 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$76,682,182 TOTAL ACTUAL DISCOUNT PERCENTAGE 4 33.15% 5 EMPLOYEE SELF INSURANCE GROSS REVENUE \$10,155,651 6 EMPLOYEE SELF INSURANCE ALLOWANCE \$5,917,710 7 UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT) \$0 8 **CHARITY CARE** \$4,672,730 9 BAD DEBTS \$12,690,606 10 TOTAL UNCOMPENSATED CARE \$17,363,336 TOTAL OTHER OPERATING REVENUE 11 \$5,109,286 TOTAL OPERATING EXPENSES 12 \$252,073,735

	WILLIAM W. BACKUS HOSPITAL	•
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2011	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
(· /	(-)	ACTUAL
LINE	DESCRIPTION	<u>FY 2011</u>
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$267,631,027
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$267,631,027
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$4,302,191
	CALCULATED NET REVENUE	\$271,933,218
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$271,933,218
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$604,060,585
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$604,060,585
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$604,060,585
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$17,363,336
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$163,776
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$17,527,112
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$17,527,112
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 **REPORT 650 - HOSPITAL UNCOMPENSATED CARE** (1) (2) (3) (4) (5) (6)**ACTUAL ACTUAL AMOUNT** % LINE DESCRIPTION FY 2010 FY 2011 DIFFERENCE DIFFERENCE Hospital Charity Care (from HRS Report 500) A. Number of Applicants 2,135 1,641 (494)-23% 2,081 2 Number of Approved Applicants (686)-33% 1,395 **Total Charges (A)** \$6,321,367 \$4,672,730 (\$1,648,637) -26% 3 4 **Average Charges** \$312 10% \$3,038 \$3,350 Ratio of Cost to Charges (RCC) 5 0.444083 0.444418 0.000335 0% **Total Cost** \$2,807,212 \$2,076,645 (\$730,566) -26% 6 **Average Cost** 7 \$1,349 \$1,489 \$140 10% \$2,384,599 \$1,555,832 -35% 8 Charity Care - Inpatient Charges (\$828,767)Charity Care - Outpatient Charges (Excludes ED Charges) -40% 9 2,272,551 1,353,196 (919, 355)10 Charity Care - Emergency Department Charges 99,485 6% 1,664,217 1,763,702 11 **Total Charges (A)** \$6,321,367 \$4,672,730 (\$1,648,637) -26% Charity Care - Number of Patient Days -19% 12 2,461 2,002 (459)13 Charity Care - Number of Discharges -22% 564 438 (126)14 Charity Care - Number of Outpatient ED Visits -22% 2,161 1,696 (465)15 Charity Care - Number of Outpatient Visits (Excludes ED Visits) (1,978)-31% 6,294 4,316 Hospital Bad Debts (from HRS Report 500) В. **Bad Debts - Inpatient Services** \$2,910,189 \$2,338,365 (\$571,824)-20% Bad Debts - Outpatient Services (Excludes ED Bad Debts) 2 3,124,457 3,128,863 4,406 0% 3 Bad Debts - Emergency Department 8.473.638 7.223.378 (1,250,260)-15% 4 **Total Bad Debts (A)** \$14,508,284 \$12,690,606 (\$1,817,678) -13% Hospital Uncompensated Care (from HRS Report 500) C. 1 Charity Care (A) \$6,321,367 \$4,672,730 (\$1,648,637) -26% 2 Bad Debts (A) 14,508,284 -13% 12,690,606 (1,817,678)**Total Uncompensated Care (A)** 3 \$20,829,651 \$17,363,336 (\$3,466,315) -17% 4 **Uncompensated Care - Inpatient Services** -26% \$5,294,788 \$3,894,197 (\$1,400,591) 5 Uncompensated Care - Outpatient Services (Excludes ED Unc. Care) 5,397,008 4,482,059 -17% (914,949)8,987,080 Uncompensated Care - Emergency Department 10,137,855 (1,150,775)-11% 6 **Total Uncompensated Care (A)** \$20,829,651 \$17,363,336 (\$3,466,315) -17% (A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

						3°
ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1)	1 .	Total Gross Revenue	\$224,385.117	\$231.352.289	\$6,967,172	30
(1) (2) (3) (4) (5) (6) FY 2010 FY 2011 ACTUAL TOTAL ACTUAL TOTAL AMOUNT % NON-GOVERNMENT NON-GOVERNMENT DIFFERENCE DIFFERENCE	<u>C</u>	COMMERCIAL - ALL PAYERS				
ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6) FY 2010 FY 2011 ACTUAL TOTAL ACTUAL TOTAL AMOUNT %			NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6) FY 2010 FY 2011		CCCDIDTION				
ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6)						
· · · · · · · · · · · · · · · · · · ·	(1)	(2)			(5)	(6)
· · · · · · · · · · · · · · · · · · ·		AC	CRUED PAYMENTS AND DISCO	UNT PERCENTAGE		
				· · · · · · · · · · · · · · · · · · ·	ALLOWANCES,	

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2011** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (1) (2) (3) (4) (5) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2009 FY 2010 FY 2011 **Gross and Net Revenue** A. Inpatient Gross Revenue \$225,853,434 \$232,397,678 \$244,179,796 1 2 Outpatient Gross Revenue \$334,787,620 \$352,993,047 \$359,880,789 3 Total Gross Patient Revenue \$560,641,054 \$585,390,725 \$604,060,585 Net Patient Revenue \$259,652,271 \$270,048,715 \$271,933,218 В. **Total Operating Expenses** 1 Total Operating Expense \$250,646,571 \$262,102,283 \$252,073,735 C. **Utilization Statistics** Patient Days 50,032 49,096 49,654 12,175 11,999 2 Discharges 11,885 3 Average Length of Stay 4.2 4.0 4.1 124,196 123,669 122,836 Equivalent (Adjusted) Patient Days (EPD) 4 Equivalent (Adjusted) Discharges (ED) 29,502 30,668 29,684 0 **Case Mix Statistics** D. 1.30482 1.24169 1.28204 1 Case Mix Index 65,283 60,962 63,658 2 Case Mix Adjusted Patient Days (CMAPD) 15,383 3 Case Mix Adjusted Discharges (CMAD) 15,508 15,118 Case Mix Adjusted Equivalent Patient Days (CMAEPD) 162,052 153,558 157,480 38,055 Case Mix Adjusted Equivalent Discharges (CMAED) 38,495 38,080 5 E. **Gross Revenue Per Statistic** 1 Total Gross Revenue per Patient Day \$11,206 \$11,923 \$12,165 2 Total Gross Revenue per Discharge \$47,172 \$48,081 \$50,343 Total Gross Revenue per EPD \$4,514 \$4,918 \$4,734 3 \$19,088 \$20,350 4 Total Gross Revenue per ED \$19,003 Total Gross Revenue per CMAEPD \$3,460 \$3,812 \$3,836 Total Gross Revenue per CMAED \$14,564 \$15,373 \$15,873 6 7 Inpatient Gross Revenue per EPD \$1,819 \$1,879 \$1,988

\$7,655

\$7,578

\$8,226

Inpatient Gross Revenue per ED

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2011** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (5) (3) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2009 FY 2010 FY 2011 **Net Revenue Per Statistic** F. \$5,500 Net Patient Revenue per Patient Day \$5,190 \$5,477 2 Net Patient Revenue per Discharge \$21,847 \$22,181 \$22,663 3 Net Patient Revenue per EPD \$2,091 \$2,184 \$2,214 Net Patient Revenue per ED \$8,801 \$8,806 \$9,161 4 5 Net Patient Revenue per CMAEPD \$1,602 \$1,759 \$1,727 Net Patient Revenue per CMAED \$6,745 \$7,092 \$7,146 G. Operating Expense Per Statistic \$5,010 Total Operating Expense per Patient Day \$5,339 \$5,077 1 \$21,089 \$21,528 \$21,008 2 Total Operating Expense per Discharge \$2,018 3 Total Operating Expense per EPD \$2,119 \$2,052 Total Operating Expense per ED \$8,496 \$8,546 \$8,492 4 Total Operating Expense per CMAEPD \$1,547 \$1,707 \$1,601 5 Total Operating Expense per CMAED \$6,883 \$6,624 6 \$6,511 H. Nursing Salary and Fringe Benefits Expense Nursing Salary Expense \$39,916,076 \$40,612,798 \$39,914,015 1 2 Nursing Fringe Benefits Expense \$7,644,307 \$7,936,981 \$7,696,604 \$48,549,779 \$47,610,619 Total Nursing Salary and Fringe Benefits Expense \$47,560,383 I. Physician Salary and Fringe Expense 1 Physician Salary Expense \$9,282,412 \$11,850,977 \$11,095,920 Physician Fringe Benefits Expense \$1,600,541 \$1,934,151 \$1,266,332 2 Total Physician Salary and Fringe Benefits Expense \$10,882,953 \$13,785,128 \$12,362,252 3 J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense Non-Nursing, Non-Physician Salary Expense \$60,399,069 \$54,917,330 \$57,392,944 1 2 Non-Nursing, Non-Physician Fringe Benefits Expense \$18,181,054 \$17,310,311 \$16,692,410 Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense \$78.580.123 \$72,227,641 \$74,085,354 K. **Total Salary and Fringe Benefits Expense** 1 Total Salary Expense \$109,597,557 \$107,381,105 \$108,402,879

\$27,425,902

\$137,023,459

\$27,181,443

\$134,562,548

\$25,655,346

\$134,058,225

Total Fringe Benefits Expense

Total Salary and Fringe Benefits Expense

2

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2011** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (1) (2) (4) (3) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2009 FY 2010 FY 2011 Total Full Time Equivalent Employees (FTEs) L. Total Nursing FTEs 462.2 450.8 455.6 1 2 Total Physician FTEs 34.2 36.7 36.3 3 Total Non-Nursing, Non-Physician FTEs 1087.1 1054.6 1022.0 Total Full Time Equivalent Employees (FTEs) 1,583.5 1,542.1 1,513.9 Μ. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$86,361 \$90,091 \$87,608 Nursing Fringe Benefits Expense per FTE \$16,539 \$17,606 \$16,893 2 3 Total Nursing Salary and Fringe Benefits Expense per FTE \$102,900 \$107,697 \$104,501 N. Physician Salary and Fringe Expense per FTE Physician Salary Expense per FTE \$271,416 \$322,915 \$305,673 1 Physician Fringe Benefits Expense per FTE \$46,799 \$52,702 \$34,885 2 Total Physician Salary and Fringe Benefits Expense per FTE \$375,617 \$340,558 3 \$318,215 Ο. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE Non-Nursing, Non-Physician Salary Expense per FTE \$55,560 \$52,074 \$56,157 1 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$16,414 \$16,333 \$16,724 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE 3 \$72,284 \$68,488 \$72,491 P. Total Salary and Fringe Benefits Expense per FTE Total Salary Expense per FTE \$69,212 \$69,633 \$71,605 1 Total Fringe Benefits Expense per FTE \$17,320 \$17,626 \$16,947 2 Total Salary and Fringe Benefits Expense per FTE \$86,532 \$87,259 \$88,552 3 Total Salary and Fringe Ben. Expense per Statistic \$2,700 Total Salary and Fringe Benefits Expense per Patient Day \$2,739 \$2,741 \$11,052 \$11,172 2 Total Salary and Fringe Benefits Expense per Discharge \$11,529 3 Total Salary and Fringe Benefits Expense per EPD \$1,103 \$1,088 \$1,091 Total Salary and Fringe Benefits Expense per ED \$4,644 \$4,388 \$4,516 4 Total Salary and Fringe Benefits Expense per CMAEPD \$846 \$876 \$851 5

Total Salary and Fringe Benefits Expense per CMAED

\$3,559

\$3,534

\$3,523