	GRIFFIN HOSPI	TAL					
	TWELVE MONTHS ACT	UAL FILING					
	FISCAL YEAR	2012					
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION						
(1)	(2)	(3) FY 2011	(4) FY 2012	(5) AMOUNT	(6) %		
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE		
I.	<u>ASSETS</u>						
A.	Current Assets:						
	Cash and Cash Equivalents	\$5,513,612	\$8,071,213	\$2,557,601	46%		
	Short Term Investments	\$7,625,803	\$5,371,978	(\$2,253,825)	-30%		
				, , , , , , , , , , , , , , , , , , , ,			
	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$17,025,431	\$12,754,987	(\$4,270,444)	-25%		
	Current Assets Whose Use is Limited for Current Liabilities	\$704,176	\$700,398	(\$3,778)	-1%		
5	Due From Affiliates	\$0	\$0	\$0	0%		
	Due From Third Party Payers	\$0	\$0	\$0	0%		
	Inventories of Supplies	\$794,648	\$852,072	\$57,424	7%		
	Prepaid Expenses	\$1,810,064	\$2,258,893	\$448,829	25%		
9	Other Current Assets	\$3,689,858	\$2,446,687	(\$1,243,171)	-34%		
	Total Current Assets	\$37,163,592	\$32,456,228	(\$4,707,364)	-13%		
В.	Noncurrent Assets Whose Use is Limited:						
1	Held by Trustee	\$3,367,120	\$3,650,093	\$282,973	8%		
2	Board Designated for Capital Acquisition	\$31,384	\$10,001	(\$21,383)	-68%		
3	Funds Held in Escrow	\$0	\$0	\$0	0%		
4	Other Noncurrent Assets Whose Use is Limited	\$4,288,799	\$4,288,627	(\$172)	0%		
	Total Noncurrent Assets Whose Use is Limited:	\$7,687,303	\$7,948,721	\$261,418	3%		
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%		
6	Long Term Investments	\$1,030,970	\$1,147,841	\$116,871	11%		
	Other Noncurrent Assets	\$14,670,358	\$28,400,710	\$13,730,352	94%		
	Not Fixed Access.						
	Net Fixed Assets:	¢1.4.4.076.500	¢4.40.400.606	\$2.046.444	20/		
	Property, Plant and Equipment	\$144,276,522	\$148,122,636	\$3,846,114	3%		
	Less: Accumulated Depreciation Property, Plant and Equipment, Net	\$82,909,524 \$61,366,998	\$88,278,310 \$50,844,326	\$5,368,786 (\$1,522,672)	6% -2%		
	r roporty, r raint and Equipment, Net	φυ1,300,336	\$59,844,326	(\$1,522,672)	-270		
3	Construction in Progress	\$715,189	\$122,391	(\$592,798)	-83%		
	Total Net Fixed Assets	\$62,082,187	\$59,966,717	(\$2,115,470)	-3%		
	Total Assets	\$122,634,410	\$129,920,217	\$7,285,807	6%		

	GRIFFIN	HOSPITAL						
	TWELVE MONTH	IS ACTUAL FILING						
	FISCAI	YEAR 2012						
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION							
(1)	(2)	(3)	(4)	(5)	(6)			
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE			
LINE	<u>BESCIAIT HON</u>	AOTOAL	AOTOAL	DITTERCIOL	DITTERCITOE			
II.	LIABILITIES AND NET ASSETS							
Α.	Current Liabilities:							
	Accounts Payable and Accrued Expenses	\$24,726,325	\$26,788,433	\$2,062,108	8%			
	Salaries, Wages and Payroll Taxes	\$1,909,525	\$1,512,123	(\$397,402)	-21%			
	Due To Third Party Payers	\$0	\$0	\$0	0%			
	Due To Affiliates	\$0	\$0	\$0	0%			
5	Current Portion of Long Term Debt	\$6,380,271	\$6,418,425	\$38,154	1%			
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%			
7	Other Current Liabilities	\$991,382	\$1,018,756	\$27,374	3%			
	Total Current Liabilities	\$34,007,503	\$35,737,737	\$1,730,234	5%			
В	Long Torm Dobt.							
	Long Term Debt: Bonds Payable (Net of Current Portion)	\$48,524,613	\$46,957,600	(\$1,567,013)	-3%			
	Notes Payable (Net of Current Portion)	\$0	\$0,937,000	\$0	0%			
	Total Long Term Debt	\$48,524,613	\$46,957,600	(\$1,567,013)	-3%			
				(.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
3	Accrued Pension Liability	\$50,147,716	\$42,427,930	(\$7,719,786)	-15%			
	Other Long Term Liabilities	\$22,212,432	\$34,832,595	\$12,620,163	57%			
	Total Long Term Liabilities	\$120,884,761	\$124,218,125	\$3,333,364	3%			
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%			
C.	Net Assets:							
	Unrestricted Net Assets or Equity	(\$39,665,385)	(\$38,049,002)	\$1,616,383	-4%			
	Temporarily Restricted Net Assets	\$1,880,150	\$2,203,003	\$322,853	17%			
	Permanently Restricted Net Assets	\$5,527,381	\$5,810,354	\$282,973	5%			
	Total Net Assets	(\$32,257,854)	(\$30,035,645)	\$2,222,209	-7%			
		(40=,=01,001,	(400,000,000,000,000,000,000,000,000,000	,,	. , ,			
	Total Liabilities and Net Assets	\$122,634,410	\$129,920,217	\$7,285,807	6%			

	GRIFFIN	N HOSPITAL					
	TWELVE MONT	HS ACTUAL FILING					
	FISCA	AL YEAR 2012					
	REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION						
(1)	(2)	(3)	(4)	(5)	(6)		
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE		
	<u> </u>		<u>.1010.12</u>	<u> </u>	<u> </u>		
A.	Operating Revenue:						
1	Total Gross Patient Revenue	\$392,114,744	\$417,991,029	\$25,876,285	7%		
2	Less: Allowances	\$262,536,248	\$290,144,702	\$27,608,454	11%		
3	Less: Charity Care	\$7,580,152	\$6,785,012	(\$795,140)	-10%		
	Less: Other Deductions	\$7,380,132	\$0,763,012	\$0	0%		
	Total Net Patient Revenue	\$121,998,344	\$121,061,315	(\$937, 029)	-1%		
5	Other Operating Revenue	\$5,999,588	\$5,743,384	(\$256,204)	-4%		
6	Net Assets Released from Restrictions	\$27,869	\$5,743,384	(\$230,204)	-82%		
- 0	Total Operating Revenue	\$128,025,801	\$126,809,699	(\$1,216,102)	-1%		
	Total Operating Nevenue	\$120,023,001	\$120,009,099	(\$1,210,102)	-1 70		
В.	Operating Expenses:						
1	Salaries and Wages	\$53,580,272	\$52,662,091	(\$918,181)	-2%		
2	Fringe Benefits	\$17,004,903	\$19,977,878	\$2,972,975	17%		
3	Physicians Fees	\$2,519,049	\$3,056,069	\$537,020	21%		
4	Supplies and Drugs	\$16,298,191	\$15,930,763	(\$367,428)	-2%		
5	Depreciation and Amortization	\$5,747,143	\$5,913,216	\$166,073	3%		
6	Bad Debts	\$3,349,408	\$985,612	(\$2,363,796)	-71%		
7	Interest	\$2,618,102	\$2,709,709	\$91,607	3%		
8	Malpractice	\$2,414,227	\$945,755	(\$1,468,472)	-61%		
9	Other Operating Expenses	\$22,636,723	\$26,934,619	\$4,297,896	19%		
	Total Operating Expenses	\$126,168,018	\$129,115,712	\$2,947,694	2%		
	Income/(Loss) From Operations	\$1,857,783	(\$2,306,013)	(\$4,163,796)	-224%		
C.	Non-Operating Revenue:						
1	Income from Investments	\$218,353	\$998,665	\$780,312	357%		
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%		
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%		
	Total Non-Operating Revenue	\$218,353	\$998,665	\$780,312	357%		
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$2,076,136	(\$1,307,348)	(\$3,383,484)	-163%		
	Other Adjustments:						
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%		
	All Other Adjustments	(\$2,254,874)	(\$2,548,347)	(\$293,473)	13%		
	Total Other Adjustments	(\$2,254,874)	(\$2,548,347)	(\$293,473)	13%		
	Excess/(Deficiency) of Revenue Over Expenses	(\$178,738)	(\$3,855,695)	(\$3,676,957)	2057%		
	Principal Payments	\$1,790,000	\$1,900,000	\$110,000	6%		

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	GROSS REVENUE BY PAYER				
A.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$73,719,430	\$75,326,254	\$1,606,824	2%
2	MEDICARE MANAGED CARE	\$32,229,271	\$30,806,568	(\$1,422,703)	-4%
3	MEDICAID	\$12,675,177	\$20,924,193	\$8,249,016	65%
4	MEDICAID MANAGED CARE	\$8,010,233	\$1,661,363	(\$6,348,870)	-79%
5	CHAMPUS/TRICARE	\$183,889	\$470,042	\$286,153	156%
6	COMMERCIAL INSURANCE	\$4,053,664	\$4,979,314	\$925,650	23%
7	NON-GOVERNMENT MANAGED CARE	\$50,988,295	\$46,708,900	(\$4,279,395)	-8%
8	WORKER'S COMPENSATION	\$1,639,569	\$1,930,752	\$291,183	18%
9	SELF- PAY/UNINSURED	\$2,439,472	\$2,363,415	(\$76,057)	-3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$185,939,000	\$185,170,801	(\$768,199)	0%
B .	OUTPATIENT GROSS REVENUE	¢47.640.000	\$52,651,420	¢5 000 404	100/
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$47,649,299 \$22,878,516	\$24,835,636	\$5,002,121 \$1,957,120	10% 9%
3	MEDICALD MEDICALD	\$14,113,862	\$35,245,507	\$21,131,645	150%
4	MEDICAID MEDICAID MANAGED CARE	\$13,455,425	\$4,230,104	(\$9,225,321)	-69%
5	CHAMPUS/TRICARE	\$309,392	\$635,138	\$325,746	105%
6	COMMERCIAL INSURANCE	\$6,436,389	\$6,645,511	\$209,122	3%
7	NON-GOVERNMENT MANAGED CARE	\$89,842,226	\$99,205,634	\$9,363,408	10%
8	WORKER'S COMPENSATION	\$4,260,571	\$4,442,858	\$182,287	4%
9	SELF- PAY/UNINSURED	\$7,230,020	\$4,928,420	(\$2,301,600)	-32%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$206,175,700	\$232,820,228	\$26,644,528	13%
	TOTAL GROSS REVENUE	4.2	<u> </u>	4	
1	MEDICARE TRADITIONAL	\$121,368,729	\$127,977,674	\$6,608,945	5%
2	MEDICARE MANAGED CARE	\$55,107,787	\$55,642,204	\$534,417	1%
<u>3</u>	MEDICAID MEDICAID MANAGED CARE	\$26,789,039 \$21,465,658	\$56,169,700	\$29,380,661 (\$45,574,404)	110% -73%
5	CHAMPUS/TRICARE	\$493,281	\$5,891,467 \$1,105,180	(\$15,574,191) \$611,899	124%
6	COMMERCIAL INSURANCE	\$10,490,053	\$1,105,180 \$11,624,825	\$1,134,772	11%
7	NON-GOVERNMENT MANAGED CARE	\$140,830,521	\$145,914,534	\$5,084,013	4%
8	WORKER'S COMPENSATION	\$5,900,140	\$6,373,610	\$473,470	8%
9		\$9,669,492	\$7,291,835	(\$2,377,657)	-25%
_	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$392,114,700	\$417,991,029	\$25,876,329	7%
II.	NET REVENUE BY PAYER				
	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$26,718,237	\$25,707,335	(\$1,010,902)	-4%
2	MEDICARE MANAGED CARE	\$9,723,105	\$7,659,117	(\$2,063,988)	-21%
3	MEDICAID MANAGED CARE	\$3,294,769	\$4,149,315	\$854,546	26%
4	MEDICAID MANAGED CARE	\$1,985,560 \$26,765	\$329,452 \$100,504	(\$1,656,108)	-83%
5	CHAMPUS/TRICARE	\$26,765 \$1,452,727	\$109,504	\$82,739	309%
6 7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	\$1,453,727 \$19,003,831	\$2,100,506 \$17,536,597	\$646,779 (\$1,467,234)	44% -8%
8	WORKER'S COMPENSATION	\$1,225,543	\$17,536,597	\$1,467,234) \$168,968	-8% 14%
9	SELF- PAY/UNINSURED	\$1,225,543	\$217,590	\$53,141	32%
10	SAGA	\$104,449	\$0	\$03,141	0%
11	OTHER	\$0	\$0 \$0	\$0	0%
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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$63,595,986	\$59,203,927	(\$4,392,059)	-7%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$9,467,600	\$9,249,339	(\$218,261)	-2%
2	MEDICARE MANAGED CARE	\$4,647,569	\$4,880,721	\$233,152	5%
3	MEDICAID	\$2,732,509	\$6,296,168	\$3,563,659	130%
4	MEDICAID MANAGED CARE	\$2,707,001	\$755,655	(\$1,951,346)	-72%
5	CHAMPUS/TRICARE	\$79,788	\$339,986	\$260,198	326%
7	COMMERCIAL INSURANCE	\$3,574,245	\$3,209,794	(\$364,451)	-10%
8	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	\$30,616,946	\$35,359,516	\$4,742,570	15%
9	SELF- PAY/UNINSURED	\$1,741,099 \$329,245	\$2,043,080 \$330,646	\$301,981 \$1,401	17% 0%
10	SAGA	\$0	\$330,040 \$0	\$1,401	0%
11	OTHER	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$55,896,002	\$62,464,905	\$6,568,903	12%
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C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$36,185,837	\$34,956,674	(\$1,229,163)	-3%
2	MEDICARE MANAGED CARE	\$14,370,674	\$12,539,838	(\$1,830,836)	-13%
3	MEDICAID	\$6,027,278	\$10,445,483	\$4,418,205	73%
4	MEDICAID MANAGED CARE	\$4,692,561	\$1,085,107	(\$3,607,454)	-77%
5	CHAMPUS/TRICARE	\$106,553	\$449,490	\$342,937	322%
6		\$5,027,972	\$5,310,300	\$282,328	6%
7	11011 001 = 11111 1111 1111 1111 1111	\$49,620,777	\$52,896,113	\$3,275,336	7%
8		\$2,966,642	\$3,437,591	\$470,949	16%
9	SELF- PAY/UNINSURED	\$493,694	\$548,236	\$54,542	11%
10		\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$119,491,988	\$121,668,832	\$2,176,844	2%
	STATISTICS BY DAVED				
1111.	STATISTICS BY PAYER				
Α.	DISCHARGES				
1	MEDICARE TRADITIONAL	2,426	2,349	(77)	-3%
2	MEDICARE MANAGED CARE	1,056	952	(104)	-10%
3	MEDICAID	623	1,170	547	88%
4	MEDICAID MANAGED CARE	683	113	(570)	-83%
5	CHAMPUS/TRICARE	6	17	11	183%
6	COMMERCIAL INSURANCE	155	177	22	14%
7	NON-GOVERNMENT MANAGED CARE	2,406	2,176	(230)	-10%
8	WORKER'S COMPENSATION	27	35	8	30%
9	SELF- PAY/UNINSURED	112	74	(38)	-34%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
<u></u>	TOTAL DISCHARGES	7,494	7,063	(431)	-6%
B.	PATIENT DAYS	40.07	44.040	(00.1)	F0.1
1	MEDICARE TRADITIONAL	12,247	11,643	(604)	-5%
2	MEDICAID	4,847	4,251	(596)	-12%
3	MEDICAID	3,133	4,474	1,341 (1,606)	43%
4	I MEDICAID MANACED CADE				-85%
	MEDICAID MANAGED CARE	1,893	287		4070/
5	CHAMPUS/TRICARE	14	71	57	407%
6	CHAMPUS/TRICARE COMMERCIAL INSURANCE	14 618	71 681	57 63	10%
6 7	CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	14 618 8,376	71 681 7,524	57 63 (852)	10% -10%
6 7 8	CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	14 618 8,376 87	71 681 7,524 107	57 63 (852) 20	10% -10% 23%
6 7 8 9	CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED	14 618 8,376 87 334	71 681 7,524 107 283	57 63 (852) 20 (51)	10% -10% 23% -15%
6 7 8 9 10	CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA	14 618 8,376 87 334	71 681 7,524 107 283 0	57 63 (852) 20 (51)	10% -10% 23% -15% 0%
6 7 8 9	CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER	14 618 8,376 87 334 0	71 681 7,524 107 283 0	57 63 (852) 20 (51) 0	10% -10% 23% -15% 0% 0%
6 7 8 9 10 11	CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA	14 618 8,376 87 334	71 681 7,524 107 283 0	57 63 (852) 20 (51)	10% -10% 23% -15% 0%

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
1	MEDICARE TRADITIONAL	32,082	32,163	81	0%
2	MEDICARE MANAGED CARE	13,628	14,657	1,029	8%
3	MEDICAID	12,790	22,104	9,314	73%
4	MEDICAID MANAGED CARE	11,344	5,936	(5,408)	-48%
5	CHAMPUS/TRICARE	193	218	25	13%
6	COMMERCIAL INSURANCE	4,192	4,394	202	5%
7	NON-GOVERNMENT MANAGED CARE	50,107	50,793	686	1%
8	WORKER'S COMPENSATION	2,527	2,768	241	10%
9	SELF- PAY/UNINSURED	5,377	4,841	(536)	-10%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	132,240	137,874	5,634	4%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				T
	EMEDOENCY DEDARTMENT QUITRATIENT ORGAN BEY	-			
	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVI		¢44 40F 400	¢0.400.045	0701
1	MEDICARE TRADITIONAL	\$8,981,845	\$11,405,160	\$2,423,315	27%
3	MEDICARE MANAGED CARE MEDICAID	\$3,327,408	\$4,309,760 \$19.044.305	\$982,352	30% 160%
4		\$7,317,414	+ -/- /	\$11,726,891	
5	MEDICAID MANAGED CARE CHAMPUS/TRICARE	\$7,160,378 \$175,005	\$1,956,988 \$148,011	(\$5,203,390) (\$26,994)	-73% -15%
6	COMMERCIAL INSURANCE	\$1,338,929	\$1,657,782	\$318,853	24%
7	NON-GOVERNMENT MANAGED CARE	\$17,556,694	\$20,840,829	\$3,284,135	19%
8	WORKER'S COMPENSATION	\$844,807	\$1,034,708	\$189,901	22%
9	SELF- PAY/UNINSURED	\$3,694,036	\$4,311,540	\$617,504	17%
10	SAGA	\$0	\$0	\$017,504	0%
11	OTHER	\$0	\$0 \$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	ΨΟ	Ψ	Ψ	070
	GROSS REVENUE	\$50,396,516	\$64,709,083	\$14,312,567	28%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENU	<u>IE</u>			
1	MEDICARE TRADITIONAL	\$1,985,053	\$2,349,431	\$364,378	18%
2	MEDICARE MANAGED CARE	\$755,969	\$935,665	\$179,696	24%
3	MEDICAID	\$1,298,900	\$3,396,546	\$2,097,646	161%
4	MEDICAID MANAGED CARE	\$1,718,138	\$431,430	(\$1,286,708)	-75%
5	CHAMPUS/TRICARE	\$51,331	\$37,781	(\$13,550)	-26%
6	COMMERCIAL INSURANCE	\$586,135	\$632,156	\$46,021	8%
7	NON-GOVERNMENT MANAGED CARE	\$6,749,698	\$7,360,336	\$610,638	9%
8	WORKER'S COMPENSATION	\$572,785	\$721,768	\$148,983	26%
9	SELF- PAY/UNINSURED	\$143,795	\$130,908	(\$12,887)	
10	SAGA	\$0	\$0	\$0	0%
11	OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT	\$0	\$0	\$0	0%
	NET REVENUE	¢12 061 004	\$15 OOG 021	\$2.424.247	150/
_	EMERGENCY DEPARTMENT OUTPATIENT VISITS	\$13,861,804	\$15,996,021	\$2,134,217	15%
C .	MEDICARE TRADITIONAL	4,846	5,226	380	8%
2	MEDICARE MANAGED CARE	1,604	1,720	116	7%
3	MEDICAID	4,289	10,640	6,351	148%
4	MEDICAID MANAGED CARE	7,246	1,733	(5,513)	-76%
5	CHAMPUS/TRICARE	150	131	(19)	-13%
6	COMMERCIAL INSURANCE	946	930	(16)	-2%
7	NON-GOVERNMENT MANAGED CARE	11,883	11,906	23	0%
8	WORKER'S COMPENSATION	837	823	(14)	-2%
9	SELF- PAY/UNINSURED	3,164	2,971	(193)	-6%
10	SAGA	0,104	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT			Ü	370
	VISITS	34,965	36,080	1,115	3%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
т	OPERATING EXPENSE BY CATEGORY				
I.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$20,006,613	\$19,496,313	(\$510,300)	-3%
2	Physician Salaries	\$3,479,944	\$4,020,152	\$540,208	16%
3	Non-Nursing, Non-Physician Salaries	\$30,093,715	\$29,145,626	(\$948,089)	-3%
	Total Salaries & Wages	\$53,580,272	\$52,662,091	(\$918,181)	-2%
	F. D. C.				
В.	Fringe Benefits:	TC 240 F40	\$7.206.220	¢4 046 692	16%
2	Nursing Fringe Benefits Physician Fringe Benefits	\$6,349,548 \$1,104,438	\$7,396,230 \$1,525,084	\$1,046,682 \$420,646	38%
3	Non-Nursing, Non-Physician Fringe Benefits	\$9,550,917	\$11,056,564	\$1,505,647	16%
	Total Fringe Benefits	\$17,004,903	\$19,977,878	\$2,972,975	17%
	Total I mige Benefits	ψ11,004,000	Ψ10,011,010	ΨΣ,51Σ,510	1170
C.	Contractual Labor Fees:				
1	Nursing Fees	\$0	\$0	\$0	0%
2	Physician Fees	\$2,519,049	\$3,056,069	\$537,020	21%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	Total Contractual Labor Fees	\$2,519,049	\$3,056,069	\$537,020	21%
D.	Medical Supplies and Pharmaceutical Cost:				
D.	Medical Supplies	\$12,758,530	\$12,033,210	(\$725,320)	-6%
2	Pharmaceutical Costs	\$3,539,661	\$3,897,553	\$357,892	10%
	Total Medical Supplies and Pharmaceutical Cost	\$16,298,191	\$15,930,763	(\$367,428)	-2%
	Total modical cappings and i harmacouncal cook	ψ.ο, <u>2</u> οο, .ο.	\$10,000,100	(4001,120)	270
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$2,453,999	\$2,446,351	(\$7,648)	0%
2	Depreciation-Equipment	\$3,293,144	\$3,466,865	\$173,721	5%
3	Amortization	\$0	\$0	\$0	0%
	Total Depreciation and Amortization	\$5,747,143	\$5,913,216	\$166,073	3%
F.	Bad Debts:				
1	Bad Debts	\$3,349,408	\$985,612	(\$2,363,796)	-71%
'	Dad Debts	ψο,οτο,τοο	ψ505,012	(ψ2,505,750)	7 1 70
G.	Interest Expense:				
1	Interest Expense	\$2,618,102	\$2,709,709	\$91,607	3%
H.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$2,414,227	\$945,755	(\$1,468,472)	-61%
	Hallidia				
l. 1	Utilities: Water	\$328,229	\$363,126	\$34,897	11%
2	Natural Gas	\$840,199	\$791,590	(\$48,609)	-6%
3	Oil	\$23,965	\$0	(\$23,965)	-100%
4	Electricity	\$2,157,722	\$2,079,092	(\$78,630)	-4%
5	Telephone	\$353,746	\$395,243	\$41,497	12%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$3,703,861	\$3,629,051	(\$74,810)	-2%
J.	Business Expenses:	#004.000	#0 55 050	#04.000	001
1	Accounting Fees Legal Fees	\$234,220 \$110,060	\$255,252 \$238,870	\$21,032 \$110,801	9% 101%
3	Consulting Fees	\$119,069 \$592,064	\$238,870 \$3,791,245	\$119,801 \$3,199,181	
4	Dues and Membership	\$592,064 \$228,327	\$3,791,245 \$349,945	\$3,199,181 \$121,618	540% 53%
5	Equipment Leases	\$1,160,748	\$1,151,458	(\$9,290)	-1%
6	Building Leases	\$294,650	\$313,890	\$19,240	7%
	Repairs and Maintenance	\$2,962,262	\$2,960,425	(\$1,837)	0%
7	INCUAIS AND MAINTENANCE				

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
9	Travel	\$218,463	\$348,787	\$130,324	60%
10	Conferences	\$210,403	\$340,767	\$130,324	0%
11	Property Tax	\$145,921	\$160,265	\$14,344	10%
12	General Supplies	\$2,259,358	\$714,766	(\$1,544,592)	-68%
13	Licenses and Subscriptions	\$445,355	\$693,794	\$248,439	56%
14	Postage and Shipping	\$109,543	\$109,952	\$409	0%
15	Advertising	\$296,830	\$619,946	\$323,116	109%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$932,137	\$932,137	0%
18	Computer hardware & small equipment	\$0	\$98,224	\$98,224	0%
19	Dietary / Food Services	\$0	\$2,093,394	\$2,093,394	0%
20	Lab Fees / Red Cross charges	\$0	\$1,741,313	\$1,741,313	0%
21	Billing & Collection / Bank Fees	\$0	\$894,327	\$894,327	0%
22	Recruiting / Employee Education & Recognition	\$0	\$194,088	\$194,088	0%
23	Laundry / Linen	\$0	\$624,687	\$624,687	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$152,182	\$152,182	0%
26	Purchased Services - Medical	\$0	\$1,221,260	\$1,221,260	0%
27	Purchased Services - Non Medical	\$0	\$1,755,199	\$1,755,199	0%
28	Other Business Expenses	\$9,517,237	\$1,648,924	(\$7,868,313)	-83%
	Total Business Expenses	\$18,932,862	\$23,305,568	\$4,372,706	23%
1.7					
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$126,168,018	\$129,115,712	\$2,947,694	2%
II.	OPERATING EXPENSE BY DEPARTMENT				
111.	OFERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$3,262,584	\$7,196,252	\$3,933,668	121%
2	General Accounting	\$1,205,173	\$1,119,661	(\$85,512)	-7%
3	Patient Billing & Collection	\$1,828,072	\$1,941,186	\$113,114	6%
4	Admitting / Registration Office	\$991,467	\$1,043,479	\$52,012	5%
5	Data Processing	\$1,915,075	\$1,959,685	\$44,610	2%
6	Communications	\$286,638	\$1,362	(\$285,276)	-100%
7	Personnel	\$1,323,926	\$930,523	(\$393,403)	-30%
8	Public Relations	\$934,435	\$1,089,905	\$155,470	17%
9	Purchasing	\$353,369	\$395,166	\$41,797	12%
10	Dietary and Cafeteria	\$3,466,703	\$3,444,252	(\$22,451)	-1%
11	Housekeeping	\$1,968,505	\$1,909,001	(\$59,504) (\$30,515)	-3%
12 13	Laundry & Linen Operation of Plant	\$506,949 \$5,366,183	\$476,434 \$5,276,067	(\$30,515) (\$80,215)	-6%
13	Security	\$5,366,182 \$451,576	\$5,276,967 \$648,379	(\$89,215) \$196,803	-2% 44%
15	Repairs and Maintenance	\$273,638	\$273,554	(\$84)	0%
16	Central Sterile Supply	\$481,231	\$528,606	\$47,375	10%
17	Pharmacy Department	\$4,787,433	\$5,240,062	\$452,629	9%
18	Other General Services	\$30,581,507	\$32,642,197	\$2,060,690	7%
10	Total General Services	\$59,984,463	\$66,116,671	\$6,132,208	10%
		, , , - 3 -	, ,	, -,,	
B.	Professional Services:				
1	Medical Care Administration	\$613,884	\$615,513	\$1,629	0%
2	Residency Program	\$2,485,686	\$2,670,214	\$184,528	7%
3	Nursing Services Administration	\$755,920	\$736,599	(\$19,321)	-3%
4	Medical Records	\$1,657,046	\$1,666,124	\$9,078	1%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
5	Social Service	\$0	\$0	\$0	0%
6	Other Professional Services	\$1,727,392	\$1,809,664	\$82,272	5%
	Total Professional Services	\$7,239,928	\$7,498,114	\$258,186	4%
	Total Froiessional Colvides	ψ1,203,320	ψ1,400,114	Ψ200,100	470
C.	Special Services:				
1	Operating Room	\$10,257,117	\$9,860,638	(\$396,479)	-4%
2	Recovery Room	\$590,311	\$556,059	(\$34,252)	-6%
3	Anesthesiology	\$545,613	\$505,535	(\$40,078)	-7%
4	Delivery Room	\$103,855	\$97,021	(\$6,834)	-7%
5	Diagnostic Radiology	\$3,520,797	\$3,246,816	(\$273,981)	-8%
6	Diagnostic Ultrasound	\$605,927	\$577,339	(\$28,588)	-5%
7	Radiation Therapy	\$1,420,292	\$1,501,734	\$81,442	6%
8	Radioisotopes	\$387,390	\$376,938	(\$10,452)	-3%
9	CT Scan	\$1,078,985	\$930,892	(\$148,093)	-14%
10	Laboratory	\$8,006,177	\$7,603,480	(\$402,697)	-5%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$737,893	\$786,157	\$48,264	7%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$53,994	\$48,455	(\$5,539)	-10%
15 16	Occupational Therapy	\$1,043,586 \$67,745	\$1,070,321 \$71,456	\$26,735 \$3,711	3% 5%
17	Speech Pathology Audiology	\$07,745	\$71,456	\$3,711 \$0	0%
18	Respiratory Therapy	\$910,643	\$926,415	\$15,772	2%
19	Pulmonary Function	\$209,958	\$229,659	\$19,701	9%
20	Intravenous Therapy	\$94,426	\$91,941	(\$2,485)	-3%
21	Shock Therapy	\$0	\$0	ξ0	0%
22	Psychiatry / Psychology Services	\$1,631,593	\$1,726,390	\$94,797	6%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$5,068,844	\$5,205,758	\$136,914	3%
25	MRI	\$1,096,204	\$1,086,349	(\$9,855)	-1%
26	PET Scan	\$272,711	\$240,711	(\$32,000)	-12%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,167,056	\$1,141,878	(\$25,178)	-2%
29	Sleep Center	\$399,573	\$367,727	(\$31,846)	-8%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$932,381	\$971,332	\$38,951	4%
33 34	Dental Clinic Other Special Services	\$0	\$0 \$1,456,899	\$0	0% 10%
- 34	Total Special Services	\$1,321,393 \$41,524,464		\$135,506 (\$246,564)	-2%
	Total Special Services	φ 4 1,324,404	\$40,677,900	(\$846,564)	-2%
D.	Routine Services:				
1	Medical & Surgical Units	\$7,460,903	\$7,277,914	(\$182,989)	-2%
2	Intensive Care Unit	\$2,317,980	\$2,235,778	(\$82,202)	-4%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$1,099,599	\$1,065,969	(\$33,630)	-3%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$1,795,944	\$1,724,376	(\$71,568)	-4%
7	Newborn Nursery Unit	\$94,451	\$129,943	\$35,492	38%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$605,929	\$575,673	(\$30,256)	-5%
11	Home Care	\$0	\$0	\$0	0%

	GR	IFFIN HOSPITAL						
	TWELVE M	ONTHS ACTUAL FILING						
	FISCAL YEAR 2012							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
. ,	,	ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012				
Α.	Statement of Operations Summary							
1	Total Net Patient Revenue	\$118,086,481	\$ 121,998,344	\$121,061,315				
2	Other Operating Revenue	3,781,488	6,027,457	5,748,384				
3	Total Operating Revenue	\$121,867,969	\$128,025,801	\$126,809,699				
4	Total Operating Expenses	120,493,484	126,168,018	129,115,712				
5	Income/(Loss) From Operations	\$1,374,485	\$1,857,783	(\$2,306,013)				
6	Total Non-Operating Revenue	(2,319,609)	(2,036,521)	(1,549,682)				
7	Excess/(Deficiency) of Revenue Over Expenses	(\$945,124)	(\$178,738)	(\$3,855,695)				
В.	Profitability Summary							
1	Hospital Operating Margin	1.15%	1.47%	-1.84%				
2	Hospital Non Operating Margin	-1.94%	-1.62%	-1.24%				
3	Hospital Total Margin	-0.79%	-0.14%	-3.08%				
4	Income/(Loss) From Operations	\$1,374,485	\$1,857,783	(\$2,306,013)				
5	Total Operating Revenue	\$121,867,969	\$128,025,801	\$126,809,699				
6	Total Non-Operating Revenue	(\$2,319,609)	(\$2,036,521)	(\$1,549,682)				
7	Total Revenue	\$119,548,360	\$125,989,280	\$125,260,017				
8	Excess/(Deficiency) of Revenue Over Expenses	(\$945,124)	(\$178,738)	(\$3,855,695)				
C.	Net Assets Summary							
1	Hospital Unrestricted Net Assets	(\$24,966,200)	(\$39,665,385)	(\$38,049,002)				
2	Hospital Total Net Assets	(\$17,147,261)	(\$32,257,854)	(\$30,035,645)				
3	Hospital Change in Total Net Assets	(\$8,330,231)	(\$15,110,593)	\$2,222,209				
4	Hospital Change in Total Net Assets %	194.5%	88.1%	-6.9%				
D.	Cost Data Summary							
1	Ratio of Cost to Charges	0.31	0.32	0.30				
2	Total Operating Expenses	\$120,493,484	\$126,168,018	\$129,115,712				
3	Total Gross Revenue	\$381,244,191	\$392,114,700	\$417,991,029				
4	Total Other Operating Revenue	\$3,781,488	\$6,027,457	\$5,748,384				
5	Private Payment to Cost Ratio	1.19	1.16	1.23				
6	Total Non-Government Payments	\$55,363,288	\$58,109,085	\$62,192,240				

	GR	IFFIN HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012							
	REPORT 185 - HOSPITAL FINA	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	<u>FY 2010</u>	<u>FY 2011</u>	FY 2012				
7	Total Uninsured Payments	\$539,191	\$493,694	\$548,236				
8	Total Non-Government Charges	\$157,567,140	\$166,890,206	\$171,204,804				
9	Total Uninsured Charges	\$9,742,915	\$9,669,492	\$7,291,835				
10	Medicare Payment to Cost Ratio	0.92	0.90	0.85				
11	Total Medicare Payments	\$50,678,054	\$50,556,511	\$47,496,512				
12	Total Medicare Charges	\$175,839,343	\$176,476,516	\$183,619,878				
13	Medicaid Payment to Cost Ratio	0.85	0.70	0.61				
14	Total Medicaid Payments	\$11,304,888	\$10,719,839	\$11,530,590				
15	Total Medicaid Charges	\$42,452,421	\$48,254,697	\$62,061,167				
16	Uncompensated Care Cost	\$3,193,586	\$3,463,489	\$2,367,752				
17	Charity Care	\$8,958,645	\$7,580,152	\$6,785,012				
18	Bad Debts	\$1,246,161	\$3,349,408	\$985,612				
19	Total Uncompensated Care	\$10,204,806	\$10,929,560	\$7,770,624				
20	Uncompensated Care % of Total Expenses	2.7%	2.7%	1.8%				
21	Total Operating Expenses	\$120,493,484	\$126,168,018	\$129,115,712				
E.	Liquidity Measures Summary							
1	Current Ratio	1.03	1.09	0.91				
2	Total Current Assets	\$33,161,943	\$37,163,592	\$32,456,228				
3	Total Current Liabilities	\$32,182,297	\$34,007,503	\$35,737,737				
4	Days Cash on Hand	43	40	40				
5	Cash and Cash Equivalents	\$3,905,172	\$5,513,612	\$8,071,213				
6	Short Term Investments	9,660,079	7,625,803	5,371,978				
7	Total Cash and Short Term Investments	\$13,565,251	\$13,139,415	\$13,443,191				
8	Total Operating Expenses	\$120,493,484	\$126,168,018	\$129,115,712				
9	Depreciation Expense	\$6,320,420	\$5,747,143	\$5,913,216				
10	Operating Expenses less Depreciation Expense	\$114,173,064	\$120,420,875	\$123,202,496				
11	Days Revenue in Patient Accounts Receivable	47.05	50.94	38.46				

	GRIFFIN	HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2012								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
. ,		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2010	FY 2011	FY 2012					
12	Net Patient Accounts Receivable	\$ 15,222,331	\$ 17,025,431	\$ 12,754,987					
13	Due From Third Party Payers	\$ 15,222,331	\$ 17,025,431						
14	, ,	\$0							
14	Due To Third Party Payers Total Net Patient Accounts Receivable and Third Party Payer	Φ0	Φ0	Φ0					
15	Activity	\$ 15,222,331	\$ 17,025,431	\$ 12,754,987					
16	Total Net Patient Revenue	\$118,086,481	\$ 121,998,344	\$ 121,061,315					
17	Average Payment Period	102.88	103.08	105.88					
18	Total Current Liabilities	\$32,182,297	\$34,007,503	\$35,737,737					
19	Total Operating Expenses	\$120,493,484	\$126,168,018	\$129,115,712					
20	Depreciation Expense	\$6,320,420	\$5,747,143						
21	Total Operating Expenses less Depreciation Expense	\$114,173,064	\$120,420,875	\$123,202,496					
F.	Solvency Measures Summary								
1	Equity Financing Ratio	(14.1)	(26.3)	(23.1)					
2	Total Net Assets	(\$17,147,261)	(\$32,257,854)	(\$30,035,645)					
3	Total Assets	\$122,021,132	\$122,634,410	\$129,920,217					
4	Cash Flow to Total Debt Ratio	6.6	6.7	2.5					
5	Excess/(Deficiency) of Revenues Over Expenses	(\$945,124)	(\$178,738)	(\$3,855,695)					
6	Depreciation Expense	\$6,320,420	\$5,747,143						
7	Excess of Revenues Over Expenses and Depreciation Expense	\$5,375,296	\$5,568,405	\$2,057,521					
8	Total Current Liabilities	\$32,182,297	\$34,007,503	\$35,737,737					
9	Total Long Term Debt	\$49,676,494	\$48,524,613						
10	Total Current Liabilities and Total Long Term Debt	\$81,858,791	\$82,532,116	\$82,695,337					
11	Long Term Debt to Capitalization Ratio	152.7	298.3	277.5					
12	Total Long Term Debt	\$49,676,494	\$48,524,613	\$46,957,600					
13	Total Net Assets	(\$17,147,261)							
14	Total Long Term Debt and Total Net Assets	\$32,529,233	\$16,266,759	\$16,921,955					
15	Debt Service Coverage Ratio	2.1	1.9	1.0					
16	Excess Revenues over Expenses	(\$945,124)							
17	Interest Expense	\$2,555,303	\$2,618,102	\$2,709,709					
18	Depreciation and Amortization Expense	\$6,320,420	\$5,747,143	\$5,913,216					

	GRIFFIN I	HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2012								
	REPORT 185 - HOSPITAL FINANCIAL	. AND STATISTICAL DA	TA ANALYSIS						
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012					
19	Principal Payments	\$1,305,000	\$1,790,000	\$1,900,000					
G.	Other Financial Ratios								
20	Average Age of Plant	12.2	14.4	14.9					
21	Accumulated Depreciation	\$77,052,764	\$82,909,524	\$88,278,310					
22	Depreciation and Amortization Expense	\$6,320,420	\$5,747,143	\$5,913,216					
н.	Utilization Measures Summary								
1	Patient Days	33,429	31,549	29,321					
2	Discharges	7,719	7,494	7,063					
3	ALOS	4.3	4.2	4.2					
4	Staffed Beds	94	89	82					
5	Available Beds	_	180	180					
6	Licensed Beds	180	180	180					
6	Occupancy of Staffed Beds	97.4%	97.1%	98.0%					
7		50.9%	48.0%	44.6%					
	Occupancy of Available Beds								
8	Full Time Equivalent Employees	958.0	940.6	973.0					
l.	Hospital Gross Revenue Payer Mix Percentage	20.00/	40.40/	20.20/					
1 2	Non-Government Gross Revenue Payer Mix Percentage Medicare Gross Revenue Payer Mix Percentage	38.8% 46.1%	40.1% 45.0%	39.2% 43.9%					
3	Medicaid Gross Revenue Payer Mix Percentage Medicaid Gross Revenue Payer Mix Percentage	11.1%	12.3%	14.8%					
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	1.3%	0.0%	0.0%					
5	Uninsured Gross Revenue Payer Mix Percentage	2.6%	2.5%	1.7%					
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.1%	0.3%					
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Gross Revenue (Charges)	\$147,824,225	\$157,220,714	\$163,912,969					
9	Medicare Gross Revenue (Charges)	\$175,839,343	\$176,476,516	\$183,619,878					
10	Medicaid Gross Revenue (Charges)	\$42,452,421	\$48,254,697	\$62,061,167					
11 12	Other Medical Assistance Gross Revenue (Charges) Uninsured Gross Revenue (Charges)	\$4,782,164 \$9,742,915	\$0 \$9,669,492	\$0 \$7,291,835					
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$603,123	\$493,281	\$1,105,180					
14	Total Gross Revenue (Charges)	\$381,244,191	\$392,114,700	\$417,991,029					
J.	Hospital Net Revenue Payer Mix Percentage								
1	Non-Government Net Revenue Payer Mix Percentage	46.6%	48.2%	50.7%					

	GRIFFIN H	HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2012								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
		(0)	40	—					
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2010	FY 2011	<u>FY 2012</u>					
2	Medicare Net Revenue Payer Mix Percentage	43.1%	42.3%	39.0%					
3	Medicaid Net Revenue Payer Mix Percentage	9.6%	9.0%	9.5%					
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.1%	0.0%	0.0%					
5	Uninsured Net Revenue Payer Mix Percentage	0.5%	0.4%	0.5%					
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.1%	0.4%					
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Net Revenue (Payments)	\$54,824,097	\$57,615,391	\$61,644,004					
9	Medicare Net Revenue (Payments)	\$50,678,054	\$50,556,511	\$47,496,512					
10	Medicaid Net Revenue (Payments)	\$11,304,888	\$10,719,839	\$11,530,590					
11	Other Medical Assistance Net Revenue (Payments)	\$62,510	\$0	\$0					
12	Uninsured Net Revenue (Payments)	\$539,191	\$493,694	\$548,236					
13	CHAMPUS / TRICARE Net Revenue Payments)	\$236,577	\$106,553	\$449,490					
14	Total Net Revenue (Payments)	\$117,645,317	\$119,491,988	\$121,668,832					
К.	Discharges								
1	Non-Government (Including Self Pay / Uninsured)	2,697	2,700	2,462					
2	Medicare	3,673	3,482	3,301					
3	Medical Assistance	1,339	1,306	1,283					
4	Medicaid	1,278	1,306	1,283					
5	Other Medical Assistance	61	-	-					
6	CHAMPUS / TRICARE	10	6	17					
7	Uninsured (Included In Non-Government)	103	112	74					
8	Total	7,719	7,494	7,063					
	Case Mix Index								
1	Non-Government (Including Self Pay / Uninsured)	0.967800	0.991020	1.020000					
2	Medicare	1.321630	1.308660	1.361000					
3	Medical Assistance	0.723383	0.771750	0.774000					
4	Medicaid	0.714430	0.771750	0.774000					
5	Other Medical Assistance	0.910970	0.000000	0.000000					
6	CHAMPUS / TRICARE	0.825280	1.365420	1.103000					
7	Uninsured (Included In Non-Government)	0.846600	0.868230	1.031000					
8	Total Case Mix Index	1.093582	1.100694	1.134885					
М.	Emergency Department Visits								
1	Emergency Room - Treated and Admitted	5,533	5,178	4,870					
2	Emergency Room - Treated and Discharged	33,402	34,965	36,080					
3	Total Emergency Room Visits	38,935	40,143	40,950					

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
	Inpatient Charges	\$836,915	\$1,623,530	\$786,615	94%
	Inpatient Payments	\$286,738	\$407,954	\$121,216	42%
3	Outpatient Charges	\$681,129	\$1,445,575	\$764,446	112%
4	Outpatient Payments	\$187,672	\$161,232	(\$26,440)	-14%
5	Discharges	26	52	26	100%
	Patient Days	142	253	111	78%
7	Outpatient Visits (Excludes ED Visits)	267	706	439	164%
8	Emergency Department Outpatient Visits	46	97	51	111%
9	Emergency Department Inpatient Admissions	23	50	27	117%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,518,044	\$3,069,105	\$1,551,061	102%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$474,410	\$569,186	\$94,776	20%
В.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
		7.	* -	* -	
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$3,574,663	\$4,038,992	\$464,329	13%
2	Inpatient Payments	\$1,021,971	\$1,078,505	\$56,534	6%
3	Outpatient Charges	\$3,226,398	\$4,990,819	\$1,764,421	55%
4	Outpatient Payments	\$795,531	\$952,043	\$156,512	20%
5	Discharges	120	123	3	3%
	Patient Days	503	538	35	7%
7	Outpatient Visits (Excludes ED Visits)	1,889	2,718	829	44%
8	Emergency Department Outpatient Visits	223	317	94	42%
	Emergency Department Inpatient Admissions	96	104	8	8%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,801,061	\$9,029,811	\$2,228,750	33%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,817,502	\$2,030,548	\$213,046	12%
			•	·	

(1)	(2)	(3)	(4)	(5)	(6)
	()	FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
	Inpatient Charges	\$7,860,219	\$0	(\$7,860,219)	-100%
	Inpatient Payments	\$1,895,713	\$0	(\$1,895,713)	-100%
3	Outpatient Charges	\$4,234,736	\$0	(\$4,234,736)	-100%
4	Outpatient Payments	\$650,764	\$0	(\$650,764)	-100%
	Discharges	231	0	(231)	-100%
	Patient Days	1,155	0	(1,155)	-100%
	Outpatient Visits (Excludes ED Visits)	2,523	0	(2,523)	-100%
8	Emergency Department Outpatient Visits	283	0	(283)	-100%
9	Emergency Department Inpatient Admissions	211	0	(211)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,094,955	\$0	(\$12,094,955)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,546,477	\$0	(\$2,546,477)	-100%
E.	OTHER MEDICARE MANAGED CARE				
	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%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN				
	Inpatient Charges	\$1,978,336	\$609,629	(\$1,368,707)	-69%
	Inpatient Payments	\$565,292	\$134,458	(\$430,834)	-76%
3	Outpatient Charges	\$1,262,571	\$350,004	(\$912,567)	-72%
	Outpatient Payments	\$227,193	\$92,675	(\$134,518)	-59%
	Discharges	46	18	(28)	-61%
	Patient Days	236	84	(152)	-64%
7	Outpatient Visits (Excludes ED Visits)	405	68	(337)	-83%
	Emergency Department Outpatient Visits	136	70	(66)	-49%
9	Emergency Department Inpatient Admissions	88	18	(70)	-80%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,240,907	\$959,633	(\$2,281,274)	-70%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$792,485	\$227,133	(\$565,352)	-71%

(1)	(2)	(3)	(4)	(5)	(6)
	()	FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$16,963,904	\$22,435,777	\$5,471,873	32%
2	Inpatient Payments	\$5,546,154	\$5,565,650	\$19,496	0%
3	Outpatient Charges	\$12,082,277	\$16,267,091	\$4,184,814	35%
4	Outpatient Payments	\$2,464,188	\$3,285,379	\$821,191	33%
5	Discharges	590	704	114	19%
6	Patient Days	2,666	3,101	435	16%
7	Outpatient Visits (Excludes ED Visits)	2,081	8,797	6,716	323%
8	Emergency Department Outpatient Visits	820	1,132	312	38%
9	Emergency Department Inpatient Admissions	481	633	152	32%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$29,046,181	\$38,702,868	\$9,656,687	33%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,010,342	\$8,851,029	\$840,687	10%
H.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
I.	AETNA	1			
1	Inpatient Charges	\$627,799	\$1,792,648	\$1,164,849	186%
2	Inpatient Payments	\$236,215	\$429,884	\$193,669	82%
3	Outpatient Charges	\$715,144	\$1,221,700	\$506,556	71%
4	Outpatient Payments	\$169,153	\$261,368	\$92,215	55%
5	Discharges	27	45	18	67%
6	Patient Days	91	225	134	147%
7	Outpatient Visits (Excludes ED Visits)	456	610	154	34%
8	Emergency Department Outpatient Visits	38	72	34	89%
9	Emergency Department Inpatient Admissions	23	36	13	57%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,342,943	\$3,014,348	\$1,671,405	124%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$405,368	\$691,252	\$285,884	71%

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2011	FY 2012	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J.	HUMANA				
1	Inpatient Charges	\$84,796	\$91,606	\$6,810	8%
2	Inpatient Payments	\$61,349	\$0	(\$61,349)	-100%
3	Outpatient Charges	\$49,172	\$109,218	\$60,046	122%
4	Outpatient Payments	\$44,355	\$50,582	\$6,227	14%
5	Discharges	3	4	1	33%
6	Patient Days	9	12	3	33%
7	Outpatient Visits (Excludes ED Visits)	12	26	14	117%
8	Emergency Department Outpatient Visits	11	10	(1)	-9%
9	Emergency Department Inpatient Admissions	3	3	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$133,968	\$200,824	\$66,856	50%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$105,704	\$50,582	(\$55,122)	-52%
K.	SECURE HORIZONS				
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%
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%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
			•	-	

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
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%
N.	EVERCARE				
1	Inpatient Charges	\$302,639	\$214,386	(\$88,253)	-29%
2	Inpatient Payments	\$109,673	\$42,666	(\$67,007)	-61%
3	Outpatient Charges	\$627,089	\$451,229	(\$175,860)	-28%
4	Outpatient Payments	\$108,713	\$77,442	(\$31,271)	-29%
5	Discharges	13	6	(7)	-54%
6	Patient Days	45	38	(7)	-16%
7	Outpatient Visits (Excludes ED Visits)	4,391	12	(4,379)	-100%
8	Emergency Department Outpatient Visits	47	22	(25)	-53%
9	Emergency Department Inpatient Admissions	12	6	(6)	-50%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$929,728	\$665,615	(\$264,113)	-28%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$218,386	\$120,108	(\$98,278)	-45%
II.	TOTAL MEDICARE MANAGED CARE			T	T
	TOTAL INPATIENT CHARGES	\$32,229,271	\$30,806,568	(\$1,422,703)	-4%
	TOTAL INPATIENT PAYMENTS	\$9,723,105	\$7,659,117	(\$2,063,988)	-21%
	TOTAL OUTPATIENT CHARGES	\$22,878,516	\$24,835,636	\$1,957,120	9%
	TOTAL OUTPATIENT PAYMENTS	\$4,647,569	\$4,880,721	\$233,152	5%
	TOTAL DISCHARGES	1,056	952	(104)	-10%
	TOTAL PATIENT DAYS	4,847	4,251	(596)	-12%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED		•	, ,	
	VISITS)	12,024	12,937	913	8%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	1,604	1,720	116	7%
	TOTAL EMERGENCY DEPARTMENT				
	INPATIENT ADMISSIONS	937	850	(87)	-9%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$55,107,787	\$55,642,204	\$534,417	1%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$14,370,674	\$12,539,838	(\$1,830,836)	-13%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD				
A.	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	\$4,114,159	\$662,498	(\$3,451,661)	-84%
2	Inpatient Payments	\$1,019,809	\$131,375	(\$888,434)	-87%
3	Outpatient Charges	\$6,894,821	\$2,264,512	(\$4,630,309)	-67%
4	Outpatient Payments	\$1,387,120	\$404,527	(\$982,593)	-71%
5	Discharges	366	50	(316)	-86%
6	Patient Days	965	123	(842)	-87%
7	Outpatient Visits (Excludes ED Visits)	1,989	3,587	1,598	80%
8	Emergency Department Outpatient Visits	3,764	938	(2,826)	-75%
9	Emergency Department Inpatient Admissions	66	14	(52)	-79%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$11,008,980	\$2,927,010	(\$8,081,970)	-73%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$2,406,929	\$535,902	(\$1,871,027)	-78%
C.	HEALTHNET OF THE NORTHEAST, INC.				
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%

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2011	FY 2012	AMÒÚNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
_					
D.	OTHER MEDICAID 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%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0	0%
3	Outpatient Charges	\$0	\$0 \$0	\$0	0%
4	Outpatient Onlinges 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%
Э	TOTAL INPATIENT & OUTPATIENT	U	0	U	0 76
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT	ΨΟ	φ0	φυ	0 76
	PAYMENTS	\$0	\$0	\$0	0%
	FIRST CHOICE OF CONNECTICUT,	Ψū	4 0	ŢŪ.	0,10
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 2011	FY 2012	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT		•	•	20/
	CHARGES TOTAL INPATIENT & OUTPATIENT	\$0	\$0	\$0	0%
	PAYMENTS	\$0	\$0	\$0	0%
	PATMENTS	\$0	Φ0	ΨU	U /0
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$1,539,078	\$486,884	(\$1,052,194)	-68%
2	Inpatient Payments	\$381,503	\$96,550	(\$284,953)	-75%
3	Outpatient Charges	\$2,838,466	\$861,679	(\$1,976,787)	-70%
4	Outpatient Payments	\$571,051	\$153,928	(\$417,123)	-73%
5	Discharges	140	35	(105)	-75%
6	Patient Days	359	93	(266)	-74%
7	Outpatient Visits (Excludes ED Visits)	1,036	295	(741)	-72%
8	Emergency Department Outpatient Visits	1,516	357	(1,159)	-76%
9	Emergency Department Inpatient Admissions	22	7	(15)	-68%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$4,377,544	\$1,348,563	(\$3,028,981)	-69%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$952,554	\$250,478	(\$702,076)	-74%
Н.	AETNA	*	* =44.004	(0.4.0.4.5.0.4.5)	
1	Inpatient Charges	\$2,356,996	\$511,981	(\$1,845,015)	-78%
2	Inpatient Payments	\$584,248	\$101,527	(\$482,721)	-83%
3	Outpatient Charges	\$3,722,138	\$1,103,913	(\$2,618,225)	-70%
<u>4</u> 5	Outpatient Payments Discharges	\$748,830 177	\$197,200 28	(\$551,630) (149)	-74% -84%
6	Patient Days	569	71	(498)	-88%
7	Outpatient Visits (Excludes ED Visits)	1,073	321	(752)	-70%
8	Emergency Department Outpatient Visits	1,966	438	(1,528)	-78%
9	Emergency Department Inpatient Admissions	37	10	(27)	-73%
-	TOTAL INPATIENT & OUTPATIENT	0,	10	(21)	1070
	CHARGES	\$6,079,134	\$1.615.894	(\$4,463,240)	-73%
	TOTAL INPATIENT & OUTPATIENT	40,010,101	V 1,0 10,00 1	(+ 1, 100, 210)	1070
	PAYMENTS	\$1,333,078	\$298,727	(\$1,034,351)	-78%
				-	
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$8,010,233	\$1,661,363	(\$6,348,870)	-79%
	TOTAL INPATIENT PAYMENTS	\$1,985,560	\$329,452	(\$1,656,108)	-83%
	TOTAL OUTPATIENT CHARGES	\$13,455,425	\$4,230,104	(\$9,225,321)	-69%
	TOTAL OUTPATIENT PAYMENTS	\$2,707,001	\$755,655	(\$1,951,346)	-72%
	TOTAL DISCHARGES	683	113	(570)	-83%
	TOTAL PATIENT DAYS	1,893	287	(1,606)	-85%
	TOTAL OUTPATIENT VISITS	4.000	4 000	405	20/
	(EXCLUDES ED VISITS) TOTAL EMERGENCY DEPARTMENT	4,098	4,203	105	3%
	OUTPATIENT VISITS	7 246	4 722	(E E43)	760/
	TOTAL EMERGENCY DEPARTMENT	7,246	1,733	(5,513)	-76%
	INPATIENT ADMISSIONS	125	31	(94)	-75%
	TOTAL INPATIENT & OUTPATIENT	120	31	(94)	-13%
	CHARGES	\$21,465,658	\$5,891,467	(\$15,574,191)	-73%
	TOTAL INPATIENT & OUTPATIENT	Ψ=1,=00,000	40,001,701	(#.0,0:7,101)	1070
	PAYMENTS	\$4,692,561	\$1,085,107	(\$3,607,454)	-77%
	•				

(1) (2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE

	GRIFFIN HEAI	LTH SERVICES CORPO	RATION		
	TWELVE	MONTHS ACTUAL FILII	NG		
		FISCAL YEAR 2012			
	REPORT 300 - HOSP	ITAL BALANCE SHEET	INFORMATION		
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1.	ASSETS				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$7,733,210	\$10,631,688	\$2,898,478	37%
2	Short Term Investments	\$36,220,671	\$42,693,844	\$6,473,173	18%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$17,300,192	\$13,110,545	(\$4,189,647)	-24%
4	Current Assets Whose Use is Limited for Current Liabilities	\$704,176	\$700,398	(\$3,778)	-1%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,221,879	\$1,308,037	\$86,158	7%
8	Prepaid Expenses	\$2,290,406	\$2,838,400	\$547,994	24%
9	Other Current Assets	\$10,024,226	\$7,736,169	(\$2,288,057)	-23%
	Total Current Assets	\$75,494,760	\$79,019,081	\$3,524,321	5%
		ψ. ο, το τ, το σ	***********	*** ,*********************************	
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$3,367,120	\$3,650,093	\$282,973	8%
2	Board Designated for Capital Acquisition	\$1,542,803	\$1,090,073	(\$452,730)	-29%
3	Funds Held in Escrow	\$0	\$850,000	\$850,000	0%
4	Other Noncurrent Assets Whose Use is Limited	\$4,288,799	\$4,288,627	(\$172)	0%
4	Total Noncurrent Assets Whose Use is	\$4,200,799	Ψ4,200,02 <i>1</i>	(\$172)	0%
	Limited:	\$9,198,722	\$9,878,793	\$680,071	7%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$2,424,396	\$2,770,764	\$346,368	14%
7	Other Noncurrent Assets	\$13,566,499	\$13,647,118	\$80,619	1%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$152,050,174	\$156,495,469	\$4,445,295	3%
2	Less: Accumulated Depreciation	\$86,002,871	\$91,910,289	\$5,907,418	\$0
	Property, Plant and Equipment, Net	\$66,047,303	\$64,585,180	(\$1,462,123)	-2%
3	Construction in Progress	\$726,687	\$130,530	(\$596,157)	-82%
	Total Net Fixed Assets	\$66,773,990	\$64,715,710	(\$2,058,280)	-3%

	GRIFFIN HEA	LTH SERVICES CORPOR	RATION			
	TWELVE	MONTHS ACTUAL FILIN	IG			
		FISCAL YEAR 2012				
	REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3) FY 2011	(4) FY 2012	(5) AMOUNT	(6) %	
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE	
II.	LIABILITIES AND NET ASSETS					
A.	Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$26,829,799	\$30,071,757	\$3,241,958	12%	
2	Salaries, Wages and Payroll Taxes	\$2,016,194	\$1,544,848	(\$471,346)	-23%	
3	Due To Third Party Payers	\$0	\$0	\$0	0%	
4	Due To Affiliates	\$0	\$0	\$0	0%	
5	Current Portion of Long Term Debt	\$6,470,292	\$6,510,397	\$40,105	1%	
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%	
7	Other Current Liabilities	\$4,255,028	\$3,641,991	(\$613,037)	-14%	
	Total Current Liabilities	\$39,571,313	\$41,768,993	\$2,197,680	6%	
В.	Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$51,588,624	\$49,939,639	(\$1,648,985)	-3%	
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%	
	Total Long Term Debt	\$51,588,624	\$49,939,639	(\$1,648,985)	-3%	
3	Accrued Pension Liability	\$52,424,095	\$42,427,930	(\$9,996,165)	-19%	
4	Other Long Term Liabilities	\$60,747,800	\$64,707,782	\$3,959,982	7%	
	Total Long Term Liabilities	\$164,760,519	\$157,075,351	(\$7,685,168)	-5%	
5	Interest in Net Assets of Affiliates or Joint	(\$1,038,881)	\$1,455,857	\$2,494,738	-240%	
C.	Net Assets:					
1	Unrestricted Net Assets or Equity	(\$43,306,301)	(\$38,333,914)	\$4,972,387	-11%	
2	Temporarily Restricted Net Assets	\$1,944,336	\$2,254,825	\$310,489	16%	
3	Permanently Restricted Net Assets	\$5,527,381	\$5,810,354	\$282,973	5%	
	Total Net Assets	(\$35,834,584)	(\$30,268,735)	\$5,565,849	-16%	
	Total Liabilities and Net Assets	\$167,458,367	\$170,031,466	\$2,573,099	2%	

		MONTHS ACTUAL			
		FISCAL YEAR 2012		44701	
(4)	REPORT 350 - HOSPITAL ST			-	(6)
(1)	(2)	(3) FY 2011	(4) FY 2012	(5) AMOUNT	(6) %
LINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α	Operating Revenue:				
A. 1		\$207.00F.049	¢422,462,254	\$25 466 426	6%
1	Total Gross Patient Revenue Less: Allowances	\$397,995,918	\$423,462,354	\$25,466,436	
2		\$265,724,365	\$292,696,932	\$26,972,567	10%
3	Less: Charity Care	\$7,580,152	\$6,785,015	(\$795,137)	-10%
4	Less: Other Deductions Total Net Patient Revenue	\$0 \$124,691,401	\$0 \$123,980,407	\$0 (\$710,994)	0% - 1%
			. , ,	, , , ,	
5	Other Operating Revenue	\$23,556,460	\$22,435,649	(\$1,120,811)	-5%
6	Net Assets Released from Restrictions	\$848,839	\$993,057	\$144,218	17%
	Total Operating Revenue	\$149,096,700	\$147,409,113	(\$1,687,587)	-1%
В.	Operating Expenses:				
1	Salaries and Wages	\$59,414,260	\$59,693,730	\$279,470	0%
2	Fringe Benefits	\$18,584,090	\$21,989,371	\$3,405,281	18%
3	Physicians Fees	\$2,519,049	\$3,068,669	\$549,620	22%
4	Supplies and Drugs	\$19,677,446	\$19,330,611	(\$346,835)	-2%
5	Depreciation and Amortization	\$5,994,793	\$6,170,889	\$176,096	3%
6	Bad Debts	\$3,490,779	\$1,156,742	(\$2,334,037)	-67%
7	Interest	\$2,856,137	\$2,945,202	\$89,065	3%
8	Malpractice	\$2,414,227	\$1,472,966	(\$941,261)	-39%
9	Other Operating Expenses	\$36,477,213	\$38,969,443	\$2,492,230	7%
	Total Operating Expenses	\$151,427,994	\$154,797,623	\$3,369,629	2%
	Income/(Loss) From Operations	(\$2,331,294)	(\$7,388,510)	(\$5,057,216)	217%
C.	Non-Operating Revenue:				
1	Income from Investments	\$1,109,064	\$2,389,209	\$1,280,145	115%
2	Gifts, Contributions and Donations	\$161,281	\$233,021	\$71,740	44%
3	Other Non-Operating Gains/(Losses)	(\$637,206)	(\$955,783)	(\$318,577)	50%
	Total Non-Operating Revenue	\$633,139	\$1,666,447	\$1,033,308	163%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$1,698,155)	(\$5,722,063)	(\$4,023,908)	237%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	(\$439,118)	(\$645,515)	(\$206,397)	47%
	Total Other Adjustments	(\$439,118)	(\$645,515)	(\$206,397)	47%
	Excess/(Deficiency) of Revenue Over Expenses	(\$2,137,273)	(\$6,367,578)	(\$4,230,305)	198%

GRIFFIN HEALTH SERVICES CORPORATION

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)	
		ACTUAL	ACTUAL	ACTUAL	
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012	
A.	Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$120,786,185	\$124,691,401	\$123,980,407	
2	Other Operating Revenue	14,557,300	24,405,299	23,428,706	
3	Total Operating Revenue	\$135,343,485	\$149,096,700	\$147,409,113	
4	Total Operating Expenses	136,595,184	151,427,994	154,797,623	
5	Income/(Loss) From Operations	(\$1,251,699)	(\$2,331,294)	(\$7,388,510)	
6	Total Non-Operating Revenue	(1,506,876)	194,021	1,020,932	
7	Excess/(Deficiency) of Revenue Over Expenses	(\$2,758,575)	(\$2,137,273)	(\$6,367,578)	
В.	Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	-0.94%	-1.56%	-4.98%	
2	Parent Corporation Non-Operating Margin	-1.13%	0.13%	0.69%	
3	Parent Corporation Total Margin	-2.06%	-1.43%	-4.29%	
4	Income/(Loss) From Operations	(\$1,251,699)	(\$2,331,294)	(\$7,388,510)	
5	Total Operating Revenue	\$135,343,485	\$149,096,700	\$147,409,113	
6	Total Non-Operating Revenue	(\$1,506,876)	\$194,021	\$1,020,932	
7	Total Revenue	\$133,836,609	\$149,290,721	\$148,430,045	
8	Excess/(Deficiency) of Revenue Over Expenses	(\$2,758,575)	(\$2,137,273)	(\$6,367,578)	
C.	Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	(\$24,116,314)	(\$43,306,301)	-\$38,333,914	
2	Parent Corporation Total Net Assets	(\$16,214,607)	(\$35,834,584)	(\$30,268,735)	
3	Parent Corporation Change in Total Net Assets	(\$6,797,651)	(\$19,619,977)	\$5,565,849	
4	Parent Corporation Change in Total Net Assets %	172.2%	121.0%	-15.5%	

GRIFFIN HEALTH SERVICES CORPORATION

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)		(5)	
		ACTUAL		ACTUAL		ACTUAL
LINE	DESCRIPTION	FY 2010		FY 2011		FY 2012
D.	Liquidity Measures Summary					
1	Current Ratio	1.96		1.91		1.89
2	Total Current Assets	\$70,487,998		\$75,494,760		\$79,019,081
3	Total Current Liabilities	\$36,014,259		\$39,571,313		\$41,768,993
4	Days Cash on Hand	132		110		131
5	Cash and Cash Equivalents	\$9,021,743		\$7,733,210		\$10,631,688
6	Short Term Investments	38,040,516		36,220,671		42,693,844
7	Total Cash and Short Term Investments	\$47,062,259		\$43,953,881		\$53,325,532
8	Total Operating Expenses	\$136,595,184		\$151,427,994		\$154,797,623
9	Depreciation Expense	\$6,533,158		\$5,994,793		\$6,170,889
10	Operating Expenses less Depreciation Expense	\$130,062,026		\$145,433,201		\$148,626,734
11	Days Revenue in Patient Accounts Receivable	47		51		39
12	Net Patient Accounts Receivable	\$ 15,556,957	\$	17,300,192	\$	13,110,545
13	Due From Third Party Payers	\$0		\$0		\$0
14	Due To Third Party Payers	\$0		\$0		\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 15,556,957	\$	17,300,192	\$	13,110,545
16	Total Net Patient Revenue	\$120,786,185		\$124,691,401		\$123,980,407
17	Average Payment Period	101		99		103
18	Total Current Liabilities	\$36,014,259		\$39,571,313		\$41,768,993
19	Total Operating Expenses	\$136,595,184		\$151,427,994		\$154,797,623
20	Depreciation Expense	\$6,533,158		\$5,994,793		\$6,170,889
21	Total Operating Expenses less Depreciation Expense	\$130,062,026		\$145,433,201		\$148,626,734

GRIFFIN HEALTH SERVICES CORPORATION TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2012 REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS** (1) (2) (3) (4) (5) **ACTUAL ACTUAL** ACTUAL LINE DESCRIPTION FY 2010 FY 2011 FY 2012 E. Solvency Measures Summary **Equity Financing Ratio** (9.9)(21.4)(17.8)Total Net Assets (\$16,214,607)(\$35,834,584)(\$30,268,735)Total Assets \$163,473,599 \$167,458,367 \$170,031,466 4 **Cash Flow to Total Debt Ratio** 4.2 4.2 (0.2)Excess/(Deficiency) of Revenues Over Expenses (\$2,758,575)(\$2,137,273)(\$6,367,578)6 Depreciation Expense \$6,533,158 \$5,994,793 \$6,170,889 Excess of Revenues Over Expenses and Depreciation Expense \$3,774,583 \$3,857,520 (\$196,689)\$41,768,993 Total Current Liabilities \$36,014,259 \$39,571,313 Total Long Term Debt \$52,830,526 \$51,588,624 \$49,939,639 10 Total Current Liabilities and Total Long Term Debt \$88,844,785 \$91,159,937 \$91,708,632 11 Long Term Debt to Capitalization Ratio 144.3 327.5 253.9 12 Total Long Term Debt \$52,830,526 \$49,939,639 \$51,588,624 13 Total Net Assets (\$16,214,607) (\$35,834,584)(\$30,268,735)

\$36,615,919

\$19,670,904

\$15,754,040

14 Total Long Term Debt and Total Net Assets

		(GRIFFIN HOSPITAL					1
			MONTHS ACTUAL	FILING				
			FISCAL YEAR 20					
	REPORT 40	0 - HOSPITAL IN	PATIENT BED UTIL	IZATION BY DEI	PARTMENT			
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
117	(2)	(3)	DISCHARGES	3(b)	(+)	(3)	OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	<u>DAYS</u>	# PATIENT		BEDS (A)	<u>BEDS</u>	BEDS (A)	<u>BEDS</u>
	Add to Martinat (Operation)	40.050	5 004	4 757	FF	440	00.40/	40.00/
1	Adult Medical/Surgical	19,956	5,321	4,757	55	118	99.4%	46.3%
2	ICU/CCU (Excludes Neonatal ICU)	2,474	282	0	7	14	96.8%	48.4%
2	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
3	Psychiatric: Ages 16 17	3,545	461	461	10	16	97.1%	60.7%
<u> </u>	TOTAL PSYCHIATRIC	3.545	461	461	10	16	97.1%	60.7%
		-,	-		-	-		
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	1,777	662	662	5	12	97.4%	40.6%
	Materialy	1,777	002	002	5	12	37.470	40.070
7	Newborn	1,569	619	619	5	20	86.0%	21.5%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
40	Other	0	0	0	0	0	0.00/	0.0%
10	Other	0	U	U	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	27,752	6,444	5,880	77	160	98.7%	47.5%
	TOTAL INPATIENT BED UTILIZATION	29,321	7,063	6,499	82	180	98.0%	44.6%
		·	·	•				
	TOTAL INPATIENT REPORTED YEAR	29,321	7,063	6,499	82	180	98.0%	44.6%
	TOTAL INPATIENT REPORTED TEAR TOTAL INPATIENT PRIOR YEAR	31,549	7,494	7,232	89	180	97.1%	48.0%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-2,228	-431	-733	-7	0	0.8%	-3.4%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-7%	-6%	-10%	-8%	0%	1%	-7%
	Total Licensed Beds and Bassinets	180						
(A) T	his number may not exceed the number of avail	able beds for ea	ch department or i	n total.				
Note	 : Total discharges do not include ICU/CCU patie	nts.						

		GRIFFIN HOSPITAL MONTHS ACTUAL	FILING		
	IVVELVE	FISCAL YEAR 2012			
	REPORT 450 - HOSPITAL INPATIENT AN			IZATION AND FTE	S
(1)	(2)	(3)	(4)	(5)	(6)
		AOTHAI	AOTHAL	AMOUNT	0/
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
LIIVL	DESCRIPTION .	112011	112012	DITTERENCE	DITTERENCE
A.	CT Scans (A)				
1	Inpatient Scans	4,727	4,391	-336	-7%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	6,350	8,014	1,664	26%
	Emergency Department Scans Other Non-Hospital Providers' Scans (A)	5,890 0	5,862 0	-28 0	0% 0%
-	Total CT Scans	16,967	18,267	1,300	8%
	Total of cours	10,007	10,201	1,000	070
В.	MRI Scans (A)				
1	Inpatient Scans	382	389	7	2%
_	Outpatient Scans (Excluding Emergency Department				_
	Scans)	4,216	4,301	85	2%
	Emergency Department Scans Other Non-Hospital Providers' Scans (A)	46	65 0	19 0	41% 0%
-	Total MRI Scans	4,644	4,755	111	2%
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,		
C.	PET Scans (A)				
1	Inpatient Scans	0	1	1	0%
	Outpatient Scans (Excluding Emergency Department	0.55	004	0.4	100/
	Scans) Emergency Department Scans	255 0	224	-31 0	-12% 0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	255	225	-30	-12%
	PET/CT Scans (A)				
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department 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/CT Scans	0	0	0	0%
	(A) If the Hospital is not the primary provider of the			scal year	
	volume of each of these types of scans from the	e primary provider of	the scans.		
E.	Linear Accelerator Procedures				
	Inpatient Procedures	48	3	-45	-94%
	Outpatient Procedures	5,369	4,635	-734	-14%
	Total Linear Accelerator Procedures	5,417	4,638	-779	-14%
	Cardiac Catheterization Procedures	_			
2	Inpatient Procedures Outpatient Procedures	0	0	0	0% 0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
				<u>_</u>	370
G.	Cardiac Angioplasty Procedures				
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
Н.	Electrophysiology Studies				
	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
			_		
	Surgical Procedures				
	Inpatient Surgical Procedures	1,482	1,454	-28	-2%
2	Outpatient Surgical Procedures Total Surgical Procedures	2,743 4 225	2,973 4 427	230 202	8% 5%
	Total Surgical Frocedures	4,225	4,427	202	5%
J.	Endoscopy Procedures				

		GRIFFIN HOSPITAL			
	TWELVE	MONTHS ACTUAL FI	LING		
		FISCAL YEAR 2012			
	REPORT 450 - HOSPITAL INPATIENT AN	ID OUTPATIENT OTHE	R SERVICES UTILI	ZATION AND FTES	}
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	356	367	11	3%
	Outpatient Endoscopy Procedures	2,938	3,080	142	5%
	Total Endoscopy Procedures	3.294	3,447	153	5%
	Total Endoscopy Frocedules	3,294	3,447	133	370
K.	Hospital Emergency Room Visits				
	Emergency Room Visits: Treated and Admitted	5,178	4,870	-308	-6%
	Emergency Room Visits: Treated and Discharged	34,965	36,080	1,115	3%
	Total Emergency Room Visits	40,143	40,950	807	2%
L.	Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	7,369	6,413	-956	-13%
2	Dental Clinic Visits	0	0	0	0%
	Psychiatric Clinic Visits	6,143	6,684	541	9%
	Medical Clinic Visits	102	161	59	58%
5	Specialty Clinic Visits	0	0	0	0%
	Total Hospital Clinic Visits	13,614	13,258	-356	-3%
М.	Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	11,947	14,170	2,223	19%
2	Cardiology	2,923	3,025	102	3%
3	Chemotherapy	947	1,143	196	21%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	56,794	59,510	2,716	5%
	Total Other Hospital Outpatient Visits	72,611	77,848	5,237	7%
	Hospital Full Time Equivalent Employees	207.5	05= 0	6.5	
1	Total Nursing FTEs	325.2	357.0	31.8	10%
	Total Physician FTEs	45.9	45.0	-0.9	-2%
3	Total Non-Nursing and Non-Physician FTEs	569.5	571.0	1.5	0%
	Total Hospital Full Time Equivalent Employees	940.6	973.0	32.4	3%

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION (1) (2) (3) (4) (5) (6) ACTUAL ACTUAL **AMOUNT** % LINE DESCRIPTION FY 2011 FY 2012 DIFFERENCE DIFFERENCE A. **Outpatient Surgical Procedures** GRIFFIN HOSPITAL 2,743 2,973 230 8% Total Outpatient Surgical Procedures(A) 8% 2,743 2,973 230 В. **Outpatient Endoscopy Procedures** 5% GRIFFIN HOSPITAL 2,938 3,080 142 Total Outpatient Endoscopy Procedures(B) 3,080 142 5% 2,938 **Outpatient Hospital Emergency Room Visits** C. **GRIFFIN HOSPITAL** 34,965 1,115 3% 36,080 **Total Outpatient Hospital Emergency Room Visits(** 36,080 1,115 3% 34,965 (A) Must agree with Total Outpatient Surgical Procedures on Report 450. (B) Must agree with Total Outpatient Endoscopy Procedures on Report 450. (C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
l.	DATA BY MAJOR PAYER CATEGORY				
A.	MEDICARE				
	MEDICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$105,948,701	\$106,132,822	\$184,121	09
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$36,441,342	\$33,366,452	(\$3,074,890)	-8%
-	INPATIENT PAYMENTS / INPATIENT CHARGES	34.40%	31.44%	-2.96%	-9%
	DISCHARGES	3,482	3,301	(181)	-5%
	CASE MIX INDEX (CMI)	1.30866	1.36100	0.05234	49
	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,556.75412	4,492.66100	(64.09312)	-19
	INPATIENT ACCRUED PAYMENT / CMAD	\$7,997.21	\$7,426.88	(\$570.34)	-7%
	PATIENT DAYS	17,094	15,894	(1,200)	-7%
-	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,131.82	\$2,099.31	(\$32.51)	-2%
10	AVERAGE LENGTH OF STAY	4.9	4.8	(0.1)	-29
	MEDICARE OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$70,527,815	\$77,487,056	\$6,959,241	109
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,115,169	\$14,130,060	\$14,891	09
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.01%	18.24%	-1.78%	-9%
	OUTPATIENT CHARGES / INPATIENT CHARGES	66.57%	73.01%	6.44%	109
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,317.89394	2,410.04401	92.15007	49
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,089.65	\$5,862.99	(\$226.66)	-4%
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
	TOTAL ACCRUED CHARGES	\$176,476,516	\$183,619,878	\$7,143,362	49
18	TOTAL ACCRUED PAYMENTS	\$50,556,511	\$47,496,512	(\$3,059,999)	-6%
19	TOTAL ALLOWANCES	\$125,920,005	\$136,123,366	\$10,203,361	89

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)				
	NON-GOVERNMENT INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$59,121,000	\$55,982,381	(\$3,138,619)	-5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$21,847,550	\$21,249,204	(\$598,346)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	36.95%	37.96%	1.00%	39
4	DISCHARGES	2,700	2,462	(238)	-99
5	CASE MIX INDEX (CMI)	0.99102	1.02000	0.02898	39
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,675.75400	2,511.24000	(164.51400)	-6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,165.01	\$8,461.64	\$296.63	49
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$167.79)	(\$1,034.76)	(\$866.97)	5179
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$448,970)	(\$2,598,527)	(\$2,149,557)	479%
10	PATIENT DAYS	9,415	8,595	(820)	-9%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,320.50	\$2,472.28	\$151.77	7%
12	AVERAGE LENGTH OF STAY	3.5	3.5	0.0	0%
	NON-GOVERNMENT OUTPATIENT				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$107,769,206	\$115,222,423	\$7,453,217	79
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$36,261,535	\$40,943,036	\$4,681,501	139
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	33.65%	35.53%	1.89%	69
16	OUTPATIENT CHARGES / INPATIENT CHARGES	182.29%	205.82%	23.53%	139
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,921.71743	5,067.26581	145,54838	3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,367.66	\$8,079.91	\$712.25	109
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$1,278.01)	(\$2,216.92)	(\$938.91)	73%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$6,289,985)	(\$11,233,715)	(\$4,943,730)	79%
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
21	TOTAL ACCRUED CHARGES	\$166,890,206	\$171,204,804	\$4,314,598	3%
22	TOTAL ACCRUED PAYMENTS	\$58,109,085	\$62,192,240	\$4,083,155	79
23	TOTAL ALLOWANCES	\$108,781,121	\$109,012,564	\$231,443	0%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$6,738,956)	(\$13,832,243)	(\$7,093,287)	105%
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$157,220,714	\$160,152,815	\$2,932,101	29
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$59,369,153	\$65,185,648	\$5,816,495	109
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	722,222,100		72,2.2,100	107
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$97,851,561	\$94,967,167	(\$2,884,394)	-3%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	62.24%	59.30%	-2.94%	

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$2,439,472	\$2,363,415	(\$76,057)	-3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$164,449	\$217,590	\$53,141	32%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	6.74%	9.21%	2.47%	37%
4	DISCHARGES	112	74	(38)	-34%
5	CASE MIX INDEX (CMI)	0.86823	1.03100	0.16277	19%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	97.24176	76.29400	(20.94776)	-22%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,691.14	\$2,851.99	\$1,160.86	69%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$6,473.87	\$5,609.64	(\$864.23)	-13%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,306.08	\$4,574.89	(\$1,731.19)	-27%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$613,214	\$349,036	(\$264,178)	-43%
11	PATIENT DAYS	334	283	(51)	-15%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$492.36	\$768.87	\$276.51	56%
13	AVERAGE LENGTH OF STAY	3.0	3.8	0.8	28%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,230,020	\$4,928,420	(\$2,301,600)	-32%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$329,245	\$330,646	\$1,401	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	4.55%	6.71%	2.16%	47%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	296.38%	208.53%	-87.85%	-30%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	331.94160	154.31191	(177.62969)	-54%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$991.88	\$2,142.71	\$1,150.84	116%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$6,375.78	\$5,937.19	(\$438.59)	-7%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,097.78	\$3,720.28	(\$1,377.50)	-27%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,692,164	\$574,083	(\$1,118,081)	-66%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$9,669,492	\$7,291,835	(\$2,377,657)	-25%
24	TOTAL ACCRUED PAYMENTS	\$493,694	\$548,236	\$54,542	11%
25	TOTAL ALLOWANCES	\$9,175,798	\$6,743,599	(\$2,432,199)	-27%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,305,378	\$923,119	(\$1,382,259)	-60%

FISCAL YEAR 2012

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$20,685,410	\$22,585,556	\$1,900,146	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,280,329	\$4,478,767	(\$801,562)	-15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.53%	19.83%	-5.70%	-22%
4	DISCHARGES	1,306	1,283	(23)	-2%
5	CASE MIX INDEX (CMI)	0.77175	0.77400	0.00225	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,007.90550	993.04200	(14.86350)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,238.91	\$4,510.15	(\$728.76)	-14%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,926.09	\$3,951.49	\$1,025.40	35%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,758.30	\$2,916.73	\$158.43	6%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,780,108	\$2,896,436	\$116,328	4%
11	PATIENT DAYS	5,026	4,761	(265)	-5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,050.60	\$940.72	(\$109.88)	-10%
13	AVERAGE LENGTH OF STAY	3.8	3.7	(0.1)	-4%
	MEDICAID CUITDATIENT				
	MEDICAID OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$27,569,287	\$39,475,611	\$11,906,324	43%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$5,439,510	\$7,051,823	\$1,612,313	30%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	19.73%	17.86%	-1.87%	-9%
	OUTPATIENT CHARGES / INPATIENT CHARGES	133.28%	174.78%	41.50%	31%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,740.62244	2,242.46013	501.83769	29%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,125.04	\$3,144.68	\$19.64	1%
	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$4,242.62	\$4,935.23	\$692.60	16%
	MEDICARE - MEDICAID OP PMT / OPED	\$2,964.62	\$2,718.31	(\$246.31)	-8%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,160,276	\$6,095,695	\$935,419	18%
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$48,254,697	\$62,061,167	\$13,806,470	29%
24	TOTAL ACCRUED PAYMENTS	\$10.719.839	\$11,530,590	\$810.751	8%
25	TOTAL ALLOWANCES	\$37,534,858	\$50,530,577	\$12,995,719	35%
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26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,940,384	\$8,992,131	\$1,051,747	13%
	TOTAL OF THE EAST (OVERY) ONDERN MINISTER	ψ1,0-10,004	ψ0,002,101	ψ1,001,747	1370

FISCAL YEAR 2012

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$8,165.01	\$8,461.64	\$296.63	4%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$7,997.21	\$7,426.88	(\$570.34)	-7%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$7,367,66	\$8.079.91	\$712.25	10%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$6,089,65	\$5,862,99	(\$226.66)	-4%
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0 \$0	0%
25	TOTAL ALLOWANCES	\$0	\$0 \$0	\$0 \$0	0%
20	TOTAL ALLOWARDED	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%
20	TOTAL OTTILIN WILDIOAL AGGISTANGE OF LIN LIMIT ONDERFATMENT	ΦU	Φυ	ΦΟ	0%

FISCAL YEAR 2012

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

	AND BASELINE UNDERPATMENT DAT	A: COMPARAT	IVE ANAL 13	13	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL AS	SSISTANCE)			
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$20,685,410	\$22,585,556	\$1,900,146	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,280,329	\$4,478,767	(\$801,562)	-15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.53%	19.83%	-5.70%	-22%
4	DISCHARGES	1,306	1,283	(23)	-2%
5	CASE MIX INDEX (CMI)	0.77175	0.77400	0.00225	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,007.90550	993.04200	(14.86350)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,238.91	\$4,510.15	(\$728.76)	-14%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,926.09	\$3,951.49	\$1,025.40	35%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,758.30	\$2,916.73	\$158.43	6%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,780,108	\$2,896,436	\$116,328	4%
11	PATIENT DAYS	5,026	4,761	(265)	-5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,050.60	\$940.72	(\$109.88)	-10%
13	AVERAGE LENGTH OF STAY	3.8	3.7	(0.1)	-4%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$27,569,287	\$39.475.611	\$11.906.324	43%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$5,439,510	\$7,051,823	\$1,612,313	30%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	19.73%	17.86%	-1.87%	-9%
	OUTPATIENT CHARGES / INPATIENT CHARGES	133.28%	174.78%	41.50%	31%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,740.62244	2,242.46013	501.83769	29%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,125.04	\$3,144.68	\$19.64	1%
	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,242.62	\$4,935.23	\$692.60	16%
-	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,964.62	\$2,718.31	(\$246.31)	-8%
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,160,276	\$6,095,695	\$935,419	18%
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	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$48,254,697	\$62,061,167	\$13,806,470	29%
24	TOTAL ACCRUED PAYMENTS	\$10,719,839	\$11,530,590	\$810,751	8%
25	TOTAL ALLOWANCES	\$37,534,858	\$50,530,577	\$12,995,719	35%
		7.2 / /	, , , .	, ,,,,,,,	

FISCAL YEAR 2012

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

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS								
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE				
G.	CHAMPUS / TRICARE								
<u> </u>	CHAIN GOT TRIOARE								
	CHAMPUS / TRICARE INPATIENT								
	INPATIENT ACCRUED CHARGES	\$183,889	\$470,042	\$286,153	156%				
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$26,765	\$109,504	\$82,739	309%				
3	INPATIENT PAYMENTS / INPATIENT CHARGES	14.55%	23.30%	8.74%	60%				
4	DISCHARGES	6	17	11	183%				
5	CASE MIX INDEX (CMI)	1.36542	1.10300	(0.26242)	-19%				
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	8.19252	18.75100	10.55848	129%				
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,267.00	\$5,839.90	\$2,572.90	79%				
8	PATIENT DAYS	14	71	57	407%				
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,911.79	\$1,542.31	(\$369.48)	-19%				
10	AVERAGE LENGTH OF STAY	2.3	4.2	1.8	79%				
	CHAMPUS / TRICARE OUTPATIENT								
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$309,392	\$635,138	\$325,746	105%				
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$79,788	\$339,986	\$260,198	326%				
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)								
13	TOTAL ACCRUED CHARGES	\$493,281	\$1,105,180	\$611,899	124%				
14	TOTAL ACCRUED PAYMENTS	\$106,553	\$449,490	\$342,937	322%				
15	TOTAL ALLOWANCES	\$386,728	\$655,690	\$268,962	70%				
Н.	OTHER DATA								
1	OTHER OPERATING REVENUE	\$6,027,457	\$5,748,384	(\$279,073)	-5%				
2	TOTAL OPERATING EXPENSES	\$126,168,018	\$129,115,712	\$2,947,694	2%				
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%				
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)								
	CHARITY CARE (CHARGES)	\$7,580,152	\$6,785,012	(\$795,140)	-10%				
	BAD DEBTS (CHARGES)	\$3,349,408	\$985,612	(\$2,363,796)	-71%				
	UNCOMPENSATED CARE (CHARGES)	\$10,929,560	\$7,770,624	(\$3,158,936)	-29%				
7	COST OF UNCOMPENSATED CARE	\$3,330,645	\$2,378,524	(\$952,121)	-29%				
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)								
8	TOTAL ACCRUED CHARGES	\$48,254,697	\$62,061,167	\$13,806,470	29%				
9	TOTAL ACCRUED PAYMENTS	\$10,719,839	\$11,530,590	\$810,751	8%				
	COST OF TOTAL MEDICAL ASSISTANCE	\$14,705,008	\$18,996,411	\$4,291,403	29%				
	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$3,985,169	\$7,465,821	\$3,480,652	87%				

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FISCAL YEAR 2012

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

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
II.	AGGREGATE DATA				
A.	TOTALS - ALL PAYERS				
1	TOTAL INPATIENT CHARGES	\$185,939,000	\$185,170,801	(\$768,199)	00
2	TOTAL INPATIENT PAYMENTS	\$63,595,986	\$59,203,927	(\$4,392,059)	-79
3	TOTAL INPATIENT PAYMENTS / CHARGES	34.20%	31.97%	-2.23%	-79
4	TOTAL DISCHARGES	7,494	7,063	(431)	-6
5	TOTAL CASE MIX INDEX	1.10069	1.13489	0.03419	3'
6	TOTAL CASE MIX ADJUSTED DISCHARGES	8,248.60614	8,015.69400	(232.91214)	-39
7	TOTAL OUTPATIENT CHARGES	\$206,175,700	\$232,820,228	\$26,644,528	139
8	OUTPATIENT CHARGES / INPATIENT CHARGES	110.88%	125.73%	14.85%	139
9	TOTAL OUTPATIENT PAYMENTS	\$55,896,002	\$62,464,905	\$6,568,903	129
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.11%	26.83%	-0.28%	-19
11	TOTAL CHARGES	\$392,114,700	\$417,991,029	\$25,876,329	79
12	TOTAL PAYMENTS	\$119,491,988	\$121,668,832	\$2,176,844	20
13	TOTAL PAYMENTS / TOTAL CHARGES	30.47%	29.11%	-1,37%	-49
14	PATIENT DAYS	31,549	29,321	(2,228)	-7
В.	TOTALS - ALL GOVERNMENT PAYERS				
1	INPATIENT CHARGES	\$126,818,000	\$129,188,420	\$2,370,420	20
2	INPATIENT PAYMENTS	\$41,748,436	\$37,954,723	(\$3,793,713)	-99
3	GOVT. INPATIENT PAYMENTS / CHARGES	32.92%	29.38%	-3.54%	-119
4	DISCHARGES	4.794	4.601	(193)	-4
5	CASE MIX INDEX	1.16246	1.19636	0.03390	3'
6	CASE MIX ADJUSTED DISCHARGES	5,572.85214	5,504.45400	(68.39814)	-1
7	OUTPATIENT CHARGES	\$98,406,494	\$117,597,805	\$19,191,311	209
8	OUTPATIENT CHARGES / INPATIENT CHARGES	77.60%	91.03%	13.43%	179
9	OUTPATIENT PAYMENTS	\$19,634,467	\$21,521,869	\$1,887,402	109
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	19.95%	18.30%	-1.65%	-89
11	TOTAL CHARGES	\$225,224,494	\$246,786,225	\$21,561,731	109
12	TOTAL PAYMENTS	\$61,382,903	\$59,476,592	(\$1,906,311)	-39
13	TOTAL PAYMENTS / CHARGES	27.25%	24.10%	-3.15%	-12°
14	PATIENT DAYS	22,134	20.726	(1,408)	-6°
15	TOTAL GOVERNMENT DEDUCTIONS	\$163,841,591	\$187,309,633	\$23,468,042	14
C.	AVERAGE LENGTH OF STAY				
1	MEDICARE	4.9	4.8	(0.1)	-20
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.5	0.0	- <u></u> 2
3	UNINSURED	3.0	3.8	0.8	289
4	MEDICAID	3.8	3.7	(0.1)	-4°
5	OTHER MEDICAL ASSISTANCE	3.6	-	(0.1)	-4
6	CHAMPUS / TRICARE	2.3	4.2	1.8	79
7	TOTAL AVERAGE LENGTH OF STAY	4.2	4.2	(0.1)	-19
	TO THE THE SECTION OF STATE	4.2	4.2	(0.1)	

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FISCAL YEAR 2012

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

	AND BASELINE UNDERPAYMENT DAT	A. COMPARAT	IVE ANALTS	13	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
LINE	<u>DESCRIPTION</u>	F1 2011	F1 2012	DIFFERENCE	DIFFERENCE
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION				
	DATA GOLD IN BACKLINE ONDER! ATMICIT GALOGEATION				
1	TOTAL CHARGES	\$392,114,700	\$417,991,029	\$25,876,329	7%
2	TOTAL GOVERNMENT DEDUCTIONS	\$163,841,591	\$187,309,633	\$23,468,042	14%
	UNCOMPENSATED CARE	\$10,929,560	\$7,770,624	(\$3,158,936)	1170
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$97,851,561	\$94,967,167	(\$2,884,394)	-3%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$272,622,712	\$290,047,424	\$17,424,712	6%
7	TOTAL ACCRUED PAYMENTS	\$119,491,988	\$127,943,605	\$8,451,617	7%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$119,491,988	\$127,943,605	\$8,451,617	7%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3047373332	0.3060917487	0.0013544154	0%
11	COST OF UNCOMPENSATED CARE	\$3,330,645	\$2,378,524	(\$952,121)	-29%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$3,985,169	\$7,465,821	\$3,480,652	87%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND	Ψ.	Ψ0	V O	0,0
	MEDICAL ASSISTANCE UNDERPAYMENT	\$7,315,814	\$9,844,345	\$2,528,531	35%
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$5,160,276	\$6,095,695	\$935,419	18%
2	OTHER MEDICAL ASSISTANCE	\$5,160,276	\$0,095,695	\$935,419	0%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,305,378	\$923,119	(\$1,382,259)	-60%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,465,654	\$7,018,814	(\$446,840)	-6%
4	TOTAL CALCULATED UNDERFATMENT (UPPER LIMIT METHODOLOGY)	\$7,405,054	\$7,010,014	(\$440,040)	-076
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600				
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$2,506,355	(\$607,519)	(\$3,113,874)	-124.24%
	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$121,998,344	\$121,061,315	(\$937,029)	-0.77%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$392,114,736	\$417,991,029	\$25,876,293	6.60%
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$10,929,560	\$7,770,624	(\$3,158,936)	-28.90%
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	GRIFFIN HOSPITAL			
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAY	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(4)	(0)	(0)	(4)	(5)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	<u>DESCRIPTION</u>	FY 2011	FY 2012	DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS	+		
	INPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$59,121,000	\$55,982,381	(\$3,138,619)
	MEDICARE	\$105,948,701	106,132,822	\$184,121
-	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$20,685,410	22,585,556	\$1,900,146
	MEDICAID OTHER MEDICAL ASSISTANCE	\$20,685,410 \$0	22,585,556 0	\$1,900,146 \$0
6	CHAMPUS / TRICARE	\$183,889	470,042	\$286,153
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INDATIENT COVERNMENT CHARGES	\$2,439,472	2,363,415	(\$76,057) \$2,370,420
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$126,818,000 \$185,939,000	\$129,188,420 \$185,170,801	\$2,370,420 (\$768,199)
		V100,000,00	ψ100,1.0,00.	(4. 00,)
	OUTPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	¢407.760.206	\$44E 000 A00	¢7 452 217
	MEDICARE	\$107,769,206 \$70,527,815	\$115,222,423 77,487,056	\$7,453,217 \$6,959,241
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$27,569,287	39,475,611	\$11,906,324
	MEDICAID OTHER MEDICAL ASSISTANCE	\$27,569,287	39,475,611	\$11,906,324
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$0 \$309,392	0 635,138	\$0 \$325,746
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,230,020	4,928,420	(\$2,301,600)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$98,406,494	\$117,597,805	\$19,191,311
$\vdash\vdash\vdash$	TOTAL OUTPATIENT CHARGES	\$206,175,700	\$232,820,228	\$26,644,528
	TOTAL ACCRUED CHARGES	<u> </u>		
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$166,890,206	\$171,204,804	\$4,314,598
	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$176,476,516 \$48,254,697	\$183,619,878 \$62,061,167	\$7,143,362 \$13,806,470
4	TOTAL MEDICAID	\$48,254,697	\$62,061,167	\$13,806,470
	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
	TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$493,281 \$9,669,492	\$1,105,180 \$7,291,835	\$611,899 (\$2,377,657)
	TOTAL GOVERNMENT CHARGES	\$225,224,494	\$246,786,225	\$21,561,731
Ш	TOTAL CHARGES	\$392,114,700	\$417,991,029	\$25,876,329
D.	INPATIENT ACCRUED PAYMENTS	+		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$21,847,550	\$21,249,204	(\$598,346)
	MEDICARE MEDICAL ASSISTANCE (INCLLIDING OTHER MEDICAL ASSISTANCE)	\$36,441,342	33,366,452	(\$3,074,890) (\$801.562)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$5,280,329 \$5,280,329	4,478,767 4,478,767	(\$801,562) (\$801,562)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
	CHAMPUS / TRICARE	\$26,765	109,504	\$82,739
_	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYMENTS	\$164,449 \$41,748,436	217,590 \$37,954,723	\$53,141 (\$3,793,713)
	TOTAL INPATIENT PAYMENTS	\$63,595,986	\$59,203,927	(\$4,392,059)
E.	OUTPATIENT ACCRUED PAYMENTS	+		
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$36,261,535	\$40,943,036	\$4,681,501
2	MEDICARE	\$14,115,169	14,130,060	\$14,891
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$5,439,510 \$5,439,510	7,051,823 7,051,823	\$1,612,313 \$1,612,313
	OTHER MEDICAL ASSISTANCE	\$5,439,510	7,051,823	\$1,612,313
6	CHAMPUS / TRICARE	\$79,788	339,986	\$260,198
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$329,245	330,646	\$1,401
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$19,634,467 \$55,896,002	\$21,521,869 \$62,464,905	\$1,887,402 \$6,568,903
		1	Ŧ-,-,	
	TOTAL ACCRUED PAYMENTS TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$58,109,085	\$62,192,240	\$4,083,155
	TOTAL NONGOVERNIMENT (INCLODING SELF PAT7 ONINGORED)	\$50,556,511	\$47,496,512	(\$3,059,999)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$10,719,839	\$11,530,590	\$810,751
	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$10,719,839	\$11,530,590 \$0	\$810,751 \$0
	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$0 \$106,553	\$449,490	\$0 \$342,937
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$493,694	\$548,236	\$54,542
	TOTAL GOVERNMENT PAYMENTS	\$61,382,903	\$59,476,592	(\$1,906,311)
$\vdash \vdash$	TOTAL PAYMENTS	\$119,491,988	\$121,668,832	\$2,176,844

	GRIFFIN HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYN	IENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
I INE	DESCRIPTION	FY 2011	FY 2012	AMOUNT DIFFERENCE
LIIVE	DESCRIPTION	11 2011	112012	DITTERENCE
II.	PAYER MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15.08%	13.39%	-1.68%
_	MEDICARE	27.02%	25.39%	-1.63%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.28%	5.40%	0.13%
	MEDICAID	5.28%	5.40%	0.13%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00% 0.05%	0.00% 0.11%	0.00% 0.07%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.05%	0.11%	-0.06%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	32.34%	30.91%	-1.44%
	TOTAL INPATIENT PAYER MIX	47.42%	44.30%	-3.12%
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
<u>В.</u>	OUTPATIENT PATER WIX BASED ON ACCROED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	27.48%	27.57%	0.08%
	MEDICARE	17.99%	18.54%	0.55%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	7.03%	9.44% 9.44%	2.41%
	OTHER MEDICAL ASSISTANCE	7.03% 0.00%	0.00%	2.41% 0.00%
	CHAMPUS / TRICARE	0.08%	0.15%	0.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.84%	1.18%	-0.66%
-	TOTAL OUTPATIENT GOVERNMENT PAYER MIX TOTAL OUTPATIENT PAYER MIX	25.10% 52.58%	28.13% 55.70%	3.04%
-	TOTAL GUIPATIENT PATER WIX	32.36%	55.70%	3.12%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.28%	17.46%	-0.82%
2	MEDICARE	30.50%	27.42%	-3.07%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.42%	3.68%	-0.74%
	MEDICAID OTHER MEDICAL ASSISTANCE	4.42% 0.00%	3.68% 0.00%	-0.74% 0.00%
	CHAMPUS / TRICARE	0.00%	0.00%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.14%	0.18%	0.04%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	34.94%	31.20%	-3.74%
-	TOTAL INPATIENT PAYER MIX	53.22%	48.66%	-4.56%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	30.35%	33.65%	3.30%
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11.81% 4.55%	11.61% 5.80%	-0.20% 1.24%
	MEDICAID	4.55%	5.80%	1.24%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
_	CHAMPUS / TRICARE	0.07%	0.28%	0.21%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYER MIX	0.28% 16.43%	0.27% 17.69%	0.00% 1.26 %
	TOTAL OUTPATIENT PAYER MIX	46.78%	51.34%	4.56%
<u> </u>	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

	ODISSIN HOODITAL			
	GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
(1)	(4)	` ,	` '	(3)
	DECORPTION	ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	D DATA		
	DICCULADOFO			
Α.	<u>DISCHARGES</u>			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	2,700	2,462	(238)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,482 1,306	3,301 1,283	(181) (23)
	MEDICAID	1,306	1,283	(23)
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0 6	0 17	- 11
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	112	74	(38)
	TOTAL GOVERNMENT DISCHARGES TOTAL DISCHARGES	4,794 7,494	4,601 7,063	(193) (431)
_		, -	,	, ,
В.	PATIENT DAYS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9,415	8,595	(820)
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17,094 5,026	15,894 4,761	(1,200) (265)
4	MEDICAID	5,026	4,761	(265)
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0 14	0 71	- 57
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	334	283	(51)
	TOTAL GOVERNMENT PATIENT DAYS	22,134	20,726	(1,408)
	TOTAL PATIENT DAYS	31,549	29,321	(2,228)
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.5	0.0
	MEDICARE	4.9	4.8	(0.1)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	3.8 3.8	3.7 3.7	(0.1)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.3 3.0	4.2 3.8	1.8 0.8
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.6	4.5	(0.1)
	TOTAL AVERAGE LENGTH OF STAY	4.2	4.2	(0.1)
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.99102	1.02000	0.02898
	MEDICARE	1.30866	1.36100	0.05234
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	0.77175 0.77175	0.77400 0.77400	0.00225
5	OTHER MEDICAL ASSISTANCE	0.00000	0.77400	0.00225 0.00000
	CHAMPUS / TRICARE	1.36542	1.10300	(0.26242)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	0.86823 1.16246	1.03100 1.19636	0.16277 0.03390
	TOTAL CASE MIX INDEX	1.10069	1.13489	0.03419
Ε.	OTHER REQUIRED DATA			
	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$457,220,74 <i>4</i>	\$160 152 915	¢2 022 101
1		\$157,220,714	\$160,152,815	\$2,932,101
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$59,369,153	\$65,185,648	\$5,816,495
3	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$97,851,561	\$94,967,167	(\$2,884,394)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE	62.24%	59.30%	(\$2,884,394) -2.94%
	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0 \$0	\$0 \$0	\$0 \$0
<u>6</u> 7	EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT	\$0 \$0	\$0 \$0	\$0
	ADJUSTMENT-OHCA INPUT)			\$0
	CHARITY CARE	\$7,580,152	\$6,785,012	(\$795,140)
	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$3,349,408 \$10,929,560	\$985,612 \$7,770,624	(\$2,363,796) (\$3,158,936)
11	TOTAL OTHER OPERATING REVENUE	\$157,220,714	\$160,152,815	\$2,932,101
	TOTAL OPERATING EXPENSES	\$126,168,018	\$129,115,712	\$2,947,694

	ODIFFIN HOODITAL			
	GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA	ENT LIMIT AND		
	BASELINE ONDERFAIMENT DATA			
(1)	(2)	(3)	(4)	(5)
	1-7			(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL FY 2012	AMOUNT <u>DIFFERENCE</u>
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,675.75400	2,511.24000	(164.51400
	MEDICARE	4,556.75412	4,492.66100	(64.09312
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,007.90550	993.04200	(14.86350
4	MEDICAID	1,007.90550	993.04200	(14.86350
	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	8.19252 97.24176	18.75100 76.29400	10.55848 (20.94776
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	5,572.85214	5,504.45400	(68.39814
	TOTAL CASE MIX ADJUSTED DISCHARGES	8,248.60614	8,015.69400	(232.91214
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,921.71743	5,067.26581	145.5483
	MEDICARE	2,317.89394 1,740.62244	2,410.04401 2,242.46013	92.1500 501.8376
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	1,740.62244	2,242.46013	501.8376
	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.0000
6	CHAMPUS / TRICARE	10.09496	22.97102	12.8760
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	331.94160	154.31191	-177.6296
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	4,068.61134	4,675.47517	606.8638
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	8,990.32877	9,742.74098	752.4122
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,165.01	\$8,461.64	\$296.63
	MEDICARE	\$7,997.21	\$7.426.88	(\$570.34
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,238.91	\$4,510.15	(\$728.76
4	MEDICAID	\$5,238.91	\$4,510.15	(\$728.76
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
	CHAMPUS / TRICARE	\$3,267.00	\$5,839.90	\$2,572.90
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$1,691.14 \$7,491.39	\$2,851.99 \$6,895.27	\$1,160.86 (\$596.12
	TOTAL GOVERNMENT INFATIENT FER CASE MIX ADJUSTED DISCHARGE TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,709.91	\$7,386.00	(\$323.91
		,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,367.66	\$8,079.91	\$712.25
2	MEDICARE	\$6,089.65	\$5,862.99	(\$226.66
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,125.04	\$3,144.68	\$19.64 \$10.64
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	\$3,125.04 \$0.00	\$3,144.68 \$0.00	\$19.64 \$0.00
6	CHAMPUS / TRICARE	\$7,903.75	\$14,800.65	\$6,896.90
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$991.88	\$2,142.71	\$1,150.84
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,825.84	\$4,603.14	(\$222.70
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,217.35	\$6,411.43	\$194.08
	TOTAL OUT ATENT ATMENT LA OUT ATENT EQUIVALENT DISCHARGE	Ψ0,211.33	Ψυ,τιι+3	φισ+.υσ

	GRIFFIN HOSPITAL	1	1	
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAY	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
(.,	\ - /	(0)	\.,	(0)
		ACTUAL	ACTUAL	AMOUNT
LINE	<u>DESCRIPTION</u>	<u>FY 2011</u>	FY 2012	DIFFERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
		A		
	MEDICAID	\$5,160,276	\$6,095,695	\$935,419
3	OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0 \$2,305,378	\$0 \$923,119	\$0 (\$1,382,259
3	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,465,654	\$7,018,814	(\$446,840
	TOTAL GALOGEATED GROEKL ATMENT (GIT ER EIMIT METHODOLOGI)	\$1,465,654	\$7,010,014	(\$440,040
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	OLOGY)		
V 1.	CALCOLATED ONDERT ATMENT BEFORE OF TER LIMIT (BASELINE MILITIODE	<u> </u>		
1	TOTAL CHARGES	\$392,114,700	\$417,991,029	\$25,876,329
2	TOTAL GOVERNMENT DEDUCTIONS	\$163,841,591	\$187,309,633	\$23,468,042
3	UNCOMPENSATED CARE	\$10,929,560	\$7,770,624	(\$3,158,936
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$97,851,561	\$94,967,167	(\$2,884,394
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
6	TOTAL ADJUSTMENTS	\$272,622,712	\$290,047,424	\$17,424,712
7	TOTAL ACCRUED PAYMENTS	\$119,491,988	\$127,943,605	\$8,451,617
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0 \$119,491,988	\$0 \$127,943,605	\$0 \$8.451.617
9 10	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS RATIO OF NET REVENUE TO TOTAL CHARGES	0.3047373332	0.3060917487	0.0013544154
11	COST OF UNCOMPENSATED CARE	\$3,330,645	\$2,378,524	(\$952,121
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$3,985,169	\$7,465,821	\$3,480,652
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	* -	* -	* -
		\$7,315,814	\$9,844,345	\$2,528,531
VII.	RATIOS			
	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	36.95%	37.96%	1.00%
2	MEDICARE	34.40%	31.44%	-2.96%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	25.53%	19.83%	-5.70%
4	MEDICAID	25.53%	19.83%	-5.70%
5	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00% 14.55%	0.00% 23.30%	0.00% 8.74%
<u>6</u> 7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6.74%	9.21%	2.47%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	0.1470	5.2170	2.77
	TOTAL GOVERNMENT NATIO OF INFAMENTO TO INFAMENTO GRANDED	22.020/	20.200/	2 5 4 0
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	32.92% 34.20%	29.38% 31.97%	-3.54% -2.23%
	TOTAL RATIO OF INFATIENT FATMENTS TO INFATIENT CHARGES	34.2070	31.37 /6	-2.23 /
B.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	33.65%	35.53%	1.89%
2	MEDICARE	20.01%	18.24%	-1.78%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19.73%	17.86%	-1.87%
	MEDICAID	19.73%	17.86%	-1.87%
4	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
4 5	OLIAMBUO /TDIOADE	25.79%	53.53%	27.74%
4 5 6	CHAMPUS / TRICARE		0.740/	
4 5	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.55%	6.71%	2.16%
4 5 6		4.55%		2.16%
4 5 6	UNINSURED (INCLUDED IN NON-GOVERNMENT)		6.71% 18.30% 26.83%	2.16% -1.65% -0.28%

	GRIFFIN HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2012			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
	, ,	, ,	, ,	` '
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2011	FY 2012	<u>DIFFERENCE</u>
* ****	NET DEVENUE OROGO DEVENUE AND UNICOMPENSATED CARE DECONOUT	TIONS		
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	ATIONS		
<u> </u>	DECONOR INTOXICE CUES DEFINED MET DEVENUE TO LICODITAL AUDITED EIN CTATEMENT	•		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENT	3		
1	TOTAL ACCRUED PAYMENTS	\$119,491,988	\$121,668,832	\$2,176,844
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)	* · · · · · · · · · · · · · · · · · · ·	* := :, :::	\$0
	(OHCA INPUT)	\$0	\$0	
	OHCA DEFINED NET REVENUE	\$119,491,988	\$121,668,832	\$2,176,844
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$2.506.355	(\$607.519)	(\$3.113.874)
4	CALCULATED NET REVENUE	\$121,998,343	\$121,061,313	(\$937,030)
Ė	ONESCENTED HET HEVENOE	\$121,000,010	V.2.,00.,010	(4001,000)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$121,998,344	\$121,061,315	(\$937,029)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)	(\$2)	(\$1)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
1	OHCA DEFINED GROSS REVENUE	C000 444 700	£447.004.000	#05.070.000
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$392,114,700 \$0	\$417,991,029 \$0	\$25,876,329 \$0
	CALCULATED GROSS REVENUE	\$392,114,700	\$417,991,029	\$25,876,329
		, , ,	, , , , , , , ,	, -,,-
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$392,114,736	\$417,991,029	\$25,876,293
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$36)	\$0	\$36
	((4-57)	4.5	,,,,
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	<u>TS</u>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,929,560	\$7,770,624	(\$3,158,936)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,929,560	\$7,770,624	(\$3,158,936)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,929,560	\$7,770,624	(\$3,158,936)
	REFORTING)			
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2012** REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND **BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES** (1) (2)(3) **ACTUAL** FY 2012 LINE DESCRIPTION ACCRUED CHARGES AND PAYMENTS **INPATIENT ACCRUED CHARGES** A. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1 \$55.982.381 **MEDICARE** 106,132,822 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 22,585,556 **MEDICAID** 22,585,556 OTHER MEDICAL ASSISTANCE 5 0 CHAMPUS / TRICARE 470,042 UNINSURED (INCLUDED IN NON-GOVERNMENT) 2,363,415 7 TOTAL INPATIENT GOVERNMENT CHARGES \$129,188,420 TOTAL INPATIENT CHARGES \$185,170,801 В. **OUTPATIENT ACCRUED CHARGES** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$115,222,423 **MEDICARE** 77,487,056 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 39,475,611 **MEDICAID** 4 39,475,611 OTHER MEDICAL ASSISTANCE 5 Ω CHAMPUS / TRICARE 635,138 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 4.928.420 TOTAL OUTPATIENT GOVERNMENT CHARGES \$117,597,805 TOTAL OUTPATIENT CHARGES \$232,820,228 C. TOTAL ACCRUED CHARGES TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED) 1 \$171,204,804 TOTAL GOVERNMENT ACCRUED CHARGES 2 246,786,225 **TOTAL ACCRUED CHARGES** \$417,991,029 INPATIENT ACCRUED PAYMENTS D. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$21,249,204 MEDICARE 33,366,452 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 4,478,767 **MEDICAID** 4,478,767 OTHER MEDICAL ASSISTANCE 5 n 6 CHAMPUS / TRICARE 109,504 UNINSURED (INCLUDED IN NON-GOVERNMENT) 217,590 7 TOTAL INPATIENT GOVERNMENT PAYMENTS \$37,954,723 **TOTAL INPATIENT PAYMENTS** \$59,203,927 **OUTPATIENT ACCRUED PAYMENTS** E NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$40,943,036 2 **MEDICARE** 14,130,060 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 7,051,823 **MEDICAID** 7,051,823 OTHER MEDICAL ASSISTANCE 5 0 CHAMPUS / TRICARE 6 339,986 UNINSURED (INCLUDED IN NON-GOVERNMENT) 330,646 7 TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$21,521,869 TOTAL OUTPATIENT PAYMENTS \$62,464,905 TOTAL ACCRUED PAYMENTS F. TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED) \$62,192,240 2 TOTAL GOVERNMENT ACCRUED PAYMENTS 59,476,592 TOTAL ACCRUED PAYMENTS \$121,668,832

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND** BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (1) (2)(3) **ACTUAL** FY 2012 LINE **DESCRIPTION** II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA A. **ACCRUED DISCHARGES** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1 2.462 **MEDICARE** 3,301 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 1,283 **MEDICAID** 1,283 OTHER MEDICAL ASSISTANCE 5 0 CHAMPUS / TRICARE 17 UNINSURED (INCLUDED IN NON-GOVERNMENT) 74 7 **TOTAL GOVERNMENT DISCHARGES** 4,601 TOTAL DISCHARGES 7,063 В. CASE MIX INDEX NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1.02000 1.36100 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 0.77400 **MEDICAID** 0.77400 4 OTHER MEDICAL ASSISTANCE 5 0.00000 CHAMPUS / TRICARE 1.10300 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 1.03100 **TOTAL GOVERNMENT CASE MIX INDEX** 1.19636 TOTAL CASE MIX INDEX 1.13489 OTHER REQUIRED DATA C. TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES 1 \$160,152,815 ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES 2 \$65,185,648 (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) 3 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$94,967,167 TOTAL ACTUAL DISCOUNT PERCENTAGE 4 59.30% 5 EMPLOYEE SELF INSURANCE GROSS REVENUE \$0 6 EMPLOYEE SELF INSURANCE ALLOWANCE \$0 \$0 UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT) CHARITY CARE 8 \$6,785,012 9 BAD DEBTS \$985,612 TOTAL UNCOMPENSATED CARE 10 \$7,770,624 TOTAL OTHER OPERATING REVENUE 11 \$5,748,384 TOTAL OPERATING EXPENSES 12 \$129,115,712

	GRIFFIN HOSPITAL				
	TWELVE MONTHS ACTUAL FILING				
	FISCAL YEAR 2012				
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES					
(1)	(2)	(3)			
(')	(-)	ACTUAL			
LINE	DESCRIPTION	FY 2012			
TTT	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$121,668,832			
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0			
	OHCA DEFINED NET REVENUE	\$121,668,832			
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$607,519			
	CALCULATED NET REVENUE	\$121,061,313			
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$121,061,315			
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$2			
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$417,991,029			
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0			
	CALCULATED GROSS REVENUE	\$417,991,029			
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$417,991,029			
	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)	\$7,770,624			
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0			
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,770,624			
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$7,770,624			
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0			

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 **REPORT 650 - HOSPITAL UNCOMPENSATED CARE** (1) (2) (3) (4) (5) (6)ACTUAL **ACTUAL AMOUNT** % LINE DESCRIPTION FY 2011 FY 2012 DIFFERENCE DIFFERENCE Hospital Charity Care (from HRS Report 500) A. Number of Applicants 382 275 (107)-28% 2 Number of Approved Applicants 328 207 -37% (121)**Total Charges (A)** \$7.580.152 \$6,785,012 (\$795,140) -10% 3 4 **Average Charges** \$23,110 \$32,778 \$9,668 42% Ratio of Cost to Charges (RCC) 5 0.312949 0.316892 0.003943 1% **Total Cost** \$2,372,201 \$2,150,116 (\$222,085) -9% 6 **Average Cost** \$3,155 44% 7 \$7,232 \$10,387 Charity Care - Inpatient Charges \$1,364,427 \$2,353,271 \$988,844 72% 8 Charity Care - Outpatient Charges (Excludes ED Charges) 9 4,851,297 1,313,727 (3,537,570)-73% 10 Charity Care - Emergency Department Charges 1,364,428 129% 3,118,014 1,753,586 11 **Total Charges (A)** \$7,580,152 \$6,785,012 (\$795,140) -10% Charity Care - Number of Patient Days 2.227 12 6,401 8,628 35% 13 Charity Care - Number of Discharges 3,495 2,361 208% 1,134 14 Charity Care - Number of Outpatient ED Visits 663 58% 1,150 1,813 15 Charity Care - Number of Outpatient Visits (Excludes ED Visits) (797)-19% 4,117 3,320 Hospital Bad Debts (from HRS Report 500) В. **Bad Debts - Inpatient Services** \$234,459 \$147,841 (\$86,618) -37% Bad Debts - Outpatient Services (Excludes ED Bad Debts) 1,172,293 (659,633) 2 512,660 -56% 3 Bad Debts - Emergency Department 1.942.656 325.111 (1,617,545) -83% 4 Total Bad Debts (A) \$3,349,408 \$985,612 (\$2,363,796) -71% Hospital Uncompensated Care (from HRS Report 500) C. Charity Care (A) -10% 1 \$7,580,152 \$6,785,012 (\$795,140) 2 Bad Debts (A) 3,349,408 -71% 985,612 (2,363,796)**Total Uncompensated Care (A)** 3 \$10,929,560 \$7,770,624 (\$3,158,936) -29% 4 **Uncompensated Care - Inpatient Services** 56% \$1,598,886 \$2,501,112 \$902,226 5 Uncompensated Care - Outpatient Services (Excludes ED Unc. Care) 1,826,387 (4,197,203)-70% 6,023,590 3,307,084 136,041 Uncompensated Care - Emergency Department 3,443,125 4% 6 **Total Uncompensated Care (A)** \$10,929,560 \$7,770,624 (\$3,158,936) -29% (A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

		TWELVE MONTHS ACTUA			
	DEDORT OOF HOORITA	FISCAL YEAR 2		ALLOWANGEO	
		AL NON-GOVERNMENT GROSS RE	•	ALLOWANCES,	
	А	CCRUED PAYMENTS AND DISCO	UNIPERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$157,220,714	\$160,152,815	\$2,932,101	2%
2	Total Contractual Allowances	\$97,851,561	\$94,967,167	(\$2,884,394)	-3%
	Total Accrued Payments (A)	\$59,369,153	\$65,185,648	\$5,816,495	10%
	Total Discount Percentage	62.24%	59.30%	-2.94%	-5%

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (3) (4) (5) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2010 FY 2011 FY 2012 **Gross and Net Revenue** A. Inpatient Gross Revenue \$184,980,450 \$185,939,000 \$185,170,801 1 2 Outpatient Gross Revenue \$196,263,741 \$206,175,700 \$232,820,228 3 Total Gross Patient Revenue \$381,244,191 \$392,114,700 \$417,991,029 Net Patient Revenue \$118,086,481 \$121,998,344 \$121,061,315 В. **Total Operating Expenses** 1 Total Operating Expense \$120,493,484 \$126,168,018 \$129,115,712 C. **Utilization Statistics** Patient Days 33,429 31,549 29,321 7,494 7,063 2 Discharges 7,719 3 Average Length of Stay 4.3 4.2 4.2 66,532 Equivalent (Adjusted) Patient Days (EPD) 68,897 66,187 4 Equivalent (Adjusted) Discharges (ED) 15,909 15,804 15,943 0 **Case Mix Statistics** D. 1.09358 1.10069 1.13489 1 Case Mix Index 36,557 34,726 33,276 2 Case Mix Adjusted Patient Days (CMAPD) 8,016 3 Case Mix Adjusted Discharges (CMAD) 8,441 8,249 Case Mix Adjusted Equivalent Patient Days (CMAEPD) 75,345 73,231 75,115 18,094 Case Mix Adjusted Equivalent Discharges (CMAED) 17,398 17,395 5 E. **Gross Revenue Per Statistic** 1 Total Gross Revenue per Patient Day \$11,405 \$12,429 \$14,256 2 Total Gross Revenue per Discharge \$49,390 \$52,324 \$59,180 Total Gross Revenue per EPD \$5,534 \$5,894 \$6,315 3 \$26,217 4 Total Gross Revenue per ED \$23,964 \$24,812 Total Gross Revenue per CMAEPD \$5,060 \$5,354 \$5,565 Total Gross Revenue per CMAED \$21,914 \$22,542 \$23,101 6 7 Inpatient Gross Revenue per EPD \$2,685 \$2,795 \$2,798 Inpatient Gross Revenue per ED \$11,628 \$11,766 \$11,614

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (5) (3) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2010 FY 2011 FY 2012 **Net Revenue Per Statistic** F. \$3,867 Net Patient Revenue per Patient Day \$3,532 \$4,129 2 Net Patient Revenue per Discharge \$15,298 \$16,279 \$17,140 3 Net Patient Revenue per EPD \$1,714 \$1,834 \$1,829 Net Patient Revenue per ED \$7,423 \$7,720 \$7,593 4 5 Net Patient Revenue per CMAEPD \$1,567 \$1,666 \$1,612 Net Patient Revenue per CMAED \$6,788 \$7,013 \$6,691 G. Operating Expense Per Statistic Total Operating Expense per Patient Day \$3,604 \$3,999 \$4,404 1 \$15,610 \$16,836 \$18,281 2 Total Operating Expense per Discharge \$1,749 \$1,896 3 Total Operating Expense per EPD \$1,951 Total Operating Expense per ED \$7,574 \$7,983 \$8,098 4 Total Operating Expense per CMAEPD \$1,599 \$1,723 \$1,719 5 Total Operating Expense per CMAED \$7,253 \$7,136 6 \$6,926 H. **Nursing Salary and Fringe Benefits Expense** Nursing Salary Expense \$18,665,249 \$20,006,613 \$19,496,313 1 2 Nursing Fringe Benefits Expense \$5,608,641 \$6,349,548 \$7,396,230 \$26,356,161 \$26,892,543 Total Nursing Salary and Fringe Benefits Expense \$24,273,890 I. Physician Salary and Fringe Expense 1 Physician Salary Expense \$5,144,632 \$3,479,944 \$4,020,152 Physician Fringe Benefits Expense \$1,545,889 \$1,104,438 \$1,525,084 2 Total Physician Salary and Fringe Benefits Expense \$6,690,521 \$4,584,382 \$5,545,236 3 J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense Non-Nursing, Non-Physician Salary Expense \$30,294,911 \$30,093,715 \$29,145,626 1 2 Non-Nursing, Non-Physician Fringe Benefits Expense \$9,103,188 \$9,550,917 \$11,056,564 \$40,202,190 Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense \$39.398.099 \$39.644.632 K. **Total Salary and Fringe Benefits Expense** 1 Total Salary Expense \$54,104,792 \$53,580,272 \$52,662,091 Total Fringe Benefits Expense \$16,257,718 \$17,004,903 \$19,977,878 2 Total Salary and Fringe Benefits Expense \$70,362,510 \$70,585,175 \$72,639,969

GRIFFIN HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (3) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2010 FY 2011 FY 2012 Total Full Time Equivalent Employees (FTEs) L. Total Nursing FTEs 305.0 325.2 357.0 1 2 Total Physician FTEs 64.0 45.9 45.0 3 Total Non-Nursing, Non-Physician FTEs 589.0 569.5 571.0 958.0 940.6 973.0 Total Full Time Equivalent Employees (FTEs) Μ. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$61,198 \$61,521 \$54,612 Nursing Fringe Benefits Expense per FTE \$18,389 \$19,525 \$20,718 2 3 Total Nursing Salary and Fringe Benefits Expense per FTE \$79,587 \$81,046 \$75,329 N. Physician Salary and Fringe Expense per FTE Physician Salary Expense per FTE \$80,385 \$75,816 \$89,337 1 Physician Fringe Benefits Expense per FTE \$24,155 \$24,062 \$33,891 2 Total Physician Salary and Fringe Benefits Expense per FTE \$104,539 \$99,878 \$123,227 3 Ο. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE Non-Nursing, Non-Physician Salary Expense per FTE \$51,434 \$52,842 \$51,043 1 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$19,364 2 \$15,455 \$16,771 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE 3 \$66,890 \$69,613 \$70,407 Ρ. Total Salary and Fringe Benefits Expense per FTE Total Salary Expense per FTE \$56,477 \$56,964 \$54,123 1 Total Fringe Benefits Expense per FTE \$16,970 \$18,079 \$20,532 2 Total Salary and Fringe Benefits Expense per FTE \$73,447 \$75,043 \$74,656 3 Total Salary and Fringe Ben. Expense per Statistic Total Salary and Fringe Benefits Expense per Patient Day \$2,105 \$2,237 \$2,477 \$9,419 \$10,285 2 Total Salary and Fringe Benefits Expense per Discharge \$9,115 3 Total Salary and Fringe Benefits Expense per EPD \$1,021 \$1,061 \$1,097 Total Salary and Fringe Benefits Expense per ED \$4,423 \$4,466 \$4,556 4 Total Salary and Fringe Benefits Expense per CMAEPD \$934 \$964 \$967 5 \$4,058 Total Salary and Fringe Benefits Expense per CMAED \$4,044 \$4,015