	JOHNSON MEMORIAL	HOSPITAI			
	TWELVE MONTHS ACTU				
	FISCAL YEAR				
	REPORT 100 - HOSPITAL BALANCE		ATION		
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
l.	<u>ASSETS</u>				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$4,142,244	\$884,889	(\$3,257,355)	-79%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$7,869,668	\$7,216,450	(\$653,218)	-8%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,154,583	\$1,216,494	\$61,911	5%
8	Prepaid Expenses	\$1,147,109	\$901,400	(\$245,709)	-21%
9	Other Current Assets	\$307,732	\$1,226,590	\$918,858	299%
	Total Current Assets	\$14,621,336	\$11,445,823	(\$3,175,513)	-22%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$3,283,243	\$3,165,722	(\$117,521)	-4%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$1,806,257	\$1,360,994	(\$445,263)	-25%
	Total Noncurrent Assets Whose Use is Limited:	\$5,089,500	\$4,526,716	(\$562,784)	-11%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$2,868,975	\$2,856,651	(\$12,324)	0%
7	Other Noncurrent Assets	\$724,807	\$1,167,552	\$442,745	61%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$57,976,953	\$58,550,236	\$573,283	1%
2	Less: Accumulated Depreciation	\$34,378,475	\$37,256,964	\$2,878,489	8%
	Property, Plant and Equipment, Net	\$23,598,478	\$21,293,272	(\$2,305,206)	-10%
3	Construction in Progress	\$0	\$0	\$0	0%
	Total Net Fixed Assets	\$23,598,478	\$21,293,272	(\$2,305,206)	-10%
	Total Assets	\$46,903,096	\$41,290,014	(\$5,613,082)	-12%

	JOHNSON MEI	MORIAL HOSPITAL			
		HS ACTUAL FILING			
		L YEAR 2011			
	REPORT 100 - HOSPITAL B		ATION		
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
II.	LIABILITIES AND NET ASSETS				
Α.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$5,340,005	\$3,828,267	(\$1,511,738)	-28%
2	Salaries, Wages and Payroll Taxes	\$2,629,814	\$1,770,108	(\$859,706)	-33%
3	Due To Third Party Payers	\$1,071,475	\$1,266,304	\$194,829	18%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$342,500	\$342,500	\$0	0%
7	Other Current Liabilities	\$7,017,456	\$4,855,415	(\$2,162,041)	-31%
	Total Current Liabilities	\$16,401,250	\$12,062,594	(\$4,338,656)	-26%
В.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$12,501,250	\$12,158,750	(\$342,500)	-3%
	Total Long Term Debt	\$12,501,250	\$12,158,750	(\$342,500)	-3%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$9,266,631	\$8,452,551	(\$814,080)	-9%
	Total Long Term Liabilities	\$21,767,881	\$20,611,301	(\$1,156,580)	-5%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	Net Assets:	Ψ0	Ψ	Ψ	0 / 0
1	Unrestricted Net Assets or Equity	\$4,607,135	\$4,285,194	(\$321,941)	-7%
2	Temporarily Restricted Net Assets	\$0	\$321,617	\$321,617	0%
3	Permanently Restricted Net Assets	\$4,126,830	\$4,009,308	(\$117,522)	-3%
	Total Net Assets	\$8,733,965	\$8,616,119	(\$117,846)	-1%
		ψο,ι σο,σσο	φο,στο,ττο	(\$111,616)	170
	Total Liabilities and Net Assets	\$46,903,096	\$41,290,014	(\$5,613,082)	-12%

	JOHNSON MEN	MORIAL HOSPITAL			
		HS ACTUAL FILING			
		L YEAR 2011			
	REPORT 150 - HOSPITAL STATEM	<del>-</del>	IS INFORMATION		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A.	Operating Revenue:				
1	Total Gross Patient Revenue	\$151,379,874	\$148,782,543	(\$2,597,331)	-2%
2	Less: Allowances	\$89,762,915	\$89,382,555	(\$380,360)	0%
3	Less: Charity Care	\$280,655	\$465,816	\$185,161	66%
4	Less: Other Deductions	\$0	(\$857,581)	(\$857,581)	0%
	Total Net Patient Revenue	\$61,336,304	\$59,791,753	(\$1,544,551)	-3%
5	Other Operating Revenue	\$252,845	\$60,758	(\$192,087)	-76%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$61,589,149	\$59,852,511	(\$1,736,638)	-3%
- В	Operating Evaposes				
В.	Operating Expenses:	\$20,004,020	\$20,200,40F	(\$455.004)	20/
1	Salaries and Wages	\$26,664,936	\$26,209,105	(\$455,831)	-2%
3	Fringe Benefits	\$8,387,477 \$387,251	\$6,949,625 \$380,259	(\$1,437,852)	-17% -2%
	Physicians Fees	\$9,882,840		(\$6,992)	
<u>4</u> 5	Supplies and Drugs  Depreciation and Amortization	\$3,172,136	\$6,591,490 \$3,243,262	(\$3,291,350) \$71,126	-33% 2%
6	Bad Debts	\$2,544,297	\$2,141,072	(\$403,225)	-16%
7				, , , ,	
8	Interest	\$592,676 \$322,204	\$1,554,402 \$729,896	\$961,726 \$407,692	162% 127%
9	Malpractice Other Operating Expenses	\$15,730,918	\$13,507,274	(\$2,223,644)	-14%
9	Total Operating Expenses	\$67,684,735	\$61,306,385	(\$6,378,350)	-14% -9%
	Total Operating Expenses	φ01,004,133	φ01,300,303	(\$0,376,330)	-9 /0
	Income/(Loss) From Operations	(\$6,095,586)	(\$1,453,874)	\$4,641,712	-76%
C.	Non-Operating Revenue:				
1	Income from Investments	\$450,042	\$111,148	(\$338,894)	-75%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	Total Non-Operating Revenue	\$450,042	\$111,148	(\$338,894)	-75%
	- WD (1) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			•	
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$5,645,544)	(\$1,342,726)	\$4,302,818	-76%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$33,017,171	\$1,094,678	(\$31,922,493)	-97%
	Total Other Adjustments	\$33,017,171	\$1,094,678	(\$31,922,493)	-97%
	Excess/(Deficiency) of Revenue Over Expenses	\$27,371,627	(\$248,048)	(\$27,619,675)	-101%
	Principal Payments	\$484,562	\$423,393	(\$61,169)	-13%

# 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
l <sub>1.</sub>	GROSS REVENUE BY PAYER				
	SHOOT REVENUE DITTILL				
Α.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$35,797,385	\$32,238,275	(\$3,559,110)	
2	MEDICARE MANAGED CARE	\$7,018,090	\$7,310,781	\$292,691	4%
3	MEDICAID	\$3,664,534	\$4,140,803	\$476,269	13%
4	MEDICAID MANAGED CARE	\$3,092,959	\$4,424,570	\$1,331,611	43%
5	CHAMPUS/TRICARE COMMERCIAL INSURANCE	\$253,020	\$400,272 \$289,102	\$147,252	58% -35%
7	NON-GOVERNMENT MANAGED CARE	\$445,621 \$15,504,223	\$13,703,932	(\$156,519) (\$1,800,291)	
8	WORKER'S COMPENSATION	\$352,198	\$101,466	(\$250,732)	
9	SELF- PAY/UNINSURED	\$734,342	\$653,864	(\$80,478)	
10	SAGA	\$712,436	\$0	(\$712,436)	
11	OTHER	\$0	\$0 \$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$67,574,808	\$63,263,065	(\$4,311,743)	
В.	OUTPATIENT GROSS REVENUE	, , , , , , , , , , , , , , , , , , , ,	. , -,	, , ,	2,72
1	MEDICARE TRADITIONAL	\$20,613,356	\$22,583,294	\$1,969,938	10%
2	MEDICARE MANAGED CARE	\$5,734,884	\$6,591,509	\$856,625	15%
3	MEDICAID	\$2,525,676	\$4,795,982	\$2,270,306	90%
4	MEDICAID MANAGED CARE	\$6,442,304	\$7,254,770	\$812,466	13%
5	CHAMPUS/TRICARE	\$509,289	\$588,682	\$79,393	16%
6	COMMERCIAL INSURANCE	\$1,335,478	\$754,767	(\$580,711)	-43%
7	NON-GOVERNMENT MANAGED CARE	\$41,451,908	\$38,814,632	(\$2,637,276)	-6%
8	WORKER'S COMPENSATION	\$1,883,810	\$2,197,783	\$313,973	17%
9	SELF- PAY/UNINSURED	\$2,311,753	\$1,938,061	(\$373,692)	-16%
10	SAGA	\$996,601	\$0	(\$996,601)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$83,805,059	\$85,519,480	\$1,714,421	2%
	TOTAL OBOSO REVENUE				
	TOTAL GROSS REVENUE	\$EC 440 744	<b>¢E4.004.EC0</b>	(\$4.500.470)	20/
1	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$56,410,741 \$12,752,074	\$54,821,569 \$12,002,200	(\$1,589,172) \$1,140,216	-3% 9%
3	MEDICARE MANAGED CARE MEDICAID	\$12,752,974	\$13,902,290	\$1,149,316 \$2,746,575	44%
4	MEDICAID MANAGED CARE	\$6,190,210 \$9,535,263	\$8,936,785 \$11,679,340	\$2,746,575 \$2,144,077	22%
5	CHAMPUS/TRICARE	\$762,309	\$988,954	\$226,645	30%
6	COMMERCIAL INSURANCE	\$1,781,099	\$1,043,869	(\$737,230)	-41%
7	NON-GOVERNMENT MANAGED CARE	\$56,956,131	\$52,518,564	(\$4,437,567)	
8	WORKER'S COMPENSATION	\$2,236,008	\$2,299,249	\$63,241	
9	SELF- PAY/UNINSURED	\$3,046,095	\$2,591,925	(\$454,170)	
10	SAGA	\$1,709,037	\$0	(\$1,709,037)	
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$151,379,867	\$148,782,545	(\$2,597,322)	-2%
II.	NET REVENUE BY PAYER			T	T
	INDATIONS NOT DEVENUE				
A	INPATIENT NET REVENUE	£40.407.004	£44.404.000	( <b>¢</b> 025,002)	00/
2	MEDICARE TRADITIONAL	\$12,127,091	\$11,191,228	(\$935,863) \$1,177,334	-8% 50%
3	MEDICARE MANAGED CARE	\$2,376,878	\$3,554,102	\$1,177,224	
4	MEDICAID MEDICAID MANAGED CARE	\$1,188,539	\$522,842 \$2,035,784	(\$665,697) \$1,167,343	
5	CHAMPUS/TRICARE	\$868,441 \$96,517	\$2,035,784 \$152,747	\$1,167,343 \$56,230	134% 58%
6					
7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	\$228,180 \$8,714,722	\$195,488 \$7,143,085	(\$32,692) (\$1,571,637)	
8	WORKER'S COMPENSATION		\$37,208	(\$244,643)	
9	SELF- PAY/UNINSURED	\$281,851 \$62,740	\$37,208 \$55,783	(\$244,643)	
10	SAGA	\$147,935	\$55,763 \$0	(\$147,935)	
11	OTHER	\$147,935	\$0 \$0	(\$147,935)	-100%
	OHILN	- Φ0	ΦΟ	Φ0	U%

# 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
		400 000 004	****	(44.004.00=)	==-/
_	TOTAL INPATIENT NET REVENUE OUTPATIENT NET REVENUE	\$26,092,894	\$24,888,267	(\$1,204,627)	-5%
<b>B</b> .	MEDICARE TRADITIONAL	\$5,423,543	\$5,593,446	\$169,903	3%
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$1,589,532	\$1,692,060	\$102,528	6%
3	MEDICAID	\$380,810	\$1,090,983	\$710,173	186%
4	MEDICAID MANAGED CARE	\$1,832,958	\$1,867,045	\$34,087	2%
5	CHAMPUS/TRICARE	\$215.804	\$236,977	\$21,173	10%
6	COMMERCIAL INSURANCE	\$909,911	\$514,717	(\$395,194)	-43%
7	NON-GOVERNMENT MANAGED CARE	\$23,321,310	\$21,819,473	(\$1,501,837)	-6%
8	WORKER'S COMPENSATION	\$1,234,189	\$1,321,666	\$87,477	7%
9	SELF- PAY/UNINSURED	\$158,606	\$147,470	(\$11,136)	-7%
10	SAGA	\$176,535	\$0	(\$176,535)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$35,243,198	\$34,283,837	(\$959,361)	-3%
c.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$17,550,634	\$16,784,674	(\$765,960)	-4%
2	MEDICARE MANAGED CARE	\$3,966,410	\$5,246,162	\$1,279,752	32%
3	MEDICAID	\$1,569,349	\$1,613,825	\$44,476	3%
4	MEDICAID MANAGED CARE	\$2,701,399	\$3,902,829	\$1,201,430	44%
5	CHAMPUS/TRICARE	\$312,321	\$389,724	\$77,403	25%
6	COMMERCIAL INSURANCE	\$1,138,091	\$710,205	(\$427,886)	-38%
7	NON-GOVERNMENT MANAGED CARE	\$32,036,032	\$28,962,558	(\$3,073,474)	-10%
8	WORKER'S COMPENSATION	\$1,516,040	\$1,358,874	(\$157,166)	-10%
9	SELF- PAY/UNINSURED	\$221,346	\$203,253	(\$18,093)	-8%
10	SAGA	\$324,470	\$0	(\$324,470)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$61,336,092	\$59,172,104	(\$2,163,988)	-4%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	1,457	1,347	(110)	-8%
2	MEDICARE MANAGED CARE	276	269	(7)	-3%
3	MEDICAID	182	216	34	19%
4	MEDICAID MANAGED CARE	327	427	100	31%
5	CHAMPUS/TRICARE	20	30	10	50%
6	COMMERCIAL INSURANCE	38	18	(20)	-53%
7	NON-GOVERNMENT MANAGED CARE	1,047	903	(144)	-14%
8	WORKER'S COMPENSATION	12	6	(6)	-50%
9	SELF- PAY/UNINSURED	46	52	6	13%
10	SAGA	32	0	(32)	-100%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	3,437	3,268	(169)	-5%
_	PATIENT DAYS				
1	MEDICARE TRADITIONAL	9,192	7,689	(1,503)	-16%
2	MEDICARE MANAGED CARE	1,591	1,491	(100)	-6%
3	MEDICAID	1,112	1,312	200	18%
4	MEDICAID MANAGED CARE	1,034	1,501	467	45%
5	CHAMPUS/TRICARE	79	93	14	18%
6	COMMERCIAL INSURANCE	134	91	(43)	-32%
7	NON-GOVERNMENT MANAGED CARE	4,139	3,422	(717)	-17%
8	WORKER'S COMPENSATION	77	22	(55)	-71%
9	SELF- PAY/UNINSURED	177	169	(8)	-5%
10	SAGA	202	0	(202)	-100%
11	OTHER	0	0	0	0%
$ldsymbol{ldsymbol{ldsymbol{eta}}}$	TOTAL PATIENT DAYS OUTPATIENT VISITS	17,737	15,790	(1,947)	-11%
C.					

# 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
	MEDIOADE TRADITIONAL	20.077	20.705	(4.40)	40/
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	23,877	23,735 7,172	(142) 756	-1% 12%
3	MEDICAID	6,416 2,038	3,435	1,397	69%
4	MEDICAID MANAGED CARE	6,715	7,004	289	4%
5	CHAMPUS/TRICARE	482	522	40	8%
6	COMMERCIAL INSURANCE	1,135	571	(564)	-50%
7	NON-GOVERNMENT MANAGED CARE	37,328	35.040	(2,288)	-6%
8	WORKER'S COMPENSATION	1,358	1,389	31	2%
9	SELF- PAY/UNINSURED	2,215	1,895	(320)	-14%
10	SAGA	861	0	(861)	-100%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	82,425	80,763	(1,662)	-2%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVI		*-		
1	MEDICARE TRADITIONAL	\$2,378,345	\$5,183,053	\$2,804,708	118%
2	MEDICARE MANAGED CARE	\$499,086	\$1,148,377	\$649,291	130%
3	MEDICAID MANAGED CARE	\$698,350	\$2,620,574	\$1,922,224	275%
4	MEDICAID MANAGED CARE	\$1,552,025	\$3,333,229	\$1,781,204 \$127.040	115%
5	CHAMPUS/TRICARE COMMERCIAL INSURANCE	\$91,717 \$366,933	\$218,757 \$277,689	(\$89,244)	139% -24%
7	NON-GOVERNMENT MANAGED CARE	\$5,008,185	\$10,106,210	\$5,098,025	102%
8	WORKER'S COMPENSATION	\$291,906	\$599,123	\$3,096,025	102%
9	SELF- PAY/UNINSURED	\$1,248,488	\$1,553,078	\$304,590	24%
10	SAGA	\$77,594	\$0	(\$77,594)	-100%
11	OTHER	\$0	\$0 \$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	Ψ	Ψ	Ψ	0 70
	GROSS REVENUE	\$12,212,629	\$25,040,090	\$12,827,461	105%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENU	J <u>E</u>			
1	MEDICARE TRADITIONAL	\$641,202	\$1,377,070	\$735,868	115%
2	MEDICARE MANAGED CARE	\$144,036	\$311,002	\$166,966	116%
3	MEDICAID	\$137,715	\$670,059	\$532,344	387%
4	MEDICAID MANAGED CARE	\$404,768	\$944,606	\$539,838	133%
5	CHAMPUS/TRICARE	\$31,615	\$92,864	\$61,249	194%
6	COMMERCIAL INSURANCE	\$192,200	\$206,839	\$14,639	8%
7 8	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	\$2,773,723 \$189,681	\$5,970,012 \$453,745	\$3,196,289 \$264,064	115% 139%
9	SELF- PAY/UNINSURED	\$45,070	\$453,745 \$69,697	\$264,064	55%
10	SAGA	\$10,739	\$09,69 <i>1</i>	(\$10,739)	-100%
11	OTHER	\$0	\$0 \$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	ΨΟ	ΨΟ	ΨΟ	370
	NET REVENUE	\$4,570,749	\$10,095,894	\$5,525,145	121%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	2,717	2,804	87	3%
2	MEDICARE MANAGED CARE	539	645	106	20%
3	MEDICAID	831	1,628	797	96%
4	MEDICAID MANAGED CARE	2,948	3,085	137	5%
5	CHAMPUS/TRICARE	147	177	30	20%
7	COMMERCIAL INSURANCE	560	191	(369)	-66%
8	NON-GOVERNMENT MANAGED CARE	6,944 591	6,963	19 47	0% 8%
9	WORKER'S COMPENSATION SELF- PAY/UNINSURED	1,554	638 1,304	(250)	-16%
10	SAGA	412	1,304	(412)	-10%
11	OTHER	0	0	(412)	-100%
1 1 1			U		· U/0
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				

# REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
	OPERATING EXPENSE BY CATEGORY				
I.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$10,037,829	\$9,606,142	(\$431,687)	-4%
2	Physician Salaries	\$692,376	\$0	(\$692,376)	-100%
3	Non-Nursing, Non-Physician Salaries	\$15,934,731	\$16,602,963	\$668,232	4%
	Total Salaries & Wages	\$26,664,936	\$26,209,105	(\$455,831)	-2%
В.	Fringe Benefits:	Ф0 40 <del>7</del> 044	<b>#0.547.000</b>	(\$500.070)	400/
2	Nursing Fringe Benefits Physician Fringe Benefits	\$3,137,311 \$216,401	\$2,547,038 \$0	(\$590,273) (\$216,401)	-19% -100%
3	Non-Nursing, Non-Physician Fringe Benefits	\$5,033,765	\$4,402,587	(\$631,178)	-100%
	Total Fringe Benefits	\$8,387,477	\$6,949,625	(\$1,437,852)	-17%
	Total Timigo Donomo	ψο,σοι,	<b>40,010,020</b>	(\$1,101,002)	11 70
C.	Contractual Labor Fees:				
1	Nursing Fees	\$278,500	\$50,864	(\$227,636)	-82%
2	Physician Fees	\$387,251	\$380,259	(\$6,992)	-2%
3	Non-Nursing, Non-Physician Fees	\$1,864,566	\$1,719,863	(\$144,703)	-8%
	Total Contractual Labor Fees	\$2,530,317	\$2,150,986	(\$379,331)	-15%
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies  Medical Supplies	\$7,668,611	\$4,303,066	(\$3,365,545)	-44%
2	Pharmaceutical Costs	\$2,214,229	\$2,288,424	\$74,195	3%
	Total Medical Supplies and Pharmaceutical Cost	\$9,882,840	\$6,591,490	(\$3,291,350)	-33%
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$1,157,868	\$1,138,435	(\$19,433)	-2%
2	Depreciation-Equipment	\$2,001,770	\$1,920,846	(\$80,924)	-4%
3	Amortization Total Depreciation and Amortization	\$12,498 <b>\$3,172,136</b>	\$183,981 <b>\$3,243,262</b>	\$171,483 <b>\$71,126</b>	1372% <b>2%</b>
	Total Depreciation and Amortization	φ3,172,130	<b>\$3,243,202</b>	φ/1,120	2 /0
F.	Bad Debts:				
1	Bad Debts	\$2,544,297	\$2,141,072	(\$403,225)	-16%
G.	Interest Expense:				
1	Interest Expense	\$592,676	\$1,554,402	\$961,726	162%
Н.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$322.204	\$729,896	\$407,692	127%
	Marpraotice modrance cost	ΨΟΣΣ,ΣΟΨ	Ψ125,000	ψ+01,002	12170
I.	Utilities:				
1	Water	\$36,866	\$28,601	(\$8,265)	-22%
2	Natural Gas	\$32,021	\$36,764	\$4,743	15%
3	Oil	\$500,461	\$638,064	\$137,603	27%
4	Electricity	\$696,544	\$739,527	\$42,983	6%
5	Telephone Other Utilities	\$196,481	\$184,383	(\$12,098)	-6%
6	Total Utilities	\$221,376 <b>\$1,683,749</b>	\$187,590 <b>\$1,814,929</b>	(\$33,786) <b>\$131,180</b>	-15% <b>8%</b>
	Total Offices	Ψ1,000,140	Ψ1,014,020	ψ101,100	070
J.	Business Expenses:				
1	Accounting Fees	\$89,663	\$97,397	\$7,734	9%
2	Legal Fees	\$1,039,029	\$368,431	(\$670,598)	-65%
3	Consulting Fees	\$4,293,016	\$2,190,213	(\$2,102,803)	-49%
4	Dues and Membership	\$157,170	\$138,275	(\$18,895)	-12%
5	Equipment Leases	\$1,280,231 \$752,637	\$1,340,979 \$679,745	\$60,748	5% -10%
6 7	Building Leases Repairs and Maintenance	\$752,637 \$469,780	\$679,745 \$375,203	(\$72,892) (\$94,577)	-10% -20%
1	Insurance	\$148,997	\$136,360	(\$12,637)	-20% -8%

# REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

Part   Property   Tawa	(1)	(2)	(3)	(4)	(5)	(6)
9   Travel			FY 2010	FY 2011	AMOUNT	%
10	LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
10	_	-	<b>A</b> 4.000	<b>^-</b>	<b>***</b>	1000/
11   Property Tax   \$0   \$0   \$0   \$0   \$0   \$0   \$0   \$						193%
12   General Supplies   \$891,594   \$382,914   \$(\$506,680)   \$-57     31   Licenses and Subscriptions   \$71,347   \$136,250   \$64,003   911     41   Postage and Shipping   \$87,686   \$76,079   \$(\$11,607)   \$138     52   Advertishing   \$128,333   \$148,970   \$20,637   \$168     53   Other Business Expenses   \$1,407,40   \$3,453,815   \$15,151,075   768     54   Total Business Expenses   \$1,407,40   \$3,453,815   \$15,151,075   768     55   Total Business Expenses   \$11,417,433   \$9,615,586   \$(\$1,801,847)   \$-169     55   Miscellaneous Other Operating Expenses   \$486,670   \$206,032   \$(\$180,638)   \$-37     56   Total Operating Expenses   \$486,670   \$306,032   \$(\$180,638)   \$-37     57   Total Operating Expenses   \$486,670   \$306,035   \$(\$6,376,350)   \$-99     58   Total Operating Expenses - All Expense Categories   \$67,684,735   \$61,306,385   \$(\$6,376,350)   \$-99     59   Total Operating Expenses - All Expense Categories   \$67,684,735   \$61,306,385   \$(\$6,376,350)   \$-99     10   General Administration   \$4,474,045   \$4,319,037   \$(\$155,008)   \$-37     11   OPERATING EXPENSE BY DEPARTMENT   \$-389,045   \$4,319,037   \$(\$155,008)   \$-37     12   General Administration   \$4,474,045   \$4,319,037   \$(\$155,008)   \$-37     13   Patient Billing & Collection   \$1,704,917   \$3,127,093   \$(\$377,834)   \$-22   \$-389,045   \$61,327,093   \$(\$377,834)   \$-22   \$-389,045   \$61,327,093   \$(\$377,834)   \$-22   \$-389,045   \$61,327,093   \$(\$377,834)   \$-22   \$-389,045   \$61,327,093   \$(\$377,834)   \$-22   \$-389,045   \$61,045   \$-389,045   \$-389,036						31%
13   Licenses and Subscriptions   \$71,347   \$136,250   \$64,903   914     Postage and Shipping   \$87,686   \$76,079   \$11,6079   131     15   Advertising   \$128,333   \$148,870   \$20,637   168     16   Other Business Expenses   \$1,940,740   \$34,633,161   \$1,513,075   768     17   Total Business Expenses   \$1,1417,433   \$9,615,586   \$(\$1,801,847)   -168     18   Miscellaneous Other Operating Expenses   \$486,670   \$306,032   \$(\$180,638)   -37     19   Miscellaneous Other Operating Expenses   \$486,670   \$306,032   \$(\$180,638)   -37     10   Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,350)   -99     10   Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,350)   -99     11   OPERATING EXPENSE BY DEPARTMENT					•	0%
14   Postage and Shipping						
15   Advertising						
Content Business Expenses   \$1,940,740   \$3,463,815   \$1,513,075   768     Total Business Expenses   \$11,417,433   \$9,615,866   \$(\$1,801,847)   -168     K. Other Operating Expenses   \$486,670   \$306,032   \$(\$180,638)   -378     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -98     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -98     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -98     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -99     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -99     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -99     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -99     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -99     Total Operating Expenses - All Expense Categories*   \$67,684,735   \$61,306,385   \$(\$6,378,359)   -99     General Accounting						
Total Business Expenses   \$11,417,433   \$9,615,586   (\$1,801,847)   -161						
Name	16					
Miscellaneous Other Operating Expenses		Total Busiliess Expenses	\$11,417,433	\$9,015,500	(\$1,001,047)	-1076
Miscellaneous Other Operating Expenses	V	Other Operating Expenses				
**A K. The total operating expenses amount above must agree with the total operating expenses amount on Report 19  **A K. The total operating expenses amount above must agree with the total operating expenses amount on Report 19  **I. OPERATING EXPENSE BY DEPARTMENT			£400.070	¢200 020	(¢400 c20)	070/
*A K. The total operating expenses amount above must agree with the total operating expenses amount on Report 15  ### A.	1	Miscellaneous Other Operating Expenses	\$486,670	\$306,032	(\$180,638)	-31%
*A K. The total operating expenses amount above must agree with the total operating expenses amount on Report 15  ### A.		Tatal On and the Francisco All Francisco Cotton and at	\$07.004.70F	<b>****</b>	(\$0.070.0E0)	00/
II.   OPERATING EXPENSE BY DEPARTMENT		Total Operating Expenses - All Expense Categories	\$67,684,735	\$61,306,385	(\$6,378,350)	-9%
II.   OPERATING EXPENSE BY DEPARTMENT						
A.         General Services:         1           1         General Administration         \$4,474,045         \$4,319,037         (\$155,008)         -33           2         General Administration         \$689,034         \$616,460         (\$72,574)         -11           3         Patient Billing & Collection         \$1,704,917         \$1,327,083         (\$377,834)         -22*           4         Admitting / Registration Office         \$998,265         \$885,526         (\$112,739)         -11*           5         Data Processing         \$1,342,538         \$1,922,903         \$80,365         4*           6         Communications         \$179,520         \$164,603         (\$15,017)         -8*           6         Communications         \$328,216,92         \$6,714,695         (\$1,606,997)         -19*           7         Personnel         \$8,321,692         \$6,714,695         (\$1,606,997)         -19*           8         Public Relations         \$289,963         \$393,345         \$69,382         24*           9         Purchasing         \$376,197         \$226,159         (\$150,038)         -40*           10         Detail Relations         \$376,197         \$228,159         (\$150,038)         -40*		*A K. The total operating expenses amount above	e must agree with	the total operation	ng expenses amou	int on Report 150
A.         General Services:         1           1         General Administration         \$4,474,045         \$4,319,037         (\$155,008)         -33           2         General Administration         \$689,034         \$616,460         (\$72,574)         -11           3         Patient Billing & Collection         \$1,704,917         \$1,327,083         (\$377,834)         -22*           4         Admitting / Registration Office         \$998,265         \$885,526         (\$112,739)         -11*           5         Data Processing         \$1,342,538         \$1,922,903         \$80,365         4*           6         Communications         \$179,520         \$164,603         (\$15,017)         -8*           6         Communications         \$328,216,92         \$6,714,695         (\$1,606,997)         -19*           7         Personnel         \$8,321,692         \$6,714,695         (\$1,606,997)         -19*           8         Public Relations         \$289,963         \$393,345         \$69,382         24*           9         Purchasing         \$376,197         \$226,159         (\$150,038)         -40*           10         Detail Relations         \$376,197         \$228,159         (\$150,038)         -40*						
A.         General Services:         1           1         General Administration         \$4,474,045         \$4,319,037         (\$155,008)         -33           2         General Administration         \$689,034         \$616,460         (\$72,574)         -11           3         Patient Billing & Collection         \$1,704,917         \$1,327,083         (\$377,834)         -22*           4         Admitting / Registration Office         \$998,265         \$885,526         (\$112,739)         -11*           5         Data Processing         \$1,342,538         \$1,922,903         \$80,365         4*           6         Communications         \$179,520         \$164,603         (\$15,017)         -8*           6         Communications         \$328,216,92         \$6,714,695         (\$1,606,997)         -19*           7         Personnel         \$8,321,692         \$6,714,695         (\$1,606,997)         -19*           8         Public Relations         \$289,963         \$393,345         \$69,382         24*           9         Purchasing         \$376,197         \$226,159         (\$150,038)         -40*           10         Detail Relations         \$376,197         \$228,159         (\$150,038)         -40*						
General Administration	II.	OPERATING EXPENSE BY DEPARTMENT				
General Administration						
Seasy	A.					
Patient Billing & Collection						-3%
Admitting / Registration Office   \$998.265   \$885.526   (\$112,739)   -119						-11%
5         Data Processing         \$1,842,538         \$1,922,903         \$80,365         44           6         Communications         \$179,520         \$164,503         (\$15,017)         -89           7         Personnel         \$8,321,692         \$6,714,695         (\$1,606,997)         -199           8         Public Relations         \$289,963         \$359,345         \$69,382         244           9         Purchasing         \$376,197         \$226,159         (\$150,038)         -409           10         Dietary and Cafeteria         \$619,794         \$576,280         (\$43,514)         -77           11         Housekeeping         \$718,735         \$689,074         \$22,6661)         -44           12         Laundry & Linen         \$280,700         \$260,513         \$20,861)         -47           12         Laundry & Linen         \$15,05,095         \$1,682,836         \$177,741         122           14         Security         \$160,811         \$163,447         \$2,636         22*           15         Repairs and Maintenance         \$857,813         \$715,838         \$(\$141,975)         -17*           16         Central Sterile Supply         \$185,163         \$184,990         \$173 <t< td=""><td></td><td></td><td></td><td></td><td></td><td>-22%</td></t<>						-22%
6         Communications         \$179,520         \$164,503         (\$15,017)         -8°           7         Personnel         \$8,321,692         \$6,714,695         (\$1,606,997)         -19°           8         Public Relations         \$289,963         \$359,345         \$69,382         24°           9         Purchasing         \$376,197         \$226,159         (\$150,038)         -40°           10         Dietary and Cafeteria         \$619,794         \$576,280         (\$43,514)         -7°           11         Housekeeping         \$718,735         \$689,074         \$22,661)         -4°           12         Laundry & Linen         \$280,700         \$260,513         (\$20,187)         -7°           13         Operation of Plant         \$1,505,095         \$1,682,336         \$177,741         12°           14         Security         \$160,811         \$163,447         \$2,636         2°           15         Repairs and Maintenance         \$857,813         \$715,838         (\$141,975)         -17°           16         Central Sterile Supply         \$185,163         \$184,990         (\$173)         0°           17         Pharmacy Department         \$3,043,300         \$2,871,144         (\$172,156)						-11%
Personnel   \$8,321,692   \$6,714,695   \$1,606,997   .199		Ü				4%
Public Relations   \$289,963   \$359,345   \$69,382   249     Purchasing   \$376,197   \$226,159   \$(\$150,038)   -409     10 Dietary and Cafeteria   \$619,794   \$576,280   \$(\$43,514)   -79     11 Housekeeping   \$718,735   \$689,074   \$(\$29,661)   -49     12 Laundry & Linen   \$280,700   \$260,513   \$(\$20,187)   -79     13 Operation of Plant   \$1,505,095   \$1,682,836   \$177,741   129     14 Security   \$160,811   \$163,447   \$2,636   29     15 Repairs and Maintenance   \$857,813   \$715,838   \$(\$141,975)   -179     16 Central Sterile Supply   \$185,163   \$184,990   \$(\$173)   09     17 Pharmacy Department   \$3,043,300   \$2,871,144   \$(\$172,156)   -69     18 Other General Services   \$5,003,442   \$4,363,595   \$(\$639,847)   -139     19 Total General Services   \$31,251,024   \$28,043,428   \$(\$3,207,596)   -109     1 Medical Care Administration   \$1,130,863   \$989,513   \$(\$141,350)   -129     2 Residency Program   \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0				\$164,503		-8%
Purchasing						-19%
10   Dietary and Cafeteria   \$619,794   \$576,280   (\$43,514)   -79						24%
11   Housekeeping						-40%
12         Laundry & Linen         \$280,700         \$260,513         (\$20,187)         -7°           13         Operation of Plant         \$1,505,095         \$1,682,836         \$177,741         12°           14         Security         \$160,811         \$163,447         \$2,636         2°           15         Repairs and Maintenance         \$857,813         \$715,838         (\$141,975)         -17°           16         Central Sterile Supply         \$185,163         \$184,990         (\$173)         0°           17         Pharmacy Department         \$3,043,300         \$2,871,144         (\$172,156)         -6°           18         Other General Services         \$5,003,442         \$4,363,595         (\$639,847)         -13°           18         Other General Services         \$31,251,024         \$28,043,428         (\$3,207,596)         -10°           19         Medical Care Administration         \$1,130,863         \$989,513         (\$141,350)         -12°           2         Residency Program         \$0         \$0         \$0         \$0           3         Nursing Services Administration         \$91,942         \$621,159         (\$280,783)         -31°           4         Medical Records         \$1,083,554						-7%
13   Operation of Plant						-4%
14   Security   \$160,811   \$163,447   \$2,636   29   15   Repairs and Maintenance   \$857,813   \$715,838   \$(\$141,975)   .179   16   Central Sterile Supply   \$185,163   \$184,990   \$(\$173)   .09   17   Pharmacy Department   \$3,043,300   \$2,871,144   \$(\$172,156)   .66   18   Other General Services   \$5,003,442   \$4,363,595   \$(\$639,847)   .139   Total General Services   \$31,251,024   \$28,043,428   \$(\$3,207,596)   .109   B.   Professional Services   Professional Service   P						-7%
15   Repairs and Maintenance   \$857,813   \$715,838   (\$141,975)   -179     16   Central Sterile Supply   \$185,163   \$184,990   (\$173)   09     17   Pharmacy Department   \$3,043,300   \$2,871,144   (\$172,156)   -69     18   Other General Services   \$5,003,442   \$4,363,595   (\$639,847)   -139     Total General Services   \$31,251,024   \$28,043,428   (\$3,207,596)   -109     B.   Professional Services   Professional Services   \$1,130,863   \$989,513   (\$141,350)   -129     2   Residency Program   \$0   \$0   \$0   \$0     3   Nursing Services Administration   \$911,942   \$621,159   (\$280,783)   -319     4   Medical Records   \$1,083,554   \$974,845   (\$108,709)   -109     5   Social Service   \$16,076   \$0   (\$16,076)   -1009     6   Other Professional Services   \$3,132,435   \$2,585,517   (\$546,918)   -179     C.   Special Services   \$3,132,435   \$2,585,517   (\$546,918)   -179     2   Recovery Room   \$3,24,625   \$466,607   \$141,982   449     3   Anesthesiology   \$324,625   \$466,607   \$141,982   449     4   Delivery Room   \$0   \$0   \$0   \$0     5   Diagnostic Ultrasound   \$275,747   \$344,887   \$69,140   259						12%
16         Central Sterile Supply         \$185,163         \$184,990         (\$173)         00           17         Pharmacy Department         \$3,043,300         \$2,871,144         (\$172,156)         -66           18         Other General Services         \$5,003,442         \$4,363,595         (\$639,847)         -139           Total General Services         \$31,251,024         \$28,043,428         (\$3,207,596)         -109           B.         Professional Services:         ***         **						2%
17         Pharmacy Department         \$3,043,300         \$2,871,144         (\$172,156)         -69           18         Other General Services         \$5,003,442         \$4,363,595         (\$639,847)         -139           Total General Services         \$31,251,024         \$28,043,428         (\$3,207,596)         -109           B. Professional Services:           1         Medical Care Administration         \$1,130,863         \$989,513         (\$141,350)         -129           2         Residency Program         \$0         \$0         \$0         \$0         \$0           3         Nursing Services Administration         \$901,942         \$621,159         (\$280,783)         -319           4         Medical Records         \$1,083,554         \$974,845         (\$108,709)         -109           5         Social Service         \$16,076         \$0         (\$16,076)         -1009           6         Other Professional Services         \$0         \$0         \$0         \$0           Total Professional Services         \$3,132,435         \$2,585,517         (\$546,918)         -179           C.         Special Services:         \$3,132,435         \$2,585,517         (\$546,918)         -179						-17%
18   Other General Services   \$5,003,442   \$4,363,595   (\$639,847)   -139     Total General Services   \$31,251,024   \$28,043,428   (\$3,207,596)   -109     B.   Professional Services:				\$184,990	(\$173)	0%
B.   Professional Services   \$31,251,024   \$28,043,428   (\$3,207,596)   -109						-6%
B.         Professional Services:         \$1,130,863         \$989,513         (\$141,350)         -129           2         Residency Program         \$0         \$0         \$0         \$0           3         Nursing Services Administration         \$901,942         \$621,159         (\$280,783)         -319           4         Medical Records         \$1,083,554         \$974,845         (\$108,709)         -109           5         Social Service         \$16,076         \$0         (\$16,076)         -109           6         Other Professional Services         \$0         \$0         \$0         \$0           7         Total Professional Services         \$3,132,435         \$2,585,517         (\$546,918)         -179           8         Pecial Services:         \$2         \$2,185,169         \$1,959,248         (\$225,921)         -109           9         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0         \$0           5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407<	18					-13%
1         Medical Care Administration         \$1,130,863         \$989,513         (\$141,350)         -129           2         Residency Program         \$0         \$0         \$0         90           3         Nursing Services Administration         \$901,942         \$621,159         (\$280,783)         -319           4         Medical Records         \$1,083,554         \$974,845         (\$108,709)         -109           5         Social Service         \$16,076         \$0         (\$16,076)         -109           6         Other Professional Services         \$0         \$0         \$0         \$0           Total Professional Services         \$3,132,435         \$2,585,517         (\$546,918)         -179           C.         Special Services:         \$0         \$0         \$0         \$0           1         Operating Room         \$2,185,169         \$1,959,248         (\$225,921)         -109           2         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0         \$0		I otal General Services	\$31,251,024	\$28,043,428	(\$3,207,596)	-10%
1         Medical Care Administration         \$1,130,863         \$989,513         (\$141,350)         -129           2         Residency Program         \$0         \$0         \$0         90           3         Nursing Services Administration         \$901,942         \$621,159         (\$280,783)         -319           4         Medical Records         \$1,083,554         \$974,845         (\$108,709)         -109           5         Social Service         \$16,076         \$0         (\$16,076)         -109           6         Other Professional Services         \$0         \$0         \$0         \$0           Total Professional Services         \$3,132,435         \$2,585,517         (\$546,918)         -179           C.         Special Services:         \$0         \$0         \$0         \$0           1         Operating Room         \$2,185,169         \$1,959,248         (\$225,921)         -109           2         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0         \$0						
2       Residency Program       \$0       \$0       \$0         3       Nursing Services Administration       \$901,942       \$621,159       (\$280,783)       -319         4       Medical Records       \$1,083,554       \$974,845       (\$108,709)       -109         5       Social Service       \$16,076       \$0       (\$16,076)       -109         6       Other Professional Services       \$0       \$0       \$0       90         Total Professional Services         1       Operating Room       \$2,185,169       \$1,959,248       (\$225,921)       -109         2       Recovery Room       \$338,446       \$323,426       (\$15,020)       -49         3       Anesthesiology       \$324,625       \$466,607       \$141,982       449         4       Delivery Room       \$0       \$0       \$0       90         5       Diagnostic Radiology       \$1,787,960       \$1,976,367       \$188,407       119         6       Diagnostic Ultrasound       \$275,747       \$344,887       \$69,140       259						
3         Nursing Services Administration         \$901,942         \$621,159         (\$280,783)         -319           4         Medical Records         \$1,083,554         \$974,845         (\$108,709)         -109           5         Social Service         \$16,076         \$0         (\$16,076)         -109           6         Other Professional Services         \$0         \$0         \$0         90           Total Professional Services         \$3,132,435         \$2,585,517         (\$546,918)         -179           C.         Special Services:         \$0         \$0         \$0         90           1         Operating Room         \$2,185,169         \$1,959,248         (\$225,921)         -109           2         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0         90           5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407         119           6         Diagnostic Ultrasound         \$275,747         \$344,887         \$69,140         259						-12%
4       Medical Records       \$1,083,554       \$974,845       (\$108,709)       -109         5       Social Service       \$16,076       \$0       (\$16,076)       -109         6       Other Professional Services       \$0       \$0       \$0       90         Total Professional Services       \$3,132,435       \$2,585,517       (\$546,918)       -179         C.       Special Services:       \$2,185,169       \$1,959,248       (\$225,921)       -109         2       Recovery Room       \$338,446       \$323,426       (\$15,020)       -49         3       Anesthesiology       \$324,625       \$466,607       \$141,982       449         4       Delivery Room       \$0       \$0       \$0       90         5       Diagnostic Radiology       \$1,787,960       \$1,976,367       \$188,407       119         6       Diagnostic Ultrasound       \$275,747       \$344,887       \$69,140       259						0%
5         Social Service         \$16,076         \$0         (\$16,076)         -1009           6         Other Professional Services         \$0         \$0         \$0         90           Total Professional Services         \$3,132,435         \$2,585,517         (\$546,918)         -179           C. Special Services:           1         Operating Room         \$2,185,169         \$1,959,248         (\$225,921)         -109           2         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0           5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407         119           6         Diagnostic Ultrasound         \$275,747         \$344,887         \$69,140         259						-31%
6         Other Professional Services         \$0         \$0         \$0           Total Professional Services         \$3,132,435         \$2,585,517         (\$546,918)         -179           C.         Special Services:         Special Services: <t< td=""><td></td><td></td><td></td><td>' '</td><td></td><td>-10%</td></t<>				' '		-10%
C.         Special Services:           1         Operating Room         \$2,185,169         \$1,959,248         (\$225,921)         -109           2         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0         90           5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407         119           6         Diagnostic Ultrasound         \$275,747         \$344,887         \$69,140         259				<u>'</u>		-100%
C.         Special Services:         Special Services:           1         Operating Room         \$2,185,169         \$1,959,248         (\$225,921)         -109           2         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0           5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407         119           6         Diagnostic Ultrasound         \$275,747         \$344,887         \$69,140         259	6			<u>'</u>	•	0%
1         Operating Room         \$2,185,169         \$1,959,248         (\$225,921)         -109           2         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0         09           5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407         119           6         Diagnostic Ultrasound         \$275,747         \$344,887         \$69,140         259		Total Professional Services	\$3,132,435	\$2,585,517	(\$546,918)	-17%
1         Operating Room         \$2,185,169         \$1,959,248         (\$225,921)         -109           2         Recovery Room         \$338,446         \$323,426         (\$15,020)         -49           3         Anesthesiology         \$324,625         \$466,607         \$141,982         449           4         Delivery Room         \$0         \$0         \$0         09           5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407         119           6         Diagnostic Ultrasound         \$275,747         \$344,887         \$69,140         259						
2       Recovery Room       \$338,446       \$323,426       (\$15,020)       -49         3       Anesthesiology       \$324,625       \$466,607       \$141,982       449         4       Delivery Room       \$0       \$0       \$0       90         5       Diagnostic Radiology       \$1,787,960       \$1,976,367       \$188,407       119         6       Diagnostic Ultrasound       \$275,747       \$344,887       \$69,140       259	C.					
3       Anesthesiology       \$324,625       \$466,607       \$141,982       449         4       Delivery Room       \$0       \$0       \$0       90         5       Diagnostic Radiology       \$1,787,960       \$1,976,367       \$188,407       119         6       Diagnostic Ultrasound       \$275,747       \$344,887       \$69,140       259						-10%
4         Delivery Room         \$0         \$0         \$0         \$0           5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407         119           6         Diagnostic Ultrasound         \$275,747         \$344,887         \$69,140         259						-4%
5         Diagnostic Radiology         \$1,787,960         \$1,976,367         \$188,407         119           6         Diagnostic Ultrasound         \$275,747         \$344,887         \$69,140         259	3	Anesthesiology	\$324,625	\$466,607	\$141,982	44%
6 Diagnostic Ultrasound \$275,747 \$344,887 \$69,140 25%		,				0%
						11%
7   Radiation Therapy   \$0   \$0   \$0   09	6		\$275,747	\$344,887		25%
	7	Radiation Therapy	\$0	\$0	\$0	0%

# 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>	<b>DIFFERENCE</b>	DIFFERENCE
8	Radioisotopes	\$485,951	\$466,507	(\$19,444)	-4%
9	CT Scan	\$348,040	\$466,868	\$118,828	34%
10	Laboratory	\$3,581,311	\$3,310,964	(\$270,347)	-8%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$284,301	\$240,061	(\$44,240)	-16%
13	Electrocardiology	\$60,519	\$63,805	\$3,286	5%
14	Electroencephalography	\$19,709	\$27,958	\$8,249	42%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$672,258	\$695,295	\$23,037	3%
19	Pulmonary Function	\$380,093	\$398,414	\$18,321	5%
20	Intravenous Therapy	\$125,244	\$112,051	(\$13,193)	-11%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$221,120	\$207,914	(\$13,206)	-6%
23	Renal Dialysis	\$141,738	\$130,633	(\$11,105)	-8%
24	Emergency Room	\$4,029,715	\$3,159,944	(\$869,771)	-22%
25	MRI	\$515,525	\$657,362	\$141,837	28%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$390,873	\$398,460	\$7,587	2%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,095,420	\$2,069,317	(\$26,103)	-1%
	Total Special Services	\$18,263,764	\$17,476,088	(\$787,676)	-4%
D.	Routine Services:				
1	Medical & Surgical Units	\$3,956,145	\$3,716,172	(\$239,973)	-6%
2	Intensive Care Unit	\$1,625,113	\$1,410,442	(\$214,671)	-13%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,228,301	\$2,187,415	(\$40,886)	-2%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$1,203,403	\$1,140,247	(\$63,156)	-5%
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	\$2,438,765	\$2,606,004	\$167,239	7%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
	Total Routine Services	\$11,451,727	\$11,060,280	(\$391,447)	-3%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$3,585,785	\$2,141,072	(\$1,444,713)	-40%
	Total On and Con Females All D	A07.004.707	<b>****</b>	(60.070.070)	***
	Total Operating Expenses - All Departments*	\$67,684,735	\$61,306,385	(\$6,378,350)	-9%
	*A 0. The total operating expenses amount about	OVA MUST SAFOR With	the total operation	na expenses amou	nt on Report 150
	A. O. The total operating expenses amount ab		the total operation	ig expenses aniou	in on Nepon 130
		1			i e

	JOHNSON	MEMORIAL 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					
Α.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$62,785,887	\$ 61,336,304	\$59,791,753					
2	Other Operating Revenue	54,542	252,845	60,758					
3	Total Operating Revenue	\$62,840,429	\$61,589,149	\$59,852,511					
4	Total Operating Expenses	66,396,980	67,684,735	61,306,385					
5	Income/(Loss) From Operations	(\$3,556,551)	(\$6,095,586)	(\$1,453,874)					
6	Total Non-Operating Revenue	(2,288,430)	33,467,213	1,205,826					
7	Excess/(Deficiency) of Revenue Over Expenses	(\$5,844,981)	\$27,371,627	(\$248,048)					
В.	Profitability Summary								
1	Hospital Operating Margin	-5.87%	-6.41%	-2.38%					
2	Hospital Non Operating Margin	-3.78%	35.21%	1.97%					
3	Hospital Total Margin	-9.65%	28.80%	-0.41%					
4	Income/(Loss) From Operations	(\$3,556,551)	(\$6,095,586)	(\$1,453,874)					
5	Total Operating Revenue	\$62,840,429	\$61,589,149	\$59,852,511					
6	Total Non-Operating Revenue	(\$2,288,430)	\$33,467,213	\$1,205,826					
7	Total Revenue	\$60,551,999	\$95,056,362	\$61,058,337					
8	Excess/(Deficiency) of Revenue Over Expenses	(\$5,844,981)	\$27,371,627	(\$248,048)					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	(\$20,718,900)	\$4,607,135	\$4,285,194					
2	Hospital Total Net Assets	(\$16,710,766)	\$8,733,965	\$8,616,119					
3	Hospital Change in Total Net Assets	(\$20,941,308)	\$25,444,731	(\$117,846)					
4	Hospital Change in Total Net Assets %	-395.0%	-152.3%	-1.3%					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.34	0.45	0.41					
2	Total Operating Expenses	\$66,396,980	\$67,684,735	\$61,306,385					
3	Total Gross Revenue	\$195,594,535	\$151,379,867	\$148,782,545					
4	Total Other Operating Revenue	\$951,983	\$571,177	\$1,209,809					
5	Private Payment to Cost Ratio	1.33	1.28	1.36					
6	Total Non-Government Payments	\$37,610,322	\$34,911,509	\$31,234,890					

	JOHNSON	MEMORIAL HOSPITAL						
	TWELVE M	ONTHS 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	<u>FY 2011</u>				
7	Total Uninsured Payments	\$818,543	\$221,346	\$203,253				
8	Total Non-Government Charges	\$89,500,134	\$64,019,333	\$58,453,607				
9	Total Uninsured Charges	\$7,448,767	\$3,046,095	\$2,591,925				
10	Medicare Payment to Cost Ratio	0.72	0.70	0.78				
11	Total Medicare Payments	\$21,189,018	\$21,517,044	\$22,030,836				
12	Total Medicare Charges	\$87,333,452	\$69,163,715	\$68,723,859				
13	Medicaid Payment to Cost Ratio	0.72	0.61	0.65				
14	Total Medicaid Payments	\$3,570,399	\$4,270,748	\$5,516,654				
15	Total Medicaid Charges	\$14,737,589	\$15,725,473	\$20,616,125				
16	Uncompensated Care Cost	\$2,828,136	\$1,258,250	\$1,065,514				
17	Charity Care	\$559,676	\$280,655	\$465,816				
18	Bad Debts	\$7,812,094	\$2,544,094	\$2,141,072				
19	Total Uncompensated Care	\$8,371,770	\$2,824,749	\$2,606,888				
20	Uncompensated Care % of Total Expenses	4.3%	1.9%	1.7%				
21	Total Operating Expenses	\$66,396,980	\$67,684,735	\$61,306,385				
E.	Liquidity Measures Summary							
1	Current Ratio	1.92	0.89	0.95				
2	Total Current Assets	\$14,386,615	\$14,621,336	\$11,445,823				
3	Total Current Liabilities	\$7,500,040	\$16,401,250	\$12,062,594				
4	Days Cash on Hand	17	23	6				
5	Cash and Cash Equivalents	\$3,033,010	\$4,142,244	\$884,889				
6	Short Term Investments	0	0	0				
7	Total Cash and Short Term Investments	\$3,033,010	\$4,142,244	\$884,889				
8	Total Operating Expenses	\$66,396,980	\$67,684,735	\$61,306,385				
9	Depreciation Expense	\$2,971,658	\$3,172,136	\$3,243,262				
10	Operating Expenses less Depreciation Expense	\$63,425,322	\$64,512,599	\$58,063,123				
11	Days Revenue in Patient Accounts Receivable	42.72	40.45	36.32				

	JOHNSON MEN	MORIAL HOSPITAL					
	TWELVE MONTHS ACTUAL FILING						
	FISCAL YEAR 2011						
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
(1)	(2)	(5)					
		ACTUAL	ACTUAL	ACTUAL			
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011			
12	Net Patient Accounts Receivable	\$ 8,626,274	\$ 7,869,668	\$ 7,216,450			
13	Due From Third Party Payers	\$0	\$0	\$0			
14	Due To Third Party Payers	\$1,278,325	\$1,071,475	\$1,266,304			
	Total Net Patient Accounts Receivable and Third Party Payer						
15	Activity	\$ 7,347,949	\$ 6,798,193	\$ 5,950,146			
16	Total Net Patient Revenue	\$62,785,887	\$ 61,336,304	\$ 59,791,753			
17	Average Payment Period	43.16	92.80	75.83			
18	Total Current Liabilities	\$7,500,040	\$16,401,250	\$12,062,594			
19	Total Operating Expenses	\$66,396,980	\$67,684,735	\$61,306,385			
20	Depreciation Expense	\$2,971,658	\$3,172,136	\$3,243,262			
21	Total Operating Expenses less Depreciation Expense	\$63,425,322	\$64,512,599	\$58,063,123			
F.	Solvency Measures Summary						
1	Equity Financing Ratio	(35.6)	18.6	20.9			
2	Total Net Assets	(\$16,710,766)	\$8,733,965	\$8,616,119			
3	Total Assets	\$46,991,731	\$46,903,096	\$41,290,014			
	Cook Flow to Total Daht Batio	(1.4.1)	105.7	12.4			
4	Cash Flow to Total Debt Ratio	(14.1)	105.7	(\$248.048)			
5	Excess/(Deficiency) of Revenues Over Expenses	(\$5,844,981)	\$27,371,627	(\$248,048)			
6	Depreciation Expense	\$2,971,658	\$3,172,136	\$3,243,262			
7	Excess of Revenues Over Expenses and Depreciation Expense	(\$2,873,323)	\$30,543,763	\$2,995,214			
8	Total Lang Tarm Dakt	\$7,500,040	\$16,401,250	\$12,062,594 \$12,458,750			
9	Total Long Term Debt	\$12,843,750		\$12,158,750			
10	Total Current Liabilities and Total Long Term Debt	\$20,343,790	\$28,902,500	\$24,221,344			
11	Long Term Debt to Capitalization Ratio	(332.1)	58.9	58.5			
12	Total Long Term Debt	\$12,843,750	\$12,501,250	\$12,158,750			
13	Total Net Assets	(\$16,710,766)	\$8,733,965	\$8,616,119			
14	Total Long Term Debt and Total Net Assets	(\$3,867,016)	\$21,235,215	\$20,774,869			
15	Debt Service Coverage Ratio	(1.3)	28.9	2.3			
16	Excess Revenues over Expenses	(\$5,844,981)	\$27,371,627	(\$248,048)			
17	Interest Expense	\$845,087	\$592,676	\$1,554,402			
18	Depreciation and Amortization Expense	\$2,971,658	\$3,172,136	\$3,243,262			

	JOHNSON MEMO	ORIAL HOSPITAL						
	TWELVE MONTH	S ACTUAL FILING						
	FISCAL YEAR 2011							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
	<u> </u>	ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2009	FY 2010	FY 2011				
19	Principal Payments	\$715,486	\$484,562	\$423,393				
G.	Other Financial Ratios							
	Suite i manifer ratios							
20	Average Age of Plant	10.4	10.8	11.5				
21	Accumulated Depreciation	\$31,022,924	\$34,378,475	\$37,256,964				
22	Depreciation and Amortization Expense	\$2,971,658	\$3,172,136	\$3,243,262				
н.	Utilization Measures Summary							
1	Patient Days	17,998	17,737	15,790				
2	Discharges	3,618	3,437	3,268				
3	ALOS	5.0	5.2	4.8				
4	Staffed Beds	72	72	72				
5	Available Beds	-	95	95				
6	Licensed Beds	101	101	101				
6	Occupancy of Staffed Beds	68.5%	67.5%	60.1%				
7	Occupancy of Available Beds	51.9%	51.2%	45.5%				
8	Full Time Equivalent Employees	469.2	475.7	463.5				
ı.	Hospital Gross Revenue Payer Mix Percentage							
<del></del> 1	Non-Government Gross Revenue Payer Mix Percentage	41.9%	40.3%	37.5%				
2	Medicare Gross Revenue Payer Mix Percentage	44.7%	45.7%	46.2%				
3	Medicaid Gross Revenue Payer Mix Percentage	7.5%	10.4%	13.9%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	1.5%	1.1%	0.0%				
5	Uninsured Gross Revenue Payer Mix Percentage	3.8%	2.0%	1.7%				
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.6%	0.5%	0.7%				
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Gross Revenue (Charges)	\$82,051,367	\$60,973,238	\$55,861,682				
9	Medicare Gross Revenue (Charges)	\$87,333,452	\$69,163,715	\$68,723,859				
10	Medicaid Gross Revenue (Charges)	\$14,737,589	\$15,725,473	\$20,616,125				
11	Other Medical Assistance Gross Revenue (Charges)	\$2,947,065	\$1,709,037	\$0 \$2,501,025				
12 13	Uninsured Gross Revenue (Charges)  CHAMPUS / TRICARE Gross Revenue (Charges)	\$7,448,767 \$1,076,295	\$3,046,095 \$762,309	\$2,591,925 \$988,954				
14	Total Gross Revenue (Charges)	\$195,594,535	\$151,379,867	\$148,782,545				
J.	Hospital Net Revenue Payer Mix Percentage							
1	Non-Government Net Revenue Payer Mix Percentage	58.6%	56.6%	52.4%				

	JOHNSON MEMO	RIAL 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					
2	Medicare Net Revenue Payer Mix Percentage	33.7%	35.1%	37.2%					
3	Medicaid Net Revenue Payer Mix Percentage	5.7%	7.0%	9.3%					
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.4%	0.5%	0.0%					
5	Uninsured Net Revenue Payer Mix Percentage	1.3%	0.4%	0.3%					
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.5%	0.7%					
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Net Revenue (Payments)	\$36,791,779	\$34,690,163	\$31,031,637					
9	Medicare Net Revenue (Payments)	\$21,189,018	\$21,517,044	\$22,030,836					
10	Medicaid Net Revenue (Payments)	\$3,570,399	\$4,270,748	\$5,516,654					
11	Other Medical Assistance Net Revenue (Payments)	\$263,032	\$324,478	\$0					
12	Uninsured Net Revenue (Payments)	\$818,543	\$221,346	\$203,253					
13	CHAMPUS / TRICARE Net Revenue Payments)	\$153,116	\$312,321	\$389,724					
14	Total Net Revenue (Payments)	\$62,785,887	\$61,336,100	\$59,172,104					
K.	<u>Discharges</u>								
1	Non-Government (Including Self Pay / Uninsured)	1,333	1,143	979					
2	Medicare	1,807	1,733	1,616					
3	Medical Assistance	456	541	643					
4	Medicaid	404	509	643					
5	Other Medical Assistance	52	32	-					
6	CHAMPUS / TRICARE	22	20	30					
7	Uninsured (Included In Non-Government)	114	46	52					
8	Total	3,618	3,437	3,268					
L.	Case Mix Index								
1	Non-Government (Including Self Pay / Uninsured)	1.023400	1.167700	1.020300					
2	Medicare	1.292520	1.352000	1.360500					
3	Medical Assistance	0.962631	0.866727	0.849130					
4	Medicaid	0.927200	0.855400	0.849130					
5	Other Medical Assistance	1.237910	1.046900	0.000000					
6	CHAMPUS / TRICARE	1.175700	0.795000	0.918800					
7	Uninsured (Included In Non-Government)	1.129800	0.922700	0.923500					
8	Total Case Mix Index	1.151078	1.211084	1.153915					
M.	Emergency Department Visits								
1	Emergency Room - Treated and Admitted	3,027	2,178	2,686					
2	Emergency Room - Treated and Discharged	17,336	17,243	17,435					
3	Total Emergency Room Visits	20,363	19,421	20,121					

(1)	(2)	(3)	(4)	(5)	(6)
	,	FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$54,264	\$91,738	\$37,474	69%
2	Inpatient Payments	\$18,227	\$50,616	\$32,389	178%
3	Outpatient Charges	\$82,129	\$121,924	\$39,795	48%
4	Outpatient Payments	\$52,434	\$38,015	(\$14,419)	-27%
5	Discharges	4	6	2	50%
6	Patient Days	14	20	6	43%
7	Outpatient Visits (Excludes ED Visits)	68	108	40	59%
8	Emergency Department Outpatient Visits	15	17	2	13%
9	Emergency Department Inpatient Admissions	4	3	(1)	-25%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$136,393	\$213,662	\$77,269	57%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$70,661	\$88,631	\$17,970	25%
В.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$33,319	\$23,389	(\$9,930)	-30%
2	Inpatient Payments	\$14,455	\$8,481	(\$5,974)	-41%
3	Outpatient Charges	\$56,675	\$12,276	(\$44,399)	-78%
4	Outpatient Payments	\$13,695	\$2,599	(\$11,096)	-81%
5	Discharges	2	Ψ2,333	(1)	-50%
6	Patient Days	10	7	(3)	-30%
7	Outpatient Visits (Excludes ED Visits)	55	14	(41)	-75%
8	Emergency Department Outpatient Visits	6	0	(6)	-100%
9	Emergency Department Inpatient Admissions	2	76	74	3700%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$89,994	\$35,665	(\$54,329)	-60%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$28,150	\$11,080	(\$17,070)	-61%
	TOTAL IN ATLENT & COTT ATLENT FATMLING	Ψ20,100	Ψ11,000	(ψ11,010)	0170
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$1,251,670	\$2,067,053	\$815,383	65%
2	Inpatient Payments	\$393,793	\$999,850	\$606,057	154%
3	Outpatient Charges	\$1,160,458	\$1,703,350	\$542,892	47%
4	Outpatient Payments	\$311,335	\$443,281	\$131,946	42%
5	Discharges	44	67	23	52%
6	Patient Days	282	397	115	41%
7	Outpatient Visits (Excludes ED Visits)	1,161	1,750	589	51%
8	Emergency Department Outpatient Visits	94	148	54	57%
9	Emergency Department Inpatient Admissions	34	56	22	65%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,412,128	\$3,770,403	\$1,358,275	56%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$705.128	\$1,443,131	\$738,003	105%
	TO THE STILL A COST ASSESSMENT OF	ψ103,120	ψ1,770,101	ψ1 30,003	103 /0

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$4,063,165	\$1,265,241	(\$2,797,924)	-69%
2	Inpatient Payments	\$1,316,137	\$555,051	(\$761,086)	-58%
3	Outpatient Charges	\$3,334,792	\$892,621	(\$2,442,171)	-73%
4	Outpatient Payments	\$882,852	\$208,535	(\$674,317)	-76%
5	Discharges	164	38	(126)	-77%
6	Patient Days	912	253	(659)	-72%
7	Outpatient Visits (Excludes ED Visits)	3,191	776	(2,415)	-76%
8	Emergency Department Outpatient Visits	281	71	(210)	-75%
9	Emergency Department Inpatient Admissions	125	38	(87)	-70%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,397,957	\$2,157,862	(\$5,240,095)	-71%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,198,989	\$763,586	(\$1,435,403)	-65%
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$165,505	\$76,781	(\$88,724)	-54%
2	Inpatient Payments	\$54,636	\$40,302	(\$14,334)	-26%
3	Outpatient Charges	\$60,934	\$39,036	(\$21,898)	-36%
4	Outpatient Payments	\$56,013	\$11,676	(\$44,337)	-79%
5	Discharges	6	4	(2)	-33%
	Patient Days	36	16	(20)	-56%
7	Outpatient Visits (Excludes ED Visits)	52	20	(32)	-62%
8	Emergency Department Outpatient Visits	16	22	6	38%
9	Emergency Department Inpatient Admissions	10	5	(5)	-50%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$226,439	\$115,817	(\$110,622)	-49%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$110,649	\$51,978	(\$58,671)	-53%
_	OVEODD HEALTH DLANG ING. MEDIGADE ADVAN	TAOF			
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN		Φ0	Φ0	20/
	Inpatient Charges	\$0	\$0	\$0	0%
	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%
	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

G. 1 II 2 II 3 (	UNITED HEALTHCARE INSURANCE COMPANY Inpatient Charges	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT	(6) %
G. 1 II 2 II 3 (	UNITED HEALTHCARE INSURANCE COMPANY	ACTUAL	ACTUAL		
1 I 2 I 3 (				DIFFERENCE	DIFFERENCE
1 I 2 I 3 (					
2 I 3 (	Innatient Charges				
3 (		\$0	\$2,064,076	\$2,064,076	0%
	Inpatient Payments	\$0	\$1,038,578	\$1,038,578	0%
4 (	Outpatient Charges	\$0	\$2,497,121	\$2,497,121	0%
	Outpatient Payments	\$0	\$645,160	\$645,160	0%
	Discharges	0	86	86	0%
	Patient Days	0	440	440	0%
	Outpatient Visits (Excludes ED Visits)	0	2,257	2,257	0%
	Emergency Department Outpatient Visits	0	222	222	0%
	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$4,561,197	\$4,561,197	0%
1	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$1,683,738	\$1,683,738	0%
	WELLCARE OF CONNECTICUT				
	Inpatient Charges	\$155,798	\$377,788	\$221,990	142%
	Inpatient Payments	\$42,052	\$161,920	\$119,868	285%
	Outpatient Charges	\$60,303	\$61,456	\$1,153	2%
	Outpatient Payments	\$18,830	\$19,352	\$522	3%
	Discharges	5	11	6	120%
	Patient Days	25	72	47	188%
	Outpatient Visits (Excludes ED Visits)	39	46	7	18%
	Emergency Department Outpatient Visits	10	13	3	30%
	Emergency Department Inpatient Admissions	4	7	3	75%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$216,101	\$439,244	\$223,143	103%
1	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$60,882	\$181,272	\$120,390	198%
	ACTNA				
	AETNA	#200 400	\$000 057	(# <b>70.000</b> )	040/
	Inpatient Charges	\$369,160	\$290,957	(\$78,203)	-21%
	Inpatient Payments	\$138,178	\$167,992	\$29,814	22%
	Outpatient Charges	\$367,105	\$342,064	(\$25,041)	-7%
	Outpatient Payments	\$99,255	\$95,281	(\$3,974)	-4%
	Discharges	16	14	(2)	-13%
	Patient Days	76	73	(3)	-4%
	Outpatient Visits (Excludes ED Visits)	344	279	(65)	-19%
	Emergency Department Outpatient Visits	32	34	2	6%
	Emergency Department Inpatient Admissions	13	10	(3)	-23%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$736,265	\$633,021	(\$103,244)	-14%
רן	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$237,433	\$263,273	\$25,840	11%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J.	HUMANA				
1	Inpatient Charges	\$0	\$19,453	\$19,453	0%
2	Inpatient Payments	\$0	\$10,099	\$10,099	0%
3	Outpatient Charges	\$30,157	\$16,355	(\$13,802)	-46%
4	Outpatient Payments	\$16,824	\$8,286	(\$8,538)	-51%
5	Discharges	0	1	1	0%
6	Patient Days	0	5	5	0%
7	Outpatient Visits (Excludes ED Visits)	24	23	(1)	-4%
8	Emergency Department Outpatient Visits	8	6	(2)	-25%
9	Emergency Department Inpatient Admissions	0	1	1	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$30,157	\$35,808	\$5,651	19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$16,824	\$18,385	\$1,561	9%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$296,375	\$654,073	\$357,698	121%
2	Inpatient Payments	\$93,246	\$329,733	\$236,487	254%
3	Outpatient Charges	\$401,597	\$681,567	\$279,970	70%
4	Outpatient Payments	\$91,506	\$162,744	\$71,238	78%
5	Discharges	16	26	10	63%
6	Patient Days	66	119	53	80%
	Outpatient Visits (Excludes ED Visits)	326	549	223	68%
8	Emergency Department Outpatient Visits	45	62	17	38%
9	Emergency Department Inpatient Admissions	13	31	18	138%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$697,972	\$1,335,640	\$637,668	91%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$184,752	\$492,477	\$307,725	167%
L.	UNICARE LIFE & HEALTH INSURANCE	<b>C</b> O	Φ0	Φ0	00/
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
	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	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
M.	UNIVERSAL AMERICAN				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0		0%
	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	0 <b>\$0</b>	0 <b>\$0</b>	0 <b>\$0</b>	0% <b>0%</b>
	TOTAL INPATIENT & OUTPATIENT CHARGES  TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	\$0 \$0	\$0	0%
	TOTAL INPATIENT & COTPATIENT PATMENTS	<b>Φ</b> 0	φu	\$0	U%
N.	EVERCARE				
	Inpatient Charges	\$628,834	\$380,232	(\$248,602)	-40%
	Inpatient Payments	\$306,154	\$191,480	(\$114,674)	-37%
	Outpatient Charges	\$180,734	\$223,739	\$43,005	24%
	Outpatient Payments	\$46,788	\$57,131	\$10,343	22%
	Discharges	19	15	(4)	-21%
	Patient Days	170	89	(81)	-48%
7	Outpatient Visits (Excludes ED Visits)	617	705	88	14%
	Emergency Department Outpatient Visits	32	50	18	56%
9	Emergency Department Inpatient Admissions	16	22	6	38%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$809,568	\$603,971	(\$205,597)	-25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$352,942	\$248,611	(\$104,331)	-30%
II.	TOTAL MEDICARE MANAGED CARE	1		T	Г
	TOTAL INDATION OF OUR DOES	<b>AT</b> 010 000	<b>A</b>	****	40/
	TOTAL INPATIENT CHARGES	\$7,018,090	\$7,310,781	\$292,691	4%
	TOTAL INPATIENT PAYMENTS	\$2,376,878	\$3,554,102	\$1,177,224	50%
	TOTAL OUTPATIENT CHARGES	\$5,734,884	\$6,591,509	\$856,625	15%
	TOTAL OUTPATIENT PAYMENTS TOTAL DISCHARGES	\$1,589,532	\$1,692,060	\$102,528	6%
	TOTAL DISCHARGES TOTAL PATIENT DAYS	276 1,591	269 1,491	(7)	-3% -6%
	TOTAL PATIENT DATS  TOTAL OUTPATIENT VISITS (EXCLUDES ED	1,591	1,491	(100)	-6%
	VISITS)	E 077	6 507	650	440/
	TOTAL EMERGENCY DEPARTMENT	5,877	6,527	030	11%
	OUTPATIENT VISITS	539	645	106	20%
	TOTAL EMERGENCY DEPARTMENT	559	045	100	20%
	INPATIENT ADMISSIONS	221	249	28	13%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,752,974	\$13,902,290	\$1,149,316	9%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,966,410	\$5,246,162	\$1,279,752	32%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD				
A.	OF CONNECTICUT				
1	Inpatient Charges	\$470,483	\$1,886,174	\$1.415.691	301%
2	Inpatient Payments	\$160,909	\$925,323	\$764,414	475%
3	Outpatient Charges	\$112,419	\$235,074	\$122,655	109%
4	Outpatient Payments	\$13,942	\$37,355	\$23,413	168%
5	Discharges	36	146	110	306%
6	Patient Days	220	775	555	252%
7	Outpatient Visits (Excludes ED Visits)	24	42	18	75%
8	Emergency Department Outpatient Visits	20	25	5	25%
9	Emergency Department Inpatient Admissions	24	132	108	450%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$582,902	\$2,121,248	\$1,538,346	264%
	TOTAL INPATIENT & OUTPATIENT	. ,	. , ,	. , ,	
	PAYMENTS	\$174,851	\$962,678	\$787,827	451%
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$1,704,664	\$1,693,094	(\$11,570)	-1%
2	Inpatient Payments	\$523,477	\$712,222	\$188,745	36%
3	Outpatient Charges	\$3,367,420	\$3,850,004	\$482,584	14%
4	Outpatient Payments	\$965,432	\$1,054,997	\$89,565	9%
5	Discharges	222	215	(7)	-3%
6	Patient Days	527	504	(23)	-4%
7	Outpatient Visits (Excludes ED Visits)	2,652	2,535	(117)	-4%
8	Emergency Department Outpatient Visits	1,567	1,679	112	7%
9	Emergency Department Inpatient Admissions	12	22	10	83%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$5,072,084	\$5,543,098	\$471,014	9%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$1,488,909	\$1,767,219	\$278,310	19%
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$49,673	\$269	(\$49,404)	-99%
4	Outpatient Payments	\$6,226	\$261	(\$5,965)	-96%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	1	1	0	0%
8	Emergency Department Outpatient Visits	53	0	(53)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$49,673	\$269	(\$49,404)	-99%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,226	\$261	(\$5,965)	-96%
	LAIMENIO	<b>Φ</b> 0, <b>∠∠</b> 0	φ∠UI	(40,305)	-30%

(1)	(2)	(3)	(4)	(5)	(6)
\.	(=)	FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
<u>D.</u>	Inpatient Charges	\$408,985	\$432,113	\$23,128	6%
2	Inpatient Charges Inpatient Payments	\$89,634	\$235,111	\$145,477	162%
3	Outpatient Charges	\$623,067	\$1,400,498	\$777,431	125%
4	Outpatient Granges Outpatient Payments	\$310,605	\$377,539	\$66,934	22%
5	Discharges	34	33	(1)	-3%
6	Patient Days	171	113	(58)	-34%
7	Outpatient Visits (Excludes ED Visits)	56	523	467	834%
8	Emergency Department Outpatient Visits	291	735	444	153%
9	Emergency Department Outpatient Visits  Emergency Department Inpatient Admissions	28	11	(17)	-61%
9	TOTAL INPATIENT & OUTPATIENT	20	11	(17)	-01/6
	CHARGES	\$1,032,052	\$1,832,611	\$800,559	78%
	TOTAL INPATIENT & OUTPATIENT	\$1,032,032	\$1,032,011	<b>\$000,339</b>	1070
	PAYMENTS	\$400,239	\$612,650	\$212,411	53%
	. 7111121110	ψ 100, <u>2</u> 00	<b>40.12,000</b>	Ψ= :=, : : :	3070
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				
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%

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2010	FY 2011	AMÒÚNT	%
		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	\$189,053	\$0	(\$189,053)	-100%
2	Inpatient Payments	\$38,095	\$0	(\$38,095)	-100%
3	Outpatient Charges	\$766,036	\$0	(\$766,036)	-100%
4	Outpatient Payments	\$174,987	\$0	(\$174,987)	-100%
5	Discharges	16	0	(16)	-100%
6	Patient Days	41	0	(41)	-100%
7	Outpatient Visits (Excludes ED Visits)	396	0	(396)	-100%
8	Emergency Department Outpatient Visits	354	0	(354)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$955,089	\$0	(\$955,089)	-100%
	TOTAL INPATIENT & OUTPATIENT			•	
	PAYMENTS	\$213,082	\$0	(\$213,082)	-100%
Н.	AETNA				
1	Inpatient Charges	\$319,774	\$413,189	\$93,415	29%
2	Inpatient Payments	\$56,326	\$163,128	\$106,802	190%
3	Outpatient Charges	\$1,523,689	\$1,768,925	\$245,236	16%
4	Outpatient Payments	\$361,766	\$396,893	\$35,127	10%
5	Discharges	19	33	14	74%
6	Patient Days	75	109	34	45%
7	Outpatient Visits (Excludes ED Visits)	638	818	180	28%
8	Emergency Department Outpatient Visits	663	646	(17)	-3%
9	Emergency Department Inpatient Admissions	14	16	2	14%
	TOTAL INPATIENT & OUTPATIENT		-		
	CHARGES	\$1,843,463	\$2,182,114	\$338,651	18%
	TOTAL INPATIENT & OUTPATIENT	ų ,	· , · ,	* ,	
	PAYMENTS	\$418,092	\$560,021	\$141,929	34%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$3,092,959	\$4,424,570	\$1,331,611	43%
	TOTAL INPATIENT CHARGES  TOTAL INPATIENT PAYMENTS	\$868,441	\$2,035,784	\$1,167,343	134%
	TOTAL INFATIENT FAIMENTS  TOTAL OUTPATIENT CHARGES	\$6,442,304			13%
	TOTAL OUTPATIENT CHARGES TOTAL OUTPATIENT PAYMENTS		\$7,254,770	\$812,466	
		\$1,832,958	\$1,867,045	\$34,087	2%
	TOTAL DISCHARGES	327	427	100	31%
	TOTAL PATIENT DAYS	1,034	1,501	467	45%
	TOTAL OUTPATIENT VISITS	0.707	2.042	450	407
	(EXCLUDES ED VISITS)	3,767	3,919	152	4%
	TOTAL EMERGENCY DEPARTMENT	0.040	2.005	407	Fo/
	OUTPATIENT VISITS	2,948	3,085	137	5%
	TOTAL EMERGENCY DEPARTMENT			44.5	
	INPATIENT ADMISSIONS	78	181	103	132%
	TOTAL INPATIENT & OUTPATIENT	40 505 005	<b>A</b> 44 <b>6-2 2 3 3</b>	00 / / / 0==	
	CHARGES	\$9,535,263	\$11,679,340	\$2,144,077	22%
	TOTAL INPATIENT & OUTPATIENT	#0 <b>=</b> 04 000	<b>#0.000.000</b>	64 664 465	4.00
	PAYMENTS	\$2,701,399	\$3,902,829	\$1,201,430	44%

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

	JOHNSON MEM	MORIAL MEDICAL CENT	TER, INC.		
	TWELVE	MONTHS ACTUAL FILI	NG		
		FISCAL YEAR 2011			
	REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION				
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	<u>ASSETS</u>				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$5,926,275	\$1,301,545	(\$4,624,730)	-78%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$11,163,874	\$11,509,996	\$346,122	3%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,154,583	\$1,216,495	\$61,912	5%
8	Prepaid Expenses	\$1,660,331	\$1,312,590	(\$347,741)	-21%
9	Other Current Assets	\$146,659	\$130,809	(\$15,850)	-11%
	Total Current Assets	\$20,051,722	\$15,471,435	(\$4,580,287)	-23%
		. , ,	, ,	, , , ,	
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$4,521,816	\$4,009,963	(\$511,853)	-11%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
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	ΨΟ	ΨΟ	ΨΟ	070
	Limited:	\$4,521,816	\$4,009,963	(\$511,853)	-11%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$3,065,208	\$3,025,491	(\$39,717)	-1%
7	Other Noncurrent Assets	\$1,440,949	\$1,199,389	(\$241,560)	-17%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$88,785,708	\$89,090,624	\$304,916	0%
2	Less: Accumulated Depreciation	\$49,297,688	\$53,104,766	\$3,807,078	\$0
	Property, Plant and Equipment, Net	\$39,488,020	\$35,985,858	(\$3,502,162)	-9%
3	Construction in Progress	\$0	\$0	\$0	0%
	Total Net Fixed Assets	\$39,488,020	\$35,985,858	(\$3,502,162)	-9%
		7.3,.32,02	Ţ23, <b>233</b> ,230	(+-,,)	

	JOHNSON MEN	IORIAL MEDICAL CENT	ER, INC.		
	TWELVE	MONTHS ACTUAL FILIN	IG		
		FISCAL YEAR 2011			
	REPORT 300 - HOSPI	TAL BALANCE SHEET I	NFORMATION		
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6) %
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$6,978,741	\$5,573,094	(\$1,405,647)	-20%
2	Salaries, Wages and Payroll Taxes	\$4,253,297	\$2,694,192	(\$1,559,105)	-37%
3	Due To Third Party Payers	\$1,323,239	\$1,559,803	\$236,564	18%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$1,401,467	\$1,221,003	(\$180,464)	-13%
7	Other Current Liabilities	\$6,980,254	\$4,963,552	(\$2,016,702)	-29%
	Total Current Liabilities	\$20,936,998	\$16,011,644	(\$4,925,354)	-24%
В.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$31,240,361	\$29,637,852	(\$1,602,509)	-5%
	Total Long Term Debt	\$31,240,361	\$29,637,852	(\$1,602,509)	-5%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$9,157,863	\$8,546,856	(\$611,007)	-7%
	Total Long Term Liabilities	\$40,398,224	\$38,184,708	(\$2,213,516)	-5%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$10,661,133	\$10,661,133	0%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$2,894,449	(\$9,697,651)	(\$12,592,100)	-435%
2	Temporarily Restricted Net Assets	\$40,979	\$352,758	\$311,779	761%
3	Permanently Restricted Net Assets	\$4,297,065	\$4,179,544	(\$117,521)	-3%
	Total Net Assets	\$7,232,493	(\$5,165,349)	(\$12,397,842)	-171%
	Total Liabilities and Net Assets	\$68,567,715	\$59,692,136	(\$8,875,579)	-13%

		ORIAL MEDICAL C MONTHS ACTUAL I	•		
	REPORT 350 - HOSPITAL ST	FISCAL YEAR 2011		MATION	
(4)					(6)
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$194,467,507	\$191,420,507	(\$3,047,000)	-2%
2	Less: Allowances	\$104,995,694	\$102,132,113	(\$2,863,581)	-3%
3	Less: Charity Care	\$323,775	\$491,100	\$167,325	52%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$89,148,038	\$88,797,294	(\$350,744)	0%
5	Other Operating Revenue	\$1,507,077	\$965,605	(\$541,472)	-36%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
- 0	Total Operating Revenue	\$90,655,115	\$89,762,899	(\$892,216)	-1%
	Total Operating November	ψ30,000,110	ψ00,1 02,000	(\$002,210)	.,
В.	Operating Expenses:				
1	Salaries and Wages	\$47,121,431	\$46,308,939	(\$812,492)	-2%
2	Fringe Benefits	\$12,107,097	\$9,658,911	(\$2,448,186)	-20%
3	Physicians Fees	\$658,322	\$493,797	(\$164,525)	-25%
4	Supplies and Drugs	\$9,310,163	\$8,817,803	(\$492,360)	-5%
5	Depreciation and Amortization	\$4,439,184	\$4,470,435	\$31,251	1%
6	Bad Debts	\$3,604,330	\$2,836,552	(\$767,778)	-21%
7	Interest	\$898,164	\$2,007,104	\$1,108,940	123%
8	Malpractice	\$788,038	\$729,896	(\$58,142)	-7%
9	Other Operating Expenses	\$18,376,434	\$17,666,404	(\$710,030)	-4%
	Total Operating Expenses	\$97,303,163	\$92,989,841	(\$4,313,322)	-4%
	Income/(Loss) From Operations	(\$6,648,048)	(\$3,226,942)	\$3,421,106	-51%
C.	Non-Operating Revenue:				
1	Income from Investments	\$174,881	\$118,937	(\$55,944)	-32%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$33,667,144	\$1,087,038	(\$32,580,106)	-97%
	Total Non-Operating Revenue	\$33,842,025	\$1,205,975	(\$32,636,050)	-96%
	Excess/(Deficiency) of Revenue Over Expenses				
	(Before Other Adjustments)	\$27,193,977	(\$2,020,967)	(\$29,214,944)	-107%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$27,193,977	(\$2,020,967)	(\$29,214,944)	-107%

# JOHNSON MEMORIAL MEDICAL CENTER, INC.

# 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	<u>FY 2009</u>	FY 2010	<u>FY 2011</u>
A.	Parent Corporation Statement of Operations Summary			
1	Net Patient Revenue	\$86,692,181	\$89,148,038	\$88,797,294
2	Other Operating Revenue	6,489,182	1,507,077	965,605
3	Total Operating Revenue	\$93,181,363	\$90,655,115	\$89,762,899
4	Total Operating Expenses	98,500,073	97,303,163	92,989,841
5	Income/(Loss) From Operations	(\$5,318,710)	(\$6,648,048)	(\$3,226,942)
6	Total Non-Operating Revenue	(672,962)	33,842,025	1,205,975
7	Excess/(Deficiency) of Revenue Over Expenses	(\$5,991,672)	\$27,193,977	(\$2,020,967)
В.	Parent Corporation Profitability Summary			
1	Parent Corporation Operating Margin	-5.75%	-5.34%	-3.55%
2	Parent Corporation Non-Operating Margin	-0.73%	27.18%	1.33%
3	Parent Corporation Total Margin	-6.48%	21.84%	-2.22%
4	Income/(Loss) From Operations	(\$5,318,710)	(\$6,648,048)	(\$3,226,942)
5	Total Operating Revenue	\$93,181,363	\$90,655,115	\$89,762,899
6	Total Non-Operating Revenue	(\$672,962)	\$33,842,025	\$1,205,975
7	Total Revenue	\$92,508,401	\$124,497,140	\$90,968,874
8	Excess/(Deficiency) of Revenue Over Expenses	(\$5,991,672)	\$27,193,977	(\$2,020,967)
C.	Parent Corporation Net Assets Summary			
1	Parent Corporation Unrestricted Net Assets	(\$16,166,149)	\$2,894,449	-\$9,697,651
2	Parent Corporation Total Net Assets	(\$14,868,343)	\$7,232,493	(\$5,165,349)
3	Parent Corporation Change in Total Net Assets	(\$8,448,356)	\$22,100,836	(\$12,397,842)
4	Parent Corporation Change in Total Net Assets %	231.6%	-148.6%	-171.4%

# JOHNSON MEMORIAL MEDICAL CENTER, INC.

# TWELVE MONTHS ACTUAL FILING

# FISCAL YEAR 2011

# **REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS**

(1)	(2)	(3)	(4)	(5)	
		ACTUAL	ACTUAL	ACTUAL <u>FY 2011</u>	
LINE	DESCRIPTION	FY 2009	FY 2010		
D.	Liquidity Measures Summary				
1	<u>Current Ratio</u>	0.47	0.96	0.97	
2	Total Current Assets	\$21,329,107	\$20,051,722	\$15,471,435	
3	Total Current Liabilities	\$45,854,071	\$20,936,998	\$16,011,644	
4	Days Cash on Hand	21	23	5	
5	Cash and Cash Equivalents	\$5,343,494	\$5,926,275	\$1,301,545	
6	Short Term Investments	0	0	0	
7	Total Cash and Short Term Investments	\$5,343,494	\$5,926,275	\$1,301,545	
8	Total Operating Expenses	\$98,500,073	\$97,303,163	\$92,989,841	
9	Depreciation Expense	\$4,295,301	\$4,439,184	\$4,470,435	
10	Operating Expenses less Depreciation Expense	\$94,204,772	\$92,863,979	\$88,519,406	
11	Days Revenue in Patient Accounts Receivable	51	40	41	
12	Net Patient Accounts Receivable	\$ 12,328,784	\$ 11,163,874	\$ 11,509,996	
13	Due From Third Party Payers	\$0	\$0	\$0	
14	Due To Third Party Payers	\$304,390	\$1,323,239	\$1,559,803	
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 12,024,394	\$ 9,840,635	\$ 9,950,193	
16	Total Net Patient Revenue	\$86,692,181	\$89,148,038	\$88,797,294	
17	Average Payment Period	178	82	66	
18	Total Current Liabilities	\$45,854,071	\$20,936,998	\$16,011,644	
19	Total Operating Expenses	\$98,500,073	\$97,303,163	\$92,989,841	
20	Depreciation Expense	\$4,295,301	\$4,439,184	\$4,470,435	
21	Total Operating Expenses less Depreciation Expense	\$94,204,772	\$92,863,979	\$88,519,406	

#### JOHNSON MEMORIAL MEDICAL CENTER, INC. **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 E. Solvency Measures Summary 10.5 **Equity Financing Ratio** (21.0)(8.7)Total Net Assets (\$14,868,343) \$7,232,493 (\$5,165,349)Total Assets \$70,744,892 \$68,567,715 \$59,692,136 4 **Cash Flow to Total Debt Ratio** (2.2)60.6 5.4 5 Excess/(Deficiency) of Revenues Over Expenses (\$5,991,672) \$27,193,977 (\$2,020,967)6 Depreciation Expense \$4,295,301 \$4,439,184 \$4,470,435 Excess of Revenues Over Expenses and Depreciation Expense (\$1,696,371) \$31,633,161 \$2,449,468 \$16,011,644 Total Current Liabilities \$45,854,071 \$20,936,998 Total Long Term Debt \$31,986,240 \$31,240,361 \$29,637,852 10 Total Current Liabilities and Total Long Term Debt \$77,840,311 \$52,177,359 \$45,649,496 11 Long Term Debt to Capitalization Ratio 186.9 81.2 121.1 12 Total Long Term Debt \$31,986,240 \$29,637,852 \$31,240,361 13 Total Net Assets (\$14,868,343)\$7,232,493 (\$5,165,349)14 Total Long Term Debt and Total Net Assets \$24,472,503 \$17,117,897 \$38,472,854

		JOHNS	ON MEMORIAL HO	SPITAL				
			MONTHS ACTUAL					
			FISCAL YEAR 20	11				
	REPORT 40	0 - HOSPITAL IN	PATIENT BED UTI	LIZATION BY DE	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>	<u># PATIENT</u>		BEDS (A)	<u>BEDS</u>	BEDS (A)	<u>BEDS</u>
1	Adult Medical/Surgical	9,961	2,220	2,232	42	56	65.0%	48.7%
2	ICU/CCU (Excludes Neonatal ICU)	1.149	105	0	5	7	63.0%	45.0%
	ICO/CCO (Excludes Neorialai ICO)	1,149	103	U	5		03.0%	45.0%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
	Psychiatric: Ages 18+	3,492	562	549	17	20	56.3%	47.8%
	TOTAL PSYCHIATRIC	3,492	562	549	17	20	56.3%	47.8%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	640	245	254	4	6	43.8%	29.2%
7	Newborn	548	241	238	4	6	37.5%	25.0%
<u> </u>	N	0		0			0.00/	0.00/
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
-	r ediatric	U	U	U	U	0	0.076	0.076
10	Other	0	0	0	0	0	0.0%	0.0%
	Carlor				0		0.070	0.070
	TOTAL EXCLUDING NEWBORN	15,242	3,027	3,035	68	89	61.4%	46.9%
		-,	- / -	,				
	TOTAL INPATIENT BED UTILIZATION	15,790	3,268	3,273	72	95	60.1%	45.5%
				·				
	TOTAL INPATIENT REPORTED YEAR	15,790	3,268	3,273	72	95	60.1%	45.5%
	TOTAL INPATIENT PRIOR YEAR	17,737	0	0	72	95	67.5%	51.2%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-1,947	3,268	3,273	0	0	-7.4%	-5.6%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-11%	0%	0%	0%	0%	-11%	-11%
	Total Licensed Beds and Bassinets	101						
,								
(A) T	his number may not exceed the number of avail	able beds for each	cn department or in	i total.				

		ON MEMORIAL HOS			
		FISCAL YEAR 2011			
	REPORT 450 - HOSPITAL INPATIENT AN	ID OUTPATIENT OTH	IER SERVICES UTIL	IZATION AND FTE	s
	(2)	(0)	(0)	(=)	(2)
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
			•		
	CT Scans (A)				
1	Inpatient Scans	2,274	1,890	-384	-17%
2	Outpatient Scans (Excluding Emergency Department Scans)	2,187	1,824	-363	-17%
	Emergency Department Scans	3,860	3,887	27	1%
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	8,321	7,601	-720	-9%
	MRI Scans (A)	107	120	77	200/
<del>- '-</del>	Inpatient Scans Outpatient Scans (Excluding Emergency Department	197	120	-77	-39%
	Scans)	1,161	1,376	215	19%
3	Emergency Department Scans	20	15	-5	-25%
4	Other Non-Hospital Providers' Scans (A)  Total MRI Scans	0	0 <b>1,511</b>	0 <b>133</b>	0%
	Total MRI Scans	1,378	1,511	133	10%
C.	PET Scans (A)				
1	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department				
	Scans)	0	0	0	0%
	Emergency Department Scans Other Non-Hospital Providers' Scans (A)	0	0	0	0% 0%
	Total PET Scans	0	0	0	0%
		-	-	-	
D.	PET/CT Scans (A)				
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
-	(A) If the Hospital is not the primary provider of the	se scans the Hosnit	al must obtain the fi	scal year	
	volume of each of these types of scans from the	e primary provider of	the scans.	scai yeai	
	7,	, , , , , , , , , , , , , , , , , , ,			
	Linear Accelerator Procedures				
	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures Total Linear Accelerator Procedures	0	<u> </u>	<u>0</u>	0% <b>0</b> %
	Total Ellion According 1 100000165	<u>U</u>	<u> </u>	<u> </u>	J /6
F.	Cardiac Catheterization Procedures				
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	<u>0</u>	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G.	Cardiac Angioplasty Procedures				
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
-	Total Cardiac Angioplasty Procedures	0	0	0	0%
Н.	Electrophysiology Studies				
	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
<b>.</b>	Curvinal Drago dure				
	Surgical Procedures Inpatient Surgical Procedures	646	578	-68	-11%
	Outpatient Surgical Procedures	2,297	2,283	-08 -14	-11%
	Total Surgical Procedures	2,943	2,861	-82	-3%
J.	Endoscopy Procedures				

		ON MEMORIAL HOSPI			
	TWELVE	MONTHS ACTUAL FIL	LING		
		FISCAL YEAR 2011			
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTHE	R SERVICES UTILI	ZATION AND FTES	i
(4)	(2)	(2)	(4)	(E)	(6)
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
IINF	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
	<u>PEGOTAL FION</u>	11.2010	20	<u>DILI EIGE</u>	<u>DILLERCE INCE</u>
1	Inpatient Endoscopy Procedures	165	130	-35	-21%
	Outpatient Endoscopy Procedures	2,061	1,809	-252	-12%
	Total Endoscopy Procedures	2,226	1,939	-287	-13%
			_	_	
	Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	2,178	2,686	508	23%
2	Emergency Room Visits: Treated and Discharged	17,243	17,435	192	1%
	Total Emergency Room Visits	19,421	20,121	700	4%
L.	Hospital Clinic Visits				
	Substance Abuse Treatment Clinic Visits	0	0	0	0%
	Dental Clinic Visits	0	0	0	0%
	Psychiatric Clinic Visits	0	0	0	0%
	Medical Clinic Visits	0	0	0	0%
	Specialty Clinic Visits	0	0	0	0%
	Total Hospital Clinic Visits	0	0	0	0%
М.	Other Hospital Outpatient Visits				
	Rehabilitation (PT/OT/ST)	871	1,180	309	35%
	Cardiology	1,370	1,180	-45	-39
	Chemotherapy	1,023	1,427	404	39%
	Gastroenterology	1,291	1,287	-4	09
5	Other Outpatient Visits	79,181	75,544	-3,637	-5%
	Total Other Hospital Outpatient Visits	83,736	80,763	-2,973	-4%
	Total other Proophal outpations viole	30,100	30,1 30	2,0.0	.,
	Harris Edit Time Emiliated Emilia				
	Hospital Full Time Equivalent Employees Total Nursing FTEs	125.4	119.6	-5.8	FO
	Total Physician FTEs	5.9	0.0	-5.8 -5.9	-5% -100%
3	Total Non-Nursing and Non-Physician FTEs	344.4	343.9	-0.5	
<u>ა</u>	Total Hospital Full Time Equivalent Employees	344.4 <b>475.7</b>	343.9 <b>463.5</b>	-0.5 -12.2	0% - <b>3%</b>
	Total Hospital Full Tille Equivalent Employees	413.1	403.3	-12.2	-37

#### JOHNSON MEMORIAL 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** Johnson Memorial Hospital 937 804 -133 -14% Offsite Surgery Department - Enfield, CT 1,360 1,479 2 119 9% Total Outpatient Surgical Procedures(A) 2,297 2,283 -14 -1% **Outpatient Endoscopy Procedures** В. Johnson Memorial Hospital 1,539 1,244 -295 -19% Offsite Surgical Department - Enfield, CT 522 565 43 8% Total Outpatient Endoscopy Procedures(B) 2,061 1,809 -252 -12% **Outpatient Hospital Emergency Room Visits** C. 1 Johnson Memorial Hospital 17,243 17,435 192 1% Total Outpatient Hospital Emergency Room Visits( 17,243 17,435 192 1% (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

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS							
		ACTUAL	ACTUAL	AMOUNT	%			
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE			
	DATA DV MA IOD DAVED CATECODY							
I.	DATA BY MAJOR PAYER CATEGORY							
A.	MEDICARE							
	MEDICARE INPATIENT							
	INPATIENT ACCRUED CHARGES	\$42,815,475	\$39,549,056	(\$3,266,419)	-8%			
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,503,969	\$14,745,330	\$241,361	2%			
	INPATIENT PAYMENTS / INPATIENT CHARGES	33.88%	37.28%	3.41%	10%			
	DISCHARGES	1,733	1,616	(117)	-7%			
	CASE MIX INDEX (CMI)	1.35200	1.36050	0.00850	1%			
	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,343.01600	2,198.56800	(144.44800)	-6%			
	INPATIENT ACCRUED PAYMENT / CMAD	\$6,190.30	\$6,706.79	\$516.49	8%			
	PATIENT DAYS	10,783	9,180	(1,603)	-15%			
_	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,345.08	\$1,606.25	\$261.17	19%			
10	AVERAGE LENGTH OF STAY	6.2	5.7	(0.5)	-9%			
	MEDICARE OUTPATIENT							
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$26,348,240	\$29,174,803	\$2,826,563	11%			
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,013,075	\$7,285,506	\$272,431	4%			
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.62%	24.97%	-1.64%	-6%			
14	OUTPATIENT CHARGES / INPATIENT CHARGES	61.54%	73.77%	12.23%	20%			
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,066.47188	1,192.10131	125.62944	12%			
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,575.96	\$6,111.48	(\$464.48)	-7%			
	-							
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)							
17	TOTAL ACCRUED CHARGES	\$69,163,715	\$68,723,859	(\$439,856)	-1%			
18	TOTAL ACCRUED PAYMENTS	\$21,517,044	\$22,030,836	\$513,792	2%			
19	TOTAL ALLOWANCES	\$47,646,671	\$46,693,023	(\$953,648)	-2%			

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

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
		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	\$17,036,384	\$14,748,364	(\$2,288,020)	-13%		
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$9,287,493	\$7,431,564	(\$1,855,929)	-20%		
3	INPATIENT PAYMENTS / INPATIENT CHARGES	54.52%	50.39%	-4.13%	-8%		
4	DISCHARGES	1,143	979	(164)	-14%		
5	CASE MIX INDEX (CMI)	1.16770	1.02030	(0.14740)	-13%		
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,334.68110	998.87370	(335.80740)	-25%		
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,958.59	\$7,439.94	\$481.36	7%		
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$768.29)	(\$733.16)	\$35.13	-5%		
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,025,418)	(\$732,330)	\$293,089	-29%		
	PATIENT DAYS	4,527	3,704	(823)	-18%		
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,051.58	\$2,006.36	(\$45.22)	-2%		
12	AVERAGE LENGTH OF STAY	4.0	3.8	(0.2)	-4%		
				(- /			
	NON-GOVERNMENT OUTPATIENT						
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$46,982,949	\$43,705,243	(\$3,277,706)	-7%		
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$25,624,016	\$23,803,326	(\$1,820,690)	-7%		
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	54.54%	54.46%	-0.08%	0%		
-	OUTPATIENT CHARGES / INPATIENT CHARGES	275,78%	296.34%		7%		
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,152.16602	2,901.16469	(251.00133)	-8%		
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,129.02	\$8,204.75	\$75.73	1%		
	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$1,553.06)	(\$2,093.27)	(\$540.21)	35%		
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$4,895,502)	(\$6,072,910)	(\$1,177,407)	24%		
		(\$1,000,002)	(\$0,0.2,0.0)	(\$1,111,101)	2.70		
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)						
	TOTAL ACCRUED CHARGES	\$64,019,333	\$58,453,607	(\$5,565,726)	-9%		
22	TOTAL ACCRUED PAYMENTS	\$34,911,509	\$31,234,890	(\$3,676,619)	-11%		
23	TOTAL ALLOWANCES	\$29,107,824	\$27,218,717	(\$1,889,107)	-6%		
		ψ20,101,021	Ψ2.,2.0,	(ψ1,000,101)	0,0		
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$5,920,921)	(\$6,805,239)	(\$884,318)	15%		
		(\$0,020,021)	(\$0,000,200)	(\$66.16.16)	1070		
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA						
	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$64,018,828	\$58,453,607	(\$5,565,221)	-9%		
	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$35,208,809	\$31,234,890	(\$3,973,919)	-11%		
20	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	ψου,200,000	ψ01,204,000	(ψο,στο,στο)	-1170		
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$28,810,019	\$27,218,717	(\$1,591,302)	-6%		
	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.00%	46.56%	1.56%	-076		

# 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				
	INPATIENT ACCRUED CHARGES	\$734,342	\$653,864	(\$80,478)	-119
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$62,740	\$55,783	(\$6,957)	-117
	INPATIENT PAYMENTS / INPATIENT CHARGES	8.54%	8.53%	-0.01%	-117
	DISCHARGES	46	52	-0.01%	13%
	CASE MIX INDEX (CMI)	0.92270	0.92350	0.00080	0%
	CASE MIX ADJUSTED DISCHARGES (CMAD)	42.44420	48.02200	5.57780	13%
	INPATIENT ACCRUED PAYMENT / CMAD	\$1,478.18	\$1,161.61	(\$316.56)	-219
	NON-GOVERNMENT - UNINSURED IP PMT / CMAD		\$6,278.33	(\$316.56) \$797.92	15%
	MEDICARE - UNINSURED IP PMT / CMAD	\$5,480.41 \$4,712.12	\$5,545.17	\$833.05	18%
-	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,712.12	\$5,545.17	\$66.288	33%
	PATIENT DAYS	\$200,002	\$200,290 169	\$66,288 (8)	-5%
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$354.46	\$330.08	(\$24.39)	-5% -7%
	AVERAGE LENGTH OF STAY	3.8	3.3	(\$24.39)	-16%
13	AVERAGE LENGTH OF STAT	3.8	3.3	(0.6)	-107
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,311,753	\$1,938,061	(\$373,692)	-16%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$158,606	\$147,470	(\$11,136)	-7%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	6.86%	7.61%	0.75%	119
17	OUTPATIENT CHARGES / INPATIENT CHARGES	314.81%	296.40%	-18.40%	-6%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	144.81078	154.12864	9.31786	6%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,095.26	\$956.80	(\$138.47)	-13%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$7,033.75	\$7,247.95	\$214.20	3%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,480.69	\$5,154.68	(\$326.01)	-6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$793,664	\$794,484	\$821	0%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$3,046,095	\$2,591,925	(\$454,170)	-15%
	TOTAL ACCRUED PAYMENTS	\$221.346	\$203,253	(\$18,093)	-197
25	TOTAL ALLOWANCES	\$2,824,749	\$2,388,672	(\$436,077)	-15%
20		Ψ2,324,143	Ψ2,000,072	(ψ-100,011)	-107
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$993,666	\$1,060,775	\$67,109	79

## 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	\$6,757,493	\$8,565,373	\$1,807,880	279
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$2,056,980	\$2,558,626	\$501,646	249
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.44%	29.87%	-0.57%	-2%
4	DISCHARGES	509	643	134	26%
5	CASE MIX INDEX (CMI)	0.85540	0.84913	(0.00627)	-19
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	435.39860	545.99059	110.59199	25%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,724.36	\$4,686.21	(\$38.15)	-19
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,234.23	\$2,753.73	\$519.51	239
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,465.94	\$2,020.58	\$554.64	389
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$638,267	\$1,103,217	\$464,950	739
11	PATIENT DAYS	2,146	2,813	667	31%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$958.52	\$909.57	(\$48.95)	-5%
13	AVERAGE LENGTH OF STAY	4.2	4.4	0.2	49
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$8,967,980	\$12,050,752	\$3,082,772	349
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,213,768	\$2,958,028	\$744,260	349
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.69%	24.55%	-0.14%	-19
17	OUTPATIENT CHARGES / INPATIENT CHARGES	132.71%	140.69%	7.98%	69
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	675.50226	904.64636	229.14410	349
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,277.22	\$3,269.82	(\$7.40)	0%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$4,851.80	\$4,934.93	\$83.13	29
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,298.74	\$2,841.67	(\$457.08)	-149
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,228,307	\$2,570,702	\$342,395	15%
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$15,725,473	\$20,616,125	\$4,890,652	31%
24	TOTAL ACCRUED PAYMENTS	\$4,270,748	\$5,516,654	\$1,245,906	29%
25	TOTAL ALLOWANCES	\$11,454,725	\$15,099,471	\$3,644,746	32%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,866,574	\$3,673,919	\$807,345	28%

## 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
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$712,436	\$0	(\$712,436)	-100%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$147,934	\$0	(\$147,934)	-100%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	20.76%	0.00%	-20.76%	-100%
4	DISCHARGES	32	-	(32)	-100%
5	CASE MIX INDEX (CMI)	1.04690	0.00000	(1.04690)	-100%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	33.50080	0.00000	(33.50080)	-100%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,415.83	\$0.00	(\$4,415.83)	-100%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$2,542.75	\$7,439.94	\$4,897.19	193%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$1,774.46	\$6,706.79	\$4,932.32	2789
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$59,446	\$0	(\$59,446)	-100%
11	PATIENT DAYS	202	0	(202)	-100%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$732.35	\$0.00	(\$732.35)	-100%
13	AVERAGE LENGTH OF STAY	6.3	-	(6.3)	-100%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$996,601	\$0	(\$996,601)	-100%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$176,544	\$0	(\$176,544)	-100%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.71%	0.00%	-17.71%	-100%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	139.89%	0.00%	-139.89%	-100%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	44.76364	0.00000	(44.76364)	-100%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,943.91	\$0.00	(\$3,943.91)	-100%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$4,185.10	\$8,204.75	\$4,019.64	96%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$2,632.04	\$6,111.48	\$3,479.44	1329
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$117,820	\$0	(\$117,820)	-100%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$1,709,037	\$0	(\$1,709,037)	-1009
24	TOTAL ACCRUED PAYMENTS	\$324,478	\$0	(\$324,478)	-1009
25	TOTAL ALLOWANCES	\$1,384,559	\$0	(\$1,384,559)	-100%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$177,266	\$0	(\$177,266)	-100%
<b>∠</b> b	TOTAL OTHER WIEDIGAL ASSISTANCE OPPER LIMIT UNDERPAYMENT	\$177,266	\$0	(\$177,266)	-100%

# 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
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDI	CAL ASSISTANCE)			
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$7,469,929	\$8,565,373	\$1,095,444	15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$2,204,914	\$2,558,626	\$353,712	16%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	29.52%	29.87%	0.35%	1%
4	DISCHARGES	541	643	102	19%
5	CASE MIX INDEX (CMI)	0.86673	0.84913	(0.01760)	-2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	468.89940	545.99059	77.09119	16%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,702.32	\$4,686.21	(\$16.11)	0%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,256.27	\$2,753.73	\$497.47	22%
_	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,487.98	\$2,020.58	\$532.60	36%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$697,713	\$1,103,217	\$405,504	58%
	PATIENT DAYS	2,348	2,813	465	20%
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$939.06	\$909.57	(\$29.49)	-3%
13	AVERAGE LENGTH OF STAY	4.3	4.4	0.0	1%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$9,964,581	\$12,050,752	\$2,086,171	21%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,390,312	\$2,958,028	\$567,716	24%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.99%	24.55%	0.56%	2%
	OUTPATIENT CHARGES / INPATIENT CHARGES	133.40%	140.69%	7.30%	5%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	720.26591	904.64636	184.38045	26%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,318.65	\$3,269.82	(\$48.84)	-1%
	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,810.37	\$4,934.93	\$124.56	3%
	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,257.31	\$2,841.67	(\$415.64)	-13%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,346,127	\$2,570,702	\$224,575	10%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$17,434,510	\$20,616,125	\$3,181,615	18%
24	TOTAL ACCRUED PAYMENTS	\$4,595,226	\$5,516,654	\$921,428	20%
25	TOTAL ALLOWANCES	\$12,839,284	\$15,099,471	\$2,260,187	18%

# 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
	CHAMPIE / TRICADE				
G.	CHAMPUS / TRICARE				
	CHAMPUS / TRICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$253,020	\$400,272	\$147,252	58%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$96,517	\$152,747	\$56,230	58%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	38.15%	38.16%	0.01%	0%
4	DISCHARGES	20	30	10	50%
5	CASE MIX INDEX (CMI)	0.79500	0.91880	0.12380	16%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	15.90000	27.56400	11.66400	73%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,070.25	\$5,541.54	(\$528.71)	-9%
8	PATIENT DAYS	79	93	14	18%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,221.73	\$1,642.44	\$420.71	34%
10	AVERAGE LENGTH OF STAY	4.0	3.1	(0.9)	-22%
	CHAMPUS / TRICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$509,289	\$588,682	\$79,393	16%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$215,804	\$236,977	\$21,173	10%
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)				
13	TOTAL ACCRUED CHARGES	\$762,309	\$988,954	\$226,645	30%
14	TOTAL ACCRUED PAYMENTS	\$312,321	\$389.724	\$77.403	25%
15	TOTAL ALLOWANCES	** /*	\$599,230	\$149,242	33%
15	TOTAL ALLOWANCES	\$449,988	\$599,230	\$149,242	33%
H.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$571,177	\$1,209,809	\$638,632	112%
2	TOTAL OPERATING EXPENSES	\$67,684,735	\$61,306,385	(\$6,378,350)	-9%
	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
4	CHARITY CARE (CHARGES)	\$280,655	\$465,816	\$185,161	66%
	BAD DEBTS (CHARGES)	\$2,544,094	\$2,141,072	(\$403,022)	-16%
	UNCOMPENSATED CARE (CHARGES)	\$2,824,749	\$2,141,072	(\$217,861)	-16%
7	COST OF UNCOMPENSATED CARE	\$2,824,749	\$2,606,888	(\$217,861)	-8% -10%
	COST OF UNCONFENDATED CARE	\$1,097,379	φ991,105	(\$106,274)	-10%
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)				
8	TOTAL ACCRUED CHARGES	\$17,434,510	\$20,616,125	\$3,181,615	18%
9	TOTAL ACCRUED PAYMENTS	\$4,595,226	\$5,516,654	\$921,428	20%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$6,773,086	\$7,837,986	\$1,064,901	16%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,177,860	\$2,321,332	\$143,473	7%

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## 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				
	ACORECATE DATA				
Α.	TOTALS - ALL PAYERS				
1	TOTAL INPATIENT CHARGES	\$67,574,808	\$63,263,065	(\$4,311,743)	-6'
2	TOTAL INPATIENT PAYMENTS	\$26,092,893	\$24,888,267	(\$1,204,626)	-5
3	TOTAL INPATIENT PAYMENTS / CHARGES	38.61%	39.34%	0.73%	2
4	TOTAL DISCHARGES	3,437	3,268	(169)	-5'
5	TOTAL CASE MIX INDEX	1.21108	1.15392	(0.05717)	-5
6	TOTAL CASE MIX ADJUSTED DISCHARGES	4,162.49650	3,770.99629	(391.50021)	-9
7	TOTAL OUTPATIENT CHARGES	\$83,805,059	\$85,519,480	\$1,714,421	2'
8	OUTPATIENT CHARGES / INPATIENT CHARGES	124.02%	135.18%	11.16%	9'
9	TOTAL OUTPATIENT PAYMENTS	\$35,243,207	\$34,283,837	(\$959,370)	-3'
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	42.05%	40.09%	-1.96%	-5'
11	TOTAL CHARGES	\$151,379,867	\$148,782,545	(\$2,597,322)	-2'
	TOTAL PAYMENTS	\$61,336,100	\$59,172,104	(\$2,163,996)	-4
	TOTAL PAYMENTS / TOTAL CHARGES	40.52%	39.77%	-0.75%	-2
	PATIENT DAYS	17,737	15,790	(1,947)	-11
В.	TOTALS - ALL GOVERNMENT PAYERS				
1	INPATIENT CHARGES	\$50.538.424	\$48.514.701	(\$2.023.723)	-4
2	INPATIENT PAYMENTS	\$16,805,400	\$17,456,703	\$651,303	4
	GOVT. INPATIENT PAYMENTS / CHARGES	33.25%	35.98%	2.73%	8
4	DISCHARGES	2.294	2,289	(5)	0
5	CASE MIX INDEX	1.23270	1.21106	(0.02164)	-2
6	CASE MIX ADJUSTED DISCHARGES	2,827.81540	2,772.12259	(55.69281)	-2
7	OUTPATIENT CHARGES	\$36,822,110	\$41,814,237	\$4,992,127	14
8	OUTPATIENT CHARGES / INPATIENT CHARGES	72.86%	86.19%	13.33%	18
9	OUTPATIENT PAYMENTS	\$9,619,191	\$10,480,511	\$861,320	9
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.12%	25.06%	-1.06%	-4
11	TOTAL CHARGES	\$87,360,534	\$90,328,938	\$2,968,404	3
12	TOTAL PAYMENTS	\$26,424,591	\$27,937,214	\$1,512,623	6
13	TOTAL PAYMENTS / CHARGES	30.25%	30.93%	0.68%	2
	PATIENT DAYS	13,210	12,086	(1,124)	-9
15	TOTAL GOVERNMENT DEDUCTIONS	\$60,935,943	\$62,391,724	\$1,455,781	2
C.	AVERAGE LENGTH OF STAY				
	MEDICARE	6.2	5.7	(0.5)	-9
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0	3.8	(0.2)	-4
	UNINSURED	3.8	3.3	(0.6)	-16
-	MEDICAID	4.2	4.4	0.2	4
	OTHER MEDICAL ASSISTANCE	6.3		(6.3)	-100
	CHAMPUS / TRICARE	4.0	3.1	(0.9)	-22
v	TOTAL AVERAGE LENGTH OF STAY	5.2	4.8	(0.3)	-6

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# 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
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION				
1	TOTAL CHARGES	\$151,379,867	\$148,782,545	(\$2,597,322)	-2%
2	TOTAL GOVERNMENT DEDUCTIONS	\$60,935,943	\$62,391,724	\$1,455,781	29
3	UNCOMPENSATED CARE	\$2,824,749	\$2,606,888	(\$217,861)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$28,810,019	\$27,218,717	(\$1,591,302)	-69
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	09
6	TOTAL ADJUSTMENTS	\$92,570,711	\$92,217,329	(\$353,382)	09
7	TOTAL ACCRUED PAYMENTS	\$58,809,156	\$56,565,216	(\$2,243,940)	-49
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$58,809,156	\$56,565,216	(\$2,243,940)	-49
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3884873013	0.3801871785	(0.0083001227)	-2%
11	COST OF UNCOMPENSATED CARE	\$1,097,379	\$991,105	(\$106,274)	-10%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,177,860	\$2,321,332	\$143,473	7%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	09
14	TOTAL COST OF UNCOMPENSATED CARE AND		*-	**	
	MEDICAL ASSISTANCE UNDERPAYMENT	\$3,275,239	\$3,312,438	\$37,199	19
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$2,228,307	\$2,570,702	\$342,395	15%
2	OTHER MEDICAL ASSISTANCE	\$177,266	\$0	(\$177,266)	-100%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$993,666	\$1,060,775	\$67,109	79
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,399,239	\$3,631,477	\$232,238	7%
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600				
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$0	\$619.650	\$619.650	0.00%
	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$61,336,304	\$59,791,753	(\$1,544,551)	-2.52%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$09,791,755	(\$1,544,551)	0.00%
	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$151,379,874	\$148,782,545	(\$2,597,329)	-1.72%
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$131,379,674	\$146,762,343	(\$2,597,329)	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$2,824,952	\$2,606,888	(\$218,064)	-7.72%
	GROOM: GARETROWINGSTIAL AUDITED FINANCIAL STATEMENTS	\$2,024,952	\$∠,000,888	(⊅∠10,064)	-1.1270

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SOTINE MEDICAL ASSISTANCE					
REPORT 550 - CALCULATION OF DISH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA  (1) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9		JOHNSON MEMORIAL HOSPITAL		<u> </u>	
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND  BASELINE UNDERPAYMENT DATA  (1) (2) (3) (4) (5)  ACTUAL ACTUAL PY 2010 PPER PAYMENT LIMIT AND  LINE DESCRIPTION F. ACTUAL PY 2011 DIFFERENCE  I. ACCRUED CHARGES AND PAYMENTS  A. INPATIENT ACCRUED CHARGES  A. INPATIENT ACCRUED CHARGES SELF PAY (UNINSURED)  3. 17 (20% 20% 20% 20% 20% 20% 20% 20% 20% 20%		TWELVE MONTHS ACTUAL FILING	}		
Display		FISCAL YEAR 2011			
Description		REPORT 550 - CALCULATION OF DSH UPPER PAY	MENT LIMIT AND		
ACTUAL   ACTUAL   PY 2010   PY 2011   DIFFERENCE		BASELINE UNDERPAYMENT DATA	A		
ACTUAL   ACTUAL   PY 2010   PY 2011   DIFFERENCE					
LINE DESCRIPTION	(1)	(2)	(3)	(4)	(5)
LINE DESCRIPTION			ACTUAL	ACTUAL	AMOUNT
A CRUED CHARGES AND PAYMENTS	IINE	DESCRIPTION			
NINATIENT ACCRUED CHARGES   11 ONN-GOVERNMENT (INCLUDING SELF PAY/LVINISURED)   \$17,036,384   \$14,748,384   \$13,286,68   \$18,286,68	LIIVL	DESCRIPTION	11 2010	112011	DITTERCENCE
1 NON-GOVERNMENT (INCLUDING SELE PAY / UNINSURED)	I.	ACCRUED CHARGES AND PAYMENTS			
1 NON-GOVERNMENT (INCLUDING SELE PAY / UNINSURED)					
2 MEDICAR   \$42,815,775   39,249,056   \$3,200,4				•	
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	_				
4 MEDICAID   S6.777.438					
SOUTHER MEDICAL ASSISTANCE					\$1,807,880
Total instruct of the property of the proper	_				(\$712,436)
TOTAL INPATIENT GOVERNMENT CHARGES   \$90,584.24   \$45,514,701   \$12,023.71				/	\$147,252
B. OUTPATIENT ACCRUED CHARGES   \$87,574,808   \$63,263,065   \$64,311,7	7				(\$80,478)
B. OUTPATIENT ACCRUED CHARGES   1. NON-GOVERNMENT INDCUDING SELF PAY / UNINSURED)   346,982,949   \$413,705,243   \$32,277,7   \$2,000,000   \$2,282,5   \$3,000,000   \$2,282,5   \$3,000,000   \$2,282,5   \$3,000,000   \$2,282,5   \$3,000,000   \$3,000,000   \$2,282,5   \$3,000,000   \$3,00					
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		TOTAL IN ATIENT CHANGES	φυ <i>ι</i> ,5/4,608	φυ <b>3,2</b> 03,003	(\$4,311,743)
Description   September   Se					
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   38,987-980   12,050,752   \$2,086.1     MEDICAL ASSISTANCE   \$896,601   0.0 (\$996,60   1.0 (\$99	_				(\$3,277,706)
MEDICALD   \$8,867,980   1,2,050,752   \$3,082.7					\$2,826,563
5 OTHER MEDICAL ASSISTANCE         \$996,601         0         (996,601)           6 CHAMPUS / TRICARE         \$509,289         588,682         \$573,7           7 UNINSUREO (INCLUDED IN NON-GOVERNMENT)         \$2,311,763         1,330,061         (\$373,6           1 TOTAL OUTPATIENT GOVERNMENT CHARGES         \$38,282,110         \$41,412,27         \$4,942,27           1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$64,019,333         \$58,659,690         \$51,714,4           1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$64,019,333         \$58,453,607         (\$5,565,722,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899)         (\$4,598,622,899,622,899)         (\$4,598,622,899,622,899)         (\$4,598,622,899,			· · · · · ·		\$2,086,171 \$3,082,772
6 CHAMPUS / TRICARE   \$509,289   588,682   \$733,	_				(\$996,601)
TOTAL OUTPATIENT GOVERNMENT CHARGES   \$38,822,110   \$41,814,237   \$4,992.1					\$79,393
C. TOTAL ACGRUED CHARGES   \$83,805,659   \$85,519,480   \$1,714,4	7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,311,753	1,938,061	(\$373,692)
C. TOTAL ACRUED CHARGES					\$4,992,127
1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)   \$84,019,333   \$58,453,607   \$55,6527, \$20,151,152,153   \$68,123,153		TOTAL OUTPATIENT CHARGES	\$83,805,059	\$85,519,480	\$1,714,421
1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)   \$84,019,333   \$58,453,607   \$55,6527, \$20,151,152,153   \$68,123,153	С	TOTAL ACCRUED CHARGES			
2 TOTAL MEDICARE   \$69,163,715   \$68,723,859   \$439,8   4 TOTAL MEDICAL ASSISTANCE   \$11,743.510   \$20,616,125   \$3,131,6   4 TOTAL MEDICAL ASSISTANCE   \$15,724.73   \$20,616,125   \$3,180,6   5 TOTAL OTHER MEDICAL ASSISTANCE   \$1,709,037   \$0 (\$1,709,6   5 TOTAL OTHER MEDICAL ASSISTANCE   \$1,709,037   \$2,266,6   \$2,266,6   7 TOTAL OTHARPUS / TRICARE   \$2,266,9 (\$1,269,4   \$2,266,6   \$2,269,295   \$2,464,1   \$1,701,4   \$2,269,4   \$2,269,295   \$2,464,1   \$1,701,4   \$2,269,4   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,464,1   \$2,269,295   \$2,465,1   \$2,464,1   \$2,465,295   \$2,465,1   \$2,465,295   \$2,465,1   \$2,465,295	1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$64.019.333	\$58.453.607	(\$5,565,726)
4 TOTAL MEDICAID   \$15,725,473   \$20,016,125   \$4,890.6   \$1,709.037   \$0   \$0,709.037   \$0   \$0,709.037   \$0   \$0,909.037   \$0,9					(\$439,856)
5 TOTAL OTHER MEDICAL ASSISTANCE         \$1,709,037         \$0         \$1,709,037         \$0         \$1,709,037         \$0         \$1,709,037         \$2,889,954         \$226,68         \$26,68         \$7,707AL CHAMPUS / TRUINGUED IN NON-GOVERNMENT)         \$3,046,095         \$2,591,925         \$26,64,1         \$3,746,095         \$2,591,925         \$26,64,1         \$3,746,095         \$2,591,925         \$2,664,1         \$3,746,095         \$2,591,925         \$2,664,1         \$3,746,095         \$3,746,095         \$3,287,938         \$3,666         \$3,746,1564         \$3,746,095         \$3,287,938         \$3,666         \$3,287,938         \$3,666         \$3,287,938         \$3,666         \$3,276,1564         \$3,276,095         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$3,277,405         \$					\$3,181,615
6 TOTAL CHAMPUS / TRICARE         \$762.309         \$988.964         \$226.6           7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$3.046.095         \$2.591.925         \$454.1           TOTAL GOVERNMENT CHARGES         \$87,360,534         \$90,328,938         \$2,968,4           TOTAL CHARGES         \$151,379,867         \$148,762,545         \$2,597,3           D. INPATIENT ACCRUED PAYMENTS         \$100,000         \$92,287,493         \$7,431,564         \$1,559,30           2 MEDICARE         \$14,703,399         14,745,330         \$241,3           3 MEDICARE         \$14,745,330         \$241,3           4 MEDICAID         \$2,066,890         2,558,626         \$353,7           4 MEDICAID         \$2,066,890         2,558,626         \$353,7           5 OTHER MEDICAL ASSISTANCE         \$147,334         0         \$147,334           6 CHAMPUS / TRICARE         \$96,517         \$12,747         \$56.2           7 UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$62,740         \$5,783         \$65.7           10 TALL INPATIENT GOVERNMENT PAYMENTS         \$16,805,400         \$17,456,703         \$651,3           10 TOTAL INPATIENT GOVERNMENT PAYMENTS         \$26,092,893         \$24,888,267         \$1,204,6           E. OUTPATIENT PAYMENTS         \$26,092,893					\$4,890,652
TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)					
TOTAL GOVERNMENT CHARGES   \$87,360,534   \$90,328,938   \$2,968,4					(\$454,170)
D. INPATIENT ACCRUED PAYMENTS   S. 287.493   \$7.431.564   \$1.855.9     1. NON-GOVERNIMENT (INCLUDING SELF PAY / UNINSURED)   \$9.287.493   \$7.431.564   \$1.855.9     2. MEDICARE   \$14.503.969   14.745.330   \$241.3     3. MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   \$2.204.914   2.558.626   \$353.7     4. MEDICALD   \$2.204.914   2.558.626   \$353.7     4. MEDICALD   \$2.204.914   2.558.626   \$353.7     5. OTHER MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   \$2.056.980   2.558.626   \$501.6     5. OTHER MEDICAL ASSISTANCE   \$147.934   0 (\$147.9     6. CHAMPUS / TRICARE   \$96.517   152.747   \$56.2     7. UNINSURED (INCLUDED IN NON-GOVERNMENT)   \$62.740   55.783   \$65.3     TOTAL INPATIENT GOVERNMENT PAYMENTS   \$16,805.400   \$17.456.703   \$565.3     TOTAL INPATIENT GOVERNMENT PAYMENTS   \$26,092.893   \$24,888.267   \$51.204.6     E. OUTPATIENT ACCRUED PAYMENTS   \$26,092.893   \$24,888.267   \$51.204.6     I. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)   \$2.56.24,016   \$2.3803.326   \$587.7     3. MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   \$2.390.312   2.958.028   \$567.7     4. MEDICARE   \$7.013.075   7.285.506   \$272.4     4. MEDICARE   \$1.65.44   0 (\$176.5     5. OTHER MEDICAL ASSISTANCE   \$1.65.44   0 (\$176.5     6. CHAMPUS / TRICARE   \$1.65.44   0 (\$176.5     7. UNINSURED (INCLUDED IN NON-GOVERNMENT)   \$158.606   147.470   \$21.1     TOTAL OUTPATIENT GOVERNMENT PAYMENTS   \$3.5243,207   \$34.283.837   \$895.3    F. TOTAL OUTPATIENT PAYMENTS   \$3.5243,207   \$34.283.837   \$895.3    F. TOTAL OUTPATIENT PAYMENTS   \$3.5243,207   \$34.283.837   \$895.3    F. TOTAL ACCRUED PAYMENTS   \$3.5243,207   \$34.283.837   \$895.3    F. TOTAL DUTPATIENT PAYMENTS   \$3.5243,207   \$34.283.837   \$895.3    F. TOTAL DUTPATIENT PAYMENTS   \$3.5243,4890					\$2,968,404
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		TOTAL CHARGES	\$151,379,867	\$148,782,545	(\$2,597,322)
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		INDATIENT ACCOURD DAVMENTS			
2 MEDICARE	_		\$9 287 493	\$7 431 564	(\$1.855.929)
3   MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   \$2,204,914   2,558,626   \$353.7     4   MEDICAL ASSISTANCE   \$20,56,980   2,558,626   \$501,6     5   OTHER MEDICAL ASSISTANCE   \$147,934   0 (\$147,9			+ - / - /		\$241,361
5         OTHER MEDICAL ASSISTANCE         \$147,934         0         (\$147,934)           6         CHAMPUS / TRICARE         \$36,517         152,747         \$56,2           7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$62,740         55,783         (\$6,9           8         \$16,805,400         \$17,456,703         \$651,3           TOTAL INPATIENT GOVERNMENT PAYMENTS         \$16,805,400         \$17,456,703         \$651,3           TOTAL INPATIENT PAYMENTS         \$26,092,893         \$24,888,267         (\$1,204,6           E.         OUTPATIENT ACCRUED PAYMENTS         \$26,092,893         \$24,888,267         (\$1,820,6           1         NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$25,624,016         \$23,803,326         (\$1,820,6           2         MEDICARE         \$7,013,075         7,285,506         \$272,4           3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$2,939,0312         2,958,028         \$567,7           4         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$2,756,028         \$746,2           5         OTHER MEDICAL ASSISTANCE         \$176,544         0         (\$176,54           6         CHAMPUS / TRICARE         \$21,5804         226,977         \$21,1 <tr< th=""><td>3</td><td>MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)</td><td></td><td>2,558,626</td><td>\$353,712</td></tr<>	3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		2,558,626	\$353,712
6         CHAMPUS / TRICARE         \$96,517         152,747         \$56,2           7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$62,740         55,783         (86,9           7         TOTAL INPATIENT GOVERNMENT PAYMENTS         \$16,805,800         \$17,456,703         \$651,3           8         TOTAL INPATIENT PAYMENTS         \$26,092,893         \$24,888,267         (\$1,204,6           E.         OUTPATIENT ACCRUED PAYMENTS         \$26,092,893         \$24,888,267         (\$1,204,6           1         NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$25,624,016         \$23,803,326         (\$1,820,6           2         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$7,013,075         7,285,506         \$272,4           3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$2,291,768         2,958,028         \$567,4           4         MEDICAL ASSISTANCE         \$176,544         0         (\$176,5           5         OTHER MEDICAL ASSISTANCE         \$215,804         236,977         \$21,1           7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$158,606         147,470         (\$11,1           7         TOTAL OUTPATIENT PAYMENTS         \$36,619,191         \$10,480,511         \$861,3           8					\$501,646
TOTAL INPATIENT GOVERNMENT PAYMENTS   \$62,740   \$55,783   \$65.9     TOTAL INPATIENT GOVERNMENT PAYMENTS   \$16,805,400   \$17,456,703   \$651,3     TOTAL INPATIENT PAYMENTS   \$26,092,893   \$24,888,267   \$12,04,6     E. OUTPATIENT ACCRUED PAYMENTS   \$25,624,016   \$23,803,326   \$1,820,6     2 MEDICARE   \$7,013,075   7,285,506   \$272,4     3 MEDICAL ASSISTANCE (INCLUDING SELF PAY / UNINSURED)   \$2,390,312   2,958,028   \$567,7     4 MEDICALD   \$2,213,768   2,958,028   \$567,7     5 OTHER MEDICAL ASSISTANCE   \$116,544   0   \$176,544     6 CHAMPUS / TRICARE   \$215,804   236,977   \$21,1     7 UNINSURED (INCLUDED IN NON-GOVERNMENT)   \$158,606   147,470   \$11,1     TOTAL OUTPATIENT GOVERNMENT PAYMENTS   \$9,619,191   \$10,480,511   \$861,3     TOTAL OUTPATIENT PAYMENTS   \$35,243,207   \$34,283,837   \$959,3     F. TOTAL ACCRUED PAYMENTS   \$21,517,044   \$22,030,836   \$513,7     3 TOTAL MEDICARE   \$21,517,044   \$22,030,836   \$513,7     3 TOTAL MEDICARE   \$21,517,044   \$22,030,836   \$513,7     3 TOTAL MEDICARE   \$21,517,044   \$22,030,836   \$513,7     3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   \$4,595,226   \$5,516,654   \$1,245,9     5 TOTAL OTHER MEDICAL ASSISTANCE   \$324,478   \$0 (\$324,478   \$0 (\$324,478   \$0 (\$324,478   \$0 (\$324,478   \$0 (\$324,478   \$0 (\$324,478   \$0 (\$324,4591   \$27,937,214   \$1,512,6     TOTAL LOURDED IN NON-GOVERNMENT)   \$221,346   \$203,253 (\$18,00   \$151,512,6   \$251,512,64   \$27,937,214   \$1,512,6   \$1,512,6   \$1,512,6   \$200,500   \$151,512,6   \$200,500   \$151,512,6   \$200,500   \$151,512,6   \$200,500   \$151,512,6   \$200,500   \$151,512,6   \$200,500   \$151,512,6   \$1					(\$147,934)
TOTAL INPATIENT GOVERNMENT PAYMENTS   \$16,805,400   \$17,456,703   \$651,3     TOTAL INPATIENT PAYMENTS   \$26,092,893   \$24,888,267   (\$1,204,6     E. OUTPATIENT ACCRUED PAYMENTS   \$25,624,016   \$23,803,326   (\$1,820,6     I. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)   \$25,624,016   \$23,803,326   (\$1,820,6     I. WEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   \$2,390,312   2,958,028   \$567,7     J. WEDICALD   \$2,213,768   2,958,028   \$744,2     J. WEDICALD   \$2,213,768   2,958,028   \$744,2     J. OTHER MEDICAL ASSISTANCE   \$176,544   0   (\$176,544   0					\$56,230 (\$6,957)
TOTAL INPATIENT PAYMENTS   \$26,092,893   \$24,888,267   (\$1,204,6]			· · ·	,	\$651,303
1         NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$25,624,016         \$23,803,326         (\$1,820.6           2         MEDICARE         \$7,013,075         7,285,506         \$272,4           3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$2,390,312         2,958,028         \$567,7           4         MEDICAID         \$2,213,768         2,958,028         \$744,2           5         OTHER MEDICAL ASSISTANCE         \$176,544         0         (\$176,5           6         CHAMPUS / TRICARE         \$215,804         236,977         \$21,1           7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$158,606         147,470         (\$11,1           TOTAL OUTPATIENT GOVERNMENT PAYMENTS         \$9,619,191         \$10,480,511         \$861,3           TOTAL OUTPATIENT PAYMENTS         \$35,243,207         \$34,283,837         (\$959,3           F.         TOTAL ACCRUED PAYMENTS         \$34,911,509         \$31,234,890         (\$3,676,6           2         TOTAL MEDICARE         \$21,517,044         \$22,030,836         \$513,7           3         TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$4,595,226         \$5,516,654         \$921,4           4         TOTAL MEDICAID         \$4,270,748         \$5		TOTAL INPATIENT PAYMENTS			(\$1,204,626)
1         NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$25,624,016         \$23,803,326         (\$1,820.6           2         MEDICARE         \$7,013,075         7,285,506         \$272,4           3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$2,390,312         2,958,028         \$567,7           4         MEDICAID         \$2,213,768         2,958,028         \$744,2           5         OTHER MEDICAL ASSISTANCE         \$176,544         0         (\$176,5           6         CHAMPUS / TRICARE         \$215,804         236,977         \$21,1           7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$158,606         147,470         (\$11,1           TOTAL OUTPATIENT GOVERNMENT PAYMENTS         \$9,619,191         \$10,480,511         \$861,3           TOTAL OUTPATIENT PAYMENTS         \$35,243,207         \$34,283,837         (\$959,3           F.         TOTAL ACCRUED PAYMENTS         \$34,911,509         \$31,234,890         (\$3,676,6           2         TOTAL MEDICARE         \$21,517,044         \$22,030,836         \$513,7           3         TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$4,595,226         \$5,516,654         \$921,4           4         TOTAL MEDICAID         \$4,270,748         \$5	_				
2 MEDICARE       \$7,013,075       7,285,506       \$272,4         3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)       \$2,390,312       2,958,028       \$567,7         4 MEDICAID       \$2,213,768       2,958,028       \$744,2         5 OTHER MEDICAL ASSISTANCE       \$176,544       0 (\$176,5         6 CHAMPUS / TRICARE       \$215,804       236,977       \$21,1         7 UNINSURED (INCLUDED IN NON-GOVERNMENT)       \$158,606       147,470       (\$11,1         TOTAL OUTPATIENT GOVERNMENT PAYMENTS       \$9,619,191       \$10,480,511       \$861,3         TOTAL OUTPATIENT PAYMENTS       \$35,243,207       \$34,283,837       (\$959,3         F. TOTAL ACCRUED PAYMENTS       \$35,243,207       \$34,283,837       (\$959,3         F. TOTAL MEDICARE       \$21,517,044       \$22,030,836       \$513,7         3 TOTAL MEDICARE       \$21,517,044       \$22,030,836       \$513,7         3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)       \$4,595,226       \$5,516,654       \$921,4         4 TOTAL MEDICALIO       \$4,270,748       \$5,516,654       \$1,245,9         5 TOTAL OTHER MEDICAL ASSISTANCE       \$324,478       \$0       (\$324,4         6 TOTAL CHAMPUS / TRICARE       \$312,321       \$389,724       \$77,4         7			\$25.624.046	¢33 8U3 33E	(\$1,920,600)
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   \$2,390,312   2,958,028   \$567,7     4 MEDICAID   \$2,213,768   2,958,028   \$744,2     5 OTHER MEDICAL ASSISTANCE   \$176,544   0 (\$176,54     6 CHAMPUS / TRICARE   \$215,804   236,977   \$21,1     7 UNINSURED (INCLUDED IN NON-GOVERNMENT)   \$158,606   147,470 (\$11,1     TOTAL OUTPATIENT GOVERNMENT PAYMENTS   \$9,619,191   \$10,480,511   \$861,3     TOTAL OUTPATIENT PAYMENTS   \$35,243,207   \$34,283,837 (\$959,3     F. TOTAL ACCRUED PAYMENTS   \$35,243,207   \$34,283,837 (\$959,3     1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)   \$34,911,509   \$31,234,890 (\$3,676,6     2 TOTAL MEDICARE   \$21,517,044   \$22,030,836   \$513,7     3 TOTAL MEDICARE   \$4,595,226   \$5,516,654   \$921,4     4 TOTAL MEDICAID   \$4,270,748   \$5,516,654   \$921,4     5 TOTAL OTHER MEDICAL ASSISTANCE   \$324,478   \$0 (\$324,4     6 TOTAL CHAMPUS / TRICARE   \$312,321   \$389,724   \$77,4     7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)   \$221,346   \$203,253   \$18,0     TOTAL GOVERNMENT PAYMENTS   \$26,424,591   \$27,937,214   \$1,512,6     TOTAL GOVERNMENT PAYMENTS   \$26,424,591   \$27,937,214   \$1,512,6					(\$1,820,690) \$272,431
4       MEDICAID       \$2,213,768       2,958,028       \$744,2         5       OTHER MEDICAL ASSISTANCE       \$176,544       0       (\$176,5         6       CHAMPUS / TRICARE       \$215,804       236,977       \$21,1         7       UNINSURED (INCLUDED IN NON-GOVERNMENT)       \$158,606       147,470       (\$11,1         TOTAL OUTPATIENT GOVERNMENT PAYMENTS       \$9,619,191       \$10,480,511       \$861,3         TOTAL OUTPATIENT PAYMENTS       \$35,243,207       \$34,283,837       (\$959,3         F.       TOTAL ACCRUED PAYMENTS       \$34,911,509       \$31,234,890       (\$3,676,6         2       TOTAL MEDICARE       \$21,517,044       \$22,030,836       \$513,7         3       TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)       \$4,595,226       \$5,516,654       \$921,4         4       TOTAL MEDICAL ASSISTANCE       \$324,478       \$5,516,654       \$1,245,9         5       TOTAL OTHER MEDICAL ASSISTANCE       \$324,478       \$0       (\$324,4         6       TOTAL CHAMPUS / TRICARE       \$312,321       \$389,724       \$77,4         7       TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)       \$221,346       \$203,253       (\$18,0         TOTAL GOVERNMENT PAYMENTS       \$26,424,591       \$27,9				,,	\$567,716
6       CHAMPUS / TRICARE       \$215,804       236,977       \$21,1         7       UNINSURED (INCLUDED IN NON-GOVERNMENT)       \$158,606       147,470       (\$11,1         TOTAL OUTPATIENT GOVERNMENT PAYMENTS       \$9,619,191       \$10,480,511       \$861,3         TOTAL OUTPATIENT PAYMENTS       \$35,243,207       \$34,283,837       (\$959,3         F. TOTAL ACCRUED PAYMENTS         1       TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)       \$34,911,509       \$31,234,890       (\$3,676,6         2       TOTAL MEDICARE       \$21,517,044       \$22,030,836       \$513,7         3       TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)       \$4,595,226       \$5,516,654       \$921,4         4       TOTAL MEDICAL ASSISTANCE       \$324,478       \$5,516,654       \$1,245,9         5       TOTAL OTHER MEDICAL ASSISTANCE       \$324,478       \$0       (\$324,4         6       TOTAL CHAMPUS / TRICARE       \$312,321       \$389,724       \$77,4         7       TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)       \$221,346       \$203,253       \$18,0         TOTAL GOVERNMENT PAYMENTS       \$26,424,591       \$27,937,214       \$1,512,6				2,958,028	\$744,260
7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$158,606         147,470         (\$11,1           TOTAL OUTPATIENT GOVERNMENT PAYMENTS         \$9,619,191         \$10,480,511         \$861,3           TOTAL OUTPATIENT PAYMENTS         \$35,243,207         \$34,283,837         (\$959,3           F. TOTAL ACCRUED PAYMENTS         \$34,911,509         \$31,234,890         (\$3,676,6           2         TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$34,911,509         \$31,234,890         (\$3,676,6           2         TOTAL MEDICARE         \$21,517,044         \$22,030,836         \$513,7           3         TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$4,595,226         \$5,516,654         \$921,4           4         TOTAL MEDICALDIO         \$4,270,748         \$5,516,654         \$1,245,9           5         TOTAL OTHER MEDICAL ASSISTANCE         \$324,478         \$0         (\$324,4           5         TOTAL OTHER MEDICAL ASSISTANCE         \$312,321         \$389,724         \$77,4           6         TOTAL CHAMPUS / TRICARE         \$312,321         \$389,724         \$77,4           7         TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$221,346         \$203,253         (\$18,0           TOTAL GOVERNMENT PAYMENTS         \$26,424,591					(\$176,544)
TOTAL OUTPATIENT GOVERNMENT PAYMENTS   \$9,619,191   \$10,480,511   \$861,3     TOTAL OUTPATIENT PAYMENTS   \$35,243,207   \$34,283,837   (\$959,3     F. TOTAL ACCRUED PAYMENTS   TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)   \$34,911,509   \$31,234,890   (\$3,676,6     2 TOTAL MEDICARE   \$21,517,044   \$22,030,836   \$513,7     3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)   \$4,595,226   \$5,516,654   \$921,4     4 TOTAL MEDICALD   \$4,270,748   \$5,516,654   \$1,245,9     5 TOTAL OTHER MEDICAL ASSISTANCE   \$324,478   \$0   (\$324,478   \$312,321   \$389,724   \$77,4     7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)   \$221,346   \$203,253   (\$18,0     TOTAL GOVERNMENT PAYMENTS   \$26,424,591   \$27,937,214   \$1,512,6     \$1,512,6   \$21,512,6   \$221,346   \$203,253   \$18,0     TOTAL GOVERNMENT PAYMENTS   \$26,424,591   \$27,937,214   \$1,512,6     \$1,512,6   \$20,0000   \$27,937,214   \$1,512,6     \$1,512,6   \$20,0000   \$27,937,214   \$1,512,6     \$1,512,6   \$20,0000   \$2,00					\$21,173 (\$11,136)
TOTAL OUTPATIENT PAYMENTS   \$35,243,207   \$34,283,837   (\$959,3)   F.   TOTAL ACCRUED PAYMENTS					(\$11,136) \$861,320
F. TOTAL ACCRUED PAYMENTS         \$34,911,509         \$31,234,890         (\$3,676,6           2 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$34,911,509         \$31,234,890         (\$3,676,6           2 TOTAL MEDICARE         \$21,517,044         \$22,030,836         \$513,7           3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$4,595,226         \$5,516,654         \$921,45,9           4 TOTAL MEDICALD         \$4,270,748         \$5,516,654         \$1,245,9           5 TOTAL OTHER MEDICAL ASSISTANCE         \$324,478         \$0         (\$324,4           6 TOTAL CHAMPUS / TRICARE         \$312,321         \$389,724         \$77,4           7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$221,346         \$203,253         (\$18,0           TOTAL GOVERNMENT PAYMENTS         \$26,424,591         \$27,937,214         \$1,512,6					(\$959,370)
1         TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)         \$34,911,509         \$31,234,890         (\$3,676,6           2         TOTAL MEDICARE         \$21,517,044         \$22,030,836         \$513,7           3         TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$4,595,226         \$5,516,654         \$921,4           4         TOTAL MEDICAID         \$4,270,748         \$5,516,654         \$1,245,9           5         TOTAL OTHER MEDICAL ASSISTANCE         \$324,478         \$0         (\$324,478           6         TOTAL CHAMPUS / TRICARE         \$312,321         \$389,724         \$77,4           7         TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$221,346         \$203,253         (\$18,0           TOTAL GOVERNMENT PAYMENTS         \$26,424,591         \$27,937,214         \$1,512,6					
2       TOTAL MEDICARE       \$21,517,044       \$22,030,836       \$513,7         3       TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)       \$4,595,226       \$5,516,654       \$921,4         4       TOTAL MEDICAID       \$4,270,748       \$5,516,654       \$1,245,9         5       TOTAL OTHER MEDICAL ASSISTANCE       \$324,478       \$0       (\$324,4         6       TOTAL CHAMPUS / TRICARE       \$312,321       \$389,724       \$77,4         7       TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)       \$221,346       \$203,253       (\$18,0         TOTAL GOVERNMENT PAYMENTS       \$26,424,591       \$27,937,214       \$1,512,6			¢24.014.500	¢31 334 000	(\$2 G7G G4O)
3         TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         \$4,595,226         \$5,516,654         \$921,4           4         TOTAL MEDICAID         \$4,270,748         \$5,516,654         \$1,245,9           5         TOTAL OTHER MEDICAL ASSISTANCE         \$324,478         \$0         (\$324,4           6         TOTAL CHAMPUS / TRICARE         \$312,321         \$389,724         \$77,4           7         TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$221,346         \$203,253         (\$18,0           TOTAL GOVERNMENT PAYMENTS         \$26,424,591         \$27,937,214         \$1,512,6					\$513,792
4         TOTAL MEDICAID         \$4,270,748         \$5,516,654         \$1,245,9           5         TOTAL OTHER MEDICAL ASSISTANCE         \$324,478         \$0         (\$324,4           6         TOTAL CHAMPUS / TRICARE         \$312,321         \$389,724         \$77,4           7         TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)         \$221,346         \$203,253         (\$18,0           TOTAL GOVERNMENT PAYMENTS         \$26,424,591         \$27,937,214         \$1,512,6					\$921,428
6       TOTAL CHAMPUS / TRICARE       \$312,321       \$389,724       \$77,4         7       TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)       \$221,346       \$203,253       (\$18,0         TOTAL GOVERNMENT PAYMENTS       \$26,424,591       \$27,937,214       \$1,512,6	4	TOTAL MEDICAID	\$4,270,748		\$1,245,906
7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$221,346 \$203,253 \$18,0 TOTAL GOVERNMENT PAYMENTS \$26,424,591 \$27,937,214 \$1,512,6					(\$324,478)
TOTAL GOVERNMENT PAYMENTS \$26,424,591 \$27,937,214 \$1,512,6					\$77,403
					(\$2,163,996)
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	JOHNSON MEMORIAL HOSPITAL			
	TWELVE MONTHS ACTUAL FILING	•		
	FISCAL YEAR 2011	<u> </u>		
	REPORT 550 - CALCULATION OF DSH UPPER PAY	MENT I IMIT AND		
	BASELINE UNDERPAYMENT DATA			
	BACELINE ONDER! ATMENT DATA	<u>,</u>		
(1)	(2)	(3)	(4)	(5)
(.,	(-)	(6)	(-)	(0)
		ACTUAL	ACTUAL	AMOUNT
LINE	<u>DESCRIPTION</u>	FY 2010	FY 2011	DIFFERENCE
II.	PAYER MIX			
A.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	11.25%	9.91%	-1.34%
2	MEDICARE	28.28%	26.58%	-1.70%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.93%	5.76%	0.82%
4	MEDICAID	4.46%	5.76%	1.29%
5	OTHER MEDICAL ASSISTANCE	0.47%	0.00%	-0.47%
6	CHAMPUS / TRICARE	0.17%	0.27%	0.10%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)  TOTAL INPATIENT GOVERNMENT PAYER MIX	0.49% <b>33.39%</b>	0.44% <b>32.61%</b>	-0.05% <b>-0.78</b> %
	TOTAL INPATIENT GOVERNMENT PATER WIX	44.64%	42.52%	-0.76%
	TOTAL BUT THEN HIM	1410476	42.02 /0	2.127
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.04%	29.38%	-1.66%
2	MEDICARE	17.41%	19.61%	2.20%
3 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	6.58% 5.92%	8.10% 8.10%	1.52% 2.18%
5	OTHER MEDICAL ASSISTANCE	0.66%	0.00%	-0.66%
6	CHAMPUS / TRICARE	0.34%	0.40%	0.06%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.53%	1.30%	-0.22%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	24.32%	28.10%	3.78%
	TOTAL OUTPATIENT PAYER MIX	55.36%	57.48%	2.12%
	TOTAL DAVED MIX DAGED ON ACCOURT CHARGE	100.000	400 0004	
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
<u> </u>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15.14%	12.56%	-2.58%
2	MEDICARE	23.65%	24.92%	1.27%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.59%	4.32%	0.73%
4	MEDICAID	3.35%	4.32%	0.97%
5	OTHER MEDICAL ASSISTANCE	0.24%	0.00%	-0.24%
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.16% 0.10%	0.26% 0.09%	0.10% -0.01%
-	TOTAL INPATIENT GOVERNMENT PAYER MIX	27.40%	29.50%	2.10%
	TOTAL INPATIENT PAYER MIX	42.54%	42.06%	-0.48%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	41.78%	40.23%	-1.55%
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11.43%	12.31%	0.88%
<u>3</u>	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.90% 3.61%	5.00% 5.00%	1.10% 1.39%
5	OTHER MEDICAL ASSISTANCE	0.29%	0.00%	-0.29%
6	CHAMPUS / TRICARE	0.25%	0.40%	0.05%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.26%	0.25%	-0.01%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	15.68%	17.71%	2.03%
	TOTAL OUTPATIENT PAYER MIX	57.46%	57.94%	0.48%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

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	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.	DISCHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	1,143	979	(164)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,733 541	1,616 643	(117) 102
4	MEDICAID	509	643	134
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	32 20	0 30	(32)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	46	52	<u>10</u> 6
	TOTAL GOVERNMENT DISCHARGES	2,294	2,289	(5)
	TOTAL DISCHARGES	3,437	3,268	(169)
B.	PATIENT DAYS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	4,527 10,783	3,704 9,180	(823) (1,603)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,348	2,813	465
	MEDICAID	2,146	2,813	667
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	202 79	0 93	(202) 14
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	177	169	(8)
	TOTAL GOVERNMENT PATIENT DAYS	13,210	12,086	(1,124)
	TOTAL PATIENT DAYS	17,737	15,790	(1,947)
C.	AVERAGE LENGTH OF STAY (ALOS)			
	NON COVERNMENT (NO LIDING OF LE DAY (LININGUEED)			(0.0)
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	4.0 6.2	3.8 5.7	(0.2)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.3	4.4	0.0
	MEDICAID	4.2	4.4	0.2
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	6.3 4.0	0.0 3.1	(6.3) (0.9)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.8	3.3	(0.6)
	TOTAL AVERAGE LENGTH OF STAY	5.8	5.3	(0.5)
	TOTAL AVERAGE LENGTH OF STAY	5.2	4.8	(0.3)
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.16770	1.02030	(0.14740)
	MEDICARE	1.35200	1.36050	0.00850
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.86673	0.84913	(0.01760)
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	0.85540 1.04690	0.84913 0.00000	(0.00627) (1.04690)
6	CHAMPUS / TRICARE	0.79500	0.00000	0.12380
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.92270	0.92350	0.00080
<del></del>	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX	1.23270 1.21108	1.21106 1.15392	(0.02164) (0.05717)
	TOTAL GAGE WITA HADEA	1.21108	1.15392	(0.05/1/)
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$64,018,828	\$58,453,607	(\$5,565,221)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,208,809	\$31,234,890	(\$3,973,919)
-	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$28,810,019	\$27,218,717	(\$1,591,302)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.00%	46.56%	1.56%
5 6	EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	\$0 \$0	\$0 \$0	\$0 \$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT	\$0 \$0	\$0 \$0	φυ
L	ADJUSTMENT-OHCA INPUT)			\$0
	CHARITY CARE	\$280,655	\$465,816	\$185,161
	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$2,544,094 \$2,824,749	\$2,141,072 \$2,606,888	(\$403,022) (\$217,861)
11	TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE	\$64,018,828	\$58,453,607	(\$5,565,221)
12	TOTAL OPERATING EXPENSES	\$67,684,735	\$61,306,385	(\$6,378,350)
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	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	
IINE	DESCRIPTION	FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
LIIVL	DESCRIPTION	112010	1 1 2011	DITTERCENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
Α.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,334.68110	998.87370	(335.80740
2	MEDICARE	2,343.01600	2,198.56800	(144.44800
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	468.89940	545.99059	77.09119
	MEDICAID	435.39860	545.99059	110.59199
	OTHER MEDICAL ASSISTANCE	33.50080	0.00000	(33.50080
	CHAMPUS / TRICARE	15.90000 42.44420	27.56400 48.02200	11.66400
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	2.827.81540	2,772.12259	5.57780 ( <b>55.6928</b> 1
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES  TOTAL CASE MIX ADJUSTED DISCHARGES	4.162.49650	3,770.99629	(391.50021
	TOTAL CASE WIX ADJUSTED DISCHARGES	4,102.49030	3,770.99029	(391.3002)
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,152.16602	2,901.16469	-251.0013
	MEDICARE	1,066.47188	1,192.10131	125.6294
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	720.26591	904.64636	184.3804
	MEDICAID	675.50226	904.64636	229.1441
	OTHER MEDICAL ASSISTANCE	44.76364	0.00000	-44.7636
	CHAMPUS / TRICARE	40.25682	44.12115	3.8643
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	144.81078 <b>1,826.99460</b>	154.12864 <b>2,140.86883</b>	9.3178 <b>313.8742</b>
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES TOTAL OUTPATIENT EQUIVALENT DISCHARGES	4,979.16062	5,042.03352	62.8729
	TOTAL CONTANIENT EQUIVALENT DISCHARGES	4,575.10002	0,042.00002	02.0723
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
	NON COVERNMENT (NICHARING OFFE DAY (TINING FIRE)	<b>#C 050 50</b>	Φ7.400.04	¢404.00
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$6,958.59 \$6,190.30	\$7,439.94 \$6,706.79	\$481.36 \$516.49
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,702.32	\$4,686.21	(\$16.1
	MEDICAID	\$4,724.36	\$4,686.21	(\$38.15
	OTHER MEDICAL ASSISTANCE	\$4,415.83	\$0.00	(\$4,415.83
	CHAMPUS / TRICARE	\$6,070.25	\$5,541.54	(\$528.71
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,478.18	\$1,161.61	(\$316.56
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$5,942.89	\$6,297.23	\$354.34
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,268.57	\$6,599.92	\$331.35
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
	SOTTATION TANKENT EN SOTTATION EQUIVALENT SIGNIFICAL			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,129.02	\$8,204.75	\$75.73
	MEDICARE	\$6,575.96	\$6,111.48	(\$464.48
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,318.65	\$3,269.82	(\$48.84
	MEDICAID	\$3,277.22	\$3,269.82	(\$7.40
	OTHER MEDICAL ASSISTANCE	\$3,943.91	\$0.00	(\$3,943.91
	CHAMPUS / TRICARE	\$5,360.68	\$5,371.05	\$10.37
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,095.26	\$956.80	(\$138.47
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$5,265.04	\$4,895.45	(\$369.59
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$5,265.04 \$7,078.14	\$6,799.61	(\$278.54
	TOTAL COTT ATTENT FER COTTATIENT EQUIVALENT DISCHARGE	φ1,010.14	ψυ, ε σσ.υ Ι	(φ210.34

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	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	
	DECORPTION			AMOUNT
INE	DESCRIPTION	<u>FY 2010</u>	FY 2011	DIFFERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
	MEDICAID	\$2,228,307	\$2,570,702	\$342,3
	OTHER MEDICAL ASSISTANCE	\$177,266	\$0	(\$177,2
3	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$993,666	\$1,060,775	\$67,1
	TOTAL CALCULATED UNDERFATMENT (OFFER LIMIT METHODOLOGY)	\$3,399,239	\$3,631,477	\$232,2
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	LOGY)		
				/
1	TOTAL CHARGES	\$151,379,867	\$148,782,545	(\$2,597,3
3	TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE	\$60,935,943 \$2,824,749	\$62,391,724 \$2,606,888	\$1,455,7 (\$217,8
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$28,810,019	\$27,218,717	(\$1,591,3
	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	(ψ1,001,0
6	TOTAL ADJUSTMENTS	\$92,570,711	\$92,217,329	(\$353,
7	TOTAL ACCRUED PAYMENTS	\$58,809,156	\$56,565,216	(\$2,243,
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	
	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$58,809,156	\$56,565,216	(\$2,243,9
	RATIO OF NET REVENUE TO TOTAL CHARGES COST OF UNCOMPENSATED CARE	0.3884873013 \$1,097,379	0.3801871785 \$991,105	(0.00830012
11 12	MEDICAL ASSISTANCE UNDERPAYMENT	\$2,177,860	\$2,321,332	\$143,4
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	Ψ140,-
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	40	<del>V</del> 0	
		\$3,275,239	\$3,312,438	\$37,
/II.	RATIOS			
Α.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	54.52%	50.39%	-4.1
	MEDICARE	33.88%	37.28%	3.4
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	29.52%	29.87%	0.3
	MEDICAID	30.44%	29.87%	-0.
5	OTHER MEDICAL ASSISTANCE	20.76%	0.00%	
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	20.76% 38.15%	38.16%	0.0
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	20.76%		0.0
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	20.76% 38.15% 8.54%	38.16% 8.53%	0.0 -0.0
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	20.76% 38.15%	38.16%	0.0 -0.0
5 6 7	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	20.76% 38.15% 8.54% 33.25%	38.16% 8.53% <b>35.98%</b>	0.0 -0.0
5 6 7	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	20.76% 38.15% 8.54% 33.25% 38.61%	38.16% 8.53% 35.98% 39.34%	0.0 -0.0 2.1 0.7
5 6 7 <b>B.</b>	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES  NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	20.76% 38.15% 8.54% 33.25% 38.61%	38.16% 8.53% 35.98% 39.34% 54.46%	0.0 -0.0 2.1 0.1
5 6 7 <b>B.</b> 1 2	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES  NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	20.76% 38.15% 8.54% 33.25% 38.61% 54.54% 26.62%	38.16% 8.53% 35.98% 39.34% 54.46% 24.97%	0.0 -0.0 2.7 0.7
5 6 7 <b>B.</b> 1 2 3	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	20.76% 38.15% 8.54% 33.25% 38.61% 54.54% 26.62% 23.99%	38.16% 8.53% 35.98% 39.34% 54.46% 24.97% 24.55%	0.0 -0.0 2.7 0.1
5 6 7 <b>B.</b> 1 2 3 4	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES  NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE  MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	20.76% 38.15% 8.54% 33.25% 38.61% 54.54% 26.62% 23.99% 24.69%	38.16% 8.53% 35.98% 39.34% 54.46% 24.97% 24.55% 24.55%	0.0 -0.0 2.7 0.7 -0.0 -1.1,0 0.3
5 6 7 <b>B.</b> 1 2 3	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	20.76% 38.15% 8.54% 33.25% 38.61% 54.54% 26.62% 23.99%	38.16% 8.53% 35.98% 39.34% 54.46% 24.97% 24.55%	0.6 -0.6 2.7 0.7 -0.6 -1.6 0.5 -0.7
5 6 7 <b>B.</b> 1 2 3 4 5	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE	20.76% 38.15% 8.54% 33.25% 38.61% 54.54% 26.62% 23.99% 24.69% 17.71%	38.16% 8.53% 35.98% 39.34% 54.46% 24.97% 24.55% 0.00%	0.0 -0.0 2.1 0.1 -0.0 -1.0 -0.1 -17.1 -2.1
5 6 7 <b>B.</b> 1 2 3 4 5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES  NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	20.76% 38.15% 8.54% 33.25% 38.61% 54.54% 26.62% 23.99% 24.69% 17.71% 42.37%	38.16% 8.53% 35.98% 39.34% 54.46% 24.97% 24.55% 0.00% 40.26%	0.6 -0.0 2.7 0.7 -0.6 -1.6 -0.9 -0.7 -17.7
5 6 7 <b>B.</b> 1 2 3 4 5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES  RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES  NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	20.76% 38.15% 8.54% 33.25% 38.61% 54.54% 26.62% 23.99% 24.69% 17.71% 42.37%	38.16% 8.53% 35.98% 39.34% 54.46% 24.97% 24.55% 0.00% 40.26%	-20.7 0.0 -0.0 2.7 0.7 -0.0 -1.6 0.5 -0.7 -1.7 -2.7

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	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
. ,	, ,	` '		` '
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
<del></del>		710110		
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	TIONS		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	5		
1	TOTAL ACCRUED PAYMENTS	\$61,336,100	\$59,172,104	(\$2,163,996)
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)	ψο τησσοή του	φοσ,2,	\$0
	(OHCA INPUT)	\$0	\$0	
	OHCA DEFINED NET REVENUE	\$61,336,100	\$59,172,104	(\$2,163,996)
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$0	\$619.650	\$640.6E0
4	CALCULATED NET REVENUE	\$61,336,100	\$59,791,754	\$619,650 (\$1,544,346)
	CALCOLATED NET REVENUE	ψ01,000,100	ψοσ,/σ1,/ο4	(ψ1,044,040)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$61,336,304	\$59,791,753	(\$1,544,551)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$204)	\$1	\$205
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
1	OHCA DEFINED GROSS REVENUE	₽454 070 007	£4.40.700.545	(\$0.507.000)
	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$151,379,867 \$0	\$148,782,545 \$0	(\$2,597,322) \$0
	CALCULATED GROSS REVENUE	\$151,379,867	\$148,782,545	(\$2,597,322)
		, , , , , , , , , , , , , , , , , , , ,	, , , , , , ,	X / / / -
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$151,379,874	\$148,782,545	(\$2,597,329)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$7)	\$0	\$7
•		(4.7	**	<del></del>
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	TS .		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$2,824,749	\$2,606,888	(\$217,861)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$2,824,749	\$2,606,888	(\$217,861)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$2,824,952	\$2,606,888	(\$218,064)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$203)	\$0	\$203
		(+200)	Ψ.	4200

	JOHNSON MEMORIAL HOSPITAL				
	TWELVE MONTHS ACTUAL FILING				
	FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND				
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES				
(4)	(0)	(2)			
(1)	(2)	(3)			
l <u>.</u>		ACTUAL			
LINE	DESCRIPTION	FY 2011			
	ACCRUED CHARGES AND PAYMENTS				
I.	ACCRUED CHARGES AND PATMENTS				
A.	INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,748,364			
3	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	39,549,056			
4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,565,373 8,565,373			
5	OTHER MEDICAL ASSISTANCE	0,000,010			
6	CHAMPUS / TRICARE	400,272			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	653,864			
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$48,514,701			
	TOTAL INFATIENT CHARGES	\$63,263,065			
В.	OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$43,705,243			
2	MEDICARE	29,174,803			
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	12,050,752 12,050,752			
5	OTHER MEDICAL ASSISTANCE	12,030,732			
	CHAMPUS / TRICARE	588,682			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,938,061			
-	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$41,814,237			
-	TOTAL OUTPATIENT CHARGES	\$85,519,480			
C.	TOTAL ACCRUED CHARGES				
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$58,453,607			
2	TOTAL GOVERNMENT ACCRUED CHARGES	90,328,938			
-	TOTAL ACCRUED CHARGES	\$148,782,545			
D.	INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,431,564			
2	MEDICARE	14,745,330			
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,558,626			
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	2,558,626			
	CHAMPUS / TRICARE	152,747			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	55,783			
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$17,456,703			
	TOTAL INPATIENT PAYMENTS	\$24,888,267			
E.	OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$23,803,326			
2	MEDICARE	7,285,506			
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,958,028			
5	MEDICAID OTHER MEDICAL ASSISTANCE	2,958,028			
6	CHAMPUS / TRICARE	236,977			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	147,470			
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$10,480,511			
<u> </u>	TOTAL OUTPATIENT PAYMENTS	\$34,283,837			
F.	TOTAL ACCRUED PAYMENTS				
1 1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$31,234,890			
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	27,937,214			
	TOTAL ACCRUED PAYMENTS	\$59,172,104			
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	JOHNSON MEMORIAL 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)
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LINE	DESCRIPTION	FY 2011
LIIVE	<u>BEOMITION</u>	112011
H.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
<del>- "'-</del>	ACCROED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
Α.	ACCRUED DISCHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	979
2	MEDICARE	1,616
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	643
4	MEDICAID	643
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	30
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	52
	TOTAL GOVERNMENT DISCHARGES	2,289
	TOTAL DISCHARGES	3,268
В.	CASE MIX INDEX	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.02030
2	MEDICARE	1.36050
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.84913
4	MEDICAID	0.84913
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	0.91880
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.92350
-	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX	1.21106 1.15392
	TOTAL CASE WIX INDEX	1.15392
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$58,453,607
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$31,234,890
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$27,218,717
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	46.56%
<u> </u>	EMPLOYEE OF ENDURANCE OPOGO PEVENUE	ФО.
5 6	EMPLOYEE SELF INSURANCE GROSS REVENUE  EMPLOYEE SELF INSURANCE ALLOWANCE	\$0 \$0
0	EMIFLOTEE SELF INSURANCE ALLOWANGE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
0	CHARITY CARE	\$465,816
<u>8</u> 9	BAD DEBTS	\$2,141,072
10	TOTAL UNCOMPENSATED CARE	\$2,606,888
	TOTAL STOCKED OTTE	Ψ2,000,000
11	TOTAL OTHER OPERATING REVENUE	\$1,209,809
12	TOTAL OPERATING EXPENSES	\$61,306,385

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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 2 PLUS SISH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) 3 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE 4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 S9,791,791 4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 S9,791,791 5 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 5 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 5 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 5 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 5 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 5 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 5 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 6 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 S148,782,54 5 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) 6 RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS 6 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 6 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE 6 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 7 S2,606.88 7 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 7 S2,606.88		JOHNSON MEMORIAL HOSPITAL	
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES  (1) (2) (3) (3) ACTUAL  INE DESCRIPTION FY 2011  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 SEQUIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) S59,172,10  3 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE S59,791,71  4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) S59,791,71  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  8. RECONCILIATION OF OHCA DEFINED GROSS REVENUE S148,782,54  1 OHCA DEFINED GROSS REVENUE S148,782,54  CALCULATED GROSS REVENUE S148,782,54  3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) S148,782,54  4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  5 CALCULATED GROSS REVENUE S148,782,54  CALCULATED GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) S148,782,54  CALCULATED GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) S148,782,54  CALCULATED GROSS REVENUE S148,782,54  CALCULATED GROSS REVENUE S148,782,54  CALCULATED UNCOMPENSATED CARE (GHARITY CARE AND BAD DEBTS) S2,606,88  CALCULATED UNCOMPENSATED CARE (GHARITY CARE AND BAD DEBTS) S2,606,88  CALCULATED UNCOMPENSATED CARE (GHARITY CARE AND BAD DEBTS) S2,606,88  CALCULATED UNCOMPENSATED CARE (GHARITY CARE AND BAD DEBTS) S2,606,88  CALCULATED UNCOMPENSATED CARE (GHARITY CARE AND BAD DEBTS) S2,606,88  CALCULATED UNCOMPENSATED CARE (GHARITY CARE AND BAD DEBTS) S2,606,88		TWELVE MONTHS ACTUAL FILING	
(1) (2) (3)  ACTUAL  INE DESCRIPTION FY 2011  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 2 PLUS OSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) 3 PLUS (MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE 4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 PLUS (MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED ORDITAL AUDITED FIN. STATEMENTS  4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 S9,791.73  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  5 CALCULATED ORDITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 S148,782.54  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 5 CALCULATED GROSS REVENUE 5 S148,782.54  3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 S148,782.54  4 CALCULATED GROSS REVENUE 5 S148,782.55  CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 7 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 7 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 7 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 7 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 7 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 7 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 8 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 8 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 8 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 8 C		FISCAL YEAR 2011	
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INE DESCRIPTION  ACTUAL FY 2011  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 2 PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) 3 PLUS (MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE 4 NET REVENUE \$619.60 CALCULATED NET REVENUE 5 PLUS (MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE \$59,791,72  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED GROSS REVENUE 2 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 \$148,782,54  3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 \$148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  C. RECONCILIATION OF OHCA DEFINED GROSS REVENUE 5 \$148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 \$2,606,88  2 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 \$2,606,88  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 5 \$2,606,88		BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
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 2 PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) 3 PLUS (MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE 4 NET REVENUE \$619.60 CALCULATED NET REVENUE 5 PLUS (MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE \$59,717.71  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED GROSS REVENUE 2 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 \$148,782,54  2 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 5 CALCULATED GROSS REVENUE 5 \$148,782,54  3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 5 \$148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 \$2,606,88  2 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 5 \$2,606,88  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 5 \$2,606,88  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 5 \$2,606,88	(1)	(2)	(3)
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PLUS (MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE  1 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE  3 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE  4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  5 S9,791,73  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  5 RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED GROSS REVENUE  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE  3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  5 148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  5 2 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  5 3 CRECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE  CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  5 2,606,86  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$ 2,606,86  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$ 2,606,86	A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
OHCA DEFINED NET REVENUE  \$59,172,103 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE \$619,665 CALCULATED NET REVENUE \$59,791,753  NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$59,791,753 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED GROSS REVENUE 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 3 CALCULATED GROSS REVENUE 4 S148,782,56 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$148,782,56 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 4 \$2,606,86 3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 4 \$2,606,86 4 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 5 \$2,606,86 5 \$2,606,86			\$59,172,104
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CALCULATED NET REVENUE  NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED GROSS REVENUE 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 3 GROSS REVENUE 4 S148,782,54  3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 3 UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 4 \$2,606,88	3	I PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$619,650
VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED GROSS REVENUE \$148,782,54 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$148,782,54 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$1  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$2,606,88 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$2,606,88 3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$2,606,88			\$59,791,754
VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED GROSS REVENUE 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  \$ 148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  5 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$ 2,606,88			
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED GROSS REVENUE 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) 4 S148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) 5 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS 6 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) 6 S2,606,88 6 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 7 S2,606,88 7 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) 7 S2,606,88	4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$59,791,753
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2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE  CALCULATED GROSS REVENUE  3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  \$148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE  CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  \$2,606,88  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$2,606,88	B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
CALCULATED GROSS REVENUE \$148,782,54  3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$9  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS \$9  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$2,606,886  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$9  CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$2,606,886  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$2,606,886	1		\$148,782,545
3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)  \$148,782,54  VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE  CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  \$2,606,88  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$2,606,88	2		\$0
VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)  C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$2,606,88		CALCULATED GROSS REVENUE	\$148,782,545
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS  1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$2,606,88	3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$148,782,545
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2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$2,606,88	C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)  3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)  \$2,606,88	1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$2.606.888
3 UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$2,606,88			\$0
		CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$2,606,888
VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$2,606,888
		VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

#### JOHNSON MEMORIAL 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 229 485 256 112% 2 Number of Approved Applicants 167 80% 209 376 **Total Charges (A)** \$280.655 \$465,816 \$185,161 66% 3 4 **Average Charges** \$1,343 (\$104) -8% \$1,239 Ratio of Cost to Charges (RCC) 5 0.351823 0.445438 0.093615 27% \$108,751 **Total Cost** \$98,741 \$207,492 110% 6 **Average Cost** \$472 7 \$552 \$79 17% \$122,446 \$282,865 \$160,419 131% 8 Charity Care - Inpatient Charges Charity Care - Outpatient Charges (Excludes ED Charges) 9 91,010 67,597 (23,413)-26% 10 Charity Care - Emergency Department Charges 67,199 115,354 48,155 72% 11 **Total Charges (A)** \$280,655 \$465,816 \$185,161 66% Charity Care - Number of Patient Days 444% 12 25 136 111 13 Charity Care - Number of Discharges 40 333% 12 52 14 Charity Care - Number of Outpatient ED Visits 165 71 94 76% 15 Charity Care - Number of Outpatient Visits (Excludes ED Visits) 57 204 147 258% Hospital Bad Debts (from HRS Report 500) В. **Bad Debts - Inpatient Services** \$1,135,684 \$898,608 (\$237,076)-21% Bad Debts - Outpatient Services (Excludes ED Bad Debts) 671,501 2 205,054 876,555 327% 3 Bad Debts - Emergency Department 1.203.356 365,909 (837,447) -70% 4 Total Bad Debts (A) \$2,544,094 \$2,141,072 (\$403,022) -16% Hospital Uncompensated Care (from HRS Report 500) C. 1 Charity Care (A) \$280,655 \$465,816 \$185,161 66% 2 Bad Debts (A) 2,544,094 2,141,072 (403,022)-16% **Total Uncompensated Care (A)** 3 \$2,824,749 \$2,606,888 (\$217,861) -8% 4 **Uncompensated Care - Inpatient Services** -6% \$1,258,130 \$1,181,473 (\$76,657)5 Uncompensated Care - Outpatient Services (Excludes ED Unc. Care) 648,088 219% 296,064 944,152 Uncompensated Care - Emergency Department 1,270,555 481,263 (789, 292)-62% 6 **Total Uncompensated Care (A)** \$2,824,749 \$2,606,888 (\$217,861) -8% (A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

	Total Discount Percentage	45.00%	46.56%	1.56%	39
	Total Accrued Payments (A)	\$35,208,809	\$31,234,890	(\$3,973,919)	-119
2	Total Contractual Allowances	\$28,810,019	\$27,218,717	(\$1,591,302)	-6°
1	Total Gross Revenue	\$64,018,828	\$58,453,607	(\$5,565,221)	-99
	COMMERCIAL - ALL PAYERS				
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
INE	DESCRIPTION	ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
		FY 2010	FY 2011	****	
(1)	(2)	(3)	(4)	(5)	(6)
		CCRUED PAYMENTS AND DISCO	· · · · · · · · · · · · · · · · · · ·	ALLOWANCES,	
	DEDORT 605 HOSDITA	FISCAL YEAR 2 L NON-GOVERNMENT GROSS RE		ALLOWANCES	
		TWELVE MONTHS ACTUA			
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#### JOHNSON MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2011** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (3) (4) (5) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2009 FY 2010 FY 2011 **Gross and Net Revenue** A. Inpatient Gross Revenue \$83,077,033 \$67,574,808 \$63,263,065 1 2 Outpatient Gross Revenue \$112,517,502 \$83,805,059 \$85,519,480 3 Total Gross Patient Revenue \$195,594,535 \$151,379,867 \$148,782,545 Net Patient Revenue \$62,785,887 \$61,336,304 \$59,791,753 В. **Total Operating Expenses** \$61,306,385 1 Total Operating Expense \$66,396,980 \$67,684,735 C. **Utilization Statistics** Patient Days 17,998 17,737 15,790 3,618 3,437 3,268 2 Discharges 3 Average Length of Stay 5.0 5.2 4.8 <u>42,</u>374 Equivalent (Adjusted) Patient Days (EPD) 39,734 37,135 4 Equivalent (Adjusted) Discharges (ED) 8,518 7,700 7,686 0 **Case Mix Statistics** D. 1.15108 1.21108 1.15392 1 Case Mix Index 20,717 21,481 18,220 2 Case Mix Adjusted Patient Days (CMAPD) 3 Case Mix Adjusted Discharges (CMAD) 4,165 4,162 3,771 Case Mix Adjusted Equivalent Patient Days (CMAEPD) 48,776 48,121 42,851 8,869 Case Mix Adjusted Equivalent Discharges (CMAED) 9,805 9,325 5 E. **Gross Revenue Per Statistic** 1 Total Gross Revenue per Patient Day \$10,868 \$8,535 \$9,423 2 Total Gross Revenue per Discharge \$54,062 \$44,044 \$45,527 Total Gross Revenue per EPD \$4,616 \$4,007 \$3,810 3 \$19,661 \$19,358 4 Total Gross Revenue per ED \$22,962 Total Gross Revenue per CMAEPD \$4,010 \$3,146 \$3,472 Total Gross Revenue per CMAED \$19,948 \$16,234 \$16,776 6

\$1,961

\$9,753

\$1,701

\$8,777

\$1,704

\$8,231

7

Inpatient Gross Revenue per EPD

Inpatient Gross Revenue per ED

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\$33,765,667

\$35,052,413

\$33,158,730

Total Salary and Fringe Benefits Expense

#### JOHNSON MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2011** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (3) ACTUAL ACTUAL ACTUAL LINE **DESCRIPTION** FY 2009 FY 2010 FY 2011 Total Full Time Equivalent Employees (FTEs) L. Total Nursing FTEs 119.0 125.4 119.6 1 2 Total Physician FTEs 11.3 5.9 0.0 3 Total Non-Nursing, Non-Physician FTEs 338.9 344.4 343.9 469.2 475.7 463.5 Total Full Time Equivalent Employees (FTEs) Μ. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$77,014 \$80,046 \$80,319 Nursing Fringe Benefits Expense per FTE \$20,374 \$25,018 \$21,296 2 3 Total Nursing Salary and Fringe Benefits Expense per FTE \$97,389 \$105,065 \$101,615 N. Physician Salary and Fringe Expense per FTE Physician Salary Expense per FTE \$224,916 \$117,352 \$0 1 \$0 Physician Fringe Benefits Expense per FTE \$59,503 \$36,678 2 Total Physician Salary and Fringe Benefits Expense per FTE \$154,030 \$0 3 \$284,419 Ο. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE Non-Nursing, Non-Physician Salary Expense per FTE \$44,352 \$46,268 \$48,278 1 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$14,616 \$12,802 \$11,601 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE 3 \$55,953 \$60,884 \$61,080 P. Total Salary and Fringe Benefits Expense per FTE Total Salary Expense per FTE \$56,985 \$56,054 \$56,546 1 Total Fringe Benefits Expense per FTE \$14,980 \$17,632 \$14,994 2 Total Salary and Fringe Benefits Expense per FTE \$71,964 \$73,686 \$71,540 3 Total Salary and Fringe Ben. Expense per Statistic Total Salary and Fringe Benefits Expense per Patient Day \$1,876 \$1,976 \$2,100 \$10,199 \$10,146 2 Total Salary and Fringe Benefits Expense per Discharge \$9,333 3 Total Salary and Fringe Benefits Expense per EPD \$797 \$882 \$893 Total Salary and Fringe Benefits Expense per ED \$3,964 \$4,553 \$4,314 4

\$692

\$3,444

\$728

\$3,759

\$774

\$3,739

Total Salary and Fringe Benefits Expense per CMAEPD

Total Salary and Fringe Benefits Expense per CMAED

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