	MIDSTATE MEDICAL	CENTER				
	TWELVE MONTHS ACT	UAL FILING				
	FISCAL YEAR	2011				
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION						
(1)	(2)	(3)	(4)	(5)	(6)	
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 <u>ACTUAL</u>	AMOUNT DIFFERENCE	% DIFFERENCE	
I.	ASSETS					
Α.	Current Assets:					
1	Cash and Cash Equivalents	\$28,181,027	\$19,361,929	(\$8,819,098)	-31%	
2	Short Term Investments	\$0	\$0	\$0	0%	
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$23,291,912	\$23,676,854	\$384,942	2%	
4	Current Assets Whose Use is Limited for Current Liabilities	\$1,168,505	\$0	(\$1,168,505)	-100%	
5	Due From Affiliates	\$0	\$0	\$0	0%	
6	Due From Third Party Payers	\$0	\$0	\$0	0%	
7	Inventories of Supplies	\$1,599,146	\$1,896,399	\$297,253	19%	
8	Prepaid Expenses	\$1,138,539	\$2,561,470	\$1,422,931	125%	
9	Other Current Assets	\$1,258,006	\$1,416,029	\$158,023	13%	
	Total Current Assets	\$56,637,135	\$48,912,681	(\$7,724,454)	-14%	
В.	Noncurrent Assets Whose Use is Limited:					
1	Held by Trustee	\$12,195,310	\$11,682,166	(\$513,144)	-4%	
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%	
3	Funds Held in Escrow	\$0	\$6,312,325	\$6,312,325	0%	
4	Other Noncurrent Assets Whose Use is Limited	\$278,277	\$119,216	(\$159,061)	-57%	
	Total Noncurrent Assets Whose Use is Limited:	\$12,473,587	\$18,113,707	\$5,640,120	45%	
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%	
6	Long Term Investments	\$12,946,811	\$12,501,552	(\$445,259)	-3%	
7	Other Noncurrent Assets	\$21,708,793	\$29,971,427	\$8,262,634	38%	
C.	Net Fixed Assets:					
1	Property, Plant and Equipment	\$231,167,762	\$242,571,664	\$11,403,902	5%	
2	Less: Accumulated Depreciation	\$98,568,512	\$111,313,262	\$12,744,750	13%	
	Property, Plant and Equipment, Net	\$132,599,250	\$131,258,402	(\$1,340,848)	-1%	
3	Construction in Progress	\$1,372,133	\$338,221	(\$1,033,912)	-75%	
	Total Net Fixed Assets	\$133,971,383	\$131,596,623	(\$2,374,760)	-2%	
	Total Assets	\$237,737,709	\$241,095,990	\$3,358,281	1%	

	MIDSTATE MEI	DICAL CENTER				
	TWELVE MONTHS	S ACTUAL FILING				
	FISCAL YEAR 2011					
	REPORT 100 - HOSPITAL BAI	ANCE SHEET INFORM	ATION			
(1)	(2) (3) (4) (5)					
		FY 2010	FY 2011	AMOUNT	(6) %	
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE	
II.	LIABILITIES AND NET ASSETS					
Α.	Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$7,161,187	\$3,860,594	(\$3,300,593)	-46%	
2	Salaries, Wages and Payroll Taxes	\$8,443,767	\$9,082,834	\$639,067	8%	
3	Due To Third Party Payers	\$942,231	\$1,800,530	\$858,299	91%	
4	Due To Affiliates	\$0	\$0	\$0	0%	
5	Current Portion of Long Term Debt	\$2,335,000	\$0	(\$2,335,000)	-100%	
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%	
7	Other Current Liabilities	\$10,442,247	\$10,646,951	\$204,704	2%	
	Total Current Liabilities	\$29,324,432	\$25,390,909	(\$3,933,523)	-13%	
В.	Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$80,580,000	\$88,754,643	\$8,174,643	10%	
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%	
	Total Long Term Debt	\$80,580,000	\$88,754,643	\$8,174,643	10%	
3	Accrued Pension Liability	\$52,087,773	\$57,749,335	\$5,661,562	11%	
4	Other Long Term Liabilities	\$2,001,497	\$1,953,497	(\$48,000)	-2%	
	Total Long Term Liabilities	\$134,669,270	\$148,457,475	\$13,788,205	10%	
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%	
C.	Net Assets:					
1	Unrestricted Net Assets or Equity	\$58,808,950	\$52,820,335	(\$5,988,615)	-10%	
2	Temporarily Restricted Net Assets	\$1,962,184	\$1,966,917	\$4,733	0%	
3	Permanently Restricted Net Assets	\$12,972,873	\$12,460,354	(\$512,519)	-4%	
	Total Net Assets	\$73,744,007	\$67,247,606	(\$6,496,401)	-9%	
	Total Liabilities and Net Assets	\$237,737,709	\$241,095,990	\$3,358,281	1%	

	MIDSTATE M	EDICAL CENTER			
	TWELVE MONT	HS ACTUAL FILING			
		L YEAR 2011			
	REPORT 150 - HOSPITAL STATEM				
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6)
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$374,870,862	\$423,415,942	\$48,545,080	13%
2	Less: Allowances	\$189,210,727	\$223,635,468	\$34,424,741	18%
3	Less: Charity Care	\$3,637,983	\$3,025,038	(\$612,945)	-17%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$182,022,152	\$196,755,436	\$14,733,284	8%
5	Other Operating Revenue	\$18,496,119	\$14,343,247	(\$4,152,872)	-22%
6	Net Assets Released from Restrictions	\$199,314	\$241,164	\$41,850	21%
	Total Operating Revenue	\$200,717,585	\$211,339,847	\$10,622,262	5%
В.	Operating Expenses:				
1	Salaries and Wages	\$69,225,416	\$73,213,622	\$3,988,206	6%
2	Fringe Benefits	\$21,359,834	\$26,412,104	\$5,052,270	24%
3	Physicians Fees	\$1,479,671	\$1,503,048	\$23,377	2%
4	Supplies and Drugs	\$19,243,667	\$22,136,153	\$2,892,486	15%
5	Depreciation and Amortization	\$10,982,105	\$12,845,628	\$1,863,523	17%
6	Bad Debts	\$10,465,542	\$7,875,420	(\$2,590,122)	-25%
7	Interest	\$2,221,191	\$2,222,925	\$1,734	0%
8	Malpractice	\$5,917,588	\$5,172,300	(\$745,288)	-13%
9	Other Operating Expenses	\$49,286,758	\$52,294,087	\$3,007,329	6%
	Total Operating Expenses	\$190,181,772	\$203,675,287	\$13,493,515	7%
	Income/(Loss) From Operations	\$10,535,813	\$7,664,560	(\$2,871,253)	-27%
C.	Non-Operating Revenue:				
1	Income from Investments	\$261,107	\$130,175	(\$130,932)	-50%
2	Gifts, Contributions and Donations	\$18,750	\$247,500	\$228,750	1220%
3	Other Non-Operating Gains/(Losses)	\$973,487	\$795,107	(\$178,380)	-18%
	Total Non-Operating Revenue	\$1,253,344	\$1,172,782	(\$80,562)	-6%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$11,789,157	\$8,837,342	(\$2,951,815)	-25%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$668,077	(\$610,653)	(\$1,278,730)	-191%
	All Other Adjustments	(\$1,387,309)	(\$106,639)	\$1,280,670	-92%
	Total Other Adjustments	(\$719,232)	(\$717,292)	\$1,940	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$11,069,925	\$8,120,050	(\$2,949,875)	-27%
	Principal Payments	\$2,390,000	\$82,915,000	\$80,525,000	3369%

MIDSTATE MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

2 MEDICARE MANAGED CARE \$17,130.048 \$22,714.080 \$55,76.632 33% 3 MEDICAD \$11,923.044 \$11,921.049 \$7,467,702 65% 4 MEDICALD \$11,923.044 \$11,921.049 \$7,467,702 65% 6 COMMERCIAL, INSURANCE \$22,333.449 \$12,341.049 \$12,690.01 25% 6 COMMERCIAL, INSURANCE \$22,333.449 \$24,041.03 \$10,664.07 75% 7 NON-GOVERNMENT MANAGED CARE \$45,652.442 \$484.215.434 \$2,286.617 -100% 8 WORKER'S COMPENSATION \$334.555 \$33.311.42 \$34.51.212 50% 9 SELF-PAYIVUNINSURED \$324.556 \$33.311.42 \$34.121 100% 11 OTHER \$20,576.632 \$55.940.119 \$6.534.938 13% 8. OUTPATIENT GROSS REVENUE \$181,486.26 \$20,4208,6669 \$23,028.043 13% 9. MEDICARE MANAGED CARE \$11,111,119,365 \$156,229,346 \$41,716,412 40% 9. MEDICARE MA	(1)	(2)	(3)	(4)	(5)	(6)
Image: Construction of the image is a standard of th			FY 2010	FY 2011	AMOUNT	%
NPATIENT GROSS REVENUE S88.106.748 S95.456.131 S7.349.383 8% 1 MEDICARE TRADITIONAL S88.106.748 S95.456.131 S7.349.383 8% 2 MEDICARE TADITIONAL S88.106.748 S95.456.131 S7.349.383 8% 3 MEDICAID S11.323.048 S2.71.4489 S5.075.632 33% 4 MEDICAID MANAGED CARE S8.492.442 S10.818.22 S2.12.29.09 22% 5 CHAMPUSTRICARE S2.33.449 S2.404.103 S10.654 0% 6 COMMERCIAL INSURANCE S2.33.449 S2.404.103 S10.654 0% 7 NON-GOVERNMENT MANAGED CARE \$45.652.482 S44.215.834 S2.843.112 50% 9 SELF- PAYJUNINSURED \$3.334.556 \$53.391.142 (S2.896.617 50 (S2.896.617 50 (S2.896.617 10% 10 OFTAL INPATIENT GROSS REVENUE \$181.100.625 \$55.940.191 \$6.53.398.13% 14% 1 MEDICARE TRADITIONAL \$49.405.253 \$55.940.191 \$6.53.498.13%<	LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
NPATIENT GROSS REVENUE S88.106.748 S95.456.131 S7.349.383 8% 1 MEDICARE TRADITIONAL S88.106.748 S95.456.131 S7.349.383 8% 2 MEDICARE TADITIONAL S88.106.748 S95.456.131 S7.349.383 8% 3 MEDICAID S11.323.048 S2.71.4489 S5.075.632 33% 4 MEDICAID MANAGED CARE S8.492.442 S10.818.22 S2.12.29.09 22% 5 CHAMPUSTRICARE S2.33.449 S2.404.103 S10.654 0% 6 COMMERCIAL INSURANCE S2.33.449 S2.404.103 S10.654 0% 7 NON-GOVERNMENT MANAGED CARE \$45.652.482 S44.215.834 S2.843.112 50% 9 SELF- PAYJUNINSURED \$3.334.556 \$53.391.142 (S2.896.617 50 (S2.896.617 50 (S2.896.617 10% 10 OFTAL INPATIENT GROSS REVENUE \$181.100.625 \$55.940.191 \$6.53.398.13% 14% 1 MEDICARE TRADITIONAL \$49.405.253 \$55.940.191 \$6.53.498.13%<						
NPATIENT GROSS REVENUE S88.106.748 S95.456.131 S7.349.383 8% 1 MEDICARE TRADITIONAL S88.106.748 S95.456.131 S7.349.383 8% 2 MEDICARE TADITIONAL S88.106.748 S95.456.131 S7.349.383 8% 3 MEDICAID S11.323.048 S2.71.4489 S5.075.632 33% 4 MEDICAID MANAGED CARE S8.492.442 S10.818.22 S2.12.29.09 22% 5 CHAMPUSTRICARE S2.33.449 S2.404.103 S10.654 0% 6 COMMERCIAL INSURANCE S2.33.449 S2.404.103 S10.654 0% 7 NON-GOVERNMENT MANAGED CARE \$45.652.482 S44.215.834 S2.843.112 50% 9 SELF- PAYJUNINSURED \$3.334.556 \$53.391.142 (S2.896.617 50 (S2.896.617 50 (S2.896.617 10% 10 OFTAL INPATIENT GROSS REVENUE \$181.100.625 \$55.940.191 \$6.53.398.13% 14% 1 MEDICARE TRADITIONAL \$49.405.253 \$55.940.191 \$6.53.498.13%<	1.					
1 MEDICARE TRADITIONAL \$88,106,748 \$99,466,131 \$57,349,343 8% 2 MEDICARE \$17,360,048 \$22,744,803 \$5,576,862 33% 3 MEDICAID \$11,323,947 \$19,391,648 \$5,746,802 35% 4 MEDICAID \$38,425,424 \$10,618,522 \$21,25,900 25% 6 COMMERCIAL INSURANCE \$23,394,494 \$24,404,103 \$10,654 0% 7 NON-GOVERNMENT MANAGED CARE \$48,625,442 \$48,415,834 \$26,866,617 \$0 (\$2,286,411) -14% 10 SAGA \$25,866,617 \$0 (\$2,286,411) -10% 11 OTHER \$131,80,662 \$204,208,669 \$23,308,043 13% 2 MEDICARE TRADITIONAL \$49,402,53 \$55,940,191 \$6,534,393 14% 3 MEDICARE TRADITIONAL \$49,402,53 \$55,594,802 \$13,86,813 13% 4 MEDICARE TRADITIONAL \$49,402,53 \$55,594,803 \$14,212 40% 5 CHAMPUSTHIN	1.	GROSS REVENUE BY PAYER				
2 NEDICARE MANAGED CARE \$17,130,048 \$22,714,680 \$55,756,832 33% 3 MEDICAD \$11,829,849 \$11,931,869 \$7,467,702 63% 4 MEDICAD \$11,829,849 \$11,821,869 \$7,467,702 63% 6 CHAMPUSTRICARE \$22,333,449 \$12,341,649 \$12,654,100 \$12,654,100 6 COMMERCIAL, INSURANCE \$23,834,462 \$442,153,834 \$28,833,281,653 \$10,654,325 \$28,552,400 \$10,654 7 NON-GOVERNMENT MANAGED CARE \$45,654,429 \$42,153,434 \$28,851,71 \$10,654 \$28,851,71 \$10,653 \$28,1212 \$0% 9 SELF-PAYUNINSURED \$3,294,565 \$33,391,422 \$18,341,619 \$0% \$11,00,656 \$24,226,043 \$15% 8 MODICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,634,338 \$13% \$12% \$10,864,524,4264,439 \$13% 8 MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,634,398 \$13% \$12% \$12,653,493 \$13% \$12	Α.	INPATIENT GROSS REVENUE				
3 MEDICAID \$11.923.947 \$19.91649 \$7.467.702 63% 4 MEDICAID MANAGED CARE \$8.492.492 \$10.1615.222 \$2.152.980 25% 5 CHAMPUS/TRICARE \$223.349 \$224.04.103 \$\$10.664 0% 6 COMMERCIAL INSURANCE \$233.349 \$2.240.4103 \$\$10.64.325 \$381.212 60% 7 NON-GOVERNMENT MANAGED CARE \$46.62.482 \$48.215.834 \$2.563.352 6% 8 SELF-PAYUNINSURED \$3.334.466 \$3.91.142 (\$58.414) -14% 10 SAGA \$2.566.617 \$30 \$74.16.19 974.16.19 744.149 10 TOTAL INPATIENT GROSS REVENUE \$11.910.520 \$56.940.191 \$66.534.938 13% 1 MEDICARE TRADITIONAL \$49.405.253 \$56.940.191 \$66.534.938 \$13.422.93 33% 1 MEDICARE TRADITIONAL \$49.405.253 \$56.940.191 \$66.534.938 \$13.422.93 33% 2 MEDICARE TRADITIONAL \$149.490.664 \$54.38.39 \$14.4	1		\$88,106,748	\$95,456,131	\$7,349,383	8%
4 MÉDICAID MANAGED CARE 58,492,542 \$10,618,522 \$2,125,980 22,193 6 COMMERCIAL INSURANCE \$2,203,440 \$2,206,44 (\$30,400) -12% 6 COMMERCIAL INSURANCE \$2,233,440 \$2,404,103 \$10,654 (\$50,700,113 \$10,654 (\$50,700,113 \$10,644,225 \$33,51,212 50% 9 SELF- PAYUINISURED \$3,334,556 \$3,391,422 \$33,534,556 \$30,91,422 \$33,656,617 -100% 10 OTHER \$50 \$741,619 0% \$741,619 0% 7 INFDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,533,493 13% 8 OUTPATIENT GROSS REVENUE \$11,910,936 \$16,629,348 \$4,718,412 40% 9 SELF. PAYUININGURED CARE \$11,910,936 \$16,629,348 \$4,718,412 40% 10 MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,553,433 \$134,429 33% 2 OMEDICARE \$10,9664 \$52,408,4393 \$134,429 33%	2	MEDICARE MANAGED CARE	\$17,136,048	\$22,714,680	\$5,578,632	33%
5 CHAMPUSTRICARE \$221,124 \$220,664 (\$30,400) 12/3 6 COMMERCIAL INSURANCE \$2,33,449 \$2,440,103 \$10,664 0% 7 NON-GOVERNMENT MANAGED CARE \$45,662,482 \$48,618,834 \$2,683,352 6% 8 WORKER'S COMPENSATION \$3,334,556 \$3,391,142 (\$25,86,617 \$3,02 (\$25,86,617 140 10 SAGA \$2,586,607 \$3,034,556 \$23,028,043 13% 10 OTHER INPATIENT GROSS REVENUE \$10,936 \$16,629,348 \$471,619 \$741,619 \$7573,5384<	-	-		<i>+ - </i>		63%
6 COMMERCIAL INSURANCE \$2333.449 \$2.494.103 \$10.654 0% 7 NON-GOVERNMENT MANAGED CARE \$45.652.482 \$48.18.834 \$25.83.52 6% 8 WORKER'S COMPENSATION \$703.113 \$1.054.325 \$351.212 50% 9 SELF- PAY/UNINSURED \$3.394.566 \$3.391.142 (\$543.114) -14% 10 SAGA \$2.356.617 . \$0 (\$22.566.617) -100% 0 TOTAL INPATIENT GROSS REVENUE \$181.160.62 \$204.028.669 \$23.028.043 13% 8. OUTPATIENT GROSS REVENUE \$11.910.936 \$16.629.348 \$4.718.412 40% 9 MEDICARE TRANTIONAL \$49.405.253 \$55.940.191 \$6.534.938 13% 2 MEDICARE TRANTIONAL \$11.910.936 \$16.629.348 \$4.718.412 40% 4 MEDICARE MANAGED CARE \$140.471.438.968.420 337.42.983 13%4.229 337.66 6 COMMERCIAL INSURANCE \$3.506.977 \$3.806.959 \$22.958.329 9% 9%	-		\$8,492,542	\$10,618,522	\$2,125,980	25%
7 NON-GOVERNMENT MANAGED CARE \$45,622,422 \$48,216,334 \$2,563,352 6% 8 WORKER'S COMPENSATION \$703,113 \$1,064,325 \$351,212 50% 9 SELF- PAY/UNINSURED \$3,334,556 \$3,391,142 (\$543,414) -14% 10 SAGA \$2,268,617 \$00 \$\$741,619 \$\$741,812 \$\$749 \$\$73,393 13% \$\$ \$\$94,523 \$\$55,94,919 \$\$\$53,393 13% \$\$65,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547 \$\$96,547						-12%
8 WORKER'S COMPENSATION \$703,113 \$1.064,325 \$351,212 50% 9 SELF-PAYUNINSURED \$3,341,566 \$3,391,142 (\$554,314) 14% 10 SAGA \$2,586,617 \$00 \$741,619 0% 11 OTHER \$0 \$741,619 0% 10% 11 MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,534,938 13% 2 MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,534,938 13% 2 MEDICARE MANAGED CARE \$11,910,396 \$16,629,348 \$4,718,412 40% 4 MEDICADID \$11,808,634 \$20,220 \$9,23,389 88% 4 MEDICAID MANAGED CARE \$18,271,615 \$20,788,054 \$2,486,439 14% 5 CHAMPUSTRICARE \$400,864 \$543,893 \$13,4229 33% 6 COMMERCIAL INSURANCE \$3,306,977 \$3,306,959 \$299,982 9% 7 NON-GOVERSATION \$2,57,327 \$3,410,851 \$555,9			.,,,	, , ,		
9 SELF. PAYUNINSURED \$3,394,456 \$3,391,425 \$3,393,453 \$3,42,29 \$3,99 \$3,55,372 \$3,391,425 \$3,391,425 \$3,391,425 \$3,391,425 \$3,393,453 \$3,42,49,39 \$3,42,49,39 \$3,42,49,39 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
10 SAGA \$2,586,617 \$0 \$2,586,617 -100% 11 OTHER \$0 \$741,619 \$741,619 0% B. OUTPATIENT GROSS REVENUE \$181,180,626 \$204,208,669 \$23,028,043 13% B. MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,534,938 13% 2 MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,534,938 13% 2 MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,534,938 13% 4 MEDICAID \$11,910,936 \$16,229,348 \$4,718,412 40% 5 CHAMPUS/TRICARE \$140,210,486,439 14% \$543,803 \$134,229 33% 6 COMMERCIAL INSURANCE \$3409,664 \$24,466,439 14% \$90,565,743 \$86,553,999 7% 8 WORKER S COMPENSATION \$2,557,327 \$2,875,342 \$316,055 12% 9 SELF- PAYUNINSURED \$17,741,172 \$7,731,745 \$4,473,917 10 \$4,783,917 \$10 \$6,440,036 -6% 10 SAGA \$12,946,98				,,,,		
11 OTHER 50 \$741.619 \$741.612 \$743.606 \$543.938 \$134.229 \$763.306 \$741.612 \$740.716 \$750.716 \$741.612 \$740.716 \$750.716 \$741.612 \$750.717 \$750.717 \$750.717 \$750.717 \$750.717 \$750.717 \$750.717.7172 \$757.727 \$22.573.322 \$313.605.917 \$750.713.7172 \$771.172 \$757.711.72 \$757.711.72 \$757.711.72 \$757.711.72 \$757.711.72 \$757.711.72 \$757.711.72 \$757.711.72 \$757.711.72 \$757.710.734 \$757.721.717.717.7177.717.717.7171.717.7						
TOTAL INPATIENT GROSS REVENUE \$161,180,626 \$20,208,669 \$23,028,043 13% 1 MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$6,534,938 13% 2 MEDICARE TRADITIONAL \$11,910,936 \$16,629,348 \$4,718,412 40% 3 MEDICARE MANAGED CARE \$11,910,936 \$16,629,348 \$4,718,412 40% 4 MEDICAID \$11,910,936 \$16,229,348 \$4,718,412 40% 5 CHAMPUS/TRICARE \$142,216,15 \$20,852,054 \$2,486,439 14% 5 CHAMPUS/TRICARE \$34006,977 \$3,806,959 \$29,982 9% 6 COMMERCIAL INSURANCE \$3,506,977 \$3,806,959 \$259,982 9% 7 NON-OOVERNIMENT MANAGED CARE \$34,223 \$318,055 12% 9 SELF- PAY/UNINSURED \$7,741,172 \$7,013 (\$4,783,917 \$10 10 SAGA \$4,763,917 \$0 (\$4,783,917 \$10 \$6,420 10 SAGA \$137,512,001 \$151,396,32	-					
B. OUTPATIENT GROSS REVENUE 9 9 1 MEDICARE TRADITIONAL \$49,405,253 \$55,940,191 \$56,534,938 13% 2 MEDICARE MANAGED CARE \$11,910,366 \$16,629,348 \$4,716,412 40% 3 MEDICAID \$11,908,634 \$20,622,023 \$9,723,389 88% 4 MEDICAID \$11,098,634 \$20,464 \$54,439 14% 6 COMMERCIAL INSURANCE \$3,506,977 \$3,806,959 \$299,982 9% 7 NON-GOVERNMENT MANAGED CARE \$84,004,741 \$89,558,740 \$5,553,999 7% 8 WORKER'S COMPENSATION \$2,557,327 \$2,673,982 \$318,055 12% 9 SELF-PAY/UNINSURED \$7,741,172 \$7,307,136 (\$444,036) -6% 10 OTHER \$10 \$265,547 \$965,547 \$96 11 OTHER \$102,77,117 \$10,267,044 \$36,421 \$10% 12 TOTAL OUTPATIENT GROSS REVENUE \$131,369,322 \$131,864,321 10% <	11					
1 MEDICARE TRADITIONAL \$49,405,263 \$55,940,191 \$65,634,938 19% 2 MEDICARE MANAGED CARE \$11,910,936 \$16,629,348 \$4,718,412 40% 4 MEDICAID \$11,908,634 \$20,622,023 \$9,723,389 88% 4 MEDICAID MANAGED CARE \$18,271,615 \$20,766,644 \$24,86,439 14% 5 CHAMPUSTRICARE \$409,664 \$543,893 \$134,229 33% 6 COMMERCIAL INSURANCE \$35,060,977 \$3,800,695 \$299,982 9% 7 NON-GOVERNMENT MANAGED CARE \$84,004,711 \$89,558,740 \$55,553,999 7% 8 WORKER'S COMPENSATION \$2,567,327 \$2,87,532 \$318,055 12% 9 SELF- PAY/UNINSURED \$7,741,172 \$7,01,36 \$434,0361 -8% 10 SAGA \$4,783,917 100% TOTAL OUTPATIENT GROSS REVENUE \$193,690,236 \$219,207,273 \$25,517,037 13% C TOTAL GROSS REVENUE \$193,690,236 \$219,207,273 \$31,384,321	_		\$181,180,626	\$204,208,669	\$23,028,043	13%
2 MEDICARE MANAGED CARE \$1110936 \$16,629,448 \$4,718,412 40% 3 MEDICAID \$11,098,634 \$20,822,023 \$9,723,389 88% 4 MEDICAID \$11,098,634 \$20,822,023 \$9,723,389 88% 5 CHAMPUSTRICARE \$409,664 \$\$2486,439 14% 6 COMMERCIAL INSURANCE \$3,506,977 \$3,800,959 \$299,982 9% 7 NON-GOVERNMENT MANAGED CARE \$84,004,741 \$89,558,740 \$5,553,999 7% 8 WORKER'S COMPENSATION \$2,557,327 \$2,875,382 \$318,055 12% 9 SELF-PAYUNINSURED \$7,741,172 \$7,307,136 (\$444,036) -6% 10 SAGA \$4,783,917 \$0 (\$64,783,917) -100% 10 THER \$193,690,236 \$219,207,27 \$25,517,037 13% C TOTAL OUTPATIENT GROSS REVENUE \$193,690,236 \$219,207,27 \$25,517,037 13% 1 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 <td></td> <td></td> <td>• · • • • • • • • •</td> <td>•== • • • • • •</td> <td>AA F- · · · · ·</td> <td></td>			• · • • • • • • • •	• == • • • • • •	A A F- · · · · ·	
3 MEDICAID \$11.098,634 \$20.822,023 \$9.723,389 88% 4 MEDICAID MANAGED CARE \$18,271,615 \$20.758,054 \$2,486,439 14% 5 CHAMPUS/TRICARE \$409,664 \$543,803 \$134,229 33% 6 COMMERCIAL INSURANCE \$30,506,977 \$33,806,959 \$229,982 9% 7 NON-GOVERNMENT MANAGED CARE \$84,004,741 \$99,558,740 \$5,553,999 7% 8 WORKER'S COMPENSATION \$2,557,327 \$2,875,382 \$318,055 12% 9 SELF- PAY/UNINSURED \$7,741,172 \$7,07,136 (\$4,783,917) 100% 10 SAGA \$4,783,917 \$30 (\$4,783,917) 110% 6 TOTAL OUTPATIENT GROSS REVENUE \$193,690,236 \$219,027,273 \$25,517,037 13% 7 TOTAL OUTPATIENT GROSS REVENUE \$137,512,001 \$151,396,322 \$13,884,321 10% 7 TOTAL GROSS REVENUE \$132,022,815 \$40,213,672 \$17,741,919 175% 4 MEDICARE						
4 MEDICAID MANAGED CARE \$18,271,615 \$20,758,054 \$2,486,439 14% 5 CHAMPUS/TRICARE \$409,664 \$543,893 \$13,4,229 33% 6 COMMERCIAL INSURANCE \$3,506,97 \$3,806,959 \$299,982 9% 7 NON-GOVERNMENT MANAGED CARE \$84,004,741 \$\$95,553,399 7% 8 WORKER'S COMPENSATION \$2,557,327 \$2,875,382 \$318,055 12% 9 SELF- PAY/UNINSURED \$7,741,172 \$7,70,736 (\$4,783,917) 100% 10 SAGA \$4,783,917 \$0 (\$4,783,917) 100% 11 OTHER \$0 \$965,547 \$965,547 \$965,547 1 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 4 MEDICARE MANAGED CARE \$29,046,984 \$39,344,028 \$10,297,044 \$35% 3 MEDICAID \$23,022,581 \$40,213,672 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
5 CHAMPUS/TRICARE \$409,664 \$543,893 \$134,229 33% 6 COMMERCIAL INSURANCE \$3,506,977 \$3,806,959 \$299,962 9% 7 NON-GOVERNMENT MANAGED CARE \$84,004,741 \$89,558,740 \$5,553,999 7% 8 WORKER'S COMPENSATION \$2,875,382 \$318,055 12% 9 SELF- PAY/UNINSURED \$7,741,172 \$7,307,136 (\$44,783,917) -100% 10 SAGA \$4,783,917 \$0 (\$4,783,917) -100% 7 TOTAL OUTPATIENT GROSS REVENUE \$193,690,236 \$219,207,273 \$25,517,037 13% C. TOTAL OUTPATIENT GROSS REVENUE \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE MANAGED CARE \$229,046,984 \$33,344,028 \$10,237,044 35% 3 MEDICARD MANAGED CARE \$220,764,157 \$31,376,576 \$4,612,419 17% 4 MEDICARD MANAGED C			+ //	1 7 7		
6 COMMERCIAL INSURANCE \$3,506,977 \$3,806,959 \$299,982 9% 7 NON-GOVERNMENT MANAGED CARE \$84,004,741 \$89,558,740 \$5,553,999 7% 8 WORKER'S COMPENSATION \$2,557,327 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,875,322 \$2,873,321 \$2,974,333,917 -100% \$10 \$10 THER \$20 \$965,547 \$965,547 \$965,547 \$0% \$965,547 \$0% \$965,547 \$965,547 \$0% \$10 THER \$10 THER \$100,97,043 \$13% \$13,864,321 10% \$10,856,547 \$0% \$10,856,547 \$0% \$10,856,547 \$0% \$13,864,321 10% \$10,856,547 0% \$10 \$11 OTTLE OTTLE \$10,856,547 10% \$10 \$13,8764,517 \$13,8764,512,419 10% \$10 \$10,856,211,01 \$1				1 7 7		
7 NON-GOVERNMENT MANAGED CARE \$84,004,741 \$89,558,740 \$\$5,553,999 7% 8 WORKER'S COMPENSATION \$2,557,327 \$2,875,382 \$318,055 12% 9 SELF-PAY/UNINSURED \$7,741,172 \$7,307,136 (\$434,036) -6% 10 SAGA \$4,783,917 \$0 \$(\$434,036) -6% 11 OTHER \$0 \$965,547 \$965,547 0% 70TAL OUTPATIENT GROSS REVENUE \$193,690,236 \$219,207,273 \$25,517,037 13% C TOTAL GROSS REVENUE \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE TRADITIONAL \$137,512,001 \$151,396,372 \$10,297,044 35% 3 MEDICAID \$23,022,581 \$40,213,072 \$11,91,091 75% 4 MEDICAID \$23,022,581 \$40,213,072 \$10,376 \$16,173 4 MEDICAID \$23,022,581 \$40,213,072 \$10,636 \$5% 4 MEDICARE MANAGED CARE \$26,761,157 \$31,376,576 \$4,612,419 17% 5 CHAMPUS/TRICARE \$560			. ,			
8 WORKER'S COMPENSATION \$2,557,327 \$2,875,382 \$318,055 12% 9 SELF- PAY/UNINSURED \$7,741,172 \$7,307,136 (\$4,783,017) -100% 11 OTHER \$0 \$965,547 \$965,547 0% (\$4,783,917) -100% 11 OTHER \$0 \$965,547 \$965,547 0% -100% 1 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 3 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 4 MEDICARE MANAGED CARE \$29,046,984 \$39,344,028 \$10,297,044 35% 3 MEDICAID \$23,022,581 \$40,213,672 \$17,191,091 75% 4 MEDICAID MANAGED CARE \$26,674,157 \$103,769 16% 6 COMMERCIAL INSURANCE \$132,9657,223 \$137,774,574 \$8,117,351 6% 6 COM						
9 SELF- PAY/UNINSURED \$7,741,172 \$7,307,136 (\$434,036) -6% 10 SAGA \$4,783,917 \$0 (\$4,783,917) +100% 11 OTHER \$0 \$965,547 \$17,91,017 \$13% C. TOTAL GROSS REVENUE \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE MANAGED CARE \$29,046,984 \$39,344,028 \$10,297,044 35% 3 MEDICAID \$23,022,581 \$40,213,672 \$11,376,576 \$4,612,419 17% 4 MEDICAID \$23,022,567,233 \$13,774,574 \$8,117,351 6% 6 COMMERCIAL INSURANCE \$3,260,440 \$3,292,707 \$669,267 21% </td <td></td> <td></td> <td>. , ,</td> <td>1 7 7</td> <td></td> <td></td>			. , ,	1 7 7		
10 SAGA \$4,783,917 \$1000000000000000000000000000000000000						
11 OTHER \$0 \$965,547 \$965,547 0% TOTAL OUTPATIENT GROSS REVENUE \$193,690,236 \$219,207,273 \$25,517,037 13% C. TOTAL GROSS REVENUE \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 3 MEDICAID \$23,022,581 \$40,213,672 \$17,191,091 75% 4 MEDICAID \$23,022,581 \$40,213,672 \$117,191,091 75% 6 COMMERCIAL INSURANCE \$26,764,157 \$31,376,576 \$4,612,419 17% 5 CHAMPUS/TRICARE \$660,788 \$764,557 \$10,636 5% 6 COMMERCIAL INSURANCE \$129,657,223 \$137,774,574 \$8,117,351 6% 9 SELF-PAY/UNINSURED \$11,675,728 \$10,698,278 \$97,70534 50 \$1,707,166 \$1,707,166 9% 10 SAGA \$7,370,534 \$0 \$1,707,166 \$1,707,166 9% 10% <t< td=""><td>-</td><td></td><td></td><td></td><td></td><td></td></t<>	-					
TOTAL OUTPATIENT GROSS REVENUE \$193,690,236 \$219,207,273 \$25,517,037 13% C. TOTAL GROSS REVENUE ************************************						
C. TOTAL GROSS REVENUE 1 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE MANAGED CARE \$29,046,984 \$39,344,028 \$10,297,044 35% 3 MEDICAID \$23,022,581 \$40,213,672 \$17,191,091 75% 4 MEDICAID MANAGED CARE \$26,764,157 \$31,376,576 \$4,612,419 17% 5 CHAMPUS/TRICARE \$660,788 \$764,557 \$103,769 16% 6 COMMERCIAL INSURANCE \$5,900,426 \$6,211,062 \$310,636 5% 7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,177,351 6% 8 WORKER'S COMPENSATION \$3,280,440 \$3,289,707 \$669,267 21% 9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$977,450) -8% 10 SAGA \$7,370,534 \$0 (\$7,370,534) -100% 11 OTAL GROSS REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13%	11					
1 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE MANAGED CARE \$29,046,984 \$39,344,028 \$10,297,044 35% 3 MEDICAID \$23,022,581 \$40,213,672 \$17,191,091 75% 4 MEDICAID MANAGED CARE \$26,764,157 \$\$11,376,576 \$4,612,419 17% 5 CHAMPUS/TRICARE \$660,788 \$764,557 \$103,769 16% 6 COMMERCIAL INSURANCE \$5,900,426 \$6,211,062 \$310,636 5% 7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,117,351 6% 8 WORKER'S COMPENSATION \$3,260,440 \$3,929,707 \$669,267 21% 9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$97,70,534) -100% 10 SAGA \$7,370,534 \$0 \$1,707,166 0% 11 OTHER \$0 \$1,707,166 \$1,707,166 0% 1 MEDICARE TRADITIONAL \$36,815,810		TOTAL OUTPATIENT GROSS REVENUE	\$193,090,230	\$219,207,273	\$23,317,037	13%
1 MEDICARE TRADITIONAL \$137,512,001 \$151,396,322 \$13,884,321 10% 2 MEDICARE MANAGED CARE \$29,046,984 \$39,344,028 \$10,297,044 35% 3 MEDICAID \$23,022,581 \$40,213,672 \$17,191,091 75% 4 MEDICAID MANAGED CARE \$26,764,157 \$\$11,376,576 \$4,612,419 17% 5 CHAMPUS/TRICARE \$660,788 \$764,557 \$103,769 16% 6 COMMERCIAL INSURANCE \$5,900,426 \$6,211,062 \$310,636 5% 7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,117,351 6% 8 WORKER'S COMPENSATION \$3,260,440 \$3,929,707 \$669,267 21% 9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$97,70,534) -100% 10 SAGA \$7,370,534 \$0 \$1,707,166 0% 11 OTHER \$0 \$1,707,166 \$1,707,166 0% 1 MEDICARE TRADITIONAL \$36,815,810	C	TOTAL GROSS REVENUE				
2 MEDICARE MANAGED CARE \$29,046,984 \$39,344,028 \$10,297,044 35% 3 MEDICAID \$23,022,581 \$40,213,672 \$17,191,091 75% 4 MEDICAID MANAGED CARE \$26,764,157 \$31,376,576 \$4,612,419 17% 5 CHAMPUS/TRICARE \$66,788 \$5764,557 \$103,769 16% 6 COMMERCIAL INSURANCE \$5,900,426 \$6,211,062 \$310,636 5% 7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,117,351 6% 8 WORKER'S COMPENSATION \$3,260,440 \$3,929,707 \$669,267 21% 9 SELF-PAY/UNINSURED \$11,675,728 \$10,698,278 (\$977,450) -8% 10 SAGA \$7,370,534 \$0 (\$7,370,534) -100% 11 OTHER \$0 \$11,675,728 \$10,698,278 \$3,244,877 9% 2 MEDICARE MANAGED CARE \$374,870,862 \$423,415,942 \$48,545,080 13% 11 MEDICARE MANAGED CARE <td></td> <td></td> <td>\$137.512.001</td> <td>\$151.396.322</td> <td>\$13.884.321</td> <td>10%</td>			\$137.512.001	\$151.396.322	\$13.884.321	10%
3 MEDICAID \$23,022,581 \$40,213,672 \$17,191,091 75% 4 MEDICAID MANAGED CARE \$26,764,157 \$31,376,576 \$4,612,419 17% 5 CHAMPUS/TRICARE \$660,788 \$764,557 \$103,769 16% 6 COMMERCIAL INSURANCE \$5,900,426 \$6,211,062 \$310,636 5% 7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,117,351 6% 8 WORKER'S COMPENSATION \$3,260,440 \$3,392,707 \$669,267 21% 9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$977,450) -8% 10 SAGA \$7,370,534 \$0 \$1,707,166 \$1,707,166 0% 11 OTHER \$0 \$1,707,166 \$1,707,166 0% 1% 1 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687 \$3,244,877 9% 1 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 2 MEDICARE MANAGED CAR	2					35%
4 MEDICAID MANAGED CARE \$26,764,157 \$31,376,576 \$4,612,419 17% 5 CHAMPUS/TRICARE \$660,788 \$764,557 \$103,769 16% 6 COMMERCIAL INSURANCE \$5,900,426 \$6,211,062 \$310,636 5% 7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,117,351 6% 8 WORKER'S COMPENSATION \$3,260,440 \$3,929,707 \$669,267 21% 9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$977,450) -8% 10 SAGA \$7,370,534 \$0 \$1,707,166 0% 11 OTHER \$0 \$1,707,166 \$1,707,166 0% 10 NET REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13% 11 OTHER \$0 \$1,707,166 0% 13% 12 NET REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13% 14 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687<			. , ,			75%
5 CHAMPUS/TRICARE \$660,788 \$764,557 \$103,769 16% 6 COMMERCIAL INSURANCE \$5,900,426 \$6,211,062 \$310,636 5% 7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,117,351 6% 8 WORKER'S COMPENSATION \$3,260,440 \$3,929,707 \$669,267 21% 9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$977,450) -8% 10 SAGA \$7,370,534 \$0 (\$7,370,534) -100% 11 OTHER \$0 \$1,707,166 \$1,707,166 0% TOTAL GROSS REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13% II. NET REVENUE BY PAYER	4	MEDICAID MANAGED CARE				17%
6 COMMERCIAL INSURANCE \$5,900,426 \$6,211,062 \$310,636 5% 7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,117,351 6% 8 WORKER'S COMPENSATION \$3,260,440 \$3,929,707 \$669,267 21% 9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$977,450) -8% 10 SAGA \$7,370,534 \$0 (\$7,370,534) -100% 11 OTHER \$0 \$1,707,166 9% \$1,707,166 9% 10 SAGA \$374,870,862 \$423,415,942 \$48,545,080 13% II. NET REVENUE BY PAYER \$36,815,810 \$40,060,687 \$3,244,877 9% 2 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687 \$3,244,877 9% 3 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 3 MEDICARE MANAGED CARE \$103,021 \$82,451 (\$20,570) -20% 4 MEDICARE MANAGED CARE \$103,021	5					16%
7 NON-GOVERNMENT MANAGED CARE \$129,657,223 \$137,774,574 \$8,117,351 6% 8 WORKER'S COMPENSATION \$3,260,440 \$3,929,707 \$669,267 21% 9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$977,450) -8% 10 SAGA \$7,370,534 \$0 (\$7,370,534) -100% 11 OTHER \$0 \$1,707,166 \$1,707,166 0% TOTAL GROSS REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13% II. NET REVENUE BY PAYER		COMMERCIAL INSURANCE				5%
9 SELF- PAY/UNINSURED \$11,675,728 \$10,698,278 (\$977,450) -8% 10 SAGA \$7,370,534 \$0 (\$7,370,534) -100% 11 OTHER \$0 \$1,707,166 \$1,707,166 0% TOTAL GROSS REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13% II. NET REVENUE BY PAYER - - - A. INPATIENT NET REVENUE \$36,815,810 \$40,060,687 \$3,244,877 9% 2 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687 \$3,244,877 9% 3 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 3 MEDICAID \$36,815,811 \$6,069,950 \$1,673,039 38% 4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8%	7	NON-GOVERNMENT MANAGED CARE	\$129,657,223			6%
10 SAGA \$7,370,534 \$0 (\$7,370,534) -100% 11 OTHER \$0 \$1,707,166 \$1,707,166 \$0% TOTAL GROSS REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13% II. NET REVENUE BY PAYER	8	WORKER'S COMPENSATION	\$3,260,440	\$3,929,707	\$669,267	21%
11 OTHER \$0 \$1,707,166 \$1,707,166 9% TOTAL GROSS REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13% II. NET REVENUE BY PAYER	9	SELF- PAY/UNINSURED	\$11,675,728	\$10,698,278	(\$977,450)	-8%
TOTAL GROSS REVENUE \$374,870,862 \$423,415,942 \$48,545,080 13% II. NET REVENUE BY PAYER	10	SAGA	\$7,370,534	\$0	(\$7,370,534)	-100%
II. NET REVENUE BY PAYER A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687 \$3,244,877 9% 2 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 3 MEDICAID \$36,815,810 \$6,069,950 \$1,673,039 38% 4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%	11	OTHER	\$0	\$1,707,166	\$1,707,166	0%
A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687 \$3,244,877 9% 2 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 3 MEDICAID \$4,396,911 \$6,069,950 \$1,673,039 38% 4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%		TOTAL GROSS REVENUE	\$374,870,862	\$423,415,942	\$48,545,080	13%
A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687 \$3,244,877 9% 2 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 3 MEDICAID \$4,396,911 \$6,069,950 \$1,673,039 38% 4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%						
1 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687 \$3,244,877 9% 2 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 3 MEDICAID \$4,396,911 \$6,069,950 \$1,673,039 38% 4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%	11.	<u>NET REVENUE BY PAYER</u>				
1 MEDICARE TRADITIONAL \$36,815,810 \$40,060,687 \$3,244,877 9% 2 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 3 MEDICAID \$4,396,911 \$6,069,950 \$1,673,039 38% 4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%	Α.	INPATIENT NET REVENUE				
2 MEDICARE MANAGED CARE \$7,108,600 \$8,517,337 \$1,408,737 20% 3 MEDICAID \$4,396,911 \$6,069,950 \$1,673,039 38% 4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%			\$36,815,810	\$40,060.687	\$3,244,877	9%
3 MEDICAID \$4,396,911 \$6,069,950 \$1,673,039 38% 4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%	2					20%
4 MEDICAID MANAGED CARE \$3,328,078 \$3,735,434 \$407,356 12% 5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%						38%
5 CHAMPUS/TRICARE \$103,021 \$82,451 (\$20,570) -20% 6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%						12%
6 COMMERCIAL INSURANCE \$1,714,399 \$1,843,918 \$129,519 8% 7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%	5					-20%
7 NON-GOVERNMENT MANAGED CARE \$30,284,098 \$32,290,415 \$2,006,317 7% 8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%	6					8%
8 WORKER'S COMPENSATION \$568,636 \$888,034 \$319,398 56% 9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%	_		. , ,	1 7 7	. ,	7%
9 SELF- PAY/UNINSURED \$102,665 \$303,258 \$200,593 195% 10 SAGA \$392,213 \$0 (\$392,213) -100%	8					56%
10 SAGA \$392,213 \$0 (\$392,213) -100%	9			. ,	. ,	195%
	10	SAGA		\$0		-100%
	11	OTHER		\$272,976		0%

MIDSTATE MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1) LINE	(2)	(3)	(4)	(5)	(6)
LINE		FY 2010	FY 2011	AMOUNT	%
	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$84,814,431	\$94,064,460	\$9,250,029	11%
В.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$15,499,035	\$16,632,192	\$1,133,157	7%
2	MEDICARE MANAGED CARE	\$3,734,870	\$4,825,098	\$1,090,228	29%
3	MEDICAID	\$3,182,821	\$4,460,061	\$1,277,240	40%
4	MEDICAID MANAGED CARE	\$5,513,562	\$6,488,567	\$975,005	18%
5	CHAMPUS/TRICARE	\$168,060	\$203,226	\$35,166	21%
6	COMMERCIAL INSURANCE	\$2,873,808	\$3,295,023	\$421,215	15%
7	NON-GOVERNMENT MANAGED CARE	\$56,272,298	\$60,157,455	\$3,885,157	7%
8	WORKER'S COMPENSATION	\$2,101,858	\$2,406,457	\$304,599	14%
9	SELF- PAY/UNINSURED	\$540,733	\$519,914	(\$20,819)	-4%
10	SAGA	\$370,710	\$0	(\$370,710)	-100%
11	OTHER	\$0	\$246,214	\$246,214	0%
	TOTAL OUTPATIENT NET REVENUE	\$90,257,755	\$99,234,207	\$8,976,452	10%
^					
C . 1	TOTAL NET REVENUE MEDICARE TRADITIONAL	\$52,314,845	\$56,692,879	\$4,378,034	8%
	MEDICARE MANAGED CARE	\$10.843.470	\$13,342,435	\$2,498,965	23%
3	MEDICARE MANAGED CARE	\$10,643,470	\$10,530,011	\$2,950,279	39%
4	MEDICAID MANAGED CARE	\$8,841,640	\$10,224,001	\$1,382,361	16%
5	CHAMPUS/TRICARE	\$271,081	\$285,677	\$14,596	5%
	COMMERCIAL INSURANCE	\$4,588,207	\$5,138,941	\$550,734	12%
7	NON-GOVERNMENT MANAGED CARE	\$86,556,396	\$92,447,870	\$5,891,474	7%
8	WORKER'S COMPENSATION	\$2,670,494	\$3,294,491	\$623,997	23%
	SELF- PAY/UNINSURED	\$643,398	\$823,172	\$179,774	28%
	SAGA	\$762,923	\$0	(\$762,923)	-100%
-	OTHER	\$0	\$519,190	\$519,190	0%
	TOTAL NET REVENUE	\$175,072,186	\$193,298,667	\$18,226,481	10%
III.	STATISTICS BY PAYER				
Α.	DISCHARGES				
A . 1	MEDICARE TRADITIONAL	3,870	3,930	60	2%
2	MEDICARE MANAGED CARE	749	896	147	20%
3	MEDICAID	749	965	211	20%
4	MEDICAID MEDICAID MANAGED CARE	987	1,141	154	16%
5	CHAMPUS/TRICARE	20	1,141	(1)	-5%
6	COMMERCIAL INSURANCE	158	127	(1)	-20%
7	NON-GOVERNMENT MANAGED CARE	2,850	2,890	40	1%
8	WORKER'S COMPENSATION	2,000	2,090	(2)	-7%
9	SELF- PAY/UNINSURED	234	209	(25)	-11%
10	SAGA	168	0	(168)	-100%
11	OTHER	0	32	32	0%
	TOTAL DISCHARGES	9,818	10,235	417	4%
В.	PATIENT DAYS	0,010	. ,,200		. /0
1	MEDICARE TRADITIONAL	20,097	20.405	308	2%
2	MEDICARE MANAGED CARE	3,628	4,795	1,167	32%
3	MEDICAID	3,560	4,689	1,129	32%
4	MEDICAID MANAGED CARE	2,641	3,133	492	19%
5	CHAMPUS/TRICARE	58	58	0	0%
6	COMMERCIAL INSURANCE	624	485	(139)	-22%
<u> </u>	NON-GOVERNMENT MANAGED CARE	9,854	9,845	(9)	0%
7	WORKER'S COMPENSATION	79	82	3	4%
7 8		969	870	(99)	-10%
	SELF- PAY/UNINSURED			(
8 9	SAGA	849	0	(849)	-100%
8 9		849 0	0 242	<u>(849)</u> 242	-100% 0%
8 9 10	SAGA				

MIDSTATE MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
1	MEDICARE TRADITIONAL	28,244	29,164	920	3%
2	MEDICARE MANAGED CARE	6,981	8,212	1,231	18%
3	MEDICAID	8,674	16,495	7,821	90%
4	MEDICAID MANAGED CARE	23,987	27,167	3,180	13%
5	CHAMPUS/TRICARE	417	475	58	14%
6		3,441	3,657	216	6%
7	NON-GOVERNMENT MANAGED CARE	64,594	63,755	(839)	-1%
8	WORKER'S COMPENSATION	2,207	2,346	139	6%
9	SELF- PAY/UNINSURED	9,549	8,654	(895)	-9%
10	SAGA	3,931	0	(3,931)	-100%
11		0	347	347	0% 5%
	TOTAL OUTPATIENT VISITS	152,025	160,272	8,247	5%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVE				
			¢15 650 000	¢0.050.000	400/
1	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$13,300,000	\$15,650,000	\$2,350,000	18%
		\$2,300,000	\$3,385,000	\$1,085,000	47%
3		\$5,800,000	\$11,800,000	\$6,000,000	103%
4 5		\$11,200,000	\$13,600,000	\$2,400,000	21%
	CHAMPUS/TRICARE COMMERCIAL INSURANCE	\$250,000	\$255,000	\$5,000	2%
6 7	NON-GOVERNMENT MANAGED CARE	\$1,300,000 \$22.950.000	\$1,950,000	\$650,000 \$1,200,000	50% 5%
8		+ //	\$24,150,000	. , ,	
0 9	WORKER'S COMPENSATION SELF- PAY/UNINSURED	\$700,000 \$6,300,000	\$790,000 \$6,100,000	\$90,000 (\$200,000)	13%
9 10		1 7 7		, i i i i	-3%
10	SAGA OTHER	\$2,400,000	\$0 \$300,000	(\$2,400,000) \$300,000	-100%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	\$0	\$300,000	\$300,000	0%
	GROSS REVENUE	\$66,500,000	\$77,980,000	\$11,480,000	17%
	EMERGENCY DEPARTMENT OUTPATIENT NET REVENU		<i>••••••••••••••••••••••••••••••••••••</i>	¢11,100,000	,0
1	MEDICARE TRADITIONAL	\$2,800,000	\$3,200,000	\$400,000	14%
2	MEDICARE MANAGED CARE	\$660,000	\$850,000	\$190,000	29%
3	MEDICAID	\$1,100,000	\$2,500,000	\$1,400,000	127%
4	MEDICAID MANAGED CARE	\$3,000,000	\$3,500,000	\$500.000	17%
5	CHAMPUS/TRICARE	\$80,000	\$80,000	\$0	0%
6	COMMERCIAL INSURANCE	\$770,000	\$1,100,000	\$330,000	43%
7	NON-GOVERNMENT MANAGED CARE	\$13,800,000	\$14,400,000	\$600,000	4%
8	WORKER'S COMPENSATION	\$600,000	\$650,000	\$50,000	8%
9	SELF- PAY/UNINSURED	\$350,000	\$300,000	(\$50,000)	-14%
10	SAGA	\$240,000	\$0	(\$240,000)	-100%
11	OTHER	\$0	\$40,000	\$40,000	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$23,400,000	\$26,620,000	\$3,220,000	14%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	8,355	9,276	921	11%
2	MEDICARE MANAGED CARE	1,466	1,856	390	27%
3	MEDICAID	5,220	10,600	5,380	103%
4	MEDICAID MANAGED CARE	16,598	19,653	3,055	18%
5	CHAMPUS/TRICARE	302	307	5	2%
6	COMMERCIAL INSURANCE	1,366	2,168	802	59%
7	NON-GOVERNMENT MANAGED CARE	24,624	26,032	1,408	6%
8	WORKER'S COMPENSATION	943	1,059	116	12%
9	SELF- PAY/UNINSURED	7,524	7,108	(416)	-6%
10	SAGA	2,544	0	(2,544)	-100%
11	OTHER	0	277	277	0%
l T					
	VISITS	68,942	78,336	9,394	14%

MIDSTATE MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
1.	OFERATING EXPENSE BI CATEGORT				
Α.	Salaries & Wages:				
1	Nursing Salaries	\$25,964,260	\$27,000,880	\$1,036,620	4%
2	Physician Salaries	\$9,314,012	\$8,870,537	(\$443,475)	-5%
3	Non-Nursing, Non-Physician Salaries	\$33,947,144	\$37,342,205	\$3,395,061	10%
	Total Salaries & Wages	\$69,225,416	\$73,213,622	\$3,988,206	6%
В.	Fringe Benefits:				
<u>в</u> . 1	Nursing Fringe Benefits	\$8,009,974	\$9,772,478	\$1,762,504	22%
2	Physician Fringe Benefits	\$2,873,372	\$3,169,452	\$296,080	10%
3	Non-Nursing, Non-Physician Fringe Benefits	\$10,476,488	\$13,470,174	\$2,993,686	29%
5	Total Fringe Benefits	\$21,359,834	\$26,412,104	\$5,052,270	2378
		Ψ 2 1,000,004	Ψ 20, 412,104	\$5,052,210	2470
C.	Contractual Labor Fees:				
1	Nursing Fees	\$254,247	\$374,172	\$119,925	47%
2	Physician Fees	\$1,479,671	\$1,503,048	\$23,377	2%
3	Non-Nursing, Non-Physician Fees	\$17,627,594	\$18,181,627	\$554,033	3%
	Total Contractual Labor Fees	\$19,361,512	\$20,058,847	\$697,335	4%
_	Medical Supplies and Destrocautical Costs				
D. 1	Medical Supplies and Pharmaceutical Cost: Medical Supplies	\$13,667,837	\$15,736,625	\$2,068,788	15%
2	Pharmaceutical Costs	\$5,575,830	\$6,399,528	\$823,698	15%
2	Total Medical Supplies and Pharmaceutical Cost	\$19,243,667	\$22,136,153	\$2,892,486	15%
		· · · · · · · · · · · ·	, , ,	· /· /· · ·	
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$4,678,169	\$5,668,645	\$990,476	21%
2	Depreciation-Equipment	\$6,241,469	\$7,096,397	\$854,928	14%
3	Amortization	\$62,467	\$80,586	\$18,119	29%
	Total Depreciation and Amortization	\$10,982,105	\$12,845,628	\$1,863,523	17%
F.	Bad Debts:				
1	Bad Debts	\$10,465,542	\$7,875,420	(\$2,590,122)	-25%
		¢.0,100,012	¢1,010,1 <u>2</u> 0	(\$=,000; 1==)	
G.	Interest Expense:				
1	Interest Expense	\$2,221,191	\$2,222,925	\$1,734	0%
Н. 1	Malpractice Insurance Cost	¢E 017 E99	¢5 170 200	(\$745,288)	-13%
- 1	Malpractice Insurance Cost	\$5,917,588	\$5,172,300	(\$745,200)	-13%
Ι.	Utilities:				
1	Water	\$180,000	\$275,000	\$95,000	53%
2	Natural Gas	\$1,111,959	\$909,088	(\$202,871)	-18%
3	Oil	\$29,752	\$26,005	(\$3,747)	-13%
4	Electricity	\$1,619,465	\$1,820,146	\$200,681	12%
5	Telephone	\$315,518	\$325,439	\$9,921	3%
6	Other Utilities	\$13,856	\$16,509	\$2,653	19%
	Total Utilities	\$3,270,550	\$3,372,187	\$101,637	3%
J.	Business Expenses:				
J. 1	Accounting Fees	\$162,170	\$133,155	(\$29,015)	-18%
2	Legal Fees	\$155,210	\$133,155 \$258,741	(\$29,015) \$103,531	67%
3	Consulting Fees	\$896,077	\$1,297,000	\$400,923	45%
4	Dues and Membership	\$2,615,994	\$2,129,239	(\$486,755)	-19%
5	Equipment Leases	\$934,206	\$855,683	(\$78,523)	-19%
6	Building Leases	\$2,653,015	\$3,114,529	\$461,514	17%
	Repairs and Maintenance	\$3,336,389	\$3,592,108	\$255,719	8%
7					

MIDSTATE MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
9	Travel	\$74,530	\$86,377	\$11,847	16%
10	Conferences	\$56,275	\$140,987	\$84,712	151%
11	Property Tax	\$107,671	\$87,376	(\$20,295)	-19%
12	General Supplies	\$1,477,098	\$1,254,525	(\$222,573)	-15%
13	Licenses and Subscriptions	\$159,512	\$182,898	\$23,386	15%
14	Postage and Shipping	\$179,407	\$194,014	\$14,607	8%
15	Advertising	\$912,871	\$745,692	(\$167,179)	-18%
16	Other Business Expenses	\$9,953,603	\$10,422,748	\$469,145	5%
	Total Business Expenses	\$24,015,829	\$24,811,803	\$795,974	3%
К.	Other Operating Expense:	.	<i>ФЕ ЕЕ 4 000</i>	.	05%
1	Miscellaneous Other Operating Expenses	\$4,118,538	\$5,554,298	\$1,435,760	35%
	Total Operating Expenses - All Expense Categories*	\$190,181,772	\$203,675,287	\$13,493,515	7%
	*A K. The total operating expenses amount abov	e must agree with	the total operation	ig expenses amou	Int on Report 150
II.	OPERATING EXPENSE BY DEPARTMENT				
11.					
Α.	General Services:	-			
1	General Administration	\$52,906,410	\$55,688,066	\$2,781,656	5%
2	General Accounting	\$1,963,323	\$1,987,142	\$23,819	1%
3	Patient Billing & Collection	\$1,862,117	\$1,868,587	\$6,470	0%
4	Admitting / Registration Office	\$1,571,762	\$1,655,366	\$83,604	5%
5	Data Processing	\$4,890,521	\$5,557,356	\$666,835	14%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$1,092,966	\$968,572	(\$124,394)	-11%
8	Public Relations	\$1,606,780	\$1,757,584	\$150,804	9%
9	Purchasing	\$920,698	\$991,221	\$70,523	8%
10	Dietary and Cafeteria	\$3,154,969	\$3,352,613	\$197,644	6%
11	Housekeeping	\$2,903,696	\$3,037,385	\$133,689	5%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$6,086,577	\$6,418,563	\$331,986	5%
14	Security	\$0	\$0	\$0	0%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$0	\$0	\$0	0%
17	Pharmacy Department	\$6,918,307	\$8,027,540	\$1,109,233	16%
18	Other General Services	\$13,181,617	\$14,143,176	\$961,559	7%
	Total General Services	\$99,059,743	\$105,453,171	\$6,393,428	6%
В.	Professional Services:				
1	Medical Care Administration	\$479,266	\$1,163,957	\$684,691	143%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,898,950	\$1,856,243	(\$42,707)	-2%
4	Medical Records	\$1,939,591	\$2,098,970	\$159,379	8%
5	Social Service	\$1,302,432	\$1,504,752	\$202,320	16%
6	Other Professional Services	\$3,533,148	\$4,213,231	\$680,083	19%
	Total Professional Services	\$9,153,387	\$10,837,153	\$1,683,766	18%
<u> </u>	Special Services:				
C.	Special Services:	¢40,000,040	¢40,000,704	¢0 000 7 10	400/
1	Operating Room	\$13,962,042	\$16,660,791	\$2,698,749	19%
2	Recovery Room	\$2,396,394	\$2,508,569	\$112,175	5%
3	Anesthesiology	\$394,417	\$299,839	(\$94,578)	-24%
4	Delivery Room	\$0	\$0	\$0 (*50.047)	0%
5	Diagnostic Radiology	\$6,185,177	\$6,126,960	(\$58,217)	-1%
6	Diagnostic Ultrasound	\$895,866	\$956,071	\$60,205	7%
7	Radiation Therapy	\$1,939,729	\$2,255,391	\$315,662	16%

MIDSTATE MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
8	Radioisotopes	\$885,973	\$920,843	\$34,870	4%
9	CT Scan	\$1,006,091	\$1,108,273	\$102,182	10%
10	Laboratory	\$7,484,776	\$7,568,477	\$83,701	1%
11	Blood Storing/Processing	\$7,404,770	\$7,500,477	\$03,701	0%
12	Cardiology	\$0	\$0 \$0	\$0	0%
13	Electrocardiology	\$1,052,110	\$1,024,793	(\$27,317)	-3%
14	Electroencephalography	\$0	φ1,024,755 \$0	(\\$27,317) \$0	0%
15	Occupational Therapy	\$0	\$0 \$0	\$0	0%
16	Speech Pathology	\$0 \$0	\$0 \$0	<u>\$0</u>	0%
17	Audiology	\$0	\$0 \$0	<u>\$0</u>	0%
18	Respiratory Therapy	\$1,224,949	\$1,306,801	\$81,852	7%
19	Pulmonary Function	\$87,868	\$86,797	(\$1,071)	-1%
20	Intravenous Therapy	\$425,337	\$306,466	(\$118,871)	-28%
21	Shock Therapy	φ 420,001 \$0	φ300,400 \$0	<u>(\$110,071)</u> \$0	0%
21	Psychiatry / Psychology Services	\$0	\$0 \$0	\$0 \$0	0%
22	Renal Dialysis	\$0	\$0 \$0		0%
23	Emergency Room	\$12,604,234	\$12,045,761	(\$558,473)	-4%
25	MRI	\$1,405,934	\$1,419,179	\$13,245	1%
26	PET Scan	\$371,405	\$48,580	(\$322,825)	-87%
20	PET/CT Scan	\$371,403	\$40,580 \$0	(\$322,823) \$0	-87%
28	Endoscopy	\$2,675,091	\$0 \$2,719,567	\$44,476	2%
28	Sleep Center	\$737,951	\$818,971	\$81,020	11%
30	Lithotripsy	\$737,931	\$010,971	<u>\$01,020</u> \$0	0%
30	Cardiac Catheterization/Rehabilitation	\$121,228	ه0 \$163,275	\$0	35%
32		\$735,065	\$803,247	<u>\$42,047</u> \$68,182	
33	Occupational Therapy / Physical Therapy Dental Clinic	\$735,065	\$003,247 \$0		<u> </u>
<u> </u>					
34	Other Special Services	\$1,607,978	\$1,752,817	\$144,839	9%
	Total Special Services	\$58,199,615	\$60,901,468	\$2,701,853	5%
D.	Routine Services:				
1	Medical & Surgical Units	\$17,265,434	\$18,788,316	\$1,522,882	9%
2	Intensive Care Unit	\$0	\$0	\$0	0%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,219,914	\$2,242,696	\$22,782	1%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,283,679	\$4,527,106	\$243,427	6%
7	Newborn Nursery Unit	\$0	\$0	<u>\$0</u>	0%
8	Neonatal ICU	\$0	\$0 \$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0 \$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0 \$0	\$0 \$0	0%
11	Home Care	\$0	\$0 \$0	\$0 \$0	0%
12	Outpatient Clinics	\$0	\$0 \$0	\$0	0%
13	Other Routine Services	\$0	\$0 \$0	\$0	0%
10	Total Routine Services	\$23,769,027	\$25,558,118	\$1,789,091	8%
		ψ 2 3,103,021	Ψ 2 3,330,110	ψ1,703,031	0 70
E.	Other Departments:				
1	Miscellaneous Other Departments	\$0	\$925,377	\$925,377	0%
	Total Operating Expenses - All Departments*	\$100 101 770	\$202 675 297	\$13,493,515	70/
		\$190,181,772	\$203,675,287	\$13,493,515	7%
	*A 0. The total operating expenses amount a	bove must agree with	the total operatir	ig expenses amou	nt on Report 150

	MIDSTATI	E MEDICAL CENTER							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011								
	REPORT 185 - HOSPITAL FINAN	NCIAL AND STATISTICAL DA							
(1)	(2)	(3)	(4)	(5)					
_ ()		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011					
Α.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$172,470,335 \$	182,022,152	\$196,755,436					
2	Other Operating Revenue	6,514,587	18,695,433	14,584,411					
3	Total Operating Revenue	\$178,984,922	\$200,717,585	\$211,339,847					
4	Total Operating Expenses	173,269,841	190,181,772	203,675,287					
5	Income/(Loss) From Operations	\$5,715,081	\$10,535,813	\$7,664,560					
6	Total Non-Operating Revenue	(345,750)	534,112	455,490					
7	Excess/(Deficiency) of Revenue Over Expenses	\$5,369,331	\$11,069,925	\$8,120,050					
В.	Profitability Summary								
1	Hospital Operating Margin	3.20%	5.24%	3.62%					
2	Hospital Non Operating Margin	-0.19%	0.27%	0.22%					
3	Hospital Total Margin	3.01%	5.50%	3.83%					
4	Income/(Loss) From Operations	\$5,715,081	\$10,535,813	\$7,664,560					
5	Total Operating Revenue	\$178,984,922	\$200,717,585	\$211,339,847					
6	Total Non-Operating Revenue	(\$345,750)	\$534,112	\$455,490					
7	Total Revenue	\$178,639,172	\$201,251,697	\$211,795,337					
8	Excess/(Deficiency) of Revenue Over Expenses	\$5,369,331	\$11,069,925	\$8,120,050					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	\$48,490,546	\$58,808,950	\$52,820,335					
2	Hospital Total Net Assets	\$62,932,116	\$73,744,007	\$67,247,606					
3	Hospital Change in Total Net Assets	(\$8,377,822)	\$10,811,891	(\$6,496,401					
4	Hospital Change in Total Net Assets %	88.3%	17.2%	-8.8%					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.49	0.48	0.47					
2	Total Operating Expenses	\$173,269,841	\$190,181,772	\$203,675,287					
3	Total Gross Revenue	\$347,627,051	\$374,870,862	\$423,415,942					
4	Total Other Operating Revenue	\$6,541,587	\$18,695,433	\$14,584,411					
5	Private Payment to Cost Ratio	1.39	1.40	1.47					
6	Total Non-Government Payments	\$87,968,614	\$94,458,495	\$101,704,474					

	MIDSTA	TE MEDICAL CENTER							
	TWELVE N	IONTHS 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	<u> </u>	<u>FY 2010</u>	FY 2011					
7	Total Uninsured Payments	\$495,336	\$643,398	\$823,172					
8	Total Non-Government Charges	\$139,391,778	\$150,493,817	\$158,613,621					
9	Total Uninsured Charges	\$10,985,431	\$11,675,728	\$10,698,278					
10	Medicare Payment to Cost Ratio	0.80	0.78	0.79					
11	Total Medicare Payments	\$62,393,615	\$63,158,315	\$70,035,314					
12	Total Medicare Charges	\$159,891,566	\$166,558,985	\$190,740,350					
13	Medicaid Payment to Cost Ratio	0.75	0.68	0.62					
14	Total Medicaid Payments	\$13,702,359	\$16,421,372	\$20,754,012					
15	Total Medicaid Charges	\$37,405,540	\$49,786,738	\$71,590,248					
16	Uncompensated Care Cost	\$6,403,138	\$6,815,201	\$5,068,840					
17	Charity Care	\$3,370,587	\$3,637,983	\$3,025,038					
18	Bad Debts	\$9,717,615	\$10,465,542	\$7,875,420					
19	Total Uncompensated Care	\$13,088,202	\$14,103,525	\$10,900,458					
20	Uncompensated Care % of Total Expenses	3.7%	3.6%	2.5%					
21	Total Operating Expenses	\$173,269,841	\$190,181,772	\$203,675,287					
E.	Liquidity Measures Summary								
1	Current Ratio	2.38	1.93	1.93					
2	Total Current Assets	\$65,521,020	\$56,637,135	\$48,912,681					
3	Total Current Liabilities	\$27,572,379	\$29,324,432	\$25,390,909					
4	Days Cash on Hand	91	57	37					
5	Cash and Cash Equivalents	\$41,146,505	\$28,181,027	\$19,361,929					
6	Short Term Investments	0	0	0					
7	Total Cash and Short Term Investments	\$41,146,505	\$28,181,027	\$19,361,929					
8	Total Operating Expenses	\$173,269,841	\$190,181,772	\$203,675,287					
9	Depreciation Expense	\$8,728,633	\$10,982,105	\$12,845,628					
10	Operating Expenses less Depreciation Expense	\$164,541,208	\$179,199,667	\$190,829,659					
11	Days Revenue in Patient Accounts Receivable	39.44	44.82	40.58					

	MIDSTATE MEDICAL CENTER									
	TWELVE MONTHS ACTUAL FILING									
	FISCAL YEAR 2011									
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS									
(1)	(2)	(3)	(4)	(5)						
		ACTUAL	ACTUAL	ACTUAL						
LINE	DESCRIPTION	<u> </u>	<u> </u>	<u> </u>						
12	Net Patient Accounts Receivable	\$ 19,523,079	\$ 23,291,912	\$ 23,676,854						
13	Due From Third Party Payers	\$0	\$0	\$0						
14	Due To Third Party Payers	\$885,467	7 \$942,231	\$1,800,530						
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 18,637,612	\$ 22,349,681	\$ 21,876,324						
16	Total Net Patient Revenue	\$172,470,335		\$ 196,755,436						
10		<i>Q</i> , <i>H</i> 2, <i>H</i> 0,000	¢ 102,022,102	¢ 100,100,100						
17	Average Payment Period	61.16	59.73	48.57						
18	Total Current Liabilities	\$27,572,379	\$29,324,432	\$25,390,909						
19	Total Operating Expenses	\$173,269,841	\$190,181,772	\$203,675,287						
20	Depreciation Expense	\$8,728,633	\$10,982,105	\$12,845,628						
21	Total Operating Expenses less Depreciation Expense	\$164,541,208	\$179,199,667	\$190,829,659						
F.	Solvency Measures Summary									
1	Equity Financing Ratio	27.7	31.0	27.9						
2	Total Net Assets	\$62,932,116	\$73,744,007	\$67,247,606						
3	Total Assets	\$227,500,164	\$237,737,709	\$241,095,990						
4	Cash Flow to Total Debt Ratio	12.8	20.1	18.4						
5	Excess/(Deficiency) of Revenues Over Expenses	\$5,369,331	\$11,069,925	\$8,120,050						
6	Depreciation Expense	\$8,728,633	\$10,982,105	\$12,845,628						
7	Excess of Revenues Over Expenses and Depreciation Expense	\$14,097,964	\$22,052,030	\$20,965,678						
8	Total Current Liabilities	\$27,572,379	\$29,324,432	\$25,390,909						
9	Total Long Term Debt	\$82,915,000	\$80,580,000	\$88,754,643						
10	Total Current Liabilities and Total Long Term Debt	\$110,487,379	\$109,904,432	\$114,145,552						
44	Long Term Daki to Canitalization Datio	EC 0		50.0						
11	Long Term Debt to Capitalization Ratio	56.9		56.9						
12	Total Long Term Debt	\$82,915,000		\$88,754,643						
13	Total Net Assets	\$62,932,116		\$67,247,606						
14	Total Long Term Debt and Total Net Assets	\$145,847,116	\$154,324,007	\$156,002,249						
15	Debt Service Coverage Ratio	3.4	5.3	0.3						
16	Excess Revenues over Expenses	\$5,369,331	\$11,069,925	\$8,120,050						
17	Interest Expense	\$2,456,574		\$2,222,925						
18	Depreciation and Amortization Expense	\$8,728,633		\$12,845,628						

MIDSTATE MEDICAL CENTER									
	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	<u>FY 2010</u>	<u>FY 2011</u>					
19	Principal Payments	\$2,460,000	\$2,390,000	\$82,915,000					
G.	Other Financial Ratios								
	Aurora Auror (Disus								
20	Average Age of Plant	10.3	9.0	8.7					
21	Accumulated Depreciation	\$89,995,490	\$98,568,512	\$111,313,262					
22	Depreciation and Amortization Expense	\$8,728,633	\$10,982,105	\$12,845,628					
Н.	Utilization Measures Summary								
1	Patient Days	42,873	42,359	44,604					
2	Discharges	9,955	9,818	10,235					
				· · · ·					
3	ALOS	4.3	4.3	4.4					
4	Staffed Beds	140	142	144					
5	Available Beds	-	156	156					
6	Licensed Beds	156	156	156					
6	Occupancy of Staffed Beds	83.9%	81.7%	84.9%					
7	Occupancy of Available Beds	82.7%	74.4%	78.3%					
8	Full Time Equivalent Employees	950.5	985.8	1,018.6					
I.	Hospital Gross Revenue Payer Mix Percentage								
1	Non-Government Gross Revenue Payer Mix Percentage	36.9%	37.0%	34.9%					
2	Medicare Gross Revenue Payer Mix Percentage	46.0%	44.4%	45.0%					
3	Medicaid Gross Revenue Payer Mix Percentage	10.8%	13.3%	16.9%					
4	Other Medical Assistance Gross Revenue Payer Mix Percentage		2.0%	0.4%					
5	Uninsured Gross Revenue Payer Mix Percentage	3.2%	3.1%	2.5%					
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.2%	0.2%					
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Gross Revenue (Charges)	\$128,406,347	\$138,818,089	\$147,915,343					
9	Medicare Gross Revenue (Charges)	\$159,891,566	\$166,558,985	\$190,740,350					
10	Medicaid Gross Revenue (Charges)	\$37,405,540	\$49,786,738	\$71,590,248					
11	Other Medical Assistance Gross Revenue (Charges)	\$10,391,208	\$7,370,534	\$1,707,166					
12	Uninsured Gross Revenue (Charges)	\$10,985,431	\$11,675,728	\$10,698,278					
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$546,959	\$660,788	\$764,557					
14	Total Gross Revenue (Charges)	\$347,627,051	\$374,870,862	\$423,415,942					
J.	Hospital Net Revenue Payer Mix Percentage								
1	Non-Government Net Revenue Payer Mix Percentage	52.8%	53.6%	52.2%					

	MIDSTATE MED	DICAL CENTER							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2011								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	<u> </u>	FY 2010	FY 2011					
2	Medicare Net Revenue Payer Mix Percentage	37.6%	36.1%	36.2%					
2	Medicaid Net Revenue Payer Mix Percentage	8.3%	9.4%	10.7%					
 	Other Medical Assistance Net Revenue Payer Mix Percentage	1.0%	0.4%	0.3%					
5	Uninsured Net Revenue Payer Mix Percentage	0.3%	0.4%	0.3%					
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.3%							
7	Total Net Revenue Payer Mix Percentage	100.0%	0.2%	<u>0.1%</u> 100.0%					
1		100.078	100.078	100.078					
8	Non-Government Net Revenue (Payments)	\$87,473,278	\$93,815,097	\$100,881,302					
9	Medicare Net Revenue (Payments)	\$62,393,615	\$63,158,315	\$70,035,314					
10	Medicaid Net Revenue (Payments)	\$13,702,359	\$16,421,372	\$20,754,012					
11	Other Medical Assistance Net Revenue (Payments)	\$1,580,350	\$762,923	\$519,190					
12	Uninsured Net Revenue (Payments)	\$495,336	\$643,398	\$823,172					
13	CHAMPUS / TRICARE Net Revenue Payments)	\$176,109	\$271,081	\$285,677					
14	Total Net Revenue (Payments)	\$165,821,047	\$175,072,186	\$193,298,667					
К.	Discharges								
1	Non-Government (Including Self Pay / Uninsured)	3,390	3,270	3,252					
2	Medicare	4,708	4,619	4,826					
3	Medical Assistance	1,847	1,909	2,138					
4	Medicaid	1,542	1,741	2,106					
5	Other Medical Assistance	305	168	32					
6	CHAMPUS / TRICARE	10	20	19					
7	Uninsured (Included In Non-Government)	302	234	209					
8	Total	9,955	9,818	10,235					
L.	Case Mix Index								
1	Non-Government (Including Self Pay / Uninsured)	1.008350	1.034840	1.029630					
2	Medicare	1.445170	1.424870	1.406880					
3	Medical Assistance	0.805267	0.840037	0.904263					
4	Medicaid	0.756420	0.811130	0.900810					
5	Other Medical Assistance	1.052230	1.139610	1.131530					
6	CHAMPUS / TRICARE	1.914120	1.121740	0.911390					
7	Uninsured (Included In Non-Government)	0.885530	1.074940	0.978100					
8	Total Case Mix Index	1.178165	1.180634	1.181103					
М.	Emergency Department Visits								
1	Emergency Room - Treated and Admitted	6,415	6,380	6,629					
2	Emergency Room - Treated and Discharged	60,480	68,942	78,336					
3	Total Emergency Room Visits	66,895	75,322	84,965					

	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMÓÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE			[[
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT				
<u>А.</u> 1	Inpatient Charges	\$1,751,349	\$2,314,400	\$563,051	32%
2	Inpatient Payments	\$740,656	\$924,071	\$183,415	25%
2	Outpatient Charges	\$1,039,673	\$1,250,302	\$210,629	23%
4	Outpatient Charges	\$347,462	\$503,247	\$155,785	45%
5	Discharges		<u>\$503,247</u> 108	29	37%
	Patient Days	384	499	115	30%
6					
7	Outpatient Visits (Excludes ED Visits)	415	503	88	21%
8	Emergency Department Outpatient Visits	135	134	(1)	-1%
9	Emergency Department Inpatient Admissions	68	89	21	31%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,791,022	\$3,564,702	\$773,680	28%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,088,118	\$1,427,318	\$339,200	31%
В.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	<u>\$0</u>	\$0	0%
4	Outpatient Payments	\$0	<u>\$0</u> \$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%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	<u> </u>	\$0	0%
		\$	ţ,	* *	• • •
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$1,886,070	\$4,105,645	\$2,219,575	118%
2	Inpatient Payments	\$821,621	\$1,367,081	\$545,460	66%
3	Outpatient Charges	\$1,734,598	\$3,860,313	\$2,125,715	123%
4	Outpatient Payments	\$550,214	\$1,058,112	\$507,898	92%
5	Discharges	91	150	59	65%
6	Patient Days	385	836	451	117%
7	Outpatient Visits (Excludes ED Visits)	845	1,485	640	76%
8	Emergency Department Outpatient Visits	199	367	168	84%
9	Emergency Department Inpatient Admissions	67	121	54	81%
-	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,620,668	\$7,965,958	\$4,345,290	120%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,371,835	\$2,425,193	\$1,053,358	77%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$10,583,692	\$3,730,175	(\$6,853,517)	-65%
2	Inpatient Payments	\$4,302,502	\$1,401,664	(\$2,900,838)	-67%
3	Outpatient Charges	\$7,766,237	\$2,467,792	(\$5,298,445)	-68%
4	Outpatient Payments	\$2,414,683	\$694,293	(\$1,720,390)	-71%
5	Discharges	449	138	(311)	-69%
6	Patient Days	2,211	793	(1,418)	-64%
7	Outpatient Visits (Excludes ED Visits)	3,525	851	(2,674)	-76%
8	Emergency Department Outpatient Visits	904	376	(528)	-58%
9	Emergency Department Inpatient Admissions	366	112	(254)	-69%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$18,349,929	\$6,197,967	(\$12,151,962)	-66%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,717,185	\$2,095,957	(\$4,621,228)	-69%
Ε.	OTHER MEDICARE MANAGED CARE				
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%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN				
1	Inpatient Charges	\$376,154	\$1,066,250	\$690,096	183%
2	Inpatient Payments	\$161,257	\$402,504	\$241,247	150%
3	Outpatient Charges	\$147,213	\$972,992	\$825,779	561%
4	Outpatient Payments	\$44,723	\$254,632	\$209,909	469%
5	Discharges	16	48	32	200%
6	Patient Days	72	232	160	222%
7	Outpatient Visits (Excludes ED Visits)	106	486	380	358%
8	Emergency Department Outpatient Visits	26	123	97	373%
9	Emergency Department Inpatient Admissions	14	40	26	186%
L	TOTAL INPATIENT & OUTPATIENT CHARGES	\$523,367	\$2,039,242	\$1,515,875	290%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$205,980	\$657,136	\$451,156	219%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$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%
H.	WELLCARE OF CONNECTICUT				
п. 1	Inpatient Charges	\$157,868	\$425,146	\$267,278	169%
2	Inpatient Charges	\$67,678	\$179,464	\$111,786	165%
2	Outpatient Charges	\$61,020	\$202,345	\$141,325	232%
4	Outpatient Charges Outpatient Payments	\$18,538	<u>\$202,345</u> \$51,617	\$33,079	178%
4 5	Discharges	\$10,536		<u>φ33,079</u> 3	38%
5 6	Patient Days	36	88	52	144%
7	Outpatient Visits (Excludes ED Visits)	24	72	48	200%
8	Emergency Department Outpatient Visits	19	36	40	89%
9	Emergency Department Inpatient Admissions	8	<u></u>	3	38%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$218,888	\$627,491	\$408,603	187%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$86,216	\$231,081	\$144,865	168%
		φ00,210	φ 2 51,001	\$144,00J	100 /8
I.	AETNA				
1	Inpatient Charges	\$740,082	\$980,915	\$240,833	33%
2	Inpatient Payments	\$311,410	\$400,954	\$89,544	29%
3	Outpatient Charges	\$512,913	\$660,949	\$148,036	29%
4	Outpatient Payments	\$161,998	\$199,805	\$37,807	23%
5	Discharges	34	40	6	18%
6	Patient Days	145	180	35	24%
7	Outpatient Visits (Excludes ED Visits)	269	257	(12)	-4%
	Emergency Department Outpatient Visits	70	76	6	9%
9	Emergency Department Inpatient Admissions	25	31	6	24%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,252,995	\$1,641,864	\$388,869	31%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$473,408	\$600,759	\$127,351	27%
		,,	,,	,,	

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J.	HUMANA				
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%
К.	SECURE HORIZONS				
		¢0.	۴۵	¢0	00/
1	Inpatient Charges	\$0 \$0	\$0	\$0 \$0	0%
2	Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0%
3	Outpatient Charges		\$0 \$0		0%
4	Outpatient Payments	\$0		\$0	0%
	Discharges	0	0	0	0%
	Patient Days	-	-	-	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8 9	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	0 \$0	0 \$0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES				0%
	TOTAL INPATIENT & OUTPATIENT PATMENTS	\$0	\$0	\$0	0%
L.	UNICARE LIFE & HEALTH INSURANCE				
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%
	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
				ŢŢ	

(1)	(2)	(3)	(4)	(5)	(6)
	DECODIDITION	FY 2010	FY 2011	AMOUNT	% DIFFEDENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
М.	UNIVERSAL AMERICAN			[
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%
Ν.	EVERCARE				
1	Inpatient Charges	\$1,640,833	\$10,092,149	\$8,451,316	515%
2	Inpatient Payments	\$703,476	\$3,841,599	\$3,138,123	446%
3	Outpatient Charges	\$649,282	\$7,214,655	\$6,565,373	1011%
4	Outpatient Payments	\$197,252	\$2,063,392	\$1,866,140	946%
5	Discharges	72	401	329	457%
6	Patient Days	395	2,167	1,772	449%
7	Outpatient Visits (Excludes ED Visits)	331	2,702	2,371	716%
8	Emergency Department Outpatient Visits	113	744	631	558%
9	Emergency Department Inpatient Admissions	57	329	272	477%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,290,115	\$17,306,804	\$15,016,689	656%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$900,728	\$5,904,991	\$5,004,263	556%
п.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$17,136,048	\$22,714,680	\$5,578,632	33%
	TOTAL INPATIENT PAYMENTS	\$7,108,600	\$8,517,337	\$1,408,737	20%
	TOTAL OUTPATIENT CHARGES	\$11,910,936	\$16,629,348	\$4,718,412	40%
	TOTAL OUTPATIENT PAYMENTS	\$3,734,870	\$4,825,098	\$1,090,228	29%
	TOTAL DISCHARGES	749	896	147	20%
	TOTAL PATIENT DAYS	3,628	4,795	1,167	32%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	5,515	6,356	841	15%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	1,466	1,856	390	27%
	TOTAL EMERGENCY DEPARTMENT				
	INPATIENT ADMISSIONS	605	733	128	21%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$29,046,984	\$39,344,028	\$10,297,044	35%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$10,843,470	\$13,342,435	\$2,498,965	23%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICAID MANAGED CARE	1			
Α.	ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$7,250,769	\$8,892,413	\$1,641,644	23%
2	Inpatient Payments	\$2,809,581	\$3,110,773	\$301,192	11%
3	Outpatient Charges	\$15,982,975	\$17,855,247	\$1,872,272	12%
4	Outpatient Payments	\$4,942,088	\$5,530,060	\$587,972	12%
5	Discharges	828	944	116	14%
6	Patient Days	2,241	2,595	354	16%
7	Outpatient Visits (Excludes ED Visits)	6,659	6,559	(100)	-2%
8	Emergency Department Outpatient Visits	14,258	16,621	2,363	17%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT	134	165	31	23%
	CHARGES	¢00.000.744	¢00 747 000	¢0 540 040	4 50/
	TOTAL INPATIENT & OUTPATIENT	\$23,233,744	\$26,747,660	\$3,513,916	15%
	PAYMENTS	\$7,751,669	\$8,640,833	\$889,164	11%
		ψ <i>ι</i> , <i>ι</i> σι,σοσ	\$0,040,000	4000 ,104	1170
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0 \$0	\$0 \$0	\$0	0%
3	Outpatient Charges	\$0 \$0	\$0 \$0	\$0	0%
4	Outpatient Payments	\$0 \$0	\$0 \$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTĂL 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	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0 \$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
Ŭ	TOTAL INPATIENT & OUTPATIENT				0,0
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT	* *	**	**	• / •
	PAYMENTS	\$0	\$0	\$0	0%
	-	+ -	· ·		
Е.	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	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$668,068	\$754,437	\$86,369	13%
2	Inpatient Payments	\$282,470	\$289,109	\$6,639	2%
3	Outpatient Charges	\$979,590	\$1,219,732	\$240,142	25%
4	Outpatient Payments	\$244,604	\$402,756	\$158,152	65%
5	Discharges	85	93	8	9%
6	Patient Days	220	249	29	13%
7	Outpatient Visits (Excludes ED Visits)	314	404	90	29%
8	Emergency Department Outpatient Visits	893	1,204	311	35%
9	Emergency Department Inpatient Admissions	13	14	1	8%
0	TOTAL INPATIENT & OUTPATIENT			•	070
	CHARGES	\$1,647,658	\$1,974,169	\$326,511	20%
	TOTAL INPATIENT & OUTPATIENT	¢1,011,000	• .,•,.••	* • _ •,• · · ·	
	PAYMENTS	\$527,074	\$691,865	\$164,791	31%
<u>H.</u>	AETNA	<i></i>	#074 070	#007.007	00%
1	Inpatient Charges	\$573,705	\$971,672	\$397,967	69%
2	Inpatient Payments	\$236,027	\$335,552	\$99,525	42%
3	Outpatient Charges	\$1,309,050	\$1,683,075	\$374,025	29%
4	Outpatient Payments	\$326,870	\$555,751	\$228,881	70%
5	Discharges	74	104	30	41%
6	Patient Days	180	289	109	61%
7	Outpatient Visits (Excludes ED Visits)	416	551	135	32% 26%
8 9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	1,447 16	1,828 23	<u>381</u> 7	<u> </u>
9	TOTAL INPATIENT & OUTPATIENT	10	23	/	4470
	CHARGES	\$1,882,755	\$2,654,747	\$771,992	41%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$562,897	\$891,303	\$328,406	58%
п	TOTAL MEDICAID MANAGED CARE				
11.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$8,492,542	\$10,618,522	\$2,125,980	25%
	TOTAL INPATIENT PAYMENTS	\$3,328,078	\$3,735,434	\$407,356	12%
	TOTAL OUTPATIENT CHARGES	\$18,271,615	\$20,758,054	\$2,486,439	14%
	TOTAL OUTPATIENT PAYMENTS	\$5,513,562	\$6,488,567	\$975,005	18%
	TOTAL DISCHARGES	987	1,141	154	16%
	TOTAL PATIENT DAYS	2,641	3,133	492	19%
	TOTAL OUTPATIENT VISITS				
	(EXCLUDES ED VISITS)	7,389	7,514	125	2%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	16,598	19,653	3,055	18%
	TOTAL EMERGENCY DEPARTMENT				
<u> </u>	INPATIENT ADMISSIONS	163	202	39	24%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$26,764,157	\$31,376,576	\$4,612,419	17%
	TOTAL INPATIENT & OUTPATIENT		• • • •	• • •	
	PAYMENTS	\$8,841,640	\$10,224,001	\$1,382,361	16%

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

	MIDSTATE MEDICAL CENTER AND SUBSIDIARIES					
	TWELVE	MONTHS ACTUAL FILIN	IG			
	FISCAL YEAR 2011					
	REPORT 300 - HOSP	ITAL BALANCE SHEET I	NFORMATION			
(1)	(2)	(3)	(4)	(5)	(6)	
LINE	DESCRIPTION	FY 2010 <u>ACTUAL</u>	FY 2011 <u>ACTUAL</u>	AMOUNT DIFFERENCE	% DIFFERENCE	
I.	ASSETS					
Α.	Current Assets:					
1	Cash and Cash Equivalents	\$29,570,490	\$20,898,243	(\$8,672,247)	-29%	
2	Short Term Investments	\$0	\$0	\$0	0%	
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$27,340,758	\$29,581,747	\$2,240,989	8%	
4	Current Assets Whose Use is Limited for Current Liabilities	\$1,168,505	\$0	(\$1,168,505)	-100%	
5	Due From Affiliates	\$0	\$0 \$0	\$0	0%	
6	Due From Third Party Payers	\$0	\$0	\$0	0%	
7	Inventories of Supplies	\$1,599,146	\$1,896,399	\$297,253	19%	
8	Prepaid Expenses	\$1,203,732	\$2,626,149	\$1,422,417	118%	
9	Other Current Assets	er Current Assets \$1,258,006	\$1,416,029	\$158,023	13%	
	Total Current Assets	\$62,140,637	\$56,418,567	(\$5,722,070)	-9%	
В.	Noncurrent Assets Whose Use is Limited:					
1	Held by Trustee	\$12,195,310	\$11,682,166	(\$513,144)	-4%	
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%	
3	Funds Held in Escrow	\$0	\$6,312,325	\$6,312,325	0%	
4	Other Noncurrent Assets Whose Use is Limited	\$278,277	\$119,216	(\$159,061)	-57%	
4	Total Noncurrent Assets Whose Use is Limited:	\$12,473,587	\$18,113,707	\$5,640,120	45%	
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%	
6	Long Term Investments	\$12,946,811	\$12,501,552	(\$445,259)	-3%	
7	Other Noncurrent Assets	\$19,832,691	\$28,097,820	\$8,265,129	42%	
C.	Net Fixed Assets:					
1	Property, Plant and Equipment	\$234,396,620	\$245,640,720	\$11,244,100	5%	
2	Less: Accumulated Depreciation	\$100,974,377	\$113,748,505	\$12,774,128	\$0	
	Property, Plant and Equipment, Net	\$133,422,243	\$131,892,215	(\$1,530,028)	-1%	
3	Construction in Progress	\$1,372,133	\$338,221	(\$1,033,912)	-75%	
	Total Net Fixed Assets	\$134,794,376	\$132,230,436	(\$2,563,940)	-2%	
	Total Assets	\$242,188,102	\$247,362,082	\$5,173,980	2%	
		Ψ272,100,102	Ψ _ 77,502,002	ψυ, ΠΟ,300	2 /0	

	MIDSTATE MED	CAL CENTER AND SUB	SIDIARIES					
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011							
	REPORT 300 - HOSP	REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION						
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6) %			
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE			
١١.	LIABILITIES AND NET ASSETS							
Α.	Current Liabilities:							
1	Accounts Payable and Accrued Expenses	\$7,813,918	\$4,489,564	(\$3,324,354)	-43%			
2	Salaries, Wages and Payroll Taxes	\$8,445,266	\$9,084,845	\$639,579	8%			
3	Due To Third Party Payers	\$942,231	\$1,800,530	\$858,299	91%			
4	Due To Affiliates	\$0	\$0	\$0	0%			
5	Current Portion of Long Term Debt	\$2,335,000	\$0	(\$2,335,000)	-100%			
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%			
7	Other Current Liabilities	\$10,442,247	\$10,646,951	\$204,704	2%			
	Total Current Liabilities	\$29,978,662	\$26,021,890	(\$3,956,772)	-13%			
В.	Long Term Debt:							
1	Bonds Payable (Net of Current Portion)	\$80,580,000	\$88,754,643	\$8,174,643	10%			
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%			
	Total Long Term Debt	\$80,580,000	\$88,754,643	\$8,174,643	10%			
3	Accrued Pension Liability	\$52,087,773	\$57,749,335	\$5,661,562	11%			
4	Other Long Term Liabilities	\$2,465,969	\$2,432,939	(\$33,030)	-1%			
	Total Long Term Liabilities	\$135,133,742	\$148,936,917	\$13,803,175	10%			
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%			
C.	Net Assets:							
1	Unrestricted Net Assets or Equity	\$62,140,641	\$57,976,004	(\$4,164,637)	-7%			
2	Temporarily Restricted Net Assets	\$1,962,184	\$1,966,917	\$4,733	0%			
3	Permanently Restricted Net Assets	\$12,972,873	\$12,460,354	(\$512,519)	-4%			
	Total Net Assets	\$77,075,698	\$72,403,275	(\$4,672,423)	-6%			
	Total Liabilities and Net Assets	\$242,188,102	\$247,362,082	\$5,173,980	2%			

	MIDSTATE MEDIC	CAL CENTER AND S	SUBSIDIARIES		
	TWELVE	MONTHS ACTUAL I	FILING		
		FISCAL YEAR 2011			
	REPORT 350 - HOSPITAL ST				
(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	\$374,870,862	\$423,415,942	\$48,545,080	13%
2	Less: Allowances	\$189,210,727	\$223,635,468	\$34,424,741	18%
3	Less: Charity Care	\$3,637,983	\$3,025,038	(\$612,945)	-17%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$182,022,152	\$196,755,436	\$14,733,284	8%
5	Other Operating Revenue	\$31,517,973	\$27,159,567	(\$4,358,406)	-14%
e		\$199.314	¢044.464	¢44.050	21%
6	Net Assets Released from Restrictions Total Operating Revenue	\$199,314 \$213,739,439	\$241,164 \$224,156,167	\$41,850 \$10.416.728	21% 5%
		\$213,739,439	\$224,150,107	\$10,410,720	576
В.	Operating Expenses:				
1	Salaries and Wages	\$70,494,313	\$74,803,914	\$4,309,601	6%
2	Fringe Benefits	\$21,760,310	\$26,868,042	\$5,107,732	23%
3	Physicians Fees	\$4,962,712	\$4,816,391	(\$146,321)	-3%
4	Supplies and Drugs	\$19,526,484	\$22,356,871	\$2,830,387	14%
5	Depreciation and Amortization	\$11,405,092	\$13,144,617	\$1,739,525	15%
6	Bad Debts	\$10,965,542	\$8,300,420	(\$2,665,122)	-24%
7	Interest	\$2,221,191	\$2,222,925	\$1,734	0%
8	Malpractice	\$5,917,588	\$5,172,300	(\$745,288)	-13%
9	Other Operating Expenses	\$56,279,104	\$59,032,149	\$2,753,045	5%
	Total Operating Expenses	\$203,532,336	\$216,717,629	\$13,185,293	6%
	Income/(Loss) From Operations	\$10,207,103	\$7,438,538	(\$2,768,565)	-27%
C.	Non-Operating Revenue:				
1	Income from Investments	\$261,107	\$130,175	(\$130,932)	-50%
2	Gifts, Contributions and Donations	\$18,750	\$247,500	\$228,750	1220%
3	Other Non-Operating Gains/(Losses)	\$973,487	\$795,107	(\$178,380)	-18%
	Total Non-Operating Revenue	\$1,253,344	\$1,172,782	(\$80,562)	-6%
	Excess/(Deficiency) of Revenue Over Expenses				
	(Before Other Adjustments)	\$11,460,447	\$8,611,320	(\$2,849,127)	-25%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$668,077	(\$610,653)	(\$1,278,730)	-191%
	All Other Adjustments	(\$1,387,309)	(\$106,639)	\$1,280,670	-92%
	Total Other Adjustments	(\$719,232)	(\$717,292)	\$1,940	0%
		\$40.744.04F	¢7.004.000	(60.047.407)	070/
	Excess/(Deficiency) of Revenue Over Expenses	\$10,741,215	\$7,894,028	(\$2,847,187)	-27%

TWELVE MONTHS AC FISCAL YEA REPORT 385 - PARENT CORPORATION CONSO (2) DESCRIPTION Parent Corporation Statement of Operations Summary Net Patient Revenue Other Operating Revenue Total Operating Revenue	R 2011	(4) ACTUAL FY 2010 \$182,022,152	(5) ACTUAL FY 2011
REPORT 385 - PARENT CORPORATION CONSO (2) DESCRIPTION Parent Corporation Statement of Operations Summary Net Patient Revenue Other Operating Revenue Total Operating Revenue	(3) ACTUAL FY 2009 \$172,470,335	(4) ACTUAL 	ACTUAL
(2) DESCRIPTION Parent Corporation Statement of Operations Summary Net Patient Revenue Other Operating Revenue Total Operating Revenue	(3) ACTUAL FY 2009 \$172,470,335	(4) ACTUAL 	ACTUAL
DESCRIPTION Parent Corporation Statement of Operations Summary Net Patient Revenue Other Operating Revenue	ACTUAL FY 2009 \$172,470,335	ACTUAL FY 2010	ACTUAL
DESCRIPTION Parent Corporation Statement of Operations Summary Net Patient Revenue Other Operating Revenue	ACTUAL FY 2009 \$172,470,335	ACTUAL FY 2010	ACTUAL
Parent Corporation Statement of Operations Summary Net Patient Revenue Other Operating Revenue	<u>FY 2009</u> \$172,470,335	FY 2010	
Parent Corporation Statement of Operations Summary Net Patient Revenue Other Operating Revenue	\$172,470,335		<u> </u>
Net Patient Revenue Other Operating Revenue Total Operating Revenue		\$182,022,152	
Other Operating Revenue		\$182,022,152	
otal Operating Revenue	18,721,299		\$196,755,436
		31,717,287	27,400,731
	\$191,191,634	\$213,739,439	\$224,156,167
otal Operating Expenses	185,252,485	203,532,336	216,717,629
ncome/(Loss) From Operations	\$5,939,149	\$10,207,103	\$7,438,538
otal Non-Operating Revenue	(1,244,067)	534,112	455,490
Excess/(Deficiency) of Revenue Over Expenses	\$4,695,082	\$10,741,215	\$7,894,028
Parent Corporation Profitability Summary			
Parent Corporation Operating Margin	3.13%	4.76%	3.31%
Parent Corporation Non-Operating Margin	-0.65%	0.25%	0.20%
Parent Corporation Total Margin	2.47%	5.01%	3.51%
ncome/(Loss) From Operations	\$5,939,149	\$10,207,103	\$7,438,538
otal Operating Revenue	\$191,191,634	\$213,739,439	\$224,156,167
otal Non-Operating Revenue	(\$1,244,067)	\$534,112	\$455,490
otal Revenue	\$189,947,567	\$214,273,551	\$224,611,657
Excess/(Deficiency) of Revenue Over Expenses	\$4,695,082	\$10,741,215	\$7,894,028
Parent Corporation Net Assets Summary			
Parent Corporation Unrestricted Net Assets	\$50,950,947	\$62,140,641	\$57,976,004
Parent Corporation Total Net Assets	\$65,392,517	\$77,075,698	\$72,403,275
Parent Corporation Change in Total Net Assets	(\$11,770,618)	\$11,683,181	(\$4,672,423)
Parent Corporation Change in Total Net Assets %	84.7%	17.9%	-6.1%
	arent Corporation Profitability Summary arent Corporation Operating Margin arent Corporation Non-Operating Margin arent Corporation Total Margin ncome/(Loss) From Operations otal Operating Revenue otal Non-Operating Revenue otal Revenue xcess/(Deficiency) of Revenue Over Expenses arent Corporation Net Assets Summary arent Corporation Unrestricted Net Assets arent Corporation Total Net Assets arent Corporation Total Net Assets arent Corporation Change in Total Net Assets	arent Corporation Profitability Summary arent Corporation Operating Margin 3.13% arent Corporation Non-Operating Margin -0.65% arent Corporation Total Margin 2.47% arent Corporation Revenue \$191,191,634 otal Non-Operating Revenue (\$1,244,067) otal Revenue \$189,947,567 xccess/(Deficiency) of Revenue Over Expenses \$4,695,082 arent Corporation Net Assets Summary 3 arent Corporation Unrestricted Net Assets \$50,950,947 arent Corporation Total Net Assets \$65,392,517 arent Corporation Change in Total Net Assets \$65,392,517	arent Corporation Profitability Summaryarent Corporation Operating Margin3.13%arent Corporation Non-Operating Margin-0.65%arent Corporation Total Margin2.47%scome/(Loss) From Operations\$5,939,149stopperating Revenue\$191,191,634stopperating Revenue\$191,191,634stopperating Revenue\$189,947,567scoss/(Deficiency) of Revenue Over Expenses\$4,695,082arent Corporation Unrestricted Net Assets\$50,950,947arent Corporation Total Net Assets\$65,392,517arent Corporation Change in Total Net Assets\$65,392,517arent Corporation Change in Total Net Assets\$11,770,618state Stopperation Change in Total Net Assets\$11,683,181

	MIDSTATE MEDICAL CENTE	RAND	SUBSIDIARIES				
	TWELVE MONTHS AG	CTUAL	FILING				
	FISCAL YE	AR 201 [,]	1				
	REPORT 385 - PARENT CORPORATION CONS	OLIDAT	ED FINANCIAL	DA.	TA ANALYSIS		
(1)	(2)	(2) (3) (4)			(5)		
(-)		ACTUAL ACTUAL				A	CTUAL
<u>LINE</u>	DESCRIPTION		FY 2009		FY 2010		FY 2011
D.	Liquidity Measures Summary						
1	Current Ratio		2.48		2.07		2.17
2	Total Current Assets		\$69,929,471		\$62,140,637	\$	56,418,567
3	Total Current Liabilities		\$28,198,287		\$29,978,662	\$	26,021,890
4	Days Cash on Hand		88		56		37
5	Cash and Cash Equivalents		\$42,246,786		\$29,570,490	\$	20,898,243
6	Short Term Investments		0		0		0
7	Total Cash and Short Term Investments		\$42,246,786		\$29,570,490	\$	20,898,243
8	Total Operating Expenses		\$185,252,485		\$203,532,336	\$2	16,717,629
9	Depreciation Expense		\$9,179,180		\$11,405,092	\$	513,144,617
10	Operating Expenses less Depreciation Expense		\$176,073,305		\$192,127,244	\$2	03,573,012
11	Days Revenue in Patient Accounts Receivable		46		53		52
12	Net Patient Accounts Receivable	\$	22,801,140	\$	27,340,758	\$	29,581,747
13	Due From Third Party Payers		\$0		\$0		\$0
14	Due To Third Party Payers		\$885,467		\$942,231		\$1,800,530
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$	21,915,673	\$	26,398,527	\$	27,781,217
16	Total Net Patient Revenue		\$172,470,335		\$182,022,152	\$1	96,755,436
17	Average Payment Period		58		57		47
18	Total Current Liabilities		\$28,198,287		\$29,978,662	\$	26,021,890
19	Total Operating Expenses		\$185,252,485		\$203,532,336	\$2	16,717,629
20	Depreciation Expense		\$9,179,180		\$11,405,092		\$13,144,617
21	Total Operating Expenses less Depreciation Expense		\$176,073,305		\$192,127,244	\$2	203,573,012

	MIDSTATE MEDICAL CENTER A	ND SUBSIDIARIES					
	TWELVE MONTHS ACT	JAL FILING					
	FISCAL YEAR	2011					
	REPORT 385 - PARENT CORPORATION CONSOL	DATED FINANCIAL D	ATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)			
		ACTUAL	ACTUAL	ACTUAL			
<u>LINE</u>	DESCRIPTION	<u> </u>	<u> </u>	FY 2011			
E.	Solvency Measures Summary						
1	Equity Financing Ratio	28.3	31.8	29.3			
2	Total Net Assets	\$65,392,517	\$77,075,698	\$72,403,275			
3	Total Assets	\$231,075,506	\$242,188,102	\$247,362,082			
4	Cash Flow to Total Debt Ratio	12.5	20.0	18.3			
5	Excess/(Deficiency) of Revenues Over Expenses	\$4,695,082	\$10,741,215	\$7,894,028			
6	Depreciation Expense	\$9,179,180	\$11,405,092	\$13,144,617			
7	Excess of Revenues Over Expenses and Depreciation Expense	\$13,874,262	\$22,146,307	\$21,038,645			
8	Total Current Liabilities	\$28,198,287	\$29,978,662	\$26,021,890			
9	Total Long Term Debt	\$82,915,000	\$80,580,000	\$88,754,643			
10	Total Current Liabilities and Total Long Term Debt	\$111,113,287	\$110,558,662	\$114,776,533			
11	Long Term Debt to Capitalization Ratio	55.9	51.1	55.1			
12	Total Long Term Debt	\$82,915,000	\$80,580,000	\$88,754,643			
13	Total Net Assets	\$65,392,517	\$77,075,698	\$72,403,275			
14	Total Long Term Debt and Total Net Assets	\$148,307,517	\$157,655,698	\$161,157,918			

		IVIIDSI	TATE MEDICAL CE	NIER				
		TWELVE	MONTHS ACTUA	L FILING				
			FISCAL YEAR 20	11				
	REPORT 400) - HOSPITAL IN	PATIENT BED UTI	LIZATION BY DEF	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	DAYS	<u># PATIENT</u>		BEDS (A)	BEDS	<u>BEDS (A)</u>	BEDS
			7.001	– 004			00.00/	<u> </u>
1	Adult Medical/Surgical	35,753	7,861	7,861	111	116	88.2%	84.4%
2	ICU/CCU (Excludes Neonatal ICU)	1,915	602	0	7	9	75.0%	58.3%
	ICU/CCU (Excludes Neonatal ICU)	1,915	602	0	/	9	/5.0%	58.3%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
	Psychiatric: Ages 18+	1,835	283	283	6	6		83.8%
	TOTAL PSYCHIATRIC	1,835	283	283	6	6		83.8%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	2,635	1,053	1,053	10	13	72.2%	55.5%
7	Newborn	2,466	1,038	1,038	10	12	67.6%	56.3%
	Neonatal ICU	0	0	0	0	0	0.0%	0.00/
8		0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
		0	0	0	0	0	0.070	0.070
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	42,138	9,197	9,197	134	144	86.2%	80.2%
	TOTAL INPATIENT BED UTILIZATION	44,604	10,235	10,235	144	156	84.9%	78.3%
	TOTAL INPATIENT REPORTED YEAR	44,604	10,235	10,235	144	156		78.3%
		42,359	0	0	142	156	81.7%	74.4%
+	DIFFERENCE #: REPORTED VS. PRIOR YEAR	2,245	10,235	10,235	2	0	3.1%	3.9%
	DIFFERENCE %: REPORTED VS. PRIOR YEAF	5%	0%	0%	1%	0%	4%	5%
	DIFFERENCE %. REFORTED VO. FRIOR TEAN	J%	0%	U%	1 %	0%	4%	5%
	Total Licensed Beds and Bassinets	156						
	ו סנמו בוטפווספע שפעס מווע שמססווופנס	100						
(<u>)</u> Tł	nis number may not exceed the number of availa	able beds for ear	ch denartment or in	n total				
<u>, , , , , , , , , , , , , , , , , , , </u>								

	-	ATE MEDICAL CENT			
		FISCAL YEAR 2011			
	REPORT 450 - HOSPITAL INPATIENT AN		ER SERVICES UTIL	ZATION AND FTES	
(1)	(2)	(3)	(4)	(5)	(6)
(1)		(-)	(4)	(-)	(-7
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
Α.	CT Scans (A)				
1	Inpatient Scans	6,652	5,759	-893	-139
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	6,433	4,983	-1,450	-23
3	Emergency Department Scans	7,761	7,719	-42	-1
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0
	Total CT Scans	20,846	18,461	-2,385	-11
В.	MRI Scans (A)				
1	Inpatient Scans	1,384	1,527	143	10
2	Outpatient Scans (Excluding Emergency Department	E 040	E E 40	000	4
2 3	Scans) Emergency Department Scans	5,319 239	<u>5,542</u> 465	223 226	4 95
<u> </u>	Other Non-Hospital Providers' Scans (A)	239	405	226	95
-7	Total MRI Scans	6,942	7,534	592	9
		0,0 12	1,001	002	
C.	PET Scans (A)				
1	Inpatient Scans	0	0	0	0
	Outpatient Scans (Excluding Emergency Department	-	-		
2	Scans)	0	0	0	0
3	Emergency Department Scans	0	0	0	0
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0
	Total PET Scans	0	0	0	0
D.	PET/CT Scans (A)				
1	Inpatient Scans	3	7	4	133
~	Outpatient Scans (Excluding Emergency Department		(70		
2	Scans) Emergency Department Scans	411	472	61 0	<u>15</u> 0
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0
4	Total PET/CT Scans	414	479	65	16
	(A) If the Hospital is not the primary provider of the	se scans, the Hospital	I must obtain the fig	scal vear	
	volume of each of these types of scans from the				
Ε.	Linear Accelerator Procedures				
1	Inpatient Procedures	123	131	8	7
2	Outpatient Procedures	6,004	6,342	338	6
	Total Linear Accelerator Procedures	6,127	6,473	346	6
F.	Cardiac Catheterization Procedures				
1	Inpatient Procedures	0	0	0	0
2	Outpatient Procedures	0	0	0	0
2	Total Cardiac Catheterization Procedures	0	0	0	0
Ζ		•			
G.	Cardiac Angioplasty Procedures				
G .	Cardiac Angioplasty Procedures Primary Procedures	0	0	0	0
G.	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures	0	0	0	C
G .	Cardiac Angioplasty Procedures Primary Procedures	0		-	C
G. 1 2	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures	0	0	0	C
G. 1 2 H.	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies	0 0 0	0 0	0	C C
G. 1 2 H. 1	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies	0 0 0 0	0	0	C C C
G. 1 2 H.	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies	0 0 0	0 0 0	0 0 0	() () () () () () () ()
G. 1 2 H. 1	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies	0 0 0 0 0	0 0 0 0	0 0 0 0 0	() () () () () () () ()
G . 1 2 H . 1	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Total Electrophysiology Studies	0 0 0 0 0	0 0 0 0	0 0 0 0 0	C C C C C
G. 1 2 H. 1 2	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies	0 0 0 0 0	0 0 0 0	0 0 0 0 0	
G. 1 2 H. 1 2 I.	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Surgical Procedures Inpatient Surgical Procedures Outpatient Surgical Procedures	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 2,438 5,878	0 0 0 0 0 0 210 196	
G. 1 2 H. 1 2 I. 1	Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Total Electrophysiology Studies Surgical Procedures Inpatient Surgical Procedures	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 2,438	0 0 0 0 0 0 210	

	MIDS	TATE MEDICAL CENT	FED		
	-	E MONTHS ACTUAL F			
		FISCAL YEAR 2011			
	REPORT 450 - HOSPITAL INPATIENT AN		ER SERVICES UTIL	ZATION AND FTE	6
(1)	(2)	(2) (3)		(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
	Inpatient Endoscopy Procedures	1,435	1,288	-147	-10%
2	Outpatient Endoscopy Procedures	6,662	6,543	-119	-2%
	Total Endoscopy Procedures	8,097	7,831	-266	-3%
К.	Hospital Emergency Room Visits				
	Emergency Room Visits: Treated and Admitted	6,380	6,629	249	4%
	Emergency Room Visits: Treated and Discharged	68,942	78,336	9,394	14%
	Total Emergency Room Visits	75,322	84,965	9,643	13%
L.	Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
	Dental Clinic Visits	0	0	0	0%
	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	2,459	2,260	-199	-8%
	Total Hospital Clinic Visits	2,459	2,260	-199	-8%
М.	Other Hospital Outpatient Visits				
	Rehabilitation (PT/OT/ST)	214	202	-12	-6%
2	Cardiology	2,270	2,485	215	9%
3	Chemotherapy	439	504	65	15%
4	Gastroenterology	6,662	6,543	-119	-2%
5	Other Outpatient Visits	80,436	69,942	-10,494	-13%
	Total Other Hospital Outpatient Visits	90,021	79,676	-10,345	-11%
	Hospital Full Time Equivalent Employees	000.0	0155		001
	Total Nursing FTEs	308.0	315.5	7.5	2%
2	Total Physician FTEs	51.4	49.7		-3%
3	Total Non-Nursing and Non-Physician FTEs Total Hospital Full Time Equivalent Employees	626.4 985.8	653.4	27.0 32.8	4% 3%
	Total nospital run time Equivalent Employees	903.8	1,018.6	32.8	3%

	MIDSTATE MEL	DICAL CENTER			
	TWELVE MONTHS		IG		
	FISCAL	YEAR 2011			
REP	ORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOS	SCOPY AND EM	ERGENCY RO	OM SERVICES	BY LOCATION
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u> </u>	<u>FY 2011</u>	DIFFERENCE	DIFFERENCE
A.	Outpatient Surgical Procedures				
1	Main hospital campus	5,682	5,878	196	3%
	Total Outpatient Surgical Procedures(A)	5,682	5,878	196	3%
B.	Outpatient Endoscopy Procedures				
1	Main hospital campus	6,662	6,543	-119	-2%
	Total Outpatient Endoscopy Procedures(B)	6,662	6,543	-119	-2%
C.	Outpatient Hospital Emergency Room Visits				
1	61 Pomeroy Ave	22,655	27,683	5,028	22%
2	Main hospital campus	46,287	50,653	4,366	9%
	Total Outpatient Hospital Emergency Room Visits	68,942	78,336	9,394	14%
	(A) Must agree with Total Outpatient Surgical Procedu	res on Report 4	50.		
	(B) Must agree with Total Outpatient Endoscopy Proce	edures on Repo	rt 450.		
	(C) Must agree with Emergency Room Visits Treated a	nd Discharged	on Report 450		[

	MIDSTAT	E MEDICAL CENTER							
	TWELVE MC	ONTHS ACTUAL FILING							
	F	ISCAL YEAR 2011							
				ЛТ					
	REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS								
	AND BASELINE UNDERPAT	MENT DATA: COMPARAT	IVE ANALYS	15					
		ACTUAL	ACTUAL	AMOUNT	%				
	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE				
	DESCRIPTION	<u>F1 2010</u>	<u> </u>	DIFFERENCE	DIFFERENCE				
I.	DATA BY MAJOR PAYER CATEGORY								
Α.	MEDICARE								
А.									
	INPATIENT ACCRUED CHARGES	\$105,242,796	\$118,170,811	\$12,928,015	129				
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$43,924,410	\$48,578,024	\$4.653.614	119				
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.74%	41.11%	-0.63%	-2%				
4	DISCHARGES	4,619	4,826	207	4%				
5	CASE MIX INDEX (CMI)	1.42487	1.40688	(0.01799)	-19				
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,581.47453	6,789.60288	208.12835	3%				
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,673.95	\$7,154.77	\$480.82	7%				
8	PATIENT DAYS	23,725	25,200	1,475	6%				
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,851.40	\$1,927.70	\$76.30	49				
10	AVERAGE LENGTH OF STAY	5.1	5.2	0.1	2%				
	MEDICARE OUTPATIENT								
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$61,316,189	\$72,569,539	\$11,253,350	18%				
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,233,905	\$21,457,290	\$2,223,385	129				
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.37%	29.57%	-1.80%	-6%				
	OUTPATIENT CHARGES / INPATIENT CHARGES	58.26%	61.41%	3.15%	5%				
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,691.10559	2,963.68107	272.57547	10%				
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,147.21	\$7,240.08	\$92.87	19				
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)								
17	TOTAL ACCRUED CHARGES	\$166,558,985	\$190,740,350	\$24,181,365	15%				
18	TOTAL ACCRUED PAYMENTS	\$63,158,315	\$70,035,314	\$6,876,999	11%				
19	TOTAL ALLOWANCES	\$103,400,670	\$120,705,036	\$17,304,366	17%				

	MIDSTATE MEDIC	AL CENTER							
	TWELVE MONTHS A	CTUAL FILING							
	FISCAL YE								
	REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT								
	AND BASELINE UNDERPAYMENT DA	TA: COMPARAT	IVE ANALYS	IS					
		ACTUAL	ACTUAL	AMOUNT	%				
	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE					
LINE	DESCRIPTION	<u> </u>	<u>FT 2011</u>	DIFFERENCE	DIFFERENCE				
-									
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)								
	NON-GOVERNMENT INPATIENT	A=0.000.000	A== 00= 101	* ******	=				
	INPATIENT ACCRUED CHARGES INPATIENT ACCRUED PAYMENTS (IP PMT)	\$52,683,600	\$55,065,404	\$2,381,804	5%				
2	INPATIENT ACCRUED PAYMENTS (IP PMT) INPATIENT PAYMENTS / INPATIENT CHARGES	\$32,669,798	\$35,325,625	\$2,655,827 2,14%	8% 3%				
-	DISCHARGES	62.01%	64.15% 3,252	2.14%	-1%				
	CASE MIX INDEX (CMI)	1.03484	1.02963	(0.00521)	-1%				
-	CASE MIX INDEX (OM) CASE MIX ADJUSTED DISCHARGES (CMAD)	3,383.92680	3,348.35676	(35.57004)	-1%				
	INPATIENT ACCRUED PAYMENT / CMAD	\$9,654.40	\$10,550.14	\$895.73	9%				
	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$2,980.46)	(\$3,395.37)	(\$414.91)	14%				
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$10,085,651)	(\$11,368,914)	(\$1,283,263)	13%				
-	PATIENT DAYS	11.526	11.282	(244)	-2%				
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,834.44	\$3,131.15	\$296.71	10%				
12	AVERAGE LENGTH OF STAY	3.5	3.5	(0.1)	-2%				
	NON-GOVERNMENT OUTPATIENT								
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$97,810,217	\$103,548,217	\$5,738,000	6%				
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$61,788,697	\$66,378,849	\$4,590,152	7%				
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	63.17%	64.10%	0.93%	1%				
	OUTPATIENT CHARGES / INPATIENT CHARGES	185.66%	188.05%	2.39%	1%				
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,070.94826	6,115.25163	44.30338	1%				
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$10,177.77	\$10,854.64	\$676.87	7%				
	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$3,030.55)	(\$3,614.56)	(\$584.00)	19%				
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$18,398,336)	(\$22,103,934)	(\$3,705,597)	20%				
———									
21	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT) TOTAL ACCRUED CHARGES	\$150,493,817	\$158,613,621	\$8,119,804	5%				
21	TOTAL ACCRUED PAYMENTS	\$150,493,817 \$94,458,495	\$101,704,474	\$8,119,804	5%				
22	TOTAL ALLOWANCES	\$94,458,495	\$56,909,147	\$7,245,979	2%				
25		<i>\\</i> 00,000,022	ψ00,000,147	ψ010,020	2 /0				
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$28,483,987)	(\$33,472,848)	(\$4.988.860)	18%				
		(\$20,100,001)	(\$55, 2,040)	(\$ 1,000,000)	1070				
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA								
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$132,260,378	\$145,881,128	\$13,620,750	10%				
	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$93,181,255	\$100,144,953	\$6,963,698	7%				
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)								
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$39,079,123	\$45,736,175	\$6,657,052	17%				
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	29.55%	31.35%	1.80%					

	MIDSTATE	MEDICAL CENTER								
	TWELVE MON	ITHS ACTUAL FILING								
	FIS	CAL YEAR 2011								
	REPORT FORM 500 - CALCULA			міт						
	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					
С.	UNINSURED									
1	UNINSURED INPATIENT INPATIENT ACCRUED CHARGES	\$2,024,556	\$3,391,142	(\$543,414)	-149					
2	INPATIENT ACCRUED CHARGES	\$3,934,556	\$3,391,142 \$303,258	(\$543,414) \$200,593	-149					
3	INPATIENT PAYMENTS / INPATIENT CHARGES	2.61%	8.94%	6.33%	243%					
4	DISCHARGES	234	209	(25)	-119					
5	CASE MIX INDEX (CMI)	1.07494	0.97810	(0.09684)	-9%					
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	251.53596	204.42290	(47.11306)	-199					
7	INPATIENT ACCRUED PAYMENT / CMAD	\$408.15	\$1.483.48	\$1.075.33	2639					
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$9,246.25	\$9.066.65	(\$179.60)	-29					
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,265.79	\$5.671.28	(\$594.51)	-9%					
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,576,073	\$1,159,340	(\$416,732)	-26%					
11	PATIENT DAYS	969	870	(99)	-109					
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$105.95	\$348.57	\$242.62	2299					
13	AVERAGE LENGTH OF STAY	4.1	4.2	0.0	19					
	UNINSURED OUTPATIENT									
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,741,172	\$7,307,136	(\$434,036)	-6%					
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$540,733	\$519,914	(\$20,819)	-4°					
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	6.99%	7.12%	0.13%	29					
17	OUTPATIENT CHARGES / INPATIENT CHARGES	196.75%	215.48%	18.73%	109					
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	460.39102	450.34724	(10.04378)	-2%					
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,174.51	\$1,154.47	(\$20.03)	-29					
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$9,003.26	\$9,700.17	\$696.91	89					
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,972.70	\$6,085.61	\$112.90	29					
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,749,780	\$2,740,636	(\$9,143)	00					
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)		A	(*****						
23	TOTAL ACCRUED CHARGES	\$11,675,728	\$10,698,278	(\$977,450)	-89					
24	TOTAL ACCRUED PAYMENTS	\$643,398	\$823,172	\$179,774	289					
25	TOTAL ALLOWANCES	\$11,032,330	\$9,875,106	(\$1,157,224)	-109					
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,325,852	\$3,899,976	(\$425,876)	-109					
-		. ,		(* -,•••)						

REPORT FORM 500 - CALCUI AND BASELINE UNDERPAYI	ATION OF DSH UPPER P MENT DATA: COMPARATI	VE ANALYS		
AND BASELINE UNDERPAY	MENT DATA: COMPARATI	VE ANALYS		
AND BASELINE UNDERPAY	MENT DATA: COMPARATI	VE ANALYS		
SCRIPTION	ACTUAL		15	
		ACTUAL		
		ACTUAL		
	FY 2010		AMOUNT	%
		FY 2011	DIFFERENCE	DIFFERENCE
ATE OF CONNECTICUT MEDICAID				
ICAID INPATIENT ITIENT ACCRUED CHARGES	000 412 100	* ***	¢0.500.000	
TIENT ACCRUED CHARGES	\$20,416,489 \$7,724,989	\$30,010,171 \$9.805.384	\$9,593,682 \$2,080,395	47%
TIENT ACCROED PAYMENTS (IP PMT)	37.84%	\$9,805,384	\$2,080,395	-14%
CHARGES	1.741	2.106	-5.16%	-14% 21%
E MIX INDEX (CMI)	0.81113	0.90081	0.08968	217
E MIX ADJUSTED DISCHARGES (CMAD)	1,412.17733	1,897.10586	484.92853	349
TIENT ACCRUED PAYMENT / CMAD	\$5.470.27	\$5,168,60	(\$301.67)	-6%
-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,470.27	\$5,381.54	(\$301.67) \$1.197.40	-6%
ICARE - MEDICAID IP PMT / CMAD	\$1,203.68	\$1,986.17	\$782.49	65%
TIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,203.68	\$3,767,966	\$2,068,158	122%
ENT DAYS	6,201	7,822	\$2,008,138 1.621	26%
TIENT ACCRUED PAYMENT / PATIENT DAY	\$1.245.77	\$1,253.56	\$7.80	1%
RAGE LENGTH OF STAY	3.6	3.7	0.2	4%
PATIENT ACCRUED CHARGES (OP CHGS)	\$29,370,249	\$41,580,077	\$12,209,828	42%
PATIENT ACCRUED PAYMENTS (OP PMT)	\$8.696.383	\$10.948.628	\$2,252,245	26%
PATIENT PAYMENTS / OUTPATIENT CHARGES	29.61%	26.33%	-3.28%	-119
PATIENT CHARGES / INPATIENT CHARGES	143.86%	138.55%	-5.30%	-4%
PATIENT EQUIVALENT DISCHARGES (OPED)	2.504.52482	2.917.93213	413.40731	179
PATIENT ACCRUED PAYMENTS / OPED	\$3.472.27	\$3,752,19	\$279.92	89
-GOVERNMENT - MEDICAID OP PMT / OPED	\$6,705.50	\$7,102.45	\$396.95	69
ICARE - MEDICAID OP PMT / OPED	\$3,674.94	\$3,487.89	(\$187.05)	-5%
PATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,203,989	\$10,177,436	\$973,447	119
ICAID TOTALS (INPATIENT + OUTPATIENT)				
AL ACCRUED CHARGES	\$49,786,738	\$71,590,248	\$21,803,510	44%
AL ACCRUED PAYMENTS	\$16,421,372	\$20,754,012	\$4,332,640	26%
	\$33,365,366	\$50,836,236	\$17,470,870	52%
AL ALLOWANCES			\$3,041,605	28%
Al Al	ACCRUED CHARGES ACCRUED PAYMENTS ALLOWANCES	ACCRUED CHARGES \$49,786,738 ACCRUED CHARGES \$49,786,738 ACCRUED PAYMENTS \$16,421,372 ALLOWANCES \$33,365,366	CAID TOTALS (INPATIENT + OUTPATIENT) ACCRUED CHARGES \$49,786,738 \$71,590,248 ACCRUED PAYMENTS \$16,421,372 \$20,754,012	CAID TOTALS (INPATIENT + OUTPATIENT) 449,786,738 \$71,590,248 \$21,803,510 ACCRUED CHARGES \$49,786,738 \$71,590,248 \$21,803,510 ACCRUED PAYMENTS \$16,421,372 \$20,754,012 \$4,332,640 ALLOWANCES \$33,365,366 \$50,836,236 \$17,470,870

	MIDSTATE MED	DICAL CENTER					
	TWELVE MONTHS	ACTUAL FILING					
	FISCAL YEAR 2011						
	REPORT FORM 500 - CALCULATIO						
	AND BASELINE UNDERPAYMENT	DATA: COMPARAT	IVE ANALYS	IS			
		ACTUAL	ACTUAL	AMOUNT	%		
I INF	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE		
	DECOM HON			DITERCENCE			
Ε.	OTHER MEDICAL ASSISTANCE (O.M.A.)						
	OTHER MEDICAL ASSISTANCE INPATIENT						
1	INPATIENT ACCRUED CHARGES	\$2.586.617	\$741.619	(\$1.844.998)	-71%		
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$392.213	\$272.976	(\$119.237)	-30%		
3	INPATIENT PAYMENTS / INPATIENT CHARGES	15.16%	36.81%	21.64%	143%		
4	DISCHARGES	168	32	(136)	-81%		
5	CASE MIX INDEX (CMI)	1.13961	1.13153	(0.00808)	-1%		
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	191.45448	36.20896	(155.24552)	-81%		
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,048.60	\$7,538.91	\$5,490.31	268%		
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$7,605.81	\$3,011.23	(\$4,594.58)	-60%		
9	MEDICARE - O.M.A. IP PMT / CMAD	\$4,625.35	(\$384.14)	(\$5,009.49)	-108%		
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$885,544	(\$13,909)	(\$899,453)	-102%		
11	PATIENT DAYS	849	242	(607)	-71%		
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$461.97	\$1,128.00	\$666.03	144%		
13	AVERAGE LENGTH OF STAY	5.1	7.6	2.5	50%		
	OTHER MEDICAL ASSISTANCE OUTPATIENT						
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$4,783,917	\$965,547	(\$3,818,370)	-80%		
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$370,710	\$246,214	(\$124,496)	-34%		
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	7.75%	25.50%	17.75%	229%		
17		184.95%	130.19%	-54.75%	-30%		
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	310.71398	41.66223	(269.05174)	-87%		
19		\$1,193.09	\$5,909.76	\$4,716.67	395%		
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD MEDICARE - O.M.A. OP PMT / CMAD	\$8,984.68 \$5,954.12	\$4,944.87 \$1.330.32	(\$4,039.80) (\$4,623,81)	-45%		
21	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,850,029	\$55,424	(\$4,623.81) (\$1,794,605)	-78% -97%		
23	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT) TOTAL ACCRUED CHARGES	\$7.370.534	\$1,707,166	(\$5.663.368)	-77%		
23	TOTAL ACCRUED CHARGES	\$7,370,534 \$762,923	\$1,707,166	(\$5,663,368) (\$243,733)	-77% -32%		
24	TOTAL ALLOWANCES	\$6.607.611	\$1.187.976	(\$5,419,635)	-327		
20		φ0,007,011	φ1,107,970	(40,419,030)	-02%		
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$2,735,573	\$41,515	(\$2,694,058)	-98%		
-		. , ,	. ,	(, , ,)			

	MIDSTATE ME	DICAL CENTER			
	TWELVE MONTH	S ACTUAL FILING			
	FISCA	L YEAR 2011			
	REPORT FORM 500 - CALCULATIO			міт	
	AND BASELINE UNDERPAYMEN				
	AND BAJELINE UNDERFAIMEN	I DATA: COMPARAT	IVE ANAL 13	13	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u> </u>	FY 2011	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDIC	CAL ASSISTANCE)			
	TOTAL MEDICAL ASSISTANCE INPATIENT				
	INPATIENT ACCRUED CHARGES	\$23,003,106	\$30,751,790	\$7,748,684	34%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$8,117,202	\$10,078,360	\$1,961,158	24%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.29%	32.77%	-2.51%	-7%
4	DISCHARGES	1,909	2,138	229	12%
5	CASE MIX INDEX (CMI)	0.84004	0.90426	0.06423	8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,603.63181	1,933.31482	329.68301	21%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,061.76	\$5,212.99	\$151.23	3%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$4,592.64	\$5,337.14	\$744.50	16%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,612.19	\$1,941.77	\$329.59	20%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,585,351	\$3,754,056	\$1,168,705	45%
11	PATIENT DAYS	7,050	8,064	1,014	14%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,151.38	\$1,249.80	\$98.42	9%
13	AVERAGE LENGTH OF STAY	3.7	3.8	0.1	2%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$34,154,166	\$42,545,624	\$8,391,458	25%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,067,093	\$11,194,842	\$2,127,749	23%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.55%	26.31%	-0.23%	-1%
	OUTPATIENT CHARGES / INPATIENT CHARGES	148.48%	138.35%	-10.12%	-7%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,815.23880	2,959.59436	144.35556	5%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3.220.72	\$3,782,56	\$561.84	17%
	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$6,957.05	\$7.072.08	\$115.03	2%
	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3.926.49	\$3,457,52	(\$468.97)	-12%
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,054,018	\$10,232,860	(\$821,159)	-7%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
	TOTAL ACCRUED CHARGES	\$57,157,272	\$73,297,414	\$16,140,142	28%
	TOTAL ACCRUED PAYMENTS	\$17,184,295	\$21,273,202	\$4,088,907	24%
25	TOTAL ALLOWANCES	\$39,972,977	\$52,024,212	\$12,051,235	30%

	MIDSTATE MEDIC	AL CENTER							
	TWELVE MONTHS A	CTUAL FILING							
	FISCAL YEAR 2011								
	REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT								
	AND BASELINE UNDERPAYMENT D								
		ACTUAL	ACTUAL	AMOUNT	%				
	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE				
	DESCRIPTION	112010	112011	DITTERENCE	DIFFERENCE				
G.	CHAMPUS / TRICARE								
О.	CHAMPUS / IRICARE								
	CHAMPUS / TRICARE INPATIENT								
	INPATIENT ACCRUED CHARGES	\$251,124	\$220.664	(\$30,460)	-12%				
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$103,021	\$82,451	(\$20,570)	-20%				
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.02%	37.36%	-3.66%	-9%				
-	DISCHARGES	20	19	(1)	-5%				
	CASE MIX INDEX (CMI)	1.12174	0.91139	(0.21035)	-19%				
-	CASE MIX ADJUSTED DISCHARGES (CMAD)	22.43480	17.31641	(5.11839)	-23%				
	INPATIENT ACCRUED PAYMENT / CMAD	\$4,592.02	\$4,761.44	\$169.42	4%				
•	PATIENT DAYS	58	58	0	0%				
-	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,776.22	\$1,421.57	(\$354.66)	-20%				
10	AVERAGE LENGTH OF STAY	2.9	3.1	0.2	5%				
	CHAMPUS / TRICARE OUTPATIENT								
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$409,664	\$543,893	\$134,229	33%				
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$168,060	\$203,226	\$35,166	21%				
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)								
-	TOTAL ACCRUED CHARGES	\$660,788	\$764,557	\$103,769	16%				
	TOTAL ACCRUED PAYMENTS TOTAL ALLOWANCES	\$271,081	\$285,677	\$14,596	5%				
15	TOTAL ALLOWANCES	\$389,707	\$478,880	\$89,173	23%				
Н.	OTHER DATA								
	OTHER OPERATING REVENUE	\$18,695,433	\$14,584,411	(\$4,111,022)	-22%				
	TOTAL OPERATING EXPENSES	\$190,181,772	\$203,675,287	\$13,493,515	7%				
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$1,215,043	\$0	(\$1,215,043)	-100%				
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)								
	CHARITY CARE (CHARGES)	\$3,637,983	\$3,025,038	(\$612,945)	-17%				
	BAD DEBTS (CHARGES)	\$3,637,983	\$3,025,038	(\$2,590,122)	-17%				
	UNCOMPENSATED CARE (CHARGES)	\$10,465,542	\$10,900,458	(\$2,590,122)	-23%				
	COST OF UNCOMPENSATED CARE	\$6.632.341	\$4.976.298	(\$1,656,042)	-25%				
		\$0,002,041	÷ .,0. 0,200	(\$1,000,042)	2070				
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)								
	TOTAL ACCRUED CHARGES	\$57,157,272	\$73,297,414	\$16,140,142	28%				
-	TOTAL ACCRUED PAYMENTS	\$17,184,295	\$21,273,202	\$4,088,907	24%				
	COST OF TOTAL MEDICAL ASSISTANCE	\$26,878,848	\$33,461,878	\$6,583,030	24%				
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$9,694,553	\$12,188,676	\$2,494,123	26%				

MIDSTATE MEDICAL CENTER						
	TWELVE MO	NTHS ACTUAL FILING				
	FI	SCAL YEAR 2011				
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT						
	AND BASELINE UNDERPAY	MENT DATA: COMPARAT	IVE ANALYS	IS		
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION	<u> </u>	FY 2011	DIFFERENCE	DIFFERENCE	
II.	AGGREGATE DATA					
Α.	TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$181,180,626	\$204,208,669	\$23,028,043	13%	
	TOTAL INPATIENT PAYMENTS	\$84,814,431	\$94,064,460	\$9,250,029	119	
3	TOTAL INPATIENT PAYMENTS / CHARGES	46.81%	46.06%	-0.75%	-29	
4	TOTAL DISCHARGES	9,818	10,235	417	49	
5	TOTAL CASE MIX INDEX	1.18063	1.18110	0.00047	0%	
6	TOTAL CASE MIX ADJUSTED DISCHARGES	11,591.46794	12,088.59087	497.12293	49	
7	TOTAL OUTPATIENT CHARGES	\$193,690,236	\$219,207,273	\$25,517,037	139	
8	OUTPATIENT CHARGES / INPATIENT CHARGES	106.90%	107.34%	0.44%	09	
9	TOTAL OUTPATIENT PAYMENTS	\$90,257,755	\$99,234,207	\$8,976,452	10	
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	46.60%	45.27%	-1.33%	-39	
11	TOTAL CHARGES	\$374,870,862	\$423,415,942	\$48,545,080	139	
12	TOTAL PAYMENTS	\$175,072,186	\$193,298,667	\$18,226,481	109	
13	TOTAL PAYMENTS / TOTAL CHARGES PATIENT DAYS	46.70%	45.65%	-1.05%	-29	
14	PATIENT DATS	42,359	44,604	2,245	5%	
В.	TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$128,497,026	\$149,143,265	\$20,646,239	16%	
2	INPATIENT PAYMENTS	\$52,144,633	\$58,738,835	\$6,594,202	139	
3	GOVT. INPATIENT PAYMENTS / CHARGES	40.58%	39.38%	-1.20%	-39	
4	DISCHARGES	6,548	6,983	435	79	
5	CASE MIX INDEX	1.25344	1.25164	(0.00180)	09	
6	CASE MIX ADJUSTED DISCHARGES	8,207.54114	8,740.23411	532.69297	69	
7	OUTPATIENT CHARGES	\$95,880,019	\$115,659,056	\$19,779,037	219	
8	OUTPATIENT CHARGES / INPATIENT CHARGES	74.62%	77.55%	2.93%	49	
9	OUTPATIENT PAYMENTS	\$28,469,058	\$32,855,358	\$4,386,300	15	
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.69%	28.41%	-1.29%	-49	
11	TOTAL CHARGES	\$224,377,045	\$264,802,321	\$40,425,276	18	
12	TOTAL PAYMENTS	\$80,613,691	\$91,594,193	\$10,980,502	149	
13	TOTAL PAYMENTS / CHARGES	35.93%	34.59%	-1.34%	-4'	
	PATIENT DAYS	30,833	33,322	2,489	8	
15	TOTAL GOVERNMENT DEDUCTIONS	\$143,763,354	\$173,208,128	\$29,444,774	209	
	AVERAGE LENGTH OF STAY					
		5.1	5.2	0.1	29	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.5	(0.1)	-2°	
-	UNINSURED	4.1	4.2	0.0	1	
	MEDICAID	3.6	3.7	0.2	4	
	OTHER MEDICAL ASSISTANCE	5.1	7.6	2.5	50'	
6	CHAMPUS / TRICARE	2.9	3.1	0.2	59	
7	TOTAL AVERAGE LENGTH OF STAY	4.3	4.4	0.0	19	

	MIDSTATE MEDICA	L CENTER					
	TWELVE MONTHS ACT	FUAL FILING					
	FISCAL YEAR 2011						
	REPORT FORM 500 - CALCULATION OF			міт			
	AND BASELINE UNDERPAYMENT DAT	A: COMPARAT	IVE ANAL 15	15			
		ACTUAL	ACTUAL	AMOUNT	%		
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE		
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION						
1	TOTAL CHARGES	\$374,870,862	\$423,415,942	\$48,545,080	13%		
2		\$143,763,354	\$173,208,128	\$29,444,774	20%		
3	UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$14,103,525 \$39.079,123	\$10,900,458 \$45,736,175	(\$3,203,067) \$6,657,052	17%		
	EMPLOYEE SELF INSURANCE ALLOWANCE	+ / / -	+ - , , -	+ - / /			
5	TOTAL ADJUSTMENTS	\$2,852,678	\$272,514	(\$2,580,164)	-90%		
6 7	TOTAL ADJOSTMENTS	\$199,798,680	\$230,117,275 \$193,298,667	\$30,318,595 \$18,226,485	15% 10%		
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$175,072,182 \$1,215,043	\$193,298,667	\$18,226,485	-100%		
-	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.			(, , , ,			
	RATIO OF NET REVENUE TO TOTAL CHARGES	\$176,287,225	\$193,298,667	\$17,011,442	-3%		
10	COST OF UNCOMPENSATED CARE	0.4702612096 \$6,632,341	0.4565219394 \$4,976,298	(0.0137392702) (\$1,656,042)	-3%		
	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$9,694,553	\$4,976,298	(\$1,656,042) \$2,494,123	-25%		
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%		
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$40.000.004	\$47.404.074	\$000.000	50		
		\$16,326,894	\$17,164,974	\$838,080	5%		
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)						
1.	CALCOLATED UNDERFAITMENT (UFFER LIMIT METHODOLOGY)						
4	MEDICAID	¢0,000,000	¢40.477.400	¢070.447	440		
	OTHER MEDICAL ASSISTANCE	\$9,203,989 \$2,735,573	\$10,177,436 \$41,515	\$973,447	-98%		
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,735,573	\$3,899,976	(\$2,694,058) (\$425,876)	-98% -10%		
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$16,265,415	\$14,118,927	(\$2,146,488)	-10%		
4	TOTAL CALCOLATED UNDERFAILMENT (OFFER LIMIT METHODOLOGT)	\$10,205,415	\$14,110,927	(\$2,140,400)	-13/6		
۷.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600						
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$5,000,636	\$474,597	(\$4,526,039)	-90.51%		
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$5,734,923	\$3,456,769	(\$2,278,154)	-39.72%		
-	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$182,022,152	\$196,755,436	\$14,733,284	8.09%		
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%		
-	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$374,870,862	\$423,415,942	\$48,545,080	12.95%		
-	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%		
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$14,103,525	\$10,900,458	(\$3,203,067)	-22.71%		

	MIDSTATE MEDICAL CENTER			
	TWELVE MONTHS ACTUAL FILING	;		
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAY BASELINE UNDERPAYMENT DAT			
	BASELINE UNDERPAIMENT DATA	4		
(1)	(2)	(3)	(4)	(5)
	X=7			
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	<u>FY 2010</u>	<u>FY 2011</u>	DIFFERENCE
L	ACCRUED CHARGES AND PAYMENTS			
	AGORGED GHARGEG AND FATMENTO			
	INPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$52,683,600	\$55,065,404	\$2,381,804
_	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$105,242,796 \$23,003,106	<u>118,170,811</u> 30,751,790	\$12,928,015 \$7,748,684
4	MEDICAID	\$20,416,489	30,010,171	\$9,593,682
	OTHER MEDICAL ASSISTANCE	\$2,586,617	741,619	(\$1,844,998)
		\$251,124	220,664	(\$30,460)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT CHARGES	\$3,934,556 \$128,497,026	3,391,142 \$149,143,265	<u>(\$543,414)</u> \$20,646,239
	TOTAL INPATIENT CHARGES	\$181,180,626	\$204,208,669	\$23,028,043
	OUTPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$97,810,217	\$103,548,217	\$5,738,000
	MON-GOVERNMENT (INCLUDING SELF PAT / UNINSURED)	\$61,316,189	72,569,539	\$11,253,350
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$34,154,166	42,545,624	\$8,391,458
	MEDICAID	\$29,370,249	41,580,077	\$12,209,828
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$4,783,917 \$409,664	965,547 543,893	(\$3,818,370) \$134,229
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,741,172	7,307,136	(\$434,036)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$95,880,019	\$115,659,056	\$19,779,037
	TOTAL OUTPATIENT CHARGES	\$193,690,236	\$219,207,273	\$25,517,037
C.	TOTAL ACCRUED CHARGES			
	TOTAL ACCROED CHARGES TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$150,493,817	\$158,613,621	\$8,119,804
2	TOTAL MEDICARE	\$166,558,985	\$190,740,350	\$24,181,365
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$57,157,272	\$73,297,414	\$16,140,142
4	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$49,786,738 \$7,370,534	\$71,590,248 \$1,707,166	\$21,803,510 (\$5,663,368)
	TOTAL CHAMPUS / TRICARE	\$660,788	\$764,557	\$103,769
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$11,675,728	\$10,698,278	(\$977,450)
	TOTAL GOVERNMENT CHARGES	\$224,377,045	\$264,802,321	\$40,425,276
	TOTAL CHARGES	\$374,870,862	\$423,415,942	\$48,545,080
D.	INPATIENT ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$32,669,798	\$35,325,625	\$2,655,827
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$43,924,410 \$8,117,202	48,578,024 10,078,360	\$4,653,614 \$1,961,158
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,724,989	9,805,384	\$2,080,395
	OTHER MEDICAL ASSISTANCE	\$392,213	272,976	(\$119,237)
	CHAMPUS / TRICARE	\$103,021	82,451	(\$20,570)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYMENTS	\$102,665 \$52,144,633	303,258 \$58,738,835	\$200,593 \$6,594,202
	TOTAL INPATIENT GOVERNMENT PATMENTS	\$84,814,431	\$94,064,460	\$9,250,029
				. , , . = •
		#04 700 00 -	¢cc 070 040	A
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$61,788,697 \$19,233,905	\$66,378,849 21,457,290	\$4,590,152 \$2,223,385
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$9,067,093	11,194,842	\$2,127,749
4	MEDICAID	\$8,696,383	10,948,628	\$2,252,245
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$370,710	246,214	(\$124,496)
-	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$168,060 \$540,733	203,226 519,914	\$35,166 (\$20,819)
Ľ	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$28,469,058	\$32,855,358	\$4,386,300
	TOTAL OUTPATIENT PAYMENTS	\$90,257,755	\$99,234,207	\$8,976,452
F.	TOTAL ACCRUED PAYMENTS	+ +		
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$94,458,495	\$101,704,474	\$7,245,979
2	TOTAL MEDICARE	\$63,158,315	\$70,035,314	\$6,876,999
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$17,184,295	\$21,273,202	\$4,088,907
		\$16,421,372	\$20,754,012	\$4,332,640
4	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$762 923	\$519 190	(\$24.37.33)
4 5	TOTAL MEDICALD TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$762,923 \$271,081	\$519,190 \$285,677	(\$243,733) \$14,596
4 5	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$271,081 \$643,398	\$285,677 \$823,172	\$14,596 \$179,774
4 5 6	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$271,081	\$285,677	\$14,596

	MIDSTATE MEDICAL C			
	TWELVE MONTHS ACTUA			
	FISCAL YEAR 20			
	REPORT 550 - CALCULATION OF DSH UPI			
	BASELINE UNDERPAYME			
(4)	(2)	(2)	(4)	(E)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	<u>FY 2010</u>	FY 2011	DIFFERENCE
II.	PAYER MIX			
•	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
Α.	INPATIENT PATER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14.05%	13.01%	-1.05%
2	MEDICARE	28.07%	27.91%	-0.17%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.14%	7.26%	1.13%
4 5	MEDICAID OTHER MEDICAL ASSISTANCE	5.45%	7.09% 0.18%	<u>1.64%</u> -0.51%
5 6	CHAMPUS / TRICARE	0.89%	0.18%	-0.51% -0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.05%	0.80%	-0.25%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	34.28%	35.22%	0.95%
	TOTAL INPATIENT PAYER MIX	48.33%	48.23%	-0.10%
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.09%	24.46%	-1.64%
2		16.36%	17.14%	0.78%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	9.11%	10.05% 9.82%	0.94%
5	OTHER MEDICAL ASSISTANCE	1.28%	0.23%	-1.05%
6	CHAMPUS / TRICARE	0.11%	0.13%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.07%	1.73%	-0.34%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	25.58%	27.32%	1.74%
	TOTAL OUTPATIENT PAYER MIX	51.67%	51.77%	0.10%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
4	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10.000/	10.000/	0.200/
1	MEDICARE	18.66%	18.28% 25.13%	<u>-0.39%</u> 0.04%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.64%	5.21%	0.58%
4	MEDICAID	4.41%	5.07%	0.66%
5	OTHER MEDICAL ASSISTANCE	0.22%	0.14%	-0.08%
6		0.06%	0.04%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYER MIX	0.06%	0.16%	0.10%
	TOTAL INPATIENT PAYER MIX	29.78%	30.39% 48.66%	0.60%
			/0	
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	35.29%	34.34%	-0.95%
2	MEDICARE	10.99%	11.10%	0.93%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.18%	5.79%	0.61%
4	MEDICAID	4.97%	5.66%	0.70%
5		0.21%	0.13%	-0.08%
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.10%	0.11% 0.27%	0.01%
1	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	0.31% 16.26%	0.27% 17.00%	-0.04% 0.74%
	TOTAL OUTPATIENT PAYER MIX	51.55%	51.34%	-0.22%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

	MIDSTATE MEDICAL CENTER			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYMI	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA		
-	D120147050			
Α.	DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,270	3,252	(18
	MEDICARE	4,619	4,826	207
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	<u>1,909</u> 1,741	2,138 2,106	<u>229</u> 365
	OTHER MEDICAL ASSISTANCE	1,741	2,106	(136
	CHAMPUS / TRICARE	20	19	(1)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	234	209	(25
	TOTAL GOVERNMENT DISCHARGES TOTAL DISCHARGES	6,548 9.818	6,983 10,235	435
		3,010	10,233	417
В.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	11,526	11,282	(244
	MEDICARE	23,725	25,200	1,475
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7,050	8,064	1,014
	MEDICAID	6,201	7,822	1,621
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	849 58	242 58	(607
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	969	870	(99
	TOTAL GOVERNMENT PATIENT DAYS	30,833	33,322	2,489
	TOTAL PATIENT DAYS	42,359	44,604	2,245
C.	AVERAGE LENGTH OF STAY (ALOS)			
0.				
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.5	(0.1)
		5.1	5.2	0.1
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	3.7	3.8 3.7	0.1
	OTHER MEDICAL ASSISTANCE	5.1	7.6	2.5
	CHAMPUS / TRICARE	2.9	3.1	0.2
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.1	4.2 4.8	0.0 0.1
	TOTAL AVERAGE LENGTH OF STAY	4.3	4.4	0.0
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.03484	1.02963	(0.00521
	MEDICARE	1.42487	1.40688	(0.01799
0		11 12 101		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.84004	0.90426	0.06423
4	MEDICAID	0.84004 0.81113	0.90426 0.90081	0.06423
4 5		0.84004 0.81113 1.13961	0.90426	0.06423 0.08968 (0.00808
4 5 6	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.84004 0.81113 1.13961 1.12174 1.07494	0.90426 0.90081 1.13153 0.91139 0.97810	0.06423 0.08968 (0.00808 (0.21035
4 5 6	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180
4 5 6	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.84004 0.81113 1.13961 1.12174 1.07494	0.90426 0.90081 1.13153 0.91139 0.97810	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180
4 5 6 7	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180
4 5 6 7 E.	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047
4 5 6 7 E.	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047
4 5 7 E .	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750
4 5 7 E.	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750
4 5 7 E. 1 2	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$93,181,255	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698
4 5 7 E. 1 2 3	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$93,181,255 \$39,079,123	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953 \$45,736,175	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698 \$6,963,698
4 5 7 E. 1 2 3 4	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$93,181,255 \$39,079,123 29.55%	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953 \$45,736,175 31.35%	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698 \$6,963,698
4 5 7 E. 1 2 3 4 5 6	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$93,181,255 \$39,079,123	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953 \$45,736,175 31.35% \$474,597 \$272,514	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698 \$6,963,698 \$6,657,052 1.80%
4 5 7 E. 1 2 3 4 5	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$93,181,255 \$39,079,123 29.55% \$5,000,636	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953 \$45,736,175 31.35% \$474,597	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698 \$6,963,698 \$6,657,052 1.80% (\$4,526,039
4 5 6 7 E. 1 2 3 4 5 6 7	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$132,260,378 \$93,181,255 \$39,079,123 29,55% \$5,000,636 \$2,852,678 \$1,215,043	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953 \$45,736,175 31.35% \$474,597 \$272,514 \$0	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698 \$6,963,698 \$6,657,052 1.80% (\$4,526,039 (\$2,580,164 (\$1,215,043
4 5 6 7 7 1 2 2 3 4 5 6 7 8	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT) CHARITY CARE	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$132,260,378 \$39,079,123 \$39,079,123 29,55% \$5,000,636 \$2,852,678 \$1,215,043 \$3,637,983	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953 \$45,736,175 31.35% \$474,597 \$272,514 \$0 \$3,025,038	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698 \$6,657,052 1.80% (\$4,526,039 (\$2,580,164 (\$1,215,043) (\$612,945
4 5 6 7 1 2 2 3 4 5 6 7 7 8 9	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT) CHARITY CARE BAD DEBTS	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$132,260,378 \$39,079,123 29.55% \$39,079,123 29.55% \$5,000,636 \$2,852,678 \$1,215,043 \$3,637,983 \$10,465,542	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953 \$45,736,175 31.35% \$474,597 \$272,514 \$0 \$3,025,038 \$7,875,420	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698 \$6,963,698 \$6,657,052 1.80% (\$4,526,039 (\$2,580,164 (\$1,215,043 (\$612,945 (\$2,590,122
4 5 6 7 1 2 2 3 4 5 6 7 7 8 9 9	MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX OTHER REQUIRED DATA OTHER REQUIRED DATA TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT) CHARITY CARE	0.84004 0.81113 1.13961 1.12174 1.07494 1.25344 1.18063 \$132,260,378 \$132,260,378 \$39,079,123 \$39,079,123 29,55% \$5,000,636 \$2,852,678 \$1,215,043 \$3,637,983	0.90426 0.90081 1.13153 0.91139 0.97810 1.25164 1.18110 \$145,881,128 \$100,144,953 \$45,736,175 31.35% \$474,597 \$272,514 \$0 \$3,025,038	0.06423 0.08968 (0.00808 (0.21035 (0.09684 (0.00180 0.00047 \$13,620,750 \$6,963,698

	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM			
	BASELINE UNDERPAYMENT DATA	1		
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	<u>FY 2010</u>	<u>FY 2011</u>	DIFFERENCE
TT 7				
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,383.92680	3,348.35676	(35.57004
2	MEDICARE	6,581.47453	6,789.60288	208.1283
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,603.63181	1,933.31482	329.6830
4	MEDICAID	1,412.17733	1,897.10586	484.9285
5	OTHER MEDICAL ASSISTANCE	191.45448	36.20896	(155.2455)
6	CHAMPUS / TRICARE	22.43480	17.31641	(5.1183
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	251.53596	204.42290	(47.1130
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	8,207.54114	8,740.23411	532.6929
	TOTAL CASE MIX ADJUSTED DISCHARGES	11,591.46794	12,088.59087	497.1229
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,070.94826	6,115.25163	44.3033
2		2,691.10559	2,963.68107	272.5754
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,815.23880	2,959.59436	144.3555
4	MEDICAID OTHER MEDICAL ASSISTANCE	2,504.52482 310.71398	2,917.93213 41.66223	413.4073
5 6	CHAMPUS / TRICARE	32.62643	46.83123	14.2048
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	460.39102	450.34724	-10.0437
- /	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	5,538.97083	5,970.10666	431.1358
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	11,609.91908	12,085.35829	475.4392
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,654.40	\$10,550.14	\$895.7
2	MEDICARE	\$6,673.95	\$7,154.77	\$480.8
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,061.76	\$5,212.99	\$151.2
4	MEDICAID	\$5,470.27	\$5,168.60	(\$301.6
-	OTHER MEDICAL ASSISTANCE	\$2,048.60	\$7,538.91	\$5,490.3
5	CHAMPUS / TRICARE	\$4,592.02	\$4,761.44	\$169.4
5 6	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$408.15	\$1,483.48	\$1,075.3
-	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,353.26	\$6,720.51	\$367.2
6			AT 704 00	\$464.2
6	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,316.97	\$7,781.26	ψ τυτι Σ
6	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,316.97	\$7,781.26	<i>\</i>
6 7 D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
6 7 D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,177.77	\$10,854.64	\$676.8
6 7 D. 1 2	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$10,177.77 \$7,147.21		\$676.8 \$92.8
6 7 D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,177.77	\$10,854.64 \$7,240.08	\$676.8
6 7 D. 1 2 3	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$10,177.77 \$7,147.21 \$3,220.72	\$10,854.64 \$7,240.08 \$3,782.56	\$676.8 \$92.8 \$561.8
6 7 D. 1 2 3 4	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$10,177.77 \$7,147.21 \$3,220.72 \$3,472.27	\$10,854.64 \$7,240.08 \$3,782.56 \$3,752.19	\$676.8 \$92.8 \$561.8 \$279.9
6 7 D. 1 2 3 4 5	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE	\$10,177.77 \$7,147.21 \$3,220.72 \$3,472.27 \$1,193.09	\$10,854.64 \$7,240.08 \$3,782.56 \$3,752.19 \$5,909.76	\$676.8 \$92.8 \$561.8 \$279.9 \$4,716.6
6 7 D. 1 2 3 4 5 6	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$10,177.77 \$7,147.21 \$3,220.72 \$3,472.27 \$1,193.09 \$5,151.04	\$10,854.64 \$7,240.08 \$3,782.56 \$3,752.19 \$5,909.76 \$4,339.54	\$676.8 \$92.8 \$561.8 \$279.9 \$4,716.6 (\$811.5
6 7 D. 1 2 3 4 5 6	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,177.77 \$7,147.21 \$3,220.72 \$3,472.27 \$1,193.09 \$5,151.04	\$10,854.64 \$7,240.08 \$3,782.56 \$3,752.19 \$5,909.76 \$4,339.54	\$676.8 \$92.8 \$561.8 \$279.9 \$4,716.6 (\$811.5

	MIDSTATE MEDICAL CENTER			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAY			
	BASELINE UNDERPAYMENT DATA			
(4)		(2)	(4)	(5)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
V .	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
		A 0,000,000	* 4 * * * * * *	* ****
	MEDICAID OTHER MEDICAL ASSISTANCE	\$9,203,989 \$2,735,573	\$10,177,436 \$41,515	\$973,447
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,325,852	\$3,899,976	<u>(\$2,694,058)</u> (\$425,876)
5	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$16,265,415	\$14,118,927	(\$2,146,488)
		<i>\\</i> 10,200, 410	ψ14,110,521	(\$2,140,400)
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	DLOGY)		
1	TOTAL CHARGES	\$374,870,862	\$423,415,942	\$48,545,080
2	TOTAL GOVERNMENT DEDUCTIONS	\$143,763,354	\$173,208,128	\$29,444,774
	UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$14,103,525	\$10,900,458 \$45,726,175	(\$3,203,067) \$6,657,052
4 5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$39,079,123 \$2,852,678	\$45,736,175 \$272,514	(\$2,580,164)
5 6	TOTAL ADJUSTMENTS	\$2,652,678	\$230,117,275	\$30,318,595
7	TOTAL ADJOSTMENTS	\$175,072,182	\$193,298,667	\$18,226,485
8	UCP DSH PAYMENTS (OHCA INPUT)	\$1,215,043	\$0	(\$1,215,043)
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$176,287,225	\$193,298,667	\$17,011,442
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4702612096	0.4565219394	(0.0137392702)
	COST OF UNCOMPENSATED CARE	\$6,632,341	\$4,976,298	(\$1,656,042)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$9,694,553	\$12,188,676	\$2,494,123
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT			
		\$16,326,894	\$17,164,974	\$838,080
VII.	RATIOS			
Α.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	62.01%	64.15%	2.14%
2	MEDICARE	41.74%	41.11%	-0.63%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	35.29%	32.77%	-2.51%
	MEDICAID	37.84%	32.67%	-5.16%
	OTHER MEDICAL ASSISTANCE	15.16%	36.81%	21.64%
		41.02%	37.36%	-3.66%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	2.61%	8.94%	6.33%
	TOTAL GOVERNMENT RATIO OF INFATIENT FATMENTS TO INFATIENT CHARGES	40.50%	00.000/	4.000
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	40.58% 46.81%	39.38% 46.06%	-1.20% -0.75%
	TOTAL RATIO OF INPATIENT PATMENTS TO INPATIENT CHARGES	40.01%	40.00%	-0.75%
В.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	63.17%	64.10%	0.93%
	MEDICARE	31.37%	29.57%	-1.80%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	26.55%	26.31%	-0.23%
	MEDICAID	29.61%	26.33%	-3.28%
4			25.50%	17.75%
4 5	OTHER MEDICAL ASSISTANCE	7.75%		0.000
4 5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	41.02%	37.37%	
4 5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)			
4 5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	41.02% 6.99%	37.37% 7.12%	0.13%
4 5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	41.02%	37.37%	-3.66% 0.13% -1.29% -1.33%

	MIDSTATE MEDICAL CENTER			
<u> </u>	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYMI	NT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
			A 071141	
				AMOUNT
	DESCRIPTION	<u>FY 2010</u>	<u>FY 2011</u>	DIFFERENCE
VIII	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA			
VIII.	NET REVENUE, OROSS REVENUE AND ONCOMI ENSATED CARE RECONCILIA			
Α.	I RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	3		
		<u>.</u>		
1	TOTAL ACCRUED PAYMENTS	\$175,072,186	\$193,298,667	\$18,226,481
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)	01 015 010		(\$1,215,043)
	(OHCA INPUT) OHCA DEFINED NET REVENUE	\$1,215,043 \$176,287,229	\$0 \$193,298,667	\$17,011,438
		\$170,207,229	\$193,290,007	\$17,011,430
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$5,734,923	\$3,456,769	(\$2,278,154)
4	CALCULATED NET REVENUE	\$182,022,152	\$196,755,436	\$14,733,284
_		\$100,000,150	\$100 JEE 100	\$11 700 001
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$182,022,152	\$196,755,436	\$14,733,284
	REPORTING)			
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
1	OHCA DEFINED GROSS REVENUE	\$374,870,862	\$423,415,942	\$48,545,080
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	ψ 423,413,342 \$0	ψ+0,0+0,000 \$0
	CALCULATED GROSS REVENUE	\$374,870,862	\$423,415,942	\$48,545,080
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$374,870,862	\$423,415,942	\$48,545,080
	REPORTING)			
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
С.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENT	<u>s</u>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$14,103,525	\$10,900,458	(\$3.203.067)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$14,103,525	\$10,900,438	(\$3,203,067) \$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$14,103,525	\$10,900,458	(\$3,203,067)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL	\$14,103,525	\$10,900,458	(\$3,203,067)
<u> </u>	REPORTING)			
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
Ė		, ,		_
<u> </u>				
<u> </u>				

	MIDSTATE MEDICAL CENTER	
	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)
(1)	(2)	
INE	DESCRIPTION	<u>FY 2011</u>
I.	ACCRUED CHARGES AND PAYMENTS	
A.	INPATIENT ACCRUED CHARGES	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$55,065,40
2	MEDICARE	118,170,81
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	30,751,79
4	MEDICAID	30,010,17
5	OTHER MEDICAL ASSISTANCE	741,6
6	CHAMPUS / TRICARE	220,60
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,391,1
	TOTAL INPATIENT GOVERNMENT CHARGES	\$149,143,20
	TOTAL INPATIENT CHARGES	\$204,208,6
В.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$103,548,2
	MEDICARE	72,569,5
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	42,545,6
4		41,580,0
5	OTHER MEDICAL ASSISTANCE	965,5
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	543,8
1	TOTAL OUTPATIENT GOVERNMENT CHARGES	7,307,11 \$115,659,0
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$219,207,2
_		
	TOTAL ACCRUED CHARGES TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	¢450.042.0
1 2	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$158,613,6 264,802,3
2	TOTAL GOVERNMENT ACCROED CHARGES	\$423,415,9
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,325,6
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	48,578,0
-	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9,805,3
	OTHER MEDICAL ASSISTANCE	9,803,3
•	CHAMPUS / TRICARE	82,4
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	303,2
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$58,738,8
	TOTAL INPATIENT PAYMENTS	\$94,064,4
E.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$66,378,8
	MEDICARE	21,457,2
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11,194,8
4	MEDICAID	10,948,6
5	OTHER MEDICAL ASSISTANCE	246,2
6	CHAMPUS / TRICARE	203,2
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	519,9
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$32,855,3
	TOTAL OUTPATIENT PAYMENTS	\$99,234,2
F.	TOTAL ACCRUED PAYMENTS	
	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$101,704,4
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	91,594,1
-	TOTAL ACCRUED PAYMENTS	\$193,298,6
		,,,

	MIDSTATE MEDICAL CENTER	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2011	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
	BASELINE UNDERPAIMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
. /		ACTUAL
	DESCRIPTION	FY 2011
	DESCRIPTION	112011
П.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
	ACCROED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
Α.	ACCRUED DISCHARGES	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,252
	MEDICARE	4,826
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,138
4	MEDICAID	2,106
5	OTHER MEDICAL ASSISTANCE	32
6	CHAMPUS / TRICARE	19
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	209
	TOTAL GOVERNMENT DISCHARGES	6,983
	TOTAL DISCHARGES	10,235
В.	CASE MIX INDEX	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.02963
2	MEDICARE	1.40688
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.90426
4	MEDICAID	0.90081
5	OTHER MEDICAL ASSISTANCE	1.13153
6	CHAMPUS / TRICARE	0.91139
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.97810
	TOTAL GOVERNMENT CASE MIX INDEX	1.25164
	TOTAL CASE MIX INDEX	1.18110
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$145,881,128
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$100,144,953
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$45,736,175
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	31.35%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$474,597
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$272,514
-		
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$3,025,038
9	BAD DEBTS	\$7,875,420
	TOTAL UNCOMPENSATED CARE	\$10,900,458
	TOTAL OTHER OPERATING REVENUE	¢44504411
11 12	TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES	\$14,584,411
12	IUTAL OFERATING EXPENSES	\$203,675,287

	MIDSTATE MEDICAL CENTER	•
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2011	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
. ,		ACTUAL
LINE	DESCRIPTION	<u>FY 2011</u>
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
		¢400.000.00
1	TOTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$193,298,667 \$0
2	OHCA DEFINED NET REVENUE	\$193,298,667
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,456,769
	CALCULATED NET REVENUE	\$196,755,436
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$196,755,436
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$423,415,942
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$423,415,942
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$423,415,942
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,900,458
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$(
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,900,458
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,900,458
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

A. Hospital Charity 1 Number of Applic 2 Number of Appro 3 Total Charges (A 4 Average Charges 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Bad Debts - Inpat 2 Bad Debts - Cutp 3 Bad Debts - Eme 1 Date Debts - Cutp 3 Bad Debts - Inpat 2 Bad Debts - Cutp 3 Total Bad Debts 4 Total Bad Debts 4 Total Bad Debts 4 Total Bad Debts 4 Charity Care (A)		CENTER			
LINE DESCRIPTION A. Hospital Charity 1 Number of Applic 2 Number of Applic 2 Number of Appro 3 Total Charges (A 4 Average Charges 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 10 Charity Care - Nu 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Bad Debts - Inpat 18 Debts - Outp 3 Bad Debts - Eme 4 Total Bad Debts 10 Charity Care (A) 2 Bad Debts - Cutp 3 Bad Debts (A) 3 Total Uncompend 1 Charity Care (A) 2 Bad Debts (A) </th <th>TWELVE MONTHS ACT</th> <th></th> <th></th> <th></th> <th></th>	TWELVE MONTHS ACT				
LINE DESCRIPTION A. Hospital Charity 1 Number of Applic 2 Number of Applic 2 Number of Appro 3 Total Charges (A 4 Average Charges 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 10 Charity Care - Nu 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Bad Debts - Inpat 18 Debts - Outp 3 Bad Debts - Eme 4 Total Bad Debts 10 Charity Care (A) 2 Bad Debts - Cutp 3 Bad Debts (A) 3 Total Uncompend 1 Charity Care (A) 2 Bad Debts (A) </th <th>FISCAL YEA</th> <th></th> <th></th> <th></th> <th></th>	FISCAL YEA				
LINE DESCRIPTION A. Hospital Charity 1 Number of Applic 2 Number of Applic 2 Number of Appro 3 Total Charges (A 4 Average Charges 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 10 Charity Care - Nu 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 16 Chapital Bad De 17 Bad Debts - Inpat 18 Debts - Outp 3 Bad Debts - Eme 4 Total Bad Debts 10 Charity Care (A) 11 Bad Debts - Cutp 12 Bad Debts - Cutp 13 Bad Debts - Cutp 14 Charity Care (A) 15 Bad Debts - Cutp </th <th>REPORT 650 - HOSPITAL UNC</th> <th></th> <th>E</th> <th></th> <th></th>	REPORT 650 - HOSPITAL UNC		E		
LINE DESCRIPTION A. Hospital Charity 1 Number of Applic 2 Number of Applic 2 Number of Appro 3 Total Charges (A 4 Average Charges 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Bad Debts - Inpat 16 Bad Debts - Cutp 3 Bad Debts - Eme 1 Bad Debts - Cutp 3 Total Bad Debts 1 Charity Care (A) 2 Bad Debts - Cutp 3 Total Bad Debts 2	(2)	(3)	(4)	(5)	(6)
A. Hospital Charity 1 Number of Applic 2 Number of Appro 3 Total Charges (A 4 Average Charges 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Bad Debts - Inpat 18 Hospital Bad De 1 Bad Debts - Cutp 3 Bad Debts - Eme 4 Total Bad Debts - Eme 4 Total Bad Debts - Cutp 3 Total Bad Debts (A) 3 Total Uncompendit (A)	(2)	ACTUAL		AMOUNT	%
1 Number of Applic 2 Number of Appro 3 Total Charges (A 4 Average Charges 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Bad Debts - Inpat 18 Hospital Bad De 1 Bad Debts - Eme 1 Bad Debts - Cutp 3 Bad Debts - Eme 4 Total Bad Debts - Eme 4 Total Bad Debts - Eme 1 Charity Care (A) 2 Bad Debts - Cutp 3 Bad Debts (A) 3 Total Uncompend 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompend </th <th>IPTION</th> <th>FY 2010</th> <th>FY 2011</th> <th>DIFFERENCE</th> <th></th>	IPTION	FY 2010	FY 2011	DIFFERENCE	
1 Number of Applic 2 Number of Appro 3 Total Charges (A 4 Average Charges 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Bad Debts - Inpat 18 Hospital Bad De 1 Bad Debts - Eme 1 Bad Debts - Cutp 3 Bad Debts - Eme 4 Total Bad Debts - Eme 4 Total Bad Debts - Eme 1 Charity Care (A) 2 Bad Debts - Cutp 3 Bad Debts (A) 3 Total Uncompend 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompend </td <td></td> <td></td> <td></td> <td></td> <td></td>					
 Number of Appro Total Charges (A Average Charges Ratio of Cost to C Total Cost Ratio of Cost to C Total Cost Average Cost Average Cost Charity Care - Inp Charity Care - Ou Charity Care - Ou Charity Care - Nu Bad Debts - Inpat Bad Debts - Eme Total Bad Debts Enational Content Bad Debts - Eme Charity Care (A) Total Uncompending 	al Charity Care (from HRS Report 500)				
 Total Charges (A Average Charges Ratio of Cost to C Total Cost Total Cost Average Cost Charity Care - Inp Charity Care - Ou Charity Care - Ou Charity Care - Err Total Charges (A Charity Care - Nu Bad Debts - Inpat Bad Debts - Errer Bad Debts - Errer Total Bad Debts C. Hospital Uncomp Charity Care (A) Total Uncompendent 		5,869	1,349	(4,520)	-77
 Average Charges Ratio of Cost to C Total Cost Average Cost Average Cost Charity Care - Inp Charity Care - Ou Charity Care - Ou Charity Care - Fm Total Charges (A Charity Care - Nu Bad Debts - Inpat Bad Debts - Cutp Bad Debts - Emend Total Bad Debts C. Hospital Uncomp Charity Care (A) Total Uncompend 	r of Approved Applicants	5,576	1,214	(4,362)	-78
 Average Charges Ratio of Cost to C Total Cost Average Cost Average Cost Charity Care - Inp Charity Care - Ou Charity Care - Ou Charity Care - Fm Total Charges (A Charity Care - Nu Bad Debts - Inpat Bad Debts - Cutp Bad Debts - Emet Total Bad Debts C. Hospital Uncomp Charity Care (A) Total Uncompendent 	harges (A)	\$3,637,983	\$3,025,038	(\$612,945)	-17
 5 Ratio of Cost to C 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 10 Charity Care - Fm 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Charity Care - Nu 18 Charity Care - Nu 19 Charity Care - Nu 10 Charity Care - Nu 10 Charity Care - Nu 11 Bad Debts - Inpat 12 Bad Debts - Outp 13 Bad Debts - Ement 4 Total Bad Debts 14 Charity Care (A) 15 Charity Care (A) 16 Total Uncompendent 	• • • •	\$652	\$2,492	\$1,839	282
 6 Total Cost 7 Average Cost 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 10 Charity Care - Fm 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Charity Care - Nu 18 A Debts - Inpat 2 Bad Debts - Emet 4 Total Bad Debts 6 Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 		φυσε	ψ2,452	φ1,000	
 Average Cost Charity Care - Inp Charity Care - Ou Charity Care - Ou Charity Care - Cu Charity Care - Nu Bad Debts - Inpat Bad Debts - Emet Bad Debts - Emet Total Bad Debts C. Hospital Uncomp Charity Care (A) Bad Debts (A) Total Uncompendent 	f Cost to Charges (RCC)	0.489230	0.483227	(0.006003)	-1
 8 Charity Care - Inp 9 Charity Care - Ou 10 Charity Care - Ou 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Data Bad Debts 18 Bad Debts - Inpat 2 Bad Debts - Cutp 3 Bad Debts - Ement 4 Total Bad Debts 6 Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 	Cost	\$1,779,810	\$1,461,780	(\$318,030)	-18
 9 Charity Care - Ou 10 Charity Care - Em 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Charity Care - Nu 17 Charity Care - Nu 18 Bad Debts - Inpat 2 Bad Debts - Emer 4 Total Bad Debts 4 Total Bad Debts C. Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 	e Cost	\$319	\$1,204	\$885	277
 9 Charity Care - Ou 10 Charity Care - Em 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Emei 4 Total Bad Debts C. Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompen 					
 10 Charity Care - Err 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 18 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Eme 4 Total Bad Debts C. Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompen 	Care - Inpatient Charges	\$1,487,724	\$1,362,740	(\$124,984)	-8
 11 Total Charges (A 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Bad Debts - Inpat 17 Bad Debts - Outp 18 Bad Debts - Cutp 18 Bad Debts - Emer 4 Total Bad Debts C. <u>Hospital Uncomp</u> 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 	Care - Outpatient Charges (Excludes ED Charges)	694,885	693,898	(987)	C
 12 Charity Care - Nu 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Emet 4 Total Bad Debts C. <u>Hospital Uncomp</u> 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 	Care - Emergency Department Charges	1,455,374	968,400	(486,974)	-33
 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Emer 4 Total Bad Debts C. Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompent 	harges (A)	\$3,637,983	\$3,025,038	(\$612,945)	-17
 13 Charity Care - Nu 14 Charity Care - Nu 15 Charity Care - Nu 15 Charity Care - Nu 16 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Emer 4 Total Bad Debts C. <u>Hospital Uncom</u> 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 	Care - Number of Patient Days	594	480	(114)	-19
14 Charity Care - Nu 15 Charity Care - Nu B. Hospital Bad Del 1 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Emer 4 Total Bad Debts 7 Charity Care (A) 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent	Care - Number of Discharges	362	250	(112)	-31
 15 Charity Care - Nu B. <u>Hospital Bad De</u> 1 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Eme 4 Total Bad Debts C. <u>Hospital Uncomp</u> 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompent 	Care - Number of Outpatient ED Visits	7.683	1.307	(6,376)	-83
 B. <u>Hospital Bad De</u> 1 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Emet 4 Total Bad Debts C. <u>Hospital Uncomp</u> 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 	Care - Number of Outpatient Visits (Excludes ED Visits)	1,184	814	(370)	-31
1 Bad Debts - Inpat 2 Bad Debts - Outp 3 Bad Debts - Emel 4 Total Bad Debts 6 Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent		.,	0	(0.0)	
 2 Bad Debts - Outp 3 Bad Debts - Emei 4 Total Bad Debts C. Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 	al Bad Debts (from HRS Report 500)				
 Bad Debts - Emeil Total Bad Debts C. Hospital Uncomp Charity Care (A) Bad Debts (A) Total Uncompendent 	bts - Inpatient Services	\$3,813,934	\$1,904,896	(\$1,909,038)	-50
 4 Total Bad Debts C. Hospital Uncomp 1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompendent 	bts - Outpatient Services (Excludes ED Bad Debts)	1,555,764	1,250,658	(305,106)	-20
C.Hospital Uncom1Charity Care (A)2Bad Debts (A)3Total Uncompen	bts - Emergency Department	5,095,844	4,719,866	(375,978)	-7
1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompen	ad Debts (A)	\$10,465,542	\$7,875,420	(\$2,590,122)	-25
1 Charity Care (A) 2 Bad Debts (A) 3 Total Uncompen	al Uncompensated Care (from HRS Report 500)				
2 Bad Debts (A) 3 Total Uncompen		\$3,637,983	\$3,025,038	(\$612,945)	-17
•	, <i>i</i>	10,465,542	7,875,420	(2,590,122)	-25
4 Uncompensated	Incompensated Care (A)	\$14,103,525	\$10,900,458	(\$3,203,067)	-23
	pensated Care - Inpatient Services	\$5,301,658	\$3,267,636	(\$2,034,022)	-38
5 Uncompensated	pensated Care - Outpatient Services (Excludes ED Unc. Care)	2,250,649	1,944,556	(306.093)	-14
	pensated Care - Emergency Department	6,551,218	5,688,266	(862,952)	-14
	Incompensated Care (A)	\$14,103,525	\$10,900,458	(\$3,203,067)	-23

OFFICE OF HEALTH CARE ACCESS

		TWELVE MONTHS ACTUA FISCAL YEAR 2			
		L NON-GOVERNMENT GROSS RE			
		CCRUED PAYMENTS AND DISCO		ALLOWANGLO,	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$132,260,378	\$145,881,128	\$13,620,750	109
2	Total Contractual Allowances	\$39,079,123	\$45,736,175	\$6,657,052	179
	Total Accrued Payments (A)	\$93,181,255	\$100,144,953	\$6,963,698	70
	Total Discount Percentage	29.55%	31.35%	1.80%	69

(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.

	MIDSTATE MEDICAL CENT	ER		
	TWELVE MONTHS ACTUAL F	ILING		
	FISCAL YEAR 2011			
	REPORT 700 - STATISTICAL ANALYSIS OF HOSPIT	AL REVENUE AND E	EXPENSE	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	<u>FY 2009</u>	<u>FY 2010</u>	<u>FY 2011</u>
А.	Gross and Net Revenue			
1	Inpatient Gross Revenue	\$171,870,736	\$181,180,626	\$204,208,669
2	Outpatient Gross Revenue	\$175,756,315	\$193,690,236	\$219,207,273
3	Total Gross Patient Revenue	\$347,627,051	\$374,870,862	\$423,415,942
4	Net Patient Revenue	\$172,470,335	\$182,022,152	\$196,755,436
В.	Total Operating Expenses			
1	Total Operating Expense	\$173,269,841	\$190,181,772	\$203,675,287
C.	Utilization Statistics			
1	Patient Days	42,873	42,359	44,604
2	Discharges	9,955	9,818	10,235
3	Average Length of Stay	4.3	4.3	4.4
4	Equivalent (Adjusted) Patient Days (EPD)	86,715	87,643	92,484
0	Equivalent (Adjusted) Fallent Days (EFD) Equivalent (Adjusted) Discharges (ED)	20,135	20,314	21,222
D.	Case Mix Statistics			
1	Case Mix Index	1.17817	1.18063	1.18110
2	Case Mix Adjusted Patient Days (CMAPD)	50,511	50,010	52,682
3	Case Mix Adjusted Discharges (CMAD)	11,729	11,591	12,089
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	102,165	103,474	109,233
5	Case Mix Adjusted Equivalent Discharges (CMAED)	23,722	23,983	25,065
E.	Gross Revenue Per Statistic			
 . 1	Total Gross Revenue per Patient Day	\$8,108	\$8,850	\$9,493
2	Total Gross Revenue per Discharge	\$34,920	\$38,182	\$41,369
3	Total Gross Revenue per EPD	\$4,009	\$4,277	\$4,578
4	Total Gross Revenue per ED	\$17,265	\$18,454	\$19,952
5	Total Gross Revenue per CMAEPD	\$3,403	\$3,623	\$3,876
6	Total Gross Revenue per CMAED	\$14,654	\$15,631	\$16,893
7	Inpatient Gross Revenue per EPD	\$1,982	\$2,067	\$2,208
8	Inpatient Gross Revenue per ED	\$8,536	\$8,919	\$9,623

	MIDSTATE MEDICAL CENTER	ł				
	TWELVE MONTHS ACTUAL FILI	NG				
	FISCAL YEAR 2011					
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE						
(1) <u>LINE</u>	(2) DESCRIPTION	(3) ACTUAL <u>FY 2009</u>	(4) ACTUAL <u>FY 2010</u>	(5) ACTUAL <u>FY 2011</u>		
F.	Net Revenue Per Statistic					
1	Net Patient Revenue per Patient Day	\$4,023	\$4,297	\$4,411		
2	Net Patient Revenue per Discharge	\$17,325	\$18,540	\$19,224		
3	Net Patient Revenue per EPD	\$1,989	\$2,077	\$2,127		
4	Net Patient Revenue per ED	\$8,566	\$8,960	\$9,271		
5	Net Patient Revenue per CMAEPD	\$1,688	\$1,759	\$1,801		
6	Net Patient Revenue per CMAED	\$7,270	\$7,590	\$7,850		
G.	Operating Expense Per Statistic					
1	Total Operating Expense per Patient Day	\$4,041	\$4,490	\$4,566		
2	Total Operating Expense per Discharge	\$17,405	\$19,371	\$19,900		
3	Total Operating Expense per EPD	\$1,998	\$2,170	\$2,202		
4	Total Operating Expense per ED	\$8,605	\$9,362	\$9,597		
5	Total Operating Expense per CMAEPD	\$1,696	\$1,838	\$1,865		
6	Total Operating Expense per CMAED	\$7,304	\$7,930	\$8,126		
H.	Nursing Salary and Fringe Benefits Expense		•	•		
1	Nursing Salary Expense	\$24,579,480	\$25,964,260	\$27,000,880		
2	Nursing Fringe Benefits Expense	\$6,537,518	\$8,009,974	\$9,772,478		
3	Total Nursing Salary and Fringe Benefits Expense	\$31,116,998	\$33,974,234	\$36,773,358		
I.	Physician Salary and Fringe Expense					
1	Physician Salary Expense	\$8,816,052	\$9,314,012	\$8,870,537		
2	Physician Fringe Benefits Expense	\$2,399,979	\$2,873,372	\$3,169,452		
3	Total Physician Salary and Fringe Benefits Expense	\$11,216,031	\$12,187,384	\$12,039,989		
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense					
1	Non-Nursing, Non-Physician Salary Expense	\$31,056,879	\$33,947,144	\$37,342,205		
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$8,205,208	\$10,476,488	\$13,470,174		
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$39,262,087	\$44,423,632	\$50,812,379		
К.	Total Salary and Fringe Benefits Expense		#00.005.440	\$70.040.000		
1	Total Salary Expense	\$64,452,411	\$69,225,416	\$73,213,622		
2 3	Total Fringe Benefits Expense Total Salary and Fringe Benefits Expense	\$17,142,705 \$81,595,116	\$21,359,834 \$90,585,250	\$26,412,104 \$99,625,726		

	MIDSTATE MEDICAL CENTER			
	TWELVE MONTHS ACTUAL FILM	IG		
	REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL F	EVENUE AND E	APENSE	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	<u>FY 2009</u>	<u>FY 2010</u>	<u>FY 2011</u>
L.	Total Full Time Equivalent Employees (FTEs)	204.2	208.0	215 5
1	Total Nursing FTEs	304.2	308.0	315.5
2	Total Physician FTEs	47.6	51.4	49.7
3	Total Non-Nursing, Non-Physician FTEs	598.7	626.4	653.4
4	Total Full Time Equivalent Employees (FTEs)	950.5	985.8	1,018.6
М.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$80,800	\$84,300	\$85,581
2	Nursing Fringe Benefits Expense per FTE	\$21,491	\$26,006	\$30,975
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$102,291	\$110,306	\$116,556
N	Physician Solamy and Erings Evenence new ETE			
N.	Physician Salary and Fringe Expense per FTE	.	* 4 * 4 * *	.
1	Physician Salary Expense per FTE	\$185,211	\$181,206	\$178,482
	Physician Fringe Benefits Expense per FTE	\$50,420	\$55,902	\$63,772
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$235,631	\$237,109	\$242,253
0.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense p	er FTE		
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$51,874	\$54,194	\$57,151
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$13,705	\$16,725	\$20,616
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$65,579	\$70,919	\$77,766
P.	Total Salary and Fringe Benefits Expense per FTE			
<u>г.</u> 1	Total Salary Expense per FTE	\$67,809	\$70,223	\$71,877
2	Total Fringe Benefits Expense per FTE	\$18,035	\$21,668	\$25,930
3	Total Salary and Fringe Benefits Expense per FTE	\$85,844	\$91,890	\$97,807
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,903	\$2,139	\$2,234
2	Total Salary and Fringe Benefits Expense per Discharge	\$8,196	\$9,226	\$9,734
3	Total Salary and Fringe Benefits Expense per EPD	\$941	\$1,034	\$1,077
4	Total Salary and Fringe Benefits Expense per ED	\$4,052	\$4,459	\$4,695
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$799	\$875	\$912
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,440	\$3,777	\$3,975