CT CHILDREN'S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

DEDODE 400	LICODITAL	DALANOE OUEET INCODIA	TIOLI
KEPOK I 100 -	HOSPITAL	BALANCE SHEET INFORMA	HON

	REPORT 100 - HOSPITAL BA	LANCE SHEET INFOR	RMATION		
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
l.	<u>ASSETS</u>				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$482,737	\$1,782,072	\$1,299,335	269%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$29,412,780	\$27,453,944	(\$1,958,836)	-7%
4	Current Assets Whose Use is Limited for Current Liabilities	\$10,408,581	\$17,008,322	\$6,599,741	63%
5	Due From Affiliates	\$6,701,228	\$1,645,518	(\$5,055,710)	-75%
6	Due From Third Party Payers	\$4,899,895	\$0	(\$4,899,895)	-100%
7	Inventories of Supplies	\$655,745	\$1,056,206	\$400,461	61%
8	Prepaid Expenses	\$2,245,764	\$2,365,218	\$119,454	5%
9	Other Current Assets	\$6,186,504	\$7,343,034	\$1,156,530	19%
	Total Current Assets	\$60,993,234	\$58,654,314	(\$2,338,920)	-4%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$75,705,081	\$79,200,328	\$3,495,247	5%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$75,705,081	\$79,200,328	\$3,495,247	5%
5	Interest in Net Assets of Foundation	\$87,705,125	\$97,605,124	\$9,899,999	11%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$27,483,112	\$16,103,813	(\$11,379,299)	-41%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$182,172,976	\$200,246,497	\$18,073,521	10%
2	Less: Accumulated Depreciation	\$93,582,827	\$104,192,282	\$10,609,455	11%
	Property, Plant and Equipment, Net	\$88,590,149	\$96,054,215	\$7,464,066	8%
3	Construction in Progress	\$19,750,929	\$29,060,602	\$9,309,673	47%
	Total Net Fixed Assets	\$108,341,078	\$125,114,817	\$16,773,739	15%
	Total Assets	\$360,227,630	\$376,678,396	\$16,450,766	5%
II.	<u>LIABILITIES AND NET ASSETS</u>				
A.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$26,273,345	\$32,601,731	\$6,328,386	24%
2	Salaries, Wages and Payroll Taxes	\$11,564,942	\$11,973,983	\$409,041	4%

CT CHILDREN'S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2013 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION** (4) (1) (2) (3) (6) (5) FY 2012 FY 2013 AMOUNT LINE DESCRIPTION DIFFERENCE DIFFERENCE **ACTUAL ACTUAL** Due To Third Party Payers \$2,965,182 \$9,819,700 \$6,854,518 231% Due To Affiliates \$61,449 \$1,178,794 \$1,117,345 1818% Current Portion of Long Term Debt \$1,215,000 \$1,280,000 \$65,000 5% Current Portion of Notes Payable \$3,874,342 \$5,435,264 \$1,560,922 40% Other Current Liabilities -24% \$66,507 \$50,298 (\$16,209)

\$46,020,767

\$39,315,000

\$16,628,802

\$55,943,802

\$19,026,898

\$29,898,238

\$104,868,938

\$96,684,590

\$20,313,398

\$92,339,937

\$209,337,925

\$360,227,630

\$0

\$62,339,770

\$38,035,000

\$25,153,377

\$63,188,377

\$8,357,282

\$23,660,838

\$95.206.497

\$101,387,989

\$21,637,126

\$96,107,014

\$219,132,129

\$376,678,396

\$0

\$16,319,003

(\$1,280,000)

\$8,524,575

\$7,244,575

(\$10,669,616)

(\$6,237,400)

(\$9,662,441)

\$4,703,399

\$1,323,728

\$3,767,077

\$9,794,204

\$16,450,766

\$0

35%

-3%

51%

13%

-56%

-21%

-9%

0%

5%

7% 4%

5%

5%

Total Current Liabilities

Total Long Term Debt

Accrued Pension Liability

Other Long Term Liabilities

Total Long Term Liabilities

Unrestricted Net Assets or Equity

Temporarily Restricted Net Assets

Permanently Restricted Net Assets

Total Liabilities and Net Assets

Bonds Payable (Net of Current Portion)

Notes Payable (Net of Current Portion)

Interest in Net Assets of Affiliates or Joint Ventures

B. Long Term Debt:

Net Assets:

Total Net Assets

1

3

	CT CHILDREN'S MEDICAL CENTER					
	TWELVE M	ONTHS ACTUAL FII	LING			
		SCAL YEAR 2013				
	REPORT 150 - HOSPITAL STA	ATEMENT OF OPER	ATIONS INFORMA	TION		
(1)	(2)	(3)	(4)	(5)	(6)	
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE	
LIIVL	<u>DECOMITION</u>	AOTOAL	AOTOAL	DITTERENCE	DITTERENCE	
A.	Operating Revenue:					
1	Total Gross Patient Revenue	\$506,581,501	\$574,813,438	\$68,231,937	13%	
2	Less: Allowances	\$270,274,469	\$323,934,980	\$53,660,511	20%	
3	Less: Charity Care	\$710,025	\$1,431,441	\$721,416	102%	
4	Less: Other Deductions	\$4,399,372	\$5,586,749	\$1,187,377	27%	
	Total Net Patient Revenue	\$231,197,635	\$243,860,268	\$12,662,633	5%	
5	Provision for Bad Debts	\$0	\$4,545,394	\$4,545,394	0%	
	Net Patient Service Revenue less provision for bad debts	\$231,197,635	\$239,314,874	\$8,117,239	4%	
6	Other Operating Revenue	\$7,522,637	\$3,079,721	(\$4,442,916)	-59%	
7	Net Assets Released from Restrictions	\$12,253,353	\$14,927,504	\$2,674,151	22%	
	Total Operating Revenue	\$250,973,625	\$257,322,099	\$6,348,474	3%	
В.	Operating Expenses:					
1	Salaries and Wages	\$98,472,704	\$107,630,278	\$9,157,574	9%	
2	Fringe Benefits	\$26,242,270	\$31,288,195	\$5,045,925	19%	
3	Physicians Fees	\$9,842,568	\$11,600,355	\$1,757,787	18%	
4	Supplies and Drugs	\$16,627,144	\$17,770,696	\$1,143,552	7%	
5	Depreciation and Amortization	\$10,408,276	\$11,801,840	\$1,393,564	13%	
6	Bad Debts	\$4,548,780	\$0	(\$4,548,780)	-100%	
7	Interest Expense	\$910,866	\$1,294,274	\$383,408	42%	
8	Malpractice Insurance Cost	\$5,072,074	\$870,596	(\$4,201,478)	-83%	
9	Other Operating Expenses	\$79,537,363	\$85,537,607	\$6,000,244	8%	
	Total Operating Expenses	\$251,662,045	\$267,793,841	\$16,131,796	6%	
	Income/(Loss) From Operations	(\$688,420)	(\$10,471,742)	(\$9,783,322)	1421%	
C.	Non-Operating Revenue:					
1	Income from Investments	\$19,597,315	\$10,804,821	(\$8,792,494)	-45%	
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%	
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%	
	Total Non-Operating Revenue	\$19,597,315	\$10,804,821	(\$8,792,494)	-45%	
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$18,908,895	\$333,079	(\$18,575,816)	-98%	
	Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%	

	CT CHILE	OREN`S MEDICAL CE	NTER		
	TWELVE	MONTHS ACTUAL F	FILING		
	F	ISCAL YEAR 2013			
	REPORT 150 - HOSPITAL S	TATEMENT OF OPE	RATIONS INFORM	ATION	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$18,908,895	\$333,079	(\$18,575,816)	-98%
	Principal Payments	\$4,530,551	\$4,463,925	(\$66,626)	-1%

		<u> </u>		,	
	CT CUII I	DREN'S MEDICAL CEN	ITED		
		MONTHS ACTUAL FIL			
			LING		
		ISCAL YEAR 2013		00 01/ 041/50	
-	REPORT 165 - HOSPITAL GROSS RE	EVENUE, NET REVENU	JE AND STATISTIC	CS BY PAYER	I
443		(0)	40	(=)	(2)
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	GROSS REVENUE BY PAYER				
Α.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$386,168	\$776,456	\$390,288	101%
2	MEDICARE MANAGED CARE	\$0	\$0	\$0	0%
3	MEDICAID	\$131,205,858	\$181,180,463	\$49,974,605	38%
4	MEDICAID MANAGED CARE	\$30,327,937	\$0	(\$30,327,937)	-100%
5	CHAMPUS/TRICARE	\$3,756,316	\$4,138,152	\$381,836	10%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$131,043,122	\$158,463,264	\$27,420,142	21%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$1,742,334	\$1,678,321	(\$64,013)	-4%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$298,461,735	\$346,236,656	\$47,774,921	16%
B.	OUTPATIENT GROSS REVENUE	. , ,	. , , ,	. , ,	
1	MEDICARE TRADITIONAL	\$110,788	\$267,448	\$156,660	141%
2	MEDICARE MANAGED CARE	\$0	\$0	\$0	0%
3	MEDICAID	\$81,999,225	\$115,542,605	\$33,543,380	41%
4	MEDICAID MANAGED CARE	\$23,600,889	\$0	(\$23,600,889)	-100%
5	CHAMPUS/TRICARE	\$1,279,360	\$1,309,026	\$29,666	2%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$98,277,619	\$108,761,195	\$10,483,576	11%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$2,851,885	\$2,696,509	(\$155,376)	-5%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$208,119,766	\$228,576,783	\$20,457,017	10%
C.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$496,956	\$1,043,904	\$546,948	110%
2	MEDICARE MANAGED CARE	\$0	\$0	\$0	0%
3	MEDICAID	\$213,205,083	\$296,723,068	\$83,517,985	39%
4	MEDICAID MANAGED CARE	\$53,928,826	\$0	(\$53,928,826)	-100%
5	CHAMPUS/TRICARE	\$5,035,676	\$5,447,178	\$411,502	8%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$229,320,741	\$267,224,459	\$37,903,718	17%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$4,594,219	\$4,374,830	(\$219,389)	-5%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$506,581,501	\$574,813,439	\$68,231,938	13%
		φυσυ,συ 1,συ 1	Ψυ, τ,υ ιυ,τυσ	ψ00,201,000	13/
II.	NET REVENUE BY PAYER				
A.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$2,274,166	\$2,018,068	(\$256,098)	-11%
2	MEDICARE MANAGED CARE	\$0	\$0	\$0	0%
3	MEDICAID	\$40,675,822	\$52,573,260	\$11,897,438	29%
4	MEDICAID MANAGED CARE	\$11,245,874	\$0 \$0	(\$11,245,874)	-100%
5	CHAMPUS/TRICARE	\$1,608,353	\$1,721,748	\$113,395	7%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
-		ΨΟ	ΨΟ	ΨΟ	, J

	CT CH	IILDREN`S MEDICAL CEN	ITER		
	TWEL	VE MONTHS ACTUAL FIL	ING		
		FISCAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS	REVENUE, NET REVENU	JE AND STATISTIC	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$81,002,817	\$95,358,999	\$14,356,182	18%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$532,200	\$373,932	(\$158,268)	-30%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$137,339,232	\$152,046,007	\$14,706,775	11%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$677,337	\$773,310	\$95,973	14%
2	MEDICARE MANAGED CARE	\$0	\$0	\$0	0%
3	MEDICAID	\$25,086,738	\$24,040,484	(\$1,046,254)	-4%
4	MEDICAID MANAGED CARE	\$7,337,657	\$0	(\$7,337,657)	-100%
5	CHAMPUS/TRICARE	\$657,602	\$863,957	\$206,355	31%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$49,034,080	\$54,037,620	\$5,003,540	10%
8 9	WORKER'S COMPENSATION	\$0	\$0	\$0 (\$440,030)	0%
10	SELF- PAY/UNINSURED SAGA	\$871,115	\$452,476 \$0	(\$418,639) \$0	-48%
11	OTHER	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
- 1 1	TOTAL OUTPATIENT NET REVENUE	\$83,664,529	\$80,167,847	(\$3,496,682)	-4%
	TOTAL COTT ATTENT NET REVENCE	\$63,004,329	\$60,10 <i>1</i> ,04 <i>1</i>	(\$3,490,002)	-4 /0
c.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$2,951,503	\$2,791,378	(\$160,125)	-5%
2	MEDICARE MANAGED CARE	\$0	\$0	\$0	0%
3	MEDICAID	\$65,762,560	\$76,613,744	\$10,851,184	17%
4	MEDICAID MANAGED CARE	\$18,583,531	\$0	(\$18,583,531)	-100%
5	CHAMPUS/TRICARE	\$2,265,955	\$2,585,705	\$319,750	14%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$130,036,897	\$149,396,619	\$19,359,722	15%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$1,403,315	\$826,408	(\$576,907)	-41%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$221,003,761	\$232,213,854	\$11,210,093	5%
	TOTAL NET REVENUE	Ψ221,000,701	ΨΕΟΣ,Σ10,004	Ψ11,210,030	370
III.	STATISTICS BY PAYER				
Α.	DISCHARGES				
1	MEDICARE TRADITIONAL	3	20	17	567%
2	MEDICARE MANAGED CARE	0	0	0	0%
3	MEDICAID	2,642	3,357	715	27%
4	MEDICAID MANAGED CARE	750	0	(750)	-100%
5	CHAMPUS/TRICARE	53	70	17	32%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	3,122	2,928	(194)	-6%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	72	47	(25)	-35%
10	SAGA	0	0	0	0%
11	OTHER TOTAL PROPERTY.	0	0	0	0%
<u> </u>	TOTAL DISCHARGES	6,642	6,422	(220)	-3%
	PATIENT DAYS				
1	MEDICARE TRADITIONAL	32	83	51	159%
2	MEDICARE MANAGED CARE	0	0	0	0%
3	MEDICAID	20,066	24,204	4,138	21%

				T	
	CT CHILDRE	N`S MEDICAL CEN	TER		
· <u></u>		ONTHS ACTUAL FIL			
	FISC	CAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS REVE	NUE, NET REVENU	IE AND STATISTIC	S BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
(1)	(2)			` ′	
	DECORIDE	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
4	MEDICAID MANAGED CARE	4,393	0	(4,393)	-100%
5	CHAMPUS/TRICARE	476	597	121	25%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	19,237	21,034	1,797	9%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	245	189	(56)	-23%
10	SAGA	0	0	0	0%
11	OTHER TOTAL PATIENT DAYS	0 44,449	0 46,107	0 1,658	0% 4%
	OUTPATIENT VISITS	44,443	40,107	1,036	4 /0
1	MEDICARE TRADITIONAL	84	117	33	39%
2	MEDICARE MANAGED CARE	0	0	0	0%
3	MEDICAID	64,792	83,489	18.697	29%
4	MEDICAID MANAGED CARE	18,694	0	(18,694)	-100%
5	CHAMPUS/TRICARE	778	925	147	19%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	75,441	77,827	2,386	3%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	2,147	1,761	(386)	-18%
10 11	SAGA OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	161,936	164,119	2,183	0% 1%
	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$19,793	\$33,787	\$13,994	71%
2	MEDICARE MANAGED CARE	\$0	\$0	\$0	0%
3	MEDICAID	\$27,933,571	\$50,563,947	\$22,630,376	81%
4	MEDICAID MANAGED CARE	\$9,213,890	\$0	(\$9,213,890)	-100%
5	CHAMPUS/TRICARE	\$316,143	\$458,456	\$142,313	45%
6 7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	\$0 \$21,308,725	\$0 \$31,639,009	\$0 \$10,330,284	0%
8	WORKER'S COMPENSATION	\$21,306,725	\$0	\$10,330,264	48% 0%
9	SELF- PAY/UNINSURED	\$1,825,220	\$1,438,339	(\$386,881)	-21%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$60,617,342	\$84,133,538	\$23,516,196	39%
	EMERGENCY DEPARTMENT OUTPATIENT NET				
	REVENUE MEDICARE TRADITIONAL	CO 040	¢4.4.404	ውር 070	740/
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$8,313 \$0	\$14,191 \$0	\$5,878 \$0	71% 0%
	MEDICAID	\$4,750,177	\$10,348,424	\$5,598,247	118%
	MEDICAID MEDICAID MANAGED CARE	\$2,114,469	\$10,340,424	(\$2,114,469)	-100%
3			T -		45%
3 4			\$302.581	\$93.926 I	1 0/0
3	CHAMPUS/TRICARE COMMERCIAL INSURANCE	\$208,655 \$0	\$302,581 \$0	\$93,926 \$0	
3 4 5	CHAMPUS/TRICARE	\$208,655		·	0% 43%
3 4 5 6 7 8	CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	\$208,655 \$0 \$13,257,611 \$0	\$0 \$18,950,202 \$0	\$0 \$5,692,591 \$0	0% 43% 0%
3 4 5 6 7	CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	\$208,655 \$0 \$13,257,611	\$0 \$18,950,202	\$0 \$5,692,591	0% 43% 0% -22% 0%

OFFICE	OF HEALTH CARE ACCESS TWELVE	MONTHS ACTUAL FILING	1	CT CHILDS	REN'S MEDICAL CENTE
	0.02	EN'S MEDICAL CEN	·· - ··		
		ONTHS ACTUAL FIL	LING		
		CAL YEAR 2013		00 01/ 041/50	
	REPORT 165 - HOSPITAL GROSS REVI	ENUE, NET REVENU	JE AND STATISTIC	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
	()	FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$21,344,365	\$30,395,355	\$9,050,990	42%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	13	11	(2)	-15%
2	MEDICARE MANAGED CARE	0	0	0	0%
3	MEDICAID	26,984	35,126	8,142	30%
4	MEDICAID MANAGED CARE	7,824	0	(7,824)	-100%
5	CHAMPUS/TRICARE	277	285	8	3%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	16,070	15,773	(297)	-2%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	1,445	1,146	(299)	-21%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	52,613	52,341	(272)	-1%

CT CHILDREN'S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
1.	OF ERATING EXITENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$30,614,095	\$29,967,685	(\$646,410)	-2%
2	Physician Salaries	\$0	\$0	\$0	0%
3	Non-Nursing, Non-Physician Salaries	\$67,858,609	\$77,662,593	\$9,803,984	14%
	Total Salaries & Wages	\$98,472,704	\$107,630,278	\$9,157,574	9%
B.	Fringe Benefits:				
1	Nursing Fringe Benefits	\$8,158,437	\$8,711,626	\$553,189	7%
2	Physician Fringe Benefits	\$0	\$0,711,020	Ψ555,169 \$0	0%
3	Non-Nursing, Non-Physician Fringe Benefits	\$18,083,833	\$22,576,569	\$4,492,736	25%
	Total Fringe Benefits	\$26,242,270	\$31,288,195	\$5,045,925	19%
C.	Contractual Labor Fees:				
1	Nursing Fees	\$0	\$0	\$0	0%
2	Physician Fees	\$9,842,568	\$11,600,355	\$1,757,787	18%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	Total Contractual Labor Fees	\$9,842,568	\$11,600,355	\$1,757,787	18%
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies	\$10,593,929	\$11,311,205	\$717,276	7%
2	Pharmaceutical Costs	\$6,033,215	\$6,459,491	\$426,276	7%
	Total Medical Supplies and Pharmaceutical Cost	\$16,627,144	\$17,770,696	\$1,143,552	7%
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$4,681,798	\$4,723,283	\$41,485	1%
2	Depreciation-Building Depreciation-Equipment	\$5,346,505	\$6,698,458	\$1,351,953	25%
3	Amortization	\$379,973	\$380,099	\$126	0%
	Total Depreciation and Amortization	\$10,408,276	\$11,801,840	\$1,393,564	13%
	· ·				
F.	Bad Debts:	* 4 * 40 * * 20	40	(4.540.500)	4000
1	Bad Debts	\$4,548,780	\$0	(\$4,548,780)	-100%
G.	Interest Expense:				
1	Interest Expense	\$910,866	\$1,294,274	\$383,408	42%
H.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$5,072,074	\$870,596	(\$4,201,478)	-83%
I.	Utilities:				
1	Water	\$135,788	\$146,604	\$10,816	8%
2	Natural Gas	\$577,148	\$584,708	\$7,560	1%
3	Oil	\$0	\$0	\$0	0%
4	Electricity	\$1,704,838	\$1,549,906	(\$154,932)	-9%
5	Telephone	\$262,323	\$284,059	\$21,736	8%
6	Other Utilities	\$43,286	\$42,515	(\$771)	-2%
	Total Utilities	\$2,723,383	\$2,607,792	(\$115,591)	-4%
	Business Funences				
J	Business Expenses:	CO 40 000	Ф000 000	(004,000)	20/
1	Accounting Fees	\$340,809 \$540,741	\$308,923	(\$31,886) \$275,621	
3	Legal Fees Consulting Fees	\$549,741 \$2,943,500	\$825,362 \$4,804,853	\$275,621 \$1,861,353	50% 63%

CT CHILDREN'S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

		<u> </u>			
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
4	Dues and Membership	\$854,188	\$950,559	\$96,371	11%
5	Equipment Leases	\$581,695	\$628,079	\$46,384	8%
6	Building Leases	\$7,410,032	\$7,908,358	\$498,326	7%
7	Repairs and Maintenance	\$2,024,760	\$2,317,322	\$292,562	14%
8	Insurance	\$330,455	\$467,389	\$136,934	41%
9	Travel	\$294,675	\$222,349	(\$72,326)	-25%
10	Conferences	\$659,564	\$564,441	(\$95,123)	-14%
11	Property Tax	\$73,298	\$52,739	(\$20,559)	-28%
12	General Supplies	\$2,960,646	\$2,786,930	(\$173,716)	-6%
13	Licenses and Subscriptions	\$83,590	\$111,647	\$28,057	34%
14	Postage and Shipping	\$121,834	\$121,114	(\$720)	-1%
15	Advertising	\$1,053,461	\$1,043,566	(\$9,895)	-1%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$0	\$0	\$0	0%
20	Lab Fees / Red Cross charges	\$0	\$0	\$0	0%
21	Billing & Collection / Bank Fees	\$0	\$0	\$0	0%
22	Recruiting / Employee Education & Recognition	\$0	\$0	\$0	0%
23	Laundry / Linen	\$0	\$0	\$0	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$0	\$0	0%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$0	\$0	\$0	0%
	Total Business Expenses	\$20,282,248	\$23,113,631	\$2,831,383	14%
1/	Other On serting Frances				
K.	Other Operating Expense:	ФЕС FO4 700	ФEО 040 404	©2 204 452	00/
1	Miscellaneous Other Operating Expenses	\$56,531,732	\$59,816,184	\$3,284,452	6%
	Total Operating Expenses - All Expense Categories*	\$251,662,045	\$267,793,841	\$16,131,796	6%
	*AK.The total operating expenses amount above mus	st agree with the to	otal operating expe	enses amount on R	eport 150
II.	OPERATING EXPENSE BY DEPARTMENT				
Α	Conoral Services				
A .	General Services:	¢26.270.605	¢24 400 470	(\$1.070.E4E)	70/
1	General Administration	\$26,379,685	\$24,409,170	(\$1,970,515)	-7%
2	General Accounting	\$2,712,703	\$2,349,300	(\$363,403)	-13%
3	Patient Billing & Collection	\$2,538,101	\$3,071,206	\$533,105 (\$134,644)	21%
4	Admitting / Registration Office	\$2,157,406	\$2,025,762	(\$131,644)	-6%
5	Data Processing	\$6,482,618	\$6,640,231	\$157,613	2%
6	Communications	\$782,700	\$817,414	\$34,714	4%
7	Personnel Public Palations	\$3,707,231	\$3,144,580	(\$562,651)	-15%
8	Public Relations	\$1,617,765	\$1,506,722	(\$111,043)	-7%
9	Purchasing	\$653,737	\$796,958	\$143,221	22%
10	Dietary and Cafeteria	\$3,618,787	\$3,127,120	(\$491,667)	-14%
11	Housekeeping	\$3,339,364	\$2,794,551	(\$544,813)	-16%
12	Laundry & Linen	\$14,558	\$6,333	(\$8,225)	-56%
13	Operation of Plant	\$6,874,200	\$6,467,858	(\$406,342)	-6%
14	Security	\$2,748,547	\$2,708,372	(\$40,175)	-1%
15	Repairs and Maintenance	\$434,361	\$502,799	\$68,438	16%
16	Central Sterile Supply	\$792,581	\$690,423	(\$102,158)	-13%

CT CHILDREN'S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
17	Pharmacy Department	\$8,721,486	\$8,965,278	\$243,792	3%
18	Other General Services	\$2,309,545	\$1,771,706	(\$537,839)	-23%
	Total General Services	\$75,885,375	\$71,795,783	(\$4,089,592)	-5%
B.	Professional Services:				
1	Medical Care Administration	\$4,773,788	\$4,364,272	(\$409,516)	-9%
2	Residency Program	\$10,782,504	\$11,709,928	\$927,424	9%
3	Nursing Services Administration	\$1,217,439	\$1,587,136	\$369,697	30%
4	Medical Records	\$2,171,272	\$2,206,022	\$34,750	2%
5	Social Service	\$2,420,239	\$2,169,316	(\$250,923)	-10%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$21,365,242	\$22,036,674	\$671,432	3%
				·	
C.	Special Services:				
1	Operating Room	\$10,830,642	\$10,822,247	(\$8,395)	0%
2	Recovery Room	\$0	\$0	\$0	0%
3	Anesthesiology	\$1,041,115	\$875,479	(\$165,636)	-16%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$4,379,406	\$4,065,901	(\$313,505)	-7%
6	Diagnostic Ultrasound	\$874,138	\$732,544	(\$141,594)	-16%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$0	\$0	\$0	0%
9	CT Scan	\$818,629	\$740,329	(\$78,300)	-10%
10	Laboratory	\$4,850,344	\$5,443,189	\$592,845	12%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$476,360	\$587,058	\$110,698	23%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$537,052	\$478,511	(\$58,541)	-11%
15	Occupational Therapy	\$1,739,174	\$1,343,449	(\$395,725)	-23%
16	Speech Pathology	\$1,560,649	\$1,313,075	(\$247,574)	-16%
17	Audiology	\$1,665,588	\$1,361,301	(\$304,287)	-18%
18	Respiratory Therapy	\$3,986,278	\$3,435,678	(\$550,600)	-14%
19	Pulmonary Function	\$629,571	\$512,681	(\$116,890)	-19%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,225,139	\$1,697,581	\$472,442	39%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$9,515,239	\$7,969,205	(\$1,546,034)	-16%
25	MRI	\$832,880	\$696,901	(\$135,979)	-16%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$256,292	\$265,549	\$9,257	4%
29	Sleep Center	\$257,193	\$285,172	\$27,979	11%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$543,767	\$628,217	\$84,450	16%
32	Occupational Therapy / Physical Therapy	\$3,621,085	\$3,012,586	(\$608,499)	-17%
33	Dental Clinic	\$0	\$0	(ψουσ, 433) \$0	0%
34	Other Special Services	\$2,330,332	\$2,265,369	(\$64,963)	-3%
	Total Special Services	\$51,970,873	\$48,532,022	(\$3,438,851)	- 7%
	. c.m. oposiai ou riodo	ψο 1,010,010	ψ 10,002,022	(ψυ, που, συ 1)	1 70
D.	Routine Services:				
1	Medical & Surgical Units	\$0	\$0	\$0	0%
2	Intensive Care Unit	\$4,356,017	\$5,803,919	\$1,447,902	33%
3	Coronary Care Unit	\$4,330,017	\$0,803,919	\$1,447,902	0%
	Toolonary Care Offit	φυ	φυ	φυ	U70

CT CHILDREN'S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

iatric Unit tric Unit nity Unit orn Nursery Unit etal ICU bilitation Unit	\$0 \$19,511,587 \$0 \$19,511,587 \$0 \$0	FY 2013 <u>ACTUAL</u> \$0 \$15,199,975 \$0 \$0	### AMOUNT DIFFERENCE \$0 (\$4,311,612)	% DIFFERENCE 0% -22% 0%
iatric Unit tric Unit nity Unit orn Nursery Unit atal ICU	\$0 \$19,511,587 \$0 \$0	\$0 \$15,199,975 \$0	\$0 (\$4,311,612)	
tric Unit nity Unit orn Nursery Unit atal ICU	\$19,511,587 \$0 \$0	\$15,199,975 \$0	(\$4,311,612)	-22%
tric Unit nity Unit orn Nursery Unit atal ICU	\$19,511,587 \$0 \$0	\$15,199,975 \$0	(\$4,311,612)	-22%
nity Unit orn Nursery Unit atal ICU	\$0 \$0	\$0		
orn Nursery Unit atal ICU	\$0	7 -	\$0	0%
atal ICU	7.	\$0		
	\$20,02E,00E	ΨΟ	\$0	0%
silitation Init	\$28,825,005	\$28,622,619	(\$202,386)	-1%
dilitation onit	\$0	\$0	\$0	0%
latory Surgery	\$4,216,414	\$3,306,835	(\$909,579)	-22%
Care	\$0	\$0	\$0	0%
tient Clinics	\$582,787	\$755,279	\$172,492	30%
Routine Services	\$0	\$0	\$0	0%
Routine Services	\$57,491,810	\$53,688,627	(\$3,803,183)	-7%
Departments:				
llaneous Other Departments	\$44,948,745	\$71,740,735	\$26,791,990	60%
Operating Expenses - All Departments*	\$251,662,045	\$267,793,841	\$16,131,796	6%
. The total operating expenses amount above	must agree with the to	otal operating exp	enses amount on l	Report 150.
F	Routine Services Routine Services Departments: aneous Other Departments Departments Departments*	Routine Services \$0 Routine Services \$57,491,810 Departments: aneous Other Departments \$44,948,745 Departments \$251,662,045	Routine Services \$0 \$0 Routine Services \$57,491,810 \$53,688,627 Departments: \$44,948,745 \$71,740,735 Operating Expenses - All Departments* \$251,662,045 \$267,793,841	Routine Services \$0 \$0 \$0 Routine Services \$57,491,810 \$53,688,627 (\$3,803,183) Departments: aneous Other Departments \$44,948,745 \$71,740,735 \$26,791,990

	CT CHILDR	EN'S MEDICAL CENTER						
	TWELVE MONTHS ACTUAL FILING							
	FISCAL YEAR 2013							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(4)	(0)	(0)	(4)	(E)				
(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) ACTUAL				
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013				
	<u> </u>							
A.	Statement of Operations Summary							
1	Total Net Patient Revenue	\$202,447,507	\$231,197,635	\$239,314,874				
2	Other Operating Revenue	15,994,983	19,775,990	18,007,225				
3	Total Operating Revenue	\$218,442,490	\$250,973,625	\$257,322,099				
4	Total Operating Expenses	212,457,955	251,662,045	267,793,841				
5	Income/(Loss) From Operations	\$5,984,535	(\$688,420)	(\$10,471,742)				
6	Total Non-Operating Revenue	9,798,919	19,597,315	10,804,821				
7	Excess/(Deficiency) of Revenue Over Expenses	\$15,783,454	\$18,908,895	\$333,079				
В.	Profitability Summary							
1	Hospital Operating Margin	2.62%	-0.25%	-3.91%				
2	Hospital Non Operating Margin	4.29%	7.24%	4.03%				
3	Hospital Total Margin	6.92%	6.99%	0.12%				
4	Income/(Loss) From Operations	\$5,984,535	(\$688,420)	(\$10,471,742)				
5	Total Operating Revenue	\$218,442,490	\$250,973,625	\$257,322,099				
6	Total Non-Operating Revenue	\$9,798,919	\$19,597,315	\$10,804,821				
7	Total Revenue	\$228,241,409	\$270,570,940	\$268,126,920				
8	Excess/(Deficiency) of Revenue Over Expenses	\$15,783,454	\$18,908,895	\$333,079				
C.	Net Assets Summary							
1	Hospital Unrestricted Net Assets	\$82,917,999	\$96,684,590	\$101,387,989				
2	Hospital Total Net Assets	\$187,010,417	\$209,337,925	\$219,132,129				
3	Hospital Change in Total Net Assets	\$2,788,429	\$22,327,508	\$9,794,204				
4	Hospital Change in Total Net Assets %	101.5%	11.9%	4.7%				
D.	Cost Data Summary							
1	Ratio of Cost to Charges	0.46	0.47	0.44				
2	Total Operating Expenses	\$212,457,955	\$251,662,045	\$267,793,841				
3	Total Gross Revenue	\$434,869,570	\$506,581,501	\$574,813,439				
4	Total Other Operating Revenue	\$26,904,783	\$29,826,230	\$28,586,425				

	CT CHILD	REN`S MEDICAL CENTER					
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
	ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	FY 2011	FY 2012	<u>FY 2013</u>				
5	Private Payment to Cost Ratio	1.27	1.21	1.26			
6	Total Non-Government Payments	\$118,024,554	\$131,440,212	\$150,223,027			
7	Total Uninsured Payments	\$586,310	\$1,403,315	\$826,408			
8	Total Non-Government Charges	\$203,476,464	\$233,914,960	\$271,599,289			
9	Total Uninsured Charges	\$3,235,240	\$4,594,219	\$4,374,830			
10	Medicare Payment to Cost Ratio	15.71	12.66	6.03			
11	Total Medicare Payments	\$2,989,383	\$2,951,503	\$2,791,378			
12	Total Medicare Charges	\$413,619	\$496,956	\$1,043,904			
13	Medicaid Payment to Cost Ratio	0.71	0.67	0.58			
14	Total Medicaid Payments	\$74,894,014	\$84,346,091	\$76,613,744			
15	Total Medicaid Charges	\$228,152,899	\$267,133,909	\$296,723,068			
16	Uncompensated Care Cost	\$1,255,628	\$2,467,230	\$2,652,569			
17	Charity Care	\$1,581,301	\$710,025	\$1,431,441			
18	Bad Debts	\$1,147,789	\$4,548,779	\$4,545,394			
19	Total Uncompensated Care	\$2,729,090	\$5,258,804	\$5,976,835			
20	Uncompensated Care % of Total Expenses	0.6%	1.0%	1.0%			
21	Total Operating Expenses	\$212,457,955	\$251,662,045	\$267,793,841			
E.	Liquidity Measures Summary						
1	Current Ratio	1	1	1			
2	Total Current Assets	\$35,880,724	\$60,993,234	\$58,654,314			
3	Total Current Liabilities	\$37,428,215	\$46,020,767	\$62,339,770			
4	Days Cash on Hand	6	1	3			
5	Cash and Cash Equivalents	\$3,472,044	\$482,737	\$1,782,072			
6	Short Term Investments	0	0	0			

	CT CHILDREN'S N	IEDICAL CENTER					
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)			
		ACTUAL	ACTUAL	ACTUAL			
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	FY 2013			
7	Total Cash and Short Term Investments	\$3,472,044	\$482,737	\$1,782,072			
8	Total Operating Expenses	\$212,457,955	\$251,662,045	\$267,793,841			
9	Depreciation Expense	\$10,397,231	\$10,408,276	\$11,801,840			
10	Operating Expenses less Depreciation Expense	\$202,060,724	\$241,253,769	\$255,992,001			
11	Days Revenue in Patient Accounts Receivable	39	49	27			
12	Net Patient Accounts Receivable	\$23,133,138	\$29,412,780	\$27,453,944			
13	Due From Third Party Payers	\$0	\$4,899,895	\$0			
14	Due To Third Party Payers	\$1,261,943	\$2,965,182	\$9,819,700			
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$21,871,195	\$31,347,493	\$17,634,244			
16	Total Net Patient Revenue	\$202,447,507	\$231,197,635	\$239,314,874			
17	Average Payment Period	68	70	89			
18	Total Current Liabilities	\$37,428,215	\$46,020,767	\$62,339,770			
19	Total Operating Expenses	\$212,457,955	\$251,662,045	\$267,793,841			
20	Depreciation Expense	\$10,397,231	\$10,408,276	\$11,801,840			
21	Total Operating Expenses less Depreciation Expense	\$202,060,724	\$241,253,769	\$255,992,001			
F.	Solvency Measures Summary						
1	Equity Financing Ratio	61.7	58.1	58.2			
2	Total Net Assets	\$187,010,417	\$209,337,925	\$219,132,129			
3	Total Assets	\$303,151,254	\$360,227,630	\$376,678,396			
4	Cash Flow to Total Debt Ratio	32.8	28.8	9.7			
5	Excess/(Deficiency) of Revenues Over Expenses	\$15,783,454	\$18,908,895	\$333,079			
6	Depreciation Expense	\$10,397,231	\$10,408,276	\$11,801,840			
7	Excess of Revenues Over Expenses and Depreciation Expense	\$26,180,685	\$29,317,171	\$12,134,919			
8	Total Current Liabilities	\$37,428,215	\$46,020,767	\$62,339,770			
9	Total Long Term Debt	\$42,375,978	\$55,943,802	\$63,188,377			
10	Total Current Liabilities and Total Long Term Debt	\$79,804,193	\$101,964,569	\$125,528,147			

	CT CHILDREN	S MEDICAL CENTER						
	TWELVE MONTHS ACTUAL FILING							
	FISC	FISCAL YEAR 2013						
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	FY 2013				
11	Long Term Debt to Capitalization Ratio	18.5	21.1	22.4				
12	Total Long Term Debt	\$42,375,978	\$55,943,802	\$63,188,377				
13	Total Net Assets	\$187,010,417	\$209,337,925	\$219,132,129				
14	Total Long Term Debt and Total Net Assets	\$229,386,395	\$265,281,727	\$282,320,506				
15	Debt Service Coverage Ratio	0.6	5.6	2.3				
16	Excess Revenues over Expenses	15,783,454	\$18,908,895	\$333,079				
17	Interest Expense	1,187,248	\$910,866	\$1,294,274				
18	Depreciation and Amortization Expense	10,397,231	\$10,408,276	\$11,801,840				
19	Principal Payments	41,251,348	\$4,530,551	\$4,463,925				
G.	Other Financial Ratios							
20	Average Age of Plant	8.1	9.0	8.8				
21	Accumulated Depreciation	84,352,993	93,582,827	104,192,282				
22	Depreciation and Amortization Expense	10,397,231	10,408,276	11,801,840				
Н.	Utilization Measures Summary							
1	Patient Days	37,834	44,449	46,107				
2	Discharges	6,203	6,642	6,422				
3	ALOS	6.1	6.7	7.2				
4	Staffed Beds	182	182	182				
5	Available Beds	-	187	187				
6	Licensed Beds	187	187	187				
7	Occupancy of Staffed Beds	57.0%	66.9%	69.4%				
8	Occupancy of Available Beds	55.4%	65.1%	67.6%				
9	Full Time Equivalent Employees	1,229.2	1,331.9	1,429.7				
I.	Hospital Gross Revenue Payer Mix Percentage							
1	Non-Government Gross Revenue Payer Mix Percentage	46.0%	45.3%	46.5%				
2	Medicare Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.2%				

	CT CHILDREN'S	MEDICAL CENTER					
	TWELVE MONTH	S ACTUAL FILING					
	FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
	N_1 = N,1 100 1100 117,12 110,110 1						
(1)	(2)	(3)	(4)	(5)			
. ,	·	ACTUAL	ACTUAL	ACTUAL			
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013			
3	Medicaid Gross Revenue Payer Mix Percentage	52.5%	52.7%	51.6%			
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%			
5	Uninsured Gross Revenue Payer Mix Percentage	0.7%	0.9%	0.8%			
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.6%	1.0%	0.9%			
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%			
	, ,						
8	Non-Government Gross Revenue (Charges)	\$200,241,224	\$229,320,741	\$267,224,459			
9	Medicare Gross Revenue (Charges)	\$413,619	\$496,956	\$1,043,904			
10	Medicaid Gross Revenue (Charges)	\$228,152,899	\$267,133,909	\$296,723,068			
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0			
12	Uninsured Gross Revenue (Charges)	\$3,235,240	\$4,594,219	\$4,374,830			
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$2,826,588	\$5,035,676	\$5,447,178			
14	Total Gross Revenue (Charges)	\$434,869,570	\$506,581,501	\$574,813,439			
	J	* - , ,	, ,	+ - , ,			
J.	Hospital Net Revenue Payer Mix Percentage						
1	Non-Government Net Revenue Payer Mix Percentage	59.5%	58.8%	64.3%			
2	Medicare Net Revenue Payer Mix Percentage	1.5%	1.3%	1.2%			
3	Medicaid Net Revenue Payer Mix Percentage	38.0%	38.2%	33.0%			
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%			
5	Uninsured Net Revenue Payer Mix Percentage	0.3%	0.6%	0.4%			
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.7%	1.0%	1.1%			
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%			
8	Non-Government Net Revenue (Payments)	\$117,438,244	\$130,036,897	\$149,396,619			
9	Medicare Net Revenue (Payments)	\$2,989,383	\$2,951,503	\$2,791,378			
10	Medicaid Net Revenue (Payments)	\$74,894,014	\$84,346,091	\$76,613,744			
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0			
12	Uninsured Net Revenue (Payments)	\$586,310	\$1,403,315	\$826,408			
13	CHAMPUS / TRICARE Net Revenue Payments)	\$1,346,637	\$2,265,955	\$2,585,705			
14	Total Net Revenue (Payments)	\$197,254,588	\$221,003,761	\$232,213,854			
			. ,	. ,			
K.	<u>Discharges</u>						
1	Non-Government (Including Self Pay / Uninsured)	2,960	3,194	2,975			
2	Medicare	14	3	20			
3	Medical Assistance	3,177	3,392	3,357			
4	Medicaid	3,177	3,392	3,357			
5	Other Medical Assistance	-	-	-			
6	CHAMPUS / TRICARE	52	53	70			

OFFICE OF	- HEALTH CARE ACCESS TWELVE MON	THS ACTUAL FILING	CT CHILI	DREN 3 MEDICAL CENT				
	CT CHILDREN'S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING							
	F	ISCAL YEAR 2013						
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
(')	(-)	ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013				
7	Uninsured (Included In Non-Government)	50	72	47				
8	Total	6,203	6,642	6,422				
L.	Case Mix Index							
1	Non-Government (Including Self Pay / Uninsured)	1.38540	1.55250	1.67780				
2	Medicare	0.92900	2.55410	1.75450				
3	Medical Assistance	1.34240	1.56580	1.57760				
4	Medicaid	1.34240	1.56580	1.57760				
5	Other Medical Assistance	0.00000	0.00000	0.00000				
6	CHAMPUS / TRICARE	1.37750	1.80800	1.42130				
7	Uninsured (Included In Non-Government)	1.03560	0.94810	1.22210				
8	Total Case Mix Index	1.36228	1.56178	1.62287				
M.	Emergency Department Visits							
1	Emergency Room - Treated and Admitted	3,376	3,365	3,299				
2	Emergency Room - Treated and Discharged	50,112	52,613	52,341				
3	Total Emergency Room Visits	53,488	55,978	55,640				

		MEDICAL CENTER			
		HS ACTUAL FILING YEAR 2013	,		
	REPORT 200 - HOSPITAL MED		CARE ACTIVITY	,	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
1.	MEDIOAKE MANAGED GAKE				
A.	ANTHEM - MEDICARE BLUE 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%
<u>6</u> 7	Patient Days Outpatient Visits (Excludes ED Visits)	0	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%
B.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
<u>4</u> 5	Outpatient Payments	\$0	\$0 0	\$0 0	0% 0%
6	Discharges Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C.	CONNECTICARE, INC.	4.5			
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
<u>3</u>	Outpatient Charges Outpatient Payments	\$0 \$0	\$0	\$0 \$0	0% 0%
5	Discharges	0	\$0 0	90	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%
	LIEAL TUNET OF CONVENTION				
D.	HEALTHNET OF CONNECTICUT	00	# 0	Φ.	001
2	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges	\$0	\$0 \$0	\$0	0%
4	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

	CT CHII DREN'S	MEDICAL CENTER	B		
		MEDICAL CENTEI			
		EAR 2013	,		
	REPORT 200 - HOSPITAL MEDIC		CARE ACTIVITY		
-					
(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2012	FY 2013	AMOÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7 8	Outpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits	0	0	0	0% 0%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	\$0	\$0 \$0	0%
	TOTAL INI ATILITI & COTT ATILITI TATINLINIO	ΨΟ	Ψ	ΨΟ	0 70
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAG	E			
1	Inpatient Charges	<u> </u>	\$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%
	LINITED HEALTHOADE INCHDANCE COMPANY				
G.	UNITED HEALTHCARE INSURANCE COMPANY	ф О	Ф О	(C)	00/
2	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges	\$0 \$0	\$0	\$0	0%
4	Outpatient Charges Outpatient Payments	\$0 \$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%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
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%
<u>8</u> 9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0% 0%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ 0	\$0	0%
-	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	\$0 \$0	\$0 \$0	0%
	TOTAL INI ATILITI & COTTATILITI FATIVILITI	Ψ	Ψ	Ψ	U 70
I.	AETNA				
	1				

		S MEDICAL CENTER			
		ITHS ACTUAL FILING	3		
		L YEAR 2013			
	REPORT 200 - HOSPITAL ME	DICARE MANAGED	CARE ACTIVITY	T	T
(4)	(0)	(0)	(4)	(5)	(0)
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
LIIVE	DECOKII FICH	ACTUAL	AOTOAL	DITTERCE	DITTERENCE
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%
<u> </u>	LULINAANIA				
J.	HUMANA Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges Inpatient Payments	\$0	\$0 \$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
5	Outpatient Payments Discharges	\$0 0	\$0 0	\$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 Outpatient Visits 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 Outpotient Visite (Evaludes ED Visite)	0	0	0	0% 0%
7 8	Outpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$ 0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL IN ATIENT & COTT ATIENT FATMENTS	Ψ	ΨΟ	Ψ0	376
М.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

	ALTH CARE ACCESS TWELVE MON	T		Ci	
	CT CHILDREN'S	MEDICAL CENTER	2		
		IS ACTUAL FILING			
		YEAR 2013			
	REPORT 200 - HOSPITAL MEDI		CARE ACTIVITY	,	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
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	\$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%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$0	\$0	* 0	00
	TOTAL INPATIENT CHARGES TOTAL INPATIENT PAYMENTS	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL INPATIENT PAYMENTS TOTAL OUTPATIENT CHARGES	\$0	\$0 \$0	\$0	0%
	TOTAL OUTPATIENT CHARGES TOTAL OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0	0%
	TOTAL OUTPATIENT PATMENTS TOTAL DISCHARGES	0		20	0%
	TOTAL DISCHARGES TOTAL PATIENT DAYS	0	0	0	0%
	IOTAL FATIENT DATS	"	U	<u> </u>	1 09
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	0	0	0	09
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT		_	_	
	VISITS	0	0	0	0
	TOTAL EMERGENCY DEPARTMENT INPATIENT		_	_	
	ADMISSIONS	0	0	0	00
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0

		EN'S MEDICAL CE			1
		ONTHS ACTUAL F	ILING		
		ISCAL YEAR 2013			
	REPORT 250 - HOSPITAL	MEDICAID MANAG	SED CARE ACTIVI	ΤΥ	
(1)	(2)	(3)	(4)	(5)	(6)
\.,	\-/	FY 2012	FY 2013	AMOUNT	(0)
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
_{I.}	MEDICAID MANAGED CARE				
1.	WEDICAID WANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
A.	CONNECTICUT				
	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
5	Outpatient Payments Discharges	\$0 0	\$0 0	\$0 0	0% 0%
	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
	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	COO 405 400	ФО.	(\$00.40E.400)	4000/
2	Inpatient Charges	\$20,165,430 \$7,780,056	\$0 \$0	(\$20,165,430) (\$7,780,056)	-100% -100%
3	Inpatient Payments Outpatient Charges	\$14,907,241	\$0 \$0	(\$14,907,241)	-100%
4	Outpatient Charges Outpatient Payments	\$4,379,762	\$0 \$0	(\$4,379,762)	-100%
5	Discharges	469	0	(469)	-100%
	Patient Days	2,938	0	(2,938)	-100%
7	Outpatient Visits (Excludes ED Visits)	7,064	0	(7,064)	-100%
	Emergency Department Outpatient Visits	4,539	0	(4,539)	-100%
9	Emergency Department Inpatient Admissions	254	0	(254)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$35,072,671	\$0	(\$35,072,671) (\$12,159,818)	-100%
	TOTAL INPATIENT & OUTPATIENT PATMENTS	\$12,159,818	\$0	(\$12,159,818)	-100%
C.	HEALTHNET OF THE NORTHEAST, INC.				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
<u>7</u> 8	Outpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits	0	0	0	0% 0%
	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$ 0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
			·	• • • • • • • • • • • • • • • • • • • •	
D.	OTHER MEDICAID MANAGED CARE				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0%
<u>4</u> 5	Outpatient Payments Discharges	\$0 0	\$0 0	\$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%

	CT CHII DD	EN'S MEDICAL OF	NTED		
		EN'S MEDICAL CE			
		ISCAL YEAR 2013	ILING	-	-
	REPORT 250 - HOSPITAL		SED CARE ACTIVIT	TY	
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6)
	<u>'</u>	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
		ACTUAL	ACTORE	DILLEGE	/6 DII I EIXEIXOE
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
				1	
E.	WELLCARE OF CONNECTICUT				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0%
	Outpatient Payments Discharges	\$0	\$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%
	FIRST CHOICE OF CONNECTICUT, PREFERRED				
	ONE				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days Outpotient Visits (Evaluate ED Visits)	0	0	0	0%
	Outpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits	0	0	0	0% 0%
	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ 0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
				· ·	
G.	UNITED HEALTHCARE				
	Inpatient Charges	\$3,570,449	\$0	(\$3,570,449)	
	Inpatient Payments	\$994,245	\$0	(\$994,245)	
	Outpatient Charges	\$3,237,736	\$0	(\$3,237,736)	
	Outpatient Payments	\$1,108,081	\$0	(\$1,108,081)	
	Discharges	107	0	(107)	
	Patient Days	517	0	(517)	
	Outpatient Visits (Excludes ED Visits)	1,254	0	(1,254)	
	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	1,291	0	(1,291)	
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,808,185	\$0	(61) (\$6,808,185)	
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,102,326	\$0	(\$2,102,326)	
	TOTAL INFATILITY & COTT ATTENT ATTICKTO	ΨZ, 10Z,3ZC	Ψ0	(\$2,102,020)	-10070
н.	AETNA				
	Inpatient Charges	\$6,592,058	\$0	(\$6,592,058)	-100%
	Inpatient Payments	\$2,471,573	\$0	(\$2,471,573)	
	Outpatient Charges	\$5,455,912	\$0	(\$5,455,912)	
	Outpatient Payments	\$1,849,814	\$0	(\$1,849,814)	
	Discharges	174	0	(174)	-100%
	Patient Days	938	0	(938)	
	Outpatient Visits (Excludes ED Visits)	2,552	0	(2,552)	-100%
	Emergency Department Outpatient Visits	1,994	0	(1,994)	
	Emergency Department Inpatient Admissions	96	0	(96)	
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,047,970	\$0	(\$12,047,970)	
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,321,387	\$0	(\$4,321,387)	-100%

	CT CIIII DD	EN'S MEDICAL OF	NTED		
		<u>EN`S MEDICAL CE</u> ONTHS ACTUAL F			
		ISCAL YEAR 2013			
	REPORT 250 - HOSPITAL			TY	
				•	
(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2012	FY 2013	AMÒÚNT	, ,
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$30,327,937	\$0	(\$30,327,937)	-100%
	TOTAL INPATIENT PAYMENTS	\$11,245,874	\$0	(\$11,245,874)	-100%
	TOTAL OUTPATIENT CHARGES	\$23,600,889	\$0	(\$23,600,889)	-100%
	TOTAL OUTPATIENT PAYMENTS	\$7,337,657	\$0	(\$7,337,657)	-100%
	TOTAL DISCHARGES	750	0	(750)	-100%
	TOTAL PATIENT DAYS	4,393	0	(4,393)	-100%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	10,870	0	(10,870)	-100%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	7,824	0	(7,824)	-100%
	TOTAL EMERGENCY DEPARTMENT			•	
	INPATIENT ADMISSIONS	411	0	(411)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$53,928,826	\$0	(\$53,928,826)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$18,583,531	\$0	(\$18,583,531)	-100%

CCMC CORPORATION TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2013** REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION (1) (2) (3) (4) (5) (6) FY 2012 FY 2013 AMOUNT LINE **DESCRIPTION ACTUAL ACTUAL DIFFERENCE DIFFERENCE ASSETS** Α. **Current Assets:** Cash and Cash Equivalents \$2,579,733 \$3,643,185 \$1,063,452 41% Short Term Investments \$15,988,872 \$4,292,988 (\$11,695,884)-73% Accounts Receivable (Less: Allowance for Doubtful Accounts) \$36.132.652 \$35,721,547 (\$411,105)-1% Current Assets Whose Use is Limited for Current Liabilities \$10,408,581 \$17,008,322 \$6,599,741 63% 5 Due From Affiliates \$0 \$0 \$0 0% -100% 6 Due From Third Party Payers \$4,899,895 \$0 (\$4,899,895)7 58% Inventories of Supplies \$692,725 \$1,094,287 \$401,562 8 **Prepaid Expenses** \$2,399,590 \$2,761,715 \$362,125 15% Other Current Assets \$2,474,655 22% \$11,272,563 \$13,747,218 -7% **Total Current Assets** \$84,374,611 \$78,269,262 (\$6,105,349)**Noncurrent Assets Whose Use is Limited:** В. Held by Trustee \$75,705,081 \$79,200,328 \$3,495,247 5% Board Designated for Capital Acquisition \$0 0% \$0 \$0 Funds Held in Escrow \$0 \$0 \$0 3 0% Other Noncurrent Assets Whose Use is Limited \$0 \$0 \$0 0% **Total Noncurrent Assets Whose Use is** Limited: \$75,705,081 \$79,200,328 \$3,495,247 5% Interest in Net Assets of Foundation \$0 \$0 \$0 0% Long Term Investments \$105.845.516 \$118.334.089 \$12,488,573 12% Other Noncurrent Assets -34% \$35,059,108 \$23,134,374 (\$11,924,734)C. **Net Fixed Assets:** Property, Plant and Equipment \$189,947,515 10% \$208,941,289 \$18,993,774 Less: Accumulated Depreciation \$97,861,389 \$108,858,277 \$10,996,888 \$0 Property, Plant and Equipment, Net \$92,086,126 \$100,083,012 \$7,996,886 9% Construction in Progress \$20,807,491 \$29,060,602 \$8,253,111 40% **Total Net Fixed Assets** 14% \$112,893,617 \$129,143,614 \$16,249,997 3% **Total Assets** \$413,877,933 \$428,081,667 \$14,203,734 **LIABILITIES AND NET ASSETS**

Current Liabilities:

A.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

DEDODT 200 DADENT	CODDODATION CONSOLIDATED	BALANCE SHEET INFORMATION
REPURI 300 - PARENI	CORPORATION CONSOLIDATED	DALANCE SHEET INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>
LIINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DITTERENCE	DITTERENCE
1	Accounts Payable and Accrued Expenses	\$32,950,531	\$40,018,124	\$7,067,593	21%
2	Salaries, Wages and Payroll Taxes	\$17,056,733	\$18,099,416	\$1,042,683	6%
3	Due To Third Party Payers	\$4,526,428	\$13,394,804	\$8,868,376	196%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,215,000	\$1,280,000	\$65,000	5%
6	Current Portion of Notes Payable	\$3,902,944	\$5,447,651	\$1,544,707	40%
7	Other Current Liabilities	\$330,715	\$307,335	(\$23,380)	-7%
	Total Current Liabilities	\$59,982,351	\$78,547,330	\$18,564,979	31%
В.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$39,315,000	\$38,035,000	(\$1,280,000)	-3%
2	Notes Payable (Net of Current Portion)	\$16,714,138	\$25,226,326	\$8,512,188	51%
	Total Long Term Debt	\$56,029,138	\$63,261,326	\$7,232,188	13%
3	Accrued Pension Liability	\$19,026,898	\$8,357,282	(\$10,669,616)	-56%
4	Other Long Term Liabilities	\$39,289,915	\$32,203,191	(\$7,086,724)	-18%
	Total Long Term Liabilities	\$114,345,951	\$103,821,799	(\$10,524,152)	-9%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$125,254,332	\$127,634,615	\$2,380,283	2%
2	Temporarily Restricted Net Assets	\$21,955,362	\$21,970,909	\$15,547	0%
3	Permanently Restricted Net Assets	\$92,339,937	\$96,107,014	\$3,767,077	4%
	Total Net Assets	\$239,549,631	\$245,712,538	\$6,162,907	3%
	Total Liabilities and Net Assets	\$413,877,933	\$428,081,667	\$14,203,734	3%

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
IINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$600,972,991	\$676,878,020	\$75,905,029	13%
2	Less: Allowances	\$317,878,153	\$377,012,973	\$59,134,820	19%
3	Less: Charity Care	\$753,946	\$1,613,807	\$859,861	114%
4	Less: Other Deductions	\$4,736,137	\$5,803,703	\$1,067,566	23%
	Total Net Patient Revenue	\$277,604,755	\$292,447,537	\$14,842,782	5%
5	Provision for Bad Debts	\$0	\$5,933,509	\$5,933,509	0%
	Net Patient Service Revenue less provision for bad debts	\$277,604,755	\$286,514,028	\$8,909,273	3%
6	Other Operating Revenue	\$22,929,236	\$21,891,523	(\$1,037,713)	-5%
7	Net Assets Released from Restrictions	\$14,391,329	\$16,410,503	\$2,019,174	14%
	Total Operating Revenue	\$314,925,320	\$324,816,054	\$9,890,734	3%
	Total Operating November	4014,020,020	ψ024,010,004	ψο,σσο,1σ-	
В.	Operating Expenses:				
1	Salaries and Wages	\$156,697,064	\$174,652,632	\$17,955,568	11%
2	Fringe Benefits	\$38,701,831	\$45,276,368	\$6,574,537	17%
3	Physicians Fees	\$9,852,845	\$10,667,380	\$814,535	8%
4	Supplies and Drugs	\$20,365,739	\$22,426,746	\$2,061,007	10%
5	Depreciation and Amortization	\$11,252,462	\$12,798,412	\$1,545,950	14%
6	Bad Debts	\$5,875,039	\$0	(\$5,875,039)	-100%
7	Interest Expense	\$940,592	\$1,314,300	\$373,708	40%
8	Malpractice Insurance Cost	\$7,639,618	\$3,777,589	(\$3,862,029)	-51%
9	Other Operating Expenses	\$80,950,323	\$87,588,797	\$6,638,474	8%
	Total Operating Expenses	\$332,275,513	\$358,502,224	\$26,226,711	8%
	Income/(Loss) From Operations	(\$17,350,193)	(\$33,686,170)	(\$16,335,977)	94%
C.	Non-Operating Revenue:				
1	Income from Investments	\$21,492,059	\$10,255,795	(\$11,236,264)	-52%
2	Gifts, Contributions and Donations	\$3,100,947	\$6,356,113	\$3,255,166	105%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	Total Non-Operating Revenue	\$24,593,006	\$16,611,908	(\$7,981,098)	-32%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$7,242,813	(\$17,074,262)	(\$24,317,075)	-336%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

	CC	MC CORPORATION			
			W IN O		
	IWELVE	MONTHS ACTUAL F	ILING		
		FISCAL YEAR 2013			
	REPORT 350 - PARENT CORPORATION CO	NSOLIDATED STATE	MENT OF OPERA	TIONS INFORMAT	ION
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$7,242,813	(\$17,074,262)	(\$24,317,075)	-336%

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	FY 2013
A.	Parent Corporation Statement of Operations Summary			
1	Net Patient Revenue	\$246,878,198	\$277,604,755	\$286,514,028
2	Other Operating Revenue	34,123,989	37,320,565	38,302,026
3	Total Operating Revenue	\$281,002,187	\$314,925,320	\$324,816,054
4	Total Operating Expenses	286,917,294	332,275,513	358,502,224
5	Income/(Loss) From Operations	(\$5,915,107)	(\$17,350,193)	(\$33,686,170)
6	Total Non-Operating Revenue	14,906,138	24,593,006	16,611,908
7	Excess/(Deficiency) of Revenue Over Expenses	\$8,991,031	\$7,242,813	(\$17,074,262)
В.	Parent Corporation Profitability Summary			
1	Parent Corporation Operating Margin	-2.00%	-5.11%	-9.87%
2	Parent Corporation Non-Operating Margin	5.04%	7.24%	4.87%
3	Parent Corporation Total Margin	3.04%	2.13%	-5.00%
4	Income/(Loss) From Operations	(\$5,915,107)	(\$17,350,193)	(\$33,686,170)
5	Total Operating Revenue	\$281,002,187	\$314,925,320	\$324,816,054
6	Total Non-Operating Revenue	\$14,906,138	\$24,593,006	\$16,611,908
7	Total Revenue	\$295,908,325	\$339,518,326	\$341,427,962
8	Excess/(Deficiency) of Revenue Over Expenses	\$8,991,031	\$7,242,813	(\$17,074,262)
C.	Parent Corporation Net Assets Summary			
1	Parent Corporation Unrestricted Net Assets	\$106,736,848	\$125,254,332	\$127,634,615
2	Parent Corporation Total Net Assets	\$212,156,945	\$239,549,631	\$245,712,538
3	Parent Corporation Change in Total Net Assets	(\$2,252,113)	\$27,392,686	\$6,162,907
4	Parent Corporation Change in Total Net Assets %	98.9%	12.9%	2.6%
D.	Liquidity Measures Summary			
1	Current Ratio	1.18	1.41	1.00
2	Total Current Assets	\$53,797,694	\$84,374,611	\$78,269,262
3	Total Current Liabilities	\$45,782,998	\$59,982,351	\$78,547,330

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	FY 2011	FY 2012	FY 2013
4	Days Cash on Hand	19	21	8
5	Cash and Cash Equivalents	\$5,041,855	\$2,579,733	\$3,643,185
6	Short Term Investments	\$9,572,313	\$15,988,872	\$4,292,988
7	Total Cash and Short Term Investments	\$14,614,168	\$18,568,605	\$7,936,173
8	Total Operating Expenses	\$286,917,294	\$332,275,513	\$358,502,224
9	Depreciation Expense	\$11,168,772	\$11,252,462	\$12,798,412
10	Operating Expenses less Depreciation Expense	\$275,748,522	\$321,023,051	\$345,703,812
11	Days Revenue in Patient Accounts Receivable	40	48	28
12	Net Patient Accounts Receivable	\$ 29,437,428	\$ 36,132,652	\$ 35,721,547
13	Due From Third Party Payers	\$0	\$4,899,895	\$0
14	Due To Third Party Payers	\$2,465,943	\$4,526,428	\$13,394,804
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 26,971,485	\$ 36,506,119	\$ 22,326,743
16	Total Net Patient Revenue	\$246,878,198	\$277,604,755	\$286,514,028
17	Average Payment Period	61	68	83
18	Total Current Liabilities	\$45,782,998	\$59,982,351	\$78,547,330
19	Total Operating Expenses	\$286,917,294	\$332,275,513	\$358,502,224
20	Depreciation Expense	\$11,168,772	\$11,252,462	\$12,798,412
20	Total Operating Expenses less Depreciation Expense	\$275,748,522	\$321,023,051	\$345,703,812
E.	Solvency Measures Summary			
1	Equity Financing Ratio	62.3	57.9	57.4
2	Total Net Assets	\$212,156,945	\$239,549,631	\$245,712,538
3	Total Assets	\$340,297,995	\$413,877,933	\$428,081,667
4	Cash Flow to Total Debt Ratio	22.8	15.9	(3.0)
5	Excess/(Deficiency) of Revenues Over Expenses	\$8,991,031	\$7,242,813	(\$17,074,262)

	CCMC CORPOR	ATION		
	TWELVE MONTHS ACT			
	FISCAL YEAR	2013		
	REPORT 385 - PARENT CORPORATION CONSO	LIDATED FINANCIAL D	ATA ANALYSIS	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
6	Depreciation Expense	\$11,168,772	\$11,252,462	\$12,798,412
7	Excess of Revenues Over Expenses and Depreciation Expense	\$20,159,803	\$18,495,275	(\$4,275,850)
8	Total Current Liabilities	\$45,782,998	\$59,982,351	\$78,547,330
9	Total Long Term Debt	\$42,489,918	\$56,029,138	\$63,261,326
10	Total Current Liabilities and Total Long Term Debt	\$88,272,916	\$116,011,489	\$141,808,656
11	Long Term Debt to Capitalization Ratio	16.7	19.0	20.5
12	Total Long Term Debt	\$42,489,918	\$56,029,138	\$63,261,326
13	Total Net Assets	\$212,156,945	\$239,549,631	\$245,712,538
14	Total Long Term Debt and Total Net Assets	\$254,646,863	\$295,578,769	\$308,973,864

PATIENT DISCHARGES OR ADMISSIONS STAFFED AVAILABLE DF STAFFED DF		-		1					
FISCAL YEAR 2013 REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT									
(1) (2) (3) (3) (3a) (3b) (4) (5) (6) (7) (7) (7) (8) (7) (8) (7) (9) (7) (9) (9) (7) (9) (9) (9) (17) (9) (9) (17) (9) (9) (17) (9) (9) (17) (9) (18) (18) (18) (18) (18) (18) (18) (18									
(1) (2) (3) (3a) (3b) (4) (5) (6) (7) OCCUPANCY OCCUPANC									
PATIENT DISCHARGES OR ADMISSIONS STAFFED AVAILABLE OF STAFFED OF STAFFED OF AVAILABLE OF STAFFED				REPORT 40	0 - HOSPITAL INI	PATIENT BED UT	LIZATION BY DE	PARTMENT	
Newborn Patient Pati	(1)	(2)	(3)	(3a)	(3h)	(4)	(5)	(6)	(7)
PATIENT DISCHARGES OR ADMISSIONS STAFFED AVAILABLE OF STAFFED OF AVAILABLE DAYS CU/CCU (# PATIEN BEDS (A) BEDS (A BEDS (A) BEDS (A	(')	(=)	(0)	(ou)	(00)	(*)	(0)		OCCUPANCY
LINE DESCRIPTION DAYS CU/CCU # PATIEN BEDS (A) BEDS (A			PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAII ARI F		OF AVAILABLE
Adult Medical/Surgical 0 0 0 0 0 0 0 0 0	LINE	DESCRIPTION			ADMICOIONO				BEDS
2 CU/CCU (Excludes Neonatal ICU)									
3 Peychiatric: Ages 0 to 17	1	Adult Medical/Surgical	0	0	0	0	0	0.0%	0.0%
4 Psychiatric: Ages 18+ 0 0 0 0 0 0 0.0% TOTAL PSYCHIATRIC 0 0 0 0 0 0 0 0 0.0% 5 Rehabilitation 0 0 0 0 0 0 0 0 0 0 0.0% 6 Maternity 0 0 0 0 0 0 0 0 0 0 0 0.0% 7 Newborn 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2	ICU/CCU (Excludes Neonatal ICU)	4,579	188	722	18	18	69.7%	69.7%
4 Psychiatric: Ages 18+ 0 0 0 0 0 0 0.0% TOTAL PSYCHIATRIC 0 0 0 0 0 0 0 0 0.0% S Rehabilitation 0 0 0 0 0 0 0 0 0 0 0.0% Maternity 0 0 0 0 0 0 0 0 0 0 0.0% TOTAL PSYCHIATRIC 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
TOTAL PSYCHIATRIC 0 0 0 0 0 0 0 0.0% 5 Rehabilitation 0 0 0 0 0 0 0 0 0 0 0.0% 6 Maternity 0 0 0 0 0 0 0 0 0 0 0 0.0% 7 Newborn 0 0 0 0 0 0 0 0 0 0 0 0.0% 8 Neonatal ICU 20,401 732 808 72 72 77.7.6% 9 Pediatric 21,127 5,690 4,817 92 97 62.9% 10 Other 0 0 0 0 0 0 0 0 0 0 0 0.0% TOTAL EXCLUDING NEWBORN 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT BED UTILIZATION 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT REPORTED YEAR 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT PRIOR YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 46,107 6,422 6,347 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4,449 6,642 6,569 182 6,569 182 6,569 182 6,569 182 6,569 182 6,569 182 6,569 182 6,569 6,569 6,569 6,569 6,569 6,569 6,56			<u>-</u>						0.0%
6 Maternity 0 0 0 0 0 0 0 0 0 0 0.0% 7 Newborn 0 0 0 0 0 0 0 0 0 0 0 0.0% 8 Neonatal ICU 20,401 732 808 72 72 77 77.6% 9 Pediatric 21,127 5,690 4,817 92 97 62.9% 10 Other 0 0 0 0 0 0 0 0 0 0.0% TOTAL EXCLUDING NEWBORN 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT BED UTILIZATION 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT REPORTED YEAR 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT PRIOR YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 1,658 -220 -222 0 0 2.5% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4% -3% -3% 0% 0% 0% 4% Total Licensed Beds and Bassinets 187			0	0	0	0			0.0%
7 Newborn 0 0 0 0 0 0 0 0 0.0% 8 Neonatal ICU 20,401 732 808 72 72 77.6% 9 Pediatric 21,127 5,690 4,817 92 97 62.9% 10 Other 0 0 0 0 0 0 0 0 0 0.0% TOTAL EXCLUDING NEWBORN 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT BED UTILIZATION 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT PRIOR YEAR 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT PRIOR YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 1,658 -220 -222 0 0 2.5% DIFFERENCE #: REPORTED VS. PRIOR YEAR 4% -3% -3% 0% 0% 0% 4% Total Licensed Beds and Bassinets 187 (A) This number may not exceed the number of available beds for each department or in total.	5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
8 Neonatal ICU 20,401 732 808 72 72 77.6% 9 Pediatric 21,127 5,690 4,817 92 97 62.9% 10 Other 0 0 0 0 0 0 0 0 0.0% TOTAL EXCLUDING NEWBORN 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT BED UTILIZATION 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT REPORTED YEAR 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT REPORTED YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 1,658 -220 -222 0 0 2.5% DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% -3% -3% 0% 0% 4% Total Licensed Beds and Bassinets 187 (A) This number may not exceed the number of available beds for each department or in total.	6	Maternity	0	0	0	0	0	0.0%	0.0%
9 Pediatric 21,127 5,690 4,817 92 97 62.9% 10 Other 0 0 0 0 0 0 0 0 0 0 0.0% TOTAL EXCLUDING NEWBORN 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT BED UTILIZATION 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT REPORTED YEAR 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT PRIOR YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 1,658 -220 -222 0 0 2.5% DIFFERENCE W: REPORTED VS. PRIOR YEAR 46,107 6,427 -3% 0% 0% 4% TOTAL Lineared Beds and Bassinets 187 (A) This number may not exceed the number of available beds for each department or in total.	7	Newborn	0	0	0	0	0	0.0%	0.0%
10 Other 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	8	Neonatal ICU	20,401	732	808	72	72	77.6%	77.6%
TOTAL EXCLUDING NEWBORN 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT BED UTILIZATION 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT REPORTED YEAR 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT PRIOR YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 1,658 -220 -222 0 0 2.5% DIFFERENCE W: REPORTED VS. PRIOR YEAR 4% -3% -3% 0% 0% 4% Total Licensed Beds and Bassinets 187 (A) This number may not exceed the number of available beds for each department or in total.	9	Pediatric	21,127	5,690	4,817	92	97	62.9%	59.7%
TOTAL INPATIENT BED UTILIZATION	10	Other	0	0	0	0	0	0.0%	0.0%
TOTAL INPATIENT REPORTED YEAR 46,107 6,422 6,347 182 187 69.4% TOTAL INPATIENT PRIOR YEAR 44,449 6,642 6,569 182 187 66.9% DIFFERENCE #: REPORTED VS. PRIOR YEAR 1,658 -220 -222 0 0 0 2.5% DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% -3% -3% 0% 0% 4% Total Licensed Beds and Bassinets 187 (A) This number may not exceed the number of available beds for each department or in total.		TOTAL EXCLUDING NEWBORN	46,107	6,422	6,347	182	187	69.4%	67.6%
TOTAL INPATIENT PRIOR YEAR		TOTAL INPATIENT BED UTILIZATION	46,107	6,422	6,347	182	187	69.4%	67.6%
TOTAL INPATIENT PRIOR YEAR		TOTAL INDATIFNIT REPORTED VEAR	40.407	0.400	0.047	400	407	20.40/	07.00/
DIFFERENCE #: REPORTED VS. PRIOR YEAR 1,658 -220 -222 0 0 0 2.5% DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% -3% -3% 0% 0% 4% Total Licensed Beds and Bassinets 187 (A) This number may not exceed the number of available beds for each department or in total.									67.6%
DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% -3% -3% 0% 0% 4% Total Licensed Beds and Bassinets 187 (A) This number may not exceed the number of available beds for each department or in total.									65.1% 2.4%
Total Licensed Beds and Bassinets 187 (A) This number may not exceed the number of available beds for each department or in total.						-			
(A) This number may not exceed the number of available beds for each department or in total.		DIFFERENCE %: REPORTED VS. PRIOR YEAR	4%	-3%	-3%	0%	0%	4%	4%
		Total Licensed Beds and Bassinets	187						
Note: Total discharges do not include ICU/CCU patients.	(A) T	nis number may not exceed the number of availa	able beds for eac	ch department or in	total.				
Note. Total discharges do not include 100/000 patients.	Noto	Total discharges do not include ICII/CCII natio	nte						
	14016	Total discharges do not include 100/000 patie	iiio.						

		DREN'S MEDICAL CE			
		FISCAL YEAR 2013			
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTH	ER SERVICES UTIL	IZATION AND FTES	1
(1)	(2)	(2)	(4)	(E)	(6)
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
A.	CT Scans (A)				
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	1,065	1,137	72	7%
2	Scans)	1,233	1,168	-65	-5%
	Emergency Department Scans	862	841	-21	-2%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	3,160	3,146	-14	0%
В.	MRI Scans (A)	200	0.50		201
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	663	650	-13	-2%
2	Scans)	3,354	3,345	-9	0%
	Emergency Department Scans	143	111	-32	-22%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	4,160	4,106	-54	-1%
<u> </u>	DET Cooms (A)				
C .	PET Scans (A) Inpatient Scans	0	0	0	0%
<u> </u>	Outpatient Scans (Excluding Emergency Department	0	U	0	U%
2	Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D.	PET/CT Scans (A)				
1	Inpatient Scans	0	0	0	0%
-	Outpatient Scans (Excluding Emergency Department		J	· ·	070
2	Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A) Total PET/CT Scans	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
	(A) If the Hospital is not the primary provider of thes	se scans, the Hospital	I must obtain the fis	scal vear	
	volume of each of these types of scans from the			Jour you.	
E.	Linear Accelerator Procedures				
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures Total Linear Accelerator Procedures	0	0	<u>0</u>	0% 0 %
	Total Lillean Accelerator Procedures	U	U	U	U%
F.	Cardiac Catheterization Procedures				
1	Inpatient Procedures	9	17	8	89%
2	Outpatient Procedures	28	40	12	43%
	Total Cardiac Catheterization Procedures	37	57	20	54%
	Conding Applicate Property				
G.	<u>Cardiac Angioplasty Procedures</u> Primary Procedures	1	5	4	400%
2	Elective Procedures	2	<u> </u>	<u>-</u> -1	400%
	Total Cardiac Angioplasty Procedures	3	6	3	100%
H.	Electrophysiology Studies				
1	Inpatient Studies	3	14	11	367%
2	Outpatient Studies Total Electrophysiology Studies	1 4	16 30	15 26	1500% 650 %
	i otal Electrophysiology studies	4	30	20	030%

I. Surgical Procedures	(6) % DIFFERENCE -29 19 19
Care	% DIFFERENCE -29 19 19
(1) (2) (3) (4) (5)	% DIFFERENCE -29 19 19
LINE DESCRIPTION FY 2012 FY 2013 DIFFERENCE	% DIFFERENCE -29 19 19
LINE DESCRIPTION FY 2012 FY 2013 DIFFERENCE	% DIFFERENCE -29 19 19
I. Surgical Procedures Surgical Proced	-29 19 -19
I. Surgical Procedures	-2º 1º 1º
Inpatient Surgical Procedures	19 19 -199
Inpatient Surgical Procedures	19 19 -199
Inpatient Surgical Procedures	19 19 -199
2 Outpatient Surgical Procedures 8,032 8,138 106 Total Surgical Procedures 10,200 10,256 56	19 19 -199
Total Surgical Procedures	-199
J. Endoscopy Procedures 178	
Inpatient Endoscopy Procedures	
2	
Total Endoscopy Procedures	
K. Hospital Emergency Room Visits: Treated and Admitted 3,365 3,299 -66 2 Emergency Room Visits: Treated and Discharged 52,613 52,341 -272 Total Emergency Room Visits 55,978 55,640 -338 L. Hospital Clinic Visits 0 0 -338 L. Hospital Clinic Visits 0 0 0 2 Dental Clinic Visits 0 0 0 3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 0 9 Specialty Clinic Visits 0 0 0 0 0 10 <td>5%</td>	5%
1 Emergency Room Visits: Treated and Admitted 3,365 3,299 -66 2 Emergency Room Visits: Treated and Discharged 52,613 52,341 -272 Total Emergency Room Visits 55,978 55,640 -338 L. Hospital Clinic Visits 0 0 0 1 Substance Abuse Treatment Clinic Visits 0 0 0 2 Dental Clinic Visits 0 0 0 3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Family Practice Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits - Cardiac Clinic	20
1 Emergency Room Visits: Treated and Admitted 3,365 3,299 -66 2 Emergency Room Visits: Treated and Discharged 52,613 52,341 -272 Total Emergency Room Visits 55,978 55,640 -338 L. Hospital Clinic Visits 0 0 0 1 Substance Abuse Treatment Clinic Visits 0 0 0 2 Dental Clinic Visits 0 0 0 3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Family Practice Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits - Cardiac Clinic	
2 Emergency Room Visits: Treated and Discharged 52,613 52,341 -272 Total Emergency Room Visits 55,978 55,640 -338 L. Hospital Clinic Visits 0 0 0 1 Substance Abuse Treatment Clinic Visits 0 0 0 2 Dental Clinic Visits 0 0 0 3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 10 Specialty Clinic Visits - Chronic Pain Clinic 0 0	-2%
Total Emergency Room Visits 55,978 55,640 -338	-19
L. Hospital Clinic Visits 1 Substance Abuse Treatment Clinic Visits 0 0 0 2 Dental Clinic Visits 0 0 0 3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	-19
1 Substance Abuse Treatment Clinic Visits 0 0 0 2 Dental Clinic Visits 0 0 0 3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	
1 Substance Abuse Treatment Clinic Visits 0 0 0 2 Dental Clinic Visits 0 0 0 3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	
2 Dental Clinic Visits 0 0 0 3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	09
3 Psychiatric Clinic Visits 0 0 0 4 Medical Clinic Visits 0 0 0 5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	09
5 Medical Clinic Visits - Pediatric Clinic 0 0 0 6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	09
6 Medical Clinic Visits - Urgent Care Clinic 0 0 0 7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	0%
7 Medical Clinic Visits - Family Practice Clinic 0 0 0 8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	09
8 Medical Clinic Visits - Other Medical Clinics 0 0 0 9 Specialty Clinic Visits 0 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	09
9 Specialty Clinic Visits 0 0 10 Specialty Clinic Visits - Cardiac Clinic 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0	09
10 Specialty Clinic Visits - Cardiac Clinic 0 0 0 11 Specialty Clinic Visits - Chronic Pain Clinic 0 0 0	09
11 Specialty Clinic Visits - Chronic Pain Clinic 0 0	09
	09
12 Specialty Clinic Visits - OB-GYN Clinic 0 0 0	09
13 Specialty Clinic Visits - Other Speciality Clinics 0 0 0	09
Total Hospital Clinic Visits 0 0	0%
M. Other Heavital Outrations Visita	
M. Other Hospital Outpatient Visits 47,883 52,076 4,193	99
	0%
2 Cardiac Rehabilitation 0 0 0 3 Chemotherapy 1,448 1,720 272	19%
4 Gastroenterology 2,189 2,353 164	7%
5 Other Outpatient Visits 48,208 49,762 1,554	39
Total Other Hospital Outpatient Visits 99,728 105,911 6,183	69
N. Hospital Full Time Equivalent Employees	
1 Total Nursing FTEs 341.1 329.6 -11.5	-3%
2 Total Physician FTEs 42.9 43.6 0.7	29
3 Total Non-Nursing and Non-Physician FTEs 947.9 1,056.5 108.6	119
Total Hospital Full Time Equivalent Employees 1,331.9 1,429.7 97.8	79

01110	E OF FILALITY CARL ACCESS	13 ACTUAL FILING		CI CITEDILLI	3 WILDICAL CLIVILIN
	CT CHILDREN`S	MEDICAL CENTI	ER		
	TWELVE MONTH	S ACTUAL FILIN	IG		
	FISCAL Y	/EAR 2013			
RE	PORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPY AND EM	ERGENCY RO	OM SERVICES E	BY LOCATION
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
Α.	Outpatient Surgical Procedures				
1	Hospital OR Suite	8,032	8,138	106	1%
-	Total Outpatient Surgical Procedures(A)	8,032	8,138	106	1%
		,	,		
В.	Outpatient Endoscopy Procedures				
1	Hospital ENDO Suite	1,533	1,607	74	5%
	Total Outpatient Endoscopy Procedures(B)	1,533	1,607	74	5%
C.	Outpatient Hospital Emergency Room Visits				
1	Hospital Emergency Department	52,613	52,341	-272	-1%
	Total Outpatient Hospital Emergency Room Visits(C)	52,613	52,341	-272	-1%
	(A) Must agree with Total Outpatient Surgical Procedure	 es on Report 450).		
	(c.)				
	(B) Must agree with Total Outpatient Endoscopy Proced	lures on Report	450.		
	(O) M	15:	D 450		
	(C) Must agree with Emergency Room Visits Treated an	d Discharged or	n Report 450.		

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DA	TA: COWFARA	TIVE ANAL 13	13	
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
	DATA DV.MA IOD DAVED GATEGODY				
I.	DATA BY MAJOR PAYER CATEGORY				
A.	MEDICARE				
	MEDICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$386,168	\$776,456	\$390,288	101%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$2,274,166	\$2,018,068	(\$256,098)	-11%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	588.91%	259.91%	-329.00%	-56%
4	DISCHARGES	3	20	17	567%
5	CASE MIX INDEX (CMI)	2.55410	1.75450	(0.79960)	-31%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7.66230	35.09000	27.42770	358%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$296,799.39	\$57,511.20	(\$239,288.19)	-81%
8	PATIENT DAYS	32	83	51	159%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$71,067.69	\$24,314.07	(\$46,753.62)	-66%
10	AVERAGE LENGTH OF STAY	10.7	4.2	(6.5)	-61%
	MEDICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$110,788	\$267,448	\$156,660	141%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$677,337	\$773,310	\$95,973	14%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	611.38%	289.14%	-322.24%	-53%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	28.69%	34.44%	5.76%	20%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.86067	6.88894	6.02827	700%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$786,986.18	\$112,253.82	(\$674,732.36)	-86%
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
17	TOTAL ACCRUED CHARGES	\$406.0E6	\$1 042 004	\$546,948	110%
		\$496,956 \$2,051,503	\$1,043,904		-5%
18 19	TOTAL ACCRUED PAYMENTS TOTAL ALLOWANCES	\$2,951,503 (\$2,454,547)	\$2,791,378	(\$160,125) \$707,073	-29%
19	TOTAL ALLOWANCES	(\$2,434,347)	(\$1,747,474)	\$707,073	-29%
B.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)				
	NON-GOVERNMENT INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$132,785,456	\$160,141,585	\$27,356,129	21%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$81,535,017	\$95,732,931	\$14,197,914	17%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	61.40%	59.78%	-1.62%	-3%
4	DISCHARGES	3,194	2,975	(219)	-7%
5	CASE MIX INDEX (CMI)	1.55250	1.67780	0.12530	8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,958.68500	4,991.45500	32.77000	1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$16,442.87	\$19,179.36	\$2,736.49	17%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	\$280,356.52	\$38,331.84	(\$242,024.69)	-86%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,390,199,688	\$191,331,635	(\$1,198,868,054)	-86%
10	PATIENT DAYS	19,482	21,223	1,741	9%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$4,185.15	\$4,510.81	\$325.66	8%
12	AVERAGE LENGTH OF STAY	6.1	7.1	1.0	17%
	NON-GOVERNMENT OUTPATIENT				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$101,129,504	\$111,457,704	\$10,328,200	10%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$49,905,195	\$54,490,096	\$4,584,901	9%
1+	OUTPATIENT ACCRUED PATMENTS (OF PMIT) OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	49.35%	48.89%	-0.46%	-1%

FISCAL YEAR 2013

AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>
16	OUTPATIENT CHARGES / INPATIENT CHARGES	76.16%	69.60%	-6.56%	-9%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,432.55282	2,070.58441	(361.96841)	-15%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$20,515.56	\$26,316.29	\$5,800.72	28%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	\$766,470.61	\$85,937.53	(\$680,533.08)	-89%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,864,480,258	\$177,940,912	(\$1,686,539,345)	-90%
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
21	TOTAL ACCRUED CHARGES	\$233,914,960	\$271,599,289	\$37,684,329	16%
22	TOTAL ACCRUED PAYMENTS	\$131,440,212	\$150,223,027	\$18,782,815	14%
23	TOTAL ALLOWANCES	\$102,474,748	\$121,376,262	\$18,901,514	18%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,254,679,946	\$369,272,547	(\$2,885,407,399)	-89%
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$229,320,741	\$267,224,459	\$37,903,718	17%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$128,326,484	\$150,463,835	\$22,137,351	17%
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)				
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$100,994,257	\$116,760,624	\$15,766,367	16%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	44.04%	43.69%	-0.35%	
C.	<u>UNINSURED</u>				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$1,742,334	\$1,678,321	(\$64,013)	-4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$532,200	\$373,932	(\$158,268)	-30%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.55%	22.28%	-8.27%	-27%
4	DISCHARGES	72	47	(25)	-35%
5	CASE MIX INDEX (CMI)	0.94810	1.22210	0.27400	29%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	68.26320	57.43870	(10.82450)	-16%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,796.29	\$6,510.11	(\$1,286.19)	-16%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$8,646.58	\$12,669.26	\$4,022.68	47%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$289,003.10	\$51,001.09	(\$238,002.01)	-82%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$19,728,276	\$2,929,437	(\$16,798,840)	-85%
11	PATIENT DAYS	245	189	(56)	-23%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,172.24	\$1,978.48	(\$193.77)	-9%
13	AVERAGE LENGTH OF STAY	3.4	4.0	0.6	18%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,851,885	\$2,696,509	(\$155,376)	-5%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$871,115	\$452,476	(\$418,639)	-48%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.55%	16.78%	-13.77%	-45%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	163.68%	160.67%	-3.01%	-2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	117.85095	75.51352	(42.33743)	-36%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,391.67	\$5,991.99	(\$1,399.68)	-19%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$13,123.90	\$20,324.30	\$7,200.40	55%
21	MEDICARE - UNINSURED OP PMT / OPED	\$779,594.51	\$106,261.83	(\$673,332.68)	-86%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$91,875,955	\$8,024,205	(\$83,851,750)	-91%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$4,594,219	\$4,374,830	(\$219,389)	-5%

FISCAL YEAR 2013

AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
24	TOTAL ACCRUED PAYMENTS	\$1,403,315	\$826,408	(\$576,907)	-41%
25	TOTAL ALLOWANCES	\$3,190,904	\$3,548,422	\$357,518	11%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$111,604,232	\$10,953,641	(\$100,650,590)	-90%
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$161,533,795	\$181,180,463	\$19,646,668	12%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$51,921,696	\$52,573,260	\$651,564	1%
	INPATIENT PAYMENTS / INPATIENT CHARGES	32.14%	29.02%	-3.13%	-10%
	DISCHARGES	3,392	3,357	(35)	-1%
	CASE MIX INDEX (CMI)	1.56580	1.57760	0.01180	1%
	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,311.19360	5,296.00320	(15.19040)	0%
	INPATIENT ACCRUED PAYMENT / CMAD	\$9,775.90	\$9,926.97	\$151.07	2%
	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,666.97	\$9,252.39	\$2,585.42	39%
	MEDICARE - MEDICAID IP PMT / CMAD	\$287,023.49	\$47,584.23	(\$239,439.26)	-83%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,524,437,348	\$252,006,238	(\$1,272,431,110)	-83%
	PATIENT DAYS	24,459	24,204	(255)	-1%
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,122.81	\$2,172.09	\$49.28	2%
	AVERAGE LENGTH OF STAY	7.2	7.2	(0.0)	0%
				(515)	
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$105,600,114	\$115,542,605	\$9,942,491	9%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$32,424,395	\$24,040,484	(\$8,383,911)	-26%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.70%	20.81%	-9.90%	-32%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	65.37%	63.77%	-1.60%	-2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,217.46531	2,140.82975	(76.63556)	-3%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$14,622.28	\$11,229.52	(\$3,392.76)	-23%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$5,893.29	\$15,086.77	\$9,193.48	156%
21	MEDICARE - MEDICAID OP PMT / OPED	\$772,363.90	\$101,024.30	(\$671,339.60)	-87%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,712,690,157	\$216,275,832	(\$1,496,414,326)	-87%
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
	TOTAL ACCRUED CHARGES	\$267,133,909	\$296,723,068	\$29,589,159	11%
	TOTAL ACCRUED PAYMENTS	\$84,346,091	\$76,613,744	(\$7,732,347)	-9%
25	TOTAL ALLOWANCES	\$182,787,818	\$220,109,324	\$37,321,506	20%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,237,127,505	\$468,282,070	(\$2,768,845,436)	-86%
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
	INPATIENT ACCROED PATMENTS (IP PWIT) INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
	DISCHARGES	0.00%	0.00%	0.00%	0%
		0.00000	0.00000	0.00000	0%
	CASE MIX INDEX (CMI) CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%

FISCAL YEAR 2013

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$16,442.87	\$19,179.36	\$2,736.49	17%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$296,799.39	\$57,511.20	(\$239,288.19)	-81%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$20,515.56	\$26,316.29	\$5,800.72	28%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$786,986.18	\$112,253.82	(\$674,732.36)	-86%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)	<u>(T)</u>			
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL)	AL ASSISTANCI	<u>=)</u>		
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$161,533,795	\$181,180,463	\$19,646,668	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$51,921,696	\$52,573,260	\$651,564	1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	32.14%	29.02%	-3.13%	-10%
4	DISCHARGES	3,392	3,357	(35)	-1%
5	CASE MIX INDEX (CMI)	1.56580	1.57760	0.01180	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,311.19360	5,296.00320	(15.19040)	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,775.90	\$9,926.97	\$151.07	2%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$6,666.97	\$9,252.39	\$2,585.42	39%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$287,023.49	\$47,584.23	(\$239,439.26)	-83%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,524,437,348	\$252,006,238	(\$1,272,431,110)	-83%
11	PATIENT DAYS	24,459	24,204	(255)	-1%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,122.81	\$2,172.09	\$49.28	2%
13	AVERAGE LENGTH OF STAY	7.2	7.2	(0.0)	0%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$105,600,114	\$115,542,605	\$9,942,491	9%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$32,424,395	\$24,040,484	(\$8,383,911)	-26%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.70%	20.81%	-9.90%	-32%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	65.37%	63.77%	-1.60%	-2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,217.46531	2,140.82975	(76.63556)	-3%

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DA	TA: OOMI AKA	IIVE AIVALIO		
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$14,622.28	\$11,229.52	(\$3,392.76)	-23%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,893.29	\$15,086.77	\$9,193.48	156%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$772,363.90	\$101,024.30	(\$671,339.60)	-87%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,712,690,157	\$216,275,832	(\$1,496,414,326)	-87%
		_			
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIEN)	<u> </u>			
23	TOTAL ACCRUED CHARGES	\$267,133,909	\$296,723,068	\$29,589,159	11%
24	TOTAL ACCRUED PAYMENTS	\$84,346,091	\$76,613,744	(\$7,732,347)	-9%
25	TOTAL ALLOWANCES	\$182,787,818	\$220,109,324	\$37,321,506	20%
G.	CHAMPUS / TRICARE				
	CHAMPUS / TRICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$3,756,316	\$4,138,152	\$381,836	10%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,608,353	\$1,721,748	\$113,395	7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	42.82%	41.61%	-1.21%	-3%
4	DISCHARGES	53	70	17	32%
5	CASE MIX INDEX (CMI)	1.80800	1.42130	(0.38670)	-21%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	95.82400	99.49100	3.66700	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$16,784.45	\$17,305.57	\$521.12	3%
8	PATIENT DAYS	476	597	121	25%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,378.89	\$2,884.00	(\$494.89)	-15%
10	AVERAGE LENGTH OF STAY	9.0	8.5	(0.5)	-5%
	CHAMPUS / TRICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,279,360	\$1,309,026	\$29,666	2%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$657,602	\$863,957	\$206,355	31%
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)				
13	TOTAL ACCRUED CHARGES	\$5,035,676	\$5,447,178	\$411,502	8%
14	TOTAL ACCRUED PAYMENTS	\$2,265,955	\$2,585,705	\$319,750	14%
15	TOTAL ALLOWANCES	\$2,769,721	\$2,861,473	\$91,752	3%
Н.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$29,826,230	\$28,586,425	(\$1,239,805)	-4%
2	TOTAL OPERATING EXPENSES	\$251,662,045	\$267,793,841	\$16,131,796	6%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
4	CHARITY CARE (CHARGES)	\$710,025	\$1,431,441	\$721,416	102%
5	BAD DEBTS (CHARGES)	\$4,548,779	\$4,545,394	(\$3,385)	0%
6	UNCOMPENSATED CARE (CHARGES)	\$5,258,804	\$5,976,835	\$718,031	14%
7	COST OF UNCOMPENSATED CARE	\$2,255,009	\$2,400,376	\$145,366	6%
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOI	LOGY)			
8	TOTAL ACCRUED CHARGES	\$267,133,909	\$296,723,068	\$29,589,159	11%
9	TOTAL ACCRUED PAYMENTS	\$84,346,091	\$76,613,744	(\$7,732,347)	-9%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$114,548,761	\$119,167,897	\$4,619,136	4%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$30,202,670	\$42,554,153	\$12,351,483	41%

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	0/	
LINE	DESCRIPTION	ACTUAL EX 2012	ACTUAL EV 2042	AMOUNT	%	
LINE	DESCRIPTION	<u>FY 2012</u>	FY 2013	DIFFERENCE	DIFFERENCE	
II.	AGGREGATE DATA					
Α.	TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$298,461,735	\$346,236,656	\$47,774,921	16%	
2	TOTAL INPATIENT CHARGES TOTAL INPATIENT PAYMENTS	\$137,339,232	\$152,046,007	\$14,706,775	11%	
3	TOTAL INPATIENT PAYMENTS / CHARGES	46.02%	43.91%	-2.10%	-5%	
4	TOTAL DISCHARGES	6,642	6,422	(220)	-3%	
5	TOTAL CASE MIX INDEX	1.56178	1.62287	0.06108	4%	
6	TOTAL CASE MIX ADJUSTED DISCHARGES	10,373.36490	10,422.03920	48.67430	0%	
7	TOTAL OUTPATIENT CHARGES	\$208,119,766	\$228,576,783	\$20,457,017	10%	
8	OUTPATIENT CHARGES / INPATIENT CHARGES	69.73%	66.02%	-3.71%	-5%	
9	TOTAL OUTPATIENT PAYMENTS	\$83,664,529	\$80,167,847	(\$3,496,682)	-4%	
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	40.20%	35.07%	-5.13%	-13%	
11	TOTAL CHARGES	\$506,581,501	\$574,813,439	\$68,231,938	13%	
12	TOTAL PAYMENTS	\$221,003,761	\$232,213,854	\$11,210,093	5%	
13	TOTAL PAYMENTS / TOTAL CHARGES	43.63%	40.40%	-3.23%	-7%	
14	PATIENT DAYS	44,449	46,107	1,658	4%	
		11,110	10,107	1,000	170	
B.	TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$165,676,279	\$186,095,071	\$20,418,792	12%	
2	INPATIENT PAYMENTS	\$55,804,215	\$56,313,076	\$508,861	1%	
3	GOVT. INPATIENT PAYMENTS / CHARGES	33.68%	30.26%	-3.42%	-10%	
4	DISCHARGES	3,448	3,447	(1)	0%	
5	CASE MIX INDEX	1.57038	1.57545	0.00507	0%	
6	CASE MIX ADJUSTED DISCHARGES	5,414.67990	5,430.58420	15.90430	0%	
7	OUTPATIENT CHARGES	\$106,990,262	\$117,119,079	\$10,128,817	9%	
8	OUTPATIENT CHARGES / INPATIENT CHARGES	64.58%	62.94%	-1.64%	-3%	
9	OUTPATIENT PAYMENTS	\$33,759,334	\$25,677,751	(\$8,081,583)	-24%	
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.55%	21.92%	-9.63%	-31%	
11	TOTAL CHARGES	\$272,666,541	\$303,214,150	\$30,547,609	11%	
12	TOTAL PAYMENTS	\$89,563,549	\$81,990,827	(\$7,572,722)	-8%	
13	TOTAL PAYMENTS / CHARGES	32.85%	27.04%	-5.81%	-18%	
14	PATIENT DAYS	24,967	24,884	(83)	0%	
15	TOTAL GOVERNMENT DEDUCTIONS	\$183,102,992	\$221,223,323	\$38,120,331	21%	
C.	AVERAGE LENGTH OF STAY					
1	MEDICARE	10.7	4.2	(6.5)	-61%	
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6.1	7.1	1.0	17%	
3	UNINSURED	3.4	4.0	0.6	18%	
4	MEDICAID	7.2	7.2	(0.0)	0%	
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%	
6	CHAMPUS / TRICARE	9.0	8.5	(0.5)	-5%	
7	TOTAL AVERAGE LENGTH OF STAY	6.7	7.2	0.5	7%	
		5		0.0	. 70	
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
		4=00 == : == :	^ 46:-:-		•	
1	TOTAL CHARGES	\$506,581,501	\$574,813,439	\$68,231,938	13%	
2	TOTAL GOVERNMENT DEDUCTIONS	\$183,102,992	\$221,223,323	\$38,120,331	21%	
3	UNCOMPENSATED CARE	\$5,258,804	\$5,976,835	\$718,031		

FISCAL YEAR 2013

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$100,994,257	\$116,760,624	\$15,766,367	16%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$289,356,053	\$343,960,782	\$54,604,729	19%
7	TOTAL ACCRUED PAYMENTS	\$217.225.448	\$230,852,657	\$13,627,209	6%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$217,225,448	\$230,852,657	\$13,627,209	6%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4288065150	0.4016131867	(0.0271933283)	-6%
11	COST OF UNCOMPENSATED CARE	\$2,255,009	\$2,400,376	\$145,366	6%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$30,202,670	\$42,554,153	\$12,351,483	41%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND	* -	* -	* -	
	MEDICAL ASSISTANCE UNDERPAYMENT	\$32,457,679	\$44,954,529	\$12,496,850	39%
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLO	OGY)			
1	MEDICAID	\$1,712,690,157	\$216,275,832	(\$1,496,414,326)	-87%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$111,604,232	\$10,953,641	(\$100,650,590)	-90%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$1,824,294,389	\$227,229,473	(\$1,597,064,916)	-88%
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600	<u>)</u>			
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$10,193,874	\$7,101,022	(\$3,092,852)	-30.34%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$231,197,635	\$239,314,874	\$8,117,239	3.51%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$506,581,501	\$574,813,439	\$68,231,938	13.47%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$4,399,371	\$1,570,481	(\$2,828,890)	-64.30%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$9,658,176	\$7,547,316	(\$2,110,860)	-21.86%

FISCAL YEAR 2013

ACTUAL PY 2012 FY 2013 FY 20	(1)	(2)	(3)	(4)	(5)
I. ACCRUED CHARGES AND PAYMENTS	\''	\ - /		, ,	
A CCRUED CHARGES AND PAYMENTS	LINE	DESCRIPTION		_	
NIPATIENT ACCRUED CHARGES \$160,141,565 \$57,565,105 \$160,141,565 \$57,565,105 \$160,040 \$170,765,266 \$160,141,565 \$57,565,105 \$160,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040 \$170,040	LINE	DESCRIPTION	<u>F1 2012</u>	2013	DIFFERENCE
NON-GOVERNMENT (INCLUDING SELF PAY (UNINSURED) \$132,786,466 \$100,141,865 \$27,360,126 \$300,288 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300	I.	ACCRUED CHARGES AND PAYMENTS			
NON-GOVERNMENT (INCLUDING SELF PAY (UNINSURED) \$132,786,466 \$100,141,865 \$27,360,126 \$300,288 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300,088 \$300					
MEDICAN ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$181,533,796 181,80,463 \$19,646,688 \$19,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688 \$10,646,688			\$132 785 <i>4</i> 56	\$160 1 <i>4</i> 1 585	\$27 356 129
MEDICATO S161,503,795 181,180,483 \$181,860,683 50 CTHER MEDICAL ASSISTANCE \$3,765,116 4,181,152 5981,585 50 CTHER MEDICAL ASSISTANCE \$3,765,116 4,181,152 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,585 5981,				1	\$390,288
SO CHAMPUS TRICARE \$3.76.3.16				1	\$19,646,668
6 CHAMPUS TRICARE \$3.76,316					+ -,,
TOTAL INPATIENT GOVERNMENT CHARGES \$156,676,279 \$186,095,071 \$20,418,792 \$170,141,171,171,171,171,171,171,171,171,171	6	CHAMPUS / TRICARE			\$381,836
TOTAL INPATIENT CHARGES \$346,236,656 \$47,774,921	7			, , -	(+ - / /
NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$101,129.004 \$111,457,704 \$10,328,200 \$110,008 \$111,457,704 \$10,328,200 \$110,508 \$110,708 \$267,448 \$116,608 \$10,008 \$110,508 \$10,008 \$110,508 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,008 \$10,					
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$101,129,904 \$111,497,704 \$10,308,001 \$10,000 \$111,497,704 \$10,600 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10		TOTAL INI ATILINI GITANGEO	\$230,401,733	ψ3 4 0,230,030	Ψ1,114,321
MEDICARE				* · · · · · · · · · · · · · · · · · · ·	412.222.222
MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$105.090.114 115.542.605 \$9.942.491 \$105.000.114 115.542.605 \$9.942.491 \$105.000.114 115.542.605 \$9.942.491 \$105.000.114 \$105.642.605 \$9.942.491 \$105.000.114 \$105.642.605 \$9.942.491 \$105.000.114 \$105.642.605 \$9.942.491 \$105.000.114 \$105.642.605 \$9.942.491 \$105.000.114 \$105.642.605 \$105.000.114 \$105.642.605 \$9.942.491 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.114 \$105.000.1					
MEDICAID S105:600,114 115.542,605 \$9.942,491					
6 CHAMPUS / TRICARE	4	MEDICAID	\$105,600,114	115,542,605	\$9,942,491
Total outpatient government \$2,851,885 2,698,509 \$155,376 \$150,576 \$170,140 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,147 \$10,128,14			•		\$0
TOTAL OUTPATIENT GOVERNMENT CHARGES \$106,990,262 \$117,119,079 \$10,128,817					
C. TOTAL ACCRUED CHARGES 1 TOTAL MONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$233,914,960 \$271,599,289 \$37,684,329 \$27 TOTAL MEDICARE \$496,956 \$1,043,904 \$546,956 \$1,043,904 \$546,956 \$1,043,904 \$546,956 \$1,043,909 \$296,723,068 \$29,589,159 \$1,000 \$267,133,909 \$296,723,068 \$29,589,159 \$1,000 \$267,133,909 \$296,723,068 \$29,589,159 \$1,000 \$267,133,909 \$296,723,068 \$29,589,159 \$1,000 \$267,133,909 \$296,723,068 \$29,589,159 \$1,000 \$1,000 \$267,133,909 \$296,723,068 \$29,589,159 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1					\$10,128,817
1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)		TOTAL OUTPATIENT CHARGES	\$208,119,766	\$228,576,783	\$20,457,017
1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	С	TOTAL ACCRUED CHARGES			
3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$267,133.909 \$296,723.088 \$29,589.159 \$5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 \$206,723.088 \$29,589.159 \$5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$			\$233,914,960	\$271,599,289	\$37,684,329
4 TOTAL MEDICAID \$267,733,089 \$296,723,088 \$29,889,159 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$					\$546,948
5 TOTAL OTHER MEDICAL ASSISTANCE \$5.05.676 \$5.447.178 \$411,502 6 TOTAL CHAMPUS / TRICARE \$5.03.676 \$5.447.178 \$411,502 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$4.594.219 \$4.374.830 \$213.389 TOTAL GOVERNMENT CHARGES \$272,666,541 \$303,214,150 \$30,547,689 TOTAL CHARGES \$506,581,501 \$574,813,439 \$30,627,689 D. INPATIENT ACCRUED PAYMENTS \$1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$81,535,017 \$95,732,931 \$11,197,914 1 MEDICAR \$2,274,166 2,018,068 \$2,573,260 \$651,564 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$51,921,696 \$2,573,260 \$861,564 4 MEDICAL ASSISTANCE \$0.0 \$0.0 \$0.0 \$0.0 \$0.0 5 OTHER MEDICAL ASSISTANCE \$1,608,353 1,721,748 \$113,395 \$1.008,635 1,721,748 \$113,395 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$532,200 373,932 \$156,288 \$100,835 1,721,748 \$113,395 7 UNINSURED (INCLUDED IN NON-GOVERNMENTS \$55,804,215 \$56,313,076					
6 TOTAL CHAMPUS / TRICARE \$ 5,035,676 \$ \$5,447,178 \$ \$411,502 T TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$ 4,594,219 \$ \$4,374,830 \$ \$213 TOTAL GOVERNMENT CHARGES \$ \$272,666,541 \$ \$303,214,150 \$ \$30,547,609 TOTAL CHARGES \$ \$306,581,501 \$ \$574,813,439 \$ \$68,231,938 D. INPATIENT ACCRUED PAYMENTS \$ \$1,000,000 \$ \$81,535,017 \$ \$95,732,931 \$ \$14,197,914 2 MEDICARE 2 \$ \$2,274,166 2,018,068 \$ \$2,573,260 \$ \$651,564 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$ \$ \$51,921,696 \$ \$2,573,260 \$ \$651,564 4 MEDICALD \$ \$ \$1,000,000 \$ \$2,573,260 \$ \$651,564 5 OTHER MEDICAL ASSISTANCE \$ \$ \$0 0 0 \$ \$0 6 CHAMPUS / TRICARE \$ \$ \$1,600,333 \$ \$1,721,748 \$ \$113,395 TOTAL INPATIENT GOVERNMENT PAYMENTS \$ \$ \$55,042,15 \$ \$56,313,076 \$ \$500,861 TOTAL INPATIENT GOVERNMENT PAYMENTS \$ \$ \$ \$55,042,15 \$ \$56,313,076 \$ \$500,861 TOTAL INPATIENT GOVERNMENT PAYMENTS \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			· · · · · · · · · · · · · · · · · · ·		
TOTAL GOVERNMENT CHARGES \$272,666,541 \$30,214,150 \$30,547,609			· ·		\$411,502
D. INPATIENT ACCRUED PAYMENTS \$81,535,017 \$95,732,931 \$14,197,914 1. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$81,535,017 \$95,732,931 \$14,197,914 2. MEDICARE \$2,274,166 2,018,068 \$(\$256,088 \$3,000,000 \$2,274,166 \$2,018,068 \$(\$256,088 \$3,000,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000 \$3,000	7			1	
D. INPATIENT ACCRUED PAYMENTS \$81.535.017 \$95.732.931 \$14.197.914 2 MEDICARE \$2.274,166 2.018.068 \$2.556.098 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$51,921.696 52.573.260 \$651.564 4 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$51,921.696 52.573.260 \$651.564 5 OTHER MEDICAL ASSISTANCE \$0 0 0 \$0 0 6 CHAMPUS / TRICARE \$1.608.353 1,721,748 \$113.395 7 UURINSURED (INCLUDED IN NON-GOVERNMENT) \$553,200 373,932 \$153,076 5 SOBREAT \$558,042.15 \$563,130.76 \$508,861 TOTAL INPATIENT GOVERNMENT PAYMENTS \$137,339,232 \$152,046,007 \$14,706,775 E. OUTPATIENT ACCRUED PAYMENTS \$137,339,232 \$152,046,007 \$14,706,775 E. OUTPATIENT ACCRUED PAYMENTS \$657,337 773,310 \$95,973 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$24,493.55 \$24,404,844 \$83.83,911 5 OTHER MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$32,242,395 \$24,044,84 \$83.83,911 5 OTHER MEDICAL ASSISTANCE \$677,337 773,310 \$95,973 5 OTHER MEDICAL ASSISTANCE \$32,424,395 \$24,044,84 \$83.83,911 5 OTHER MEDICAL ASSISTANCE \$867,602 \$863,957 \$206,355 TOTAL OUTPATIENT PAYMENTS \$33,759,334 \$25,677,751 \$89,973 TOTAL OUTPATIENT PAYMENTS \$33,759,334 \$25,677,751 \$89,973 TOTAL OUTPATIENT PAYMENTS \$33,759,334 \$25,677,751 \$89,983 TOTAL OUTPATIENT PAYMENTS \$33,759,334 \$25,677,751 \$89,91,583 TOTAL MEDICAR ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,846,091 \$76,613,744 \$7,732,347 TOTAL MEDICAL ASSISTANCE \$89,91,579,378 \$15,00,125 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 \$7,73	-				
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		TOTAL GHARGES	ψοσο,σοτ,σοτ	ψοι 4,010,403	ψου,201,300
MEDICARE			****		
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$51,921,696 52,573,260 \$651,564 4 MEDICAID \$51,921,696 52,573,260 \$651,564 5 OTHER MEDICAL ASSISTANCE \$0 0 0 \$0 0 \$0 0 \$0 0 \$0 0 \$0 0 \$0 0					
MEDICAID \$51,921,696 \$2,573,260 \$651,564 5 OTHER MEDICAL ASSISTANCE \$1,008,353 1,721,748 \$113,395 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$532,200 373,932 \$158,286 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$552,200 373,932 \$158,286 TOTAL INPATIENT GOVERNMENT PAYMENTS \$558,804,215 \$56,313,076 \$508,886 TOTAL INPATIENT GOVERNMENT PAYMENTS \$137,339,232 \$152,046,007 \$14,706,775 E. OUTPATIENT ACCRUED PAYMENTS \$137,339,232 \$152,046,007 \$14,706,775 E. OUTPATIENT ACCRUED PAYMENTS \$49,905,195 \$54,490,096 \$4,584,901 1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$49,905,195 \$54,490,096 \$4,584,901 2 MEDICARE \$677,337 773,310 \$59,383,911 4 MEDICAID \$32,424,395 24,040,484 \$8,383,911 5 OTHER MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$32,424,395 24,040,484 \$8,383,911 5 OTHER MEDICAL ASSISTANCE \$0 0 0 0 \$6 CHAMPUS / TRICARE \$657,602 \$63,957 \$206,355 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$871,115 452,476 \$418,639 TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$33,759,334 \$25,677,751 \$88,018,159 TOTAL OUTPATIENT GOVERNMENT S \$33,496,682 F. TOTAL ACCRUED PAYMENTS \$33,759,334 \$25,677,751 \$18,782,815 3 TOTAL MEDICARE \$2,951,503 \$2,791,378 \$18,782,815 3 TOTAL MEDICARE \$9,000 \$76,613,744 \$7,732,347 4 TOTAL MEDICARE \$9,000 \$76,613,744 \$7,732,347 5 TOTAL OTHER MEDICAL ASSISTANCE \$80,000 \$9,000 \$9,000 \$9,000 5 TOTAL CHAMPUS / TRICARE \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9,000 \$9					\$651,564
6 CHAMPUS / TRICARE 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) 8532,200 873,932 (\$158,268 1,721,748 \$113,395 1,721,748 \$113,395 1,721,748 \$113,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$113,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$115,395 1,721,748 \$117,393 1,721,748 \$115,395 1,721,748 \$117,393 1,721,748 \$115,395 1,721,748 \$117,393 1,721,748 \$115,395 1,721,748 \$117,393 1,721,748 \$117,393 1,721,748 \$117,393 1,721,748 \$117,393 1,721,748 \$115,205 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,721,721 1,72			· / /	- ,,	\$651,564
TOTAL INPATIENT GOVERNMENT PAYMENTS \$532,200 373,932 \$152,688 \$107AL INPATIENT GOVERNMENT PAYMENTS \$55,804,215 \$56,313,076 \$508,861 \$107AL INPATIENT PAYMENTS \$137,339,232 \$152,046,007 \$14,706,775 \$14,706,775 \$100 \$137,339,232 \$152,046,007 \$14,706,775 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$1				·	
TOTAL INPATIENT GOVERNMENT PAYMENTS \$55,804,215 \$56,313,076 \$508,861 TOTAL INPATIENT PAYMENTS \$137,339,232 \$152,046,007 \$14,706,775 E. OUTPATIENT ACCRUED PAYMENTS \$49,905,195 \$54,490,096 \$4,584,901 1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$49,905,195 \$54,490,096 \$4,584,901 2 MEDICALE \$677,337 773,310 \$95,973 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$32,424,395 24,040,484 \$8,383,911 4 MEDICALO \$32,424,395 24,040,484 \$8,383,911 5 OTHER MEDICAL ASSISTANCE \$0 0 \$0 0 6 CHAMPUS / TRICARE \$657,602 \$863,957 \$206,355 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$871,115 452,476 \$418,639 TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$33,759,334 \$25,677,751 \$8,881,563 TOTAL OUTPATIENT PAYMENTS \$33,759,334 \$25,677,751 \$8,881,563 TOTAL OUTPATIENT PAYMENTS \$83,664,529 \$80,167,847 \$3,496,682 F. TOTAL ACCRUED PAYMENTS \$14,40,212 \$150,223,027 \$18,782,815 2 TOTAL MEDICALE \$2,951,503 \$2,791,378 \$160,125 3 TOTAL MEDICAL ASSISTANCE \$84,346,091 \$76,613,744 \$7,732,347 4 TOTAL MEDICAL ASSISTANCE \$84,346,091 \$76,613,744 \$7,732,347 5 TOTAL OTHER MEDICAL ASSISTANCE \$82,265,955 \$2,585,705 \$319,750 6 TOTAL OTHER MEDICAL ASSISTANCE \$8,266,955 \$2,585,705 \$319,750 7 TOTAL OUTNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 \$57,772,722 TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 \$7,772,722					
E. OUTPATIENT ACCRUED PAYMENTS 49,905,195 \$54,490,096 \$4,584,901 2 MEDICARE \$677,337 773,310 \$95,973 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$32,424,395 24,040,484 (\$8,383,911 5 OTHER MEDICAL ASSISTANCE \$0 0 \$0 \$0 6 CHAMPUS / TRICARE \$657,602 863,957 \$206,355 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$871,115 452,476 (\$418,639 TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$33,759,334 \$25,677,751 (\$8,081,583 TOTAL OUTPATIENT PAYMENTS \$83,664,529 \$80,167,847 (\$3,496,682 F. TOTAL ACCRUED PAYMENTS \$131,440,212 \$150,223,027 \$18,782,815 1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$131,440,212 \$150,223,027 \$18,782,815 2 TOTAL MEDICARE \$2,951,503 \$2,791,378 (\$160,125 3 TOTAL MEDICAID \$84,346,091 \$76,613,744 (\$7,732,347 4 TOTAL MEDICAID \$84,346,091 \$76,613,744 (\$7,732,347 5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0			\$55,804,215	\$56,313,076	\$508,861
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$49,905,195 \$54,490,096 \$4,584,901 \$677,337 773,310 \$95,973 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$32,424,395 24,040,484 \$8,383,911 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000		TOTAL INPATIENT PAYMENTS	\$137,339,232	\$152,046,007	\$14,706,775
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$49,905,195 \$54,490,096 \$4,584,901 \$677,337 773,310 \$95,973 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$32,424,395 24,040,484 \$8,383,911 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000	E.	OUTPATIENT ACCRUED PAYMENTS			
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$32,424,395 24,040,484 (\$8,383,911 4 MEDICAID \$32,424,395 24,040,484 (\$8,383,911 5 OTHER MEDICAL ASSISTANCE \$0	1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)			\$4,584,901
4 MEDICAID \$32,424,395 24,040,484 (\$8,383,911 5 OTHER MEDICAL ASSISTANCE \$0 0 \$0 6 CHAMPUS / TRICARE \$657,602 863,957 \$206,355 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$871,115 452,476 (\$418,639 8 TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$33,759,334 \$25,677,751 (\$8,081,583 TOTAL OUTPATIENT PAYMENTS \$83,664,529 \$80,167,847 (\$3,496,682 F. TOTAL ACCRUED PAYMENTS \$131,440,212 \$150,223,027 \$18,782,815 2 TOTAL MEDICARE \$2,951,503 \$2,791,378 (\$160,125 3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 (\$7,732,347 4 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 5 TOTAL OTHER MEDICAL ASSISTANCE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL CHAMPUS / TRICARE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,					\$95,973
5 OTHER MEDICAL ASSISTANCE \$0 0 \$0 6 CHAMPUS / TRICARE \$657,602 \$63,957 \$206,355 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$871,115 452,476 (\$418,639) TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$33,759,334 \$25,677,751 (\$8,081,583) TOTAL OUTPATIENT PAYMENTS \$83,664,529 \$80,167,847 (\$3,496,682) F. TOTAL ACCRUED PAYMENTS \$150,223,027 \$18,782,815 2 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$131,440,212 \$150,223,027 \$18,782,815 2 TOTAL MEDICARE \$2,951,503 \$2,791,378 (\$160,125) 3 TOTAL MEDICALA ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 (\$7,732,347) 4 TOTAL MEDICALD \$84,346,091 \$76,613,744 (\$7,732,347) 5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 6 TOTAL CHAMPUS / TRICARE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907) TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827			· · · · · ·		
6 CHAMPUS / TRICARE \$657,602 863,957 \$206,355 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$871,115 452,476 (\$418,639) TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$33,759,334 \$25,677,751 (\$8,081,583) TOTAL OUTPATIENT PAYMENTS \$33,759,334 \$25,677,751 (\$8,081,583) TOTAL OUTPATIENT PAYMENTS \$83,664,529 \$80,167,847 (\$3,496,682) F. TOTAL ACCRUED PAYMENTS 1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$131,440,212 \$150,223,027 \$18,782,815 2 TOTAL MEDICARE \$2,951,503 \$2,791,378 (\$160,125) 3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 (\$7,732,347) 4 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 (\$7,732,347) 5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 50 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907) TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 (\$7,572,722)	5	OTHER MEDICAL ASSISTANCE	\$0		\$0
TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$33,759,334 \$25,677,751 (\$8,081,583 TOTAL OUTPATIENT PAYMENTS \$83,664,529 \$80,167,847 (\$3,496,682 F. TOTAL ACCRUED PAYMENTS \$131,440,212 \$150,223,027 \$18,782,815 \$2 TOTAL MEDICARE \$2,951,503 \$2,791,378 (\$160,125 \$3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 (\$7,732,347 TOTAL MEDICAL ASSISTANCE \$84,346,091 \$76,613,744 (\$7,732,347 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,750 \$10,7	6	CHAMPUS / TRICARE			\$206,355
TOTAL OUTPATIENT PAYMENTS \$83,664,529 \$80,167,847 (\$3,496,682	7			1	
F. TOTAL ACCRUED PAYMENTS \$131,440,212 \$150,223,027 \$18,782,815 2 TOTAL MEDICARE \$2,951,503 \$2,791,378 (\$160,125 3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 (\$7,732,347 4 TOTAL MEDICALD \$84,346,091 \$76,613,744 (\$7,732,347 5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 6 TOTAL CHAMPUS / TRICARE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907 TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 (\$7,7572,722					(\$8,081,583)
1 TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$131,440,212 \$150,223,027 \$18,782,815 2 TOTAL MEDICARE \$2,951,503 \$2,791,378 (\$160,125 3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 (\$7,732,347 4 TOTAL MEDICALO \$84,346,091 \$76,613,744 (\$7,732,347 5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 6 TOTAL CHAMPUS / TRICARE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907 TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 (\$7,572,722	_				. , , , , ,
2 TOTAL MEDICARE \$2,951,503 \$2,791,378 (\$160,125 3 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$84,346,091 \$76,613,744 (\$7,732,347 4 TOTAL MEDICAID \$84,346,091 \$76,613,744 (\$7,732,347 5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 6 TOTAL CHAMPUS / TRICARE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907 TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 (\$7,572,722			\$131 440 212	\$150 223 027	\$18 782 815
4 TOTAL MEDICAID \$84,346,091 \$76,613,744 (\$7,732,347 5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 6 TOTAL CHAMPUS / TRICARE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907 TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 (\$7,572,722				1	(\$160,125)
5 TOTAL OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 6 TOTAL CHAMPUS / TRICARE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907 TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 (\$7,572,722			\$84,346,091	\$76,613,744	(\$7,732,347)
6 TOTAL CHAMPUS / TRICARE \$2,265,955 \$2,585,705 \$319,750 7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907 TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 (\$7,572,722					(\$7,732,347) \$0
7 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$1,403,315 \$826,408 (\$576,907 TOTAL GOVERNMENT PAYMENTS \$89,563,549 \$81,990,827 (\$7,572,722					
					(\$576,907)
				1	(\$7,572,722)
		IOTAL PAYMENTS	\$221,003,761	\$232,213,854	\$11,210,093

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY	AMOUNT DIFFERENCE
LINE	DESCRIPTION	112012	2013	DITTERENCE
II.	PAYER MIX			
A.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.21%	27.86%	1.65%
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.08% 31.89%	0.14% 31.52%	0.06% -0.37%
4	MEDICAID	31.89%	31.52%	-0.37%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00%	0.00% 0.72%	0.00% -0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.74%		-0.02%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	32.70%		-0.33%
	TOTAL INPATIENT PAYER MIX	58.92%	60.23%	1.32%
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	19.96%	19.39%	-0.57%
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.02% 20.85%	0.05% 20.10%	0.02% -0.74%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	20.85%	20.10%	-0.74%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.25% 0.56%		-0.02% -0.09%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	21.12%		-0.74%
	TOTAL OUTPATIENT PAYER MIX	41.08%	39.77%	-1.32%
	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)	36.89%	41.23%	4.33%
	MEDICARE	1.03%	0.87%	-0.16%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.49%	22.64%	-0.85%
	MEDICAID OTHER MEDICAL ASSISTANCE	23.49% 0.00%		-0.85% 0.00%
6	CHAMPUS / TRICARE	0.73%		0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.24%		-0.08%
	TOTAL INPATIENT GOVERNMENT PAYER MIX TOTAL INPATIENT PAYER MIX	25.25% 62.14%	i e	-1.00% 3.33%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	22.58% 0.31%	23.47% 0.33%	0.88% 0.03%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14.67%		-4.32%
	MEDICAID OTHER MEDICAL ACCIDENACE	14.67%	10.35%	-4.32%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00%	0.00% 0.37%	0.00% 0.07%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.39%		-0.20%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	15.28%	i e	-4.22%
	TOTAL OUTPATIENT PAYER MIX	37.86%	34.52%	-3.33%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA		
A.	DISCHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,194	2,975	(219)
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,392	20 3,357	17 (35)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,392	3,357	(35)
5	OTHER MEDICAL ASSISTANCE	0	0	-
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	53 72		17 (25)
	TOTAL GOVERNMENT DISCHARGES	3,448		(25)
	TOTAL DISCHARGES	6,642		(220)

REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT A	ND
BASELINE UNDERPAYMENT DATA	

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL <u>FY</u> <u>2013</u>	AMOUNT <u>DIFFERENCE</u>
В.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	19,482	21,223	1,741
	MEDICARE	32	83	51
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	24,459 24,459	24,204 24,204	(255) (255)
	OTHER MEDICAL ASSISTANCE	24,439	0	(233)
	CHAMPUS / TRICARE	476	597	121
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT PATIENT DAYS	245 24,967	189 24,884	(56) (83)
	TOTAL PATIENT DAYS	44,449	46,107	1,658
C.	AVERAGE LENGTH OF STAY (ALOS)			
C.	AVERAGE LENGTH OF STAT (ALOS)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6.1	7.1	1.0
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10.7 7.2	4.2 7.2	(6.5)
4	MEDICAID	7.2	7.2	(0.0)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	9.0 3.4	8.5 4.0	(0.5) 0.6
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	7.2	7.2	(0.0)
	TOTAL AVERAGE LENGTH OF STAY	6.7	7.2	0.5
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.55250	1.67780	0.12530
	MEDICARE	2.55410	1.75450	(0.79960)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.56580	1.57760	0.01180
	MEDICAID OTHER MEDICAL ASSISTANCE	1.56580 0.00000	1.57760 0.00000	0.01180 0.00000
	CHAMPUS / TRICARE	1.80800	1.42130	(0.38670)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.94810	1.22210	0.27400
	TOTAL GOVERNMENT CASE MIX INDEX TOTAL CASE MIX INDEX	1.57038 1.56178	1.57545 1.62287	0.00507 0.06108
		1.50170	1.02201	0.00100
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$229,320,741	\$267,224,459	\$37,903,718
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$128,326,484	\$150,463,835	\$22,137,351
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$400,004,057	**	A45 700 007
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE	\$100,994,257 44.04%	\$116,760,624 43.69%	\$15,766,367 -0.35%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
	LICE DOLL DAVMENTS (CDOSS DOLL DAVMENTS DI LIC LICES LIMITAS ILICTASSIT			
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-	\$0	\$0	ψO
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT) CHARITY CARE		\$0 \$1,431,441	
7 8 9	OHCA INPUT) CHARITY CARE BAD DEBTS	\$710,025 \$4,548,779	\$1,431,441 \$4,545,394	\$721,416 (\$3,385)
7 8 9 10	OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE	\$710,025 \$4,548,779 \$5,258,804	\$1,431,441 \$4,545,394 \$5,976,835	\$721,416 (\$3,385) \$718,031
7 8 9 10	OHCA INPUT) CHARITY CARE BAD DEBTS	\$710,025 \$4,548,779	\$1,431,441 \$4,545,394	\$721,416 (\$3,385) \$718,031 (\$1,239,805)
7 8 9 10 11 12	OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES	\$710,025 \$4,548,779 \$5,258,804 \$29,826,230	\$1,431,441 \$4,545,394 \$5,976,835 \$28,586,425	\$721,416 (\$3,385) \$718,031 (\$1,239,805)
7 8 9 10 11 12 IV.	OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES DSH UPPER PAYMENT LIMIT CALCULATIONS	\$710,025 \$4,548,779 \$5,258,804 \$29,826,230	\$1,431,441 \$4,545,394 \$5,976,835 \$28,586,425	\$721,416 (\$3,385) \$718,031 (\$1,239,805)
7 8 9 10 11 12 IV.	OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES DSH UPPER PAYMENT LIMIT CALCULATIONS CASE MIX ADJUSTED DISCHARGES	\$0 \$710,025 \$4,548,779 \$5,258,804 \$29,826,230 \$251,662,045	\$1,431,441 \$4,545,394 \$5,976,835 \$28,586,425 \$267,793,841	\$721,416 (\$3,385) \$718,031 (\$1,239,805) \$16,131,796
7 8 9 10 11 12 IV.	OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES DSH UPPER PAYMENT LIMIT CALCULATIONS CASE MIX ADJUSTED DISCHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$0 \$710,025 \$4,548,779 \$5,258,804 \$29,826,230 \$251,662,045 4,958.68500	\$1,431,441 \$4,545,394 \$5,976,835 \$28,586,425 \$267,793,841 4,991.45500	\$721,416 (\$3,385) \$718,031 (\$1,239,805) \$16,131,796
7 8 9 10 11 12 IV.	OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES DSH UPPER PAYMENT LIMIT CALCULATIONS CASE MIX ADJUSTED DISCHARGES	\$0 \$710,025 \$4,548,779 \$5,258,804 \$29,826,230 \$251,662,045	\$1,431,441 \$4,545,394 \$5,976,835 \$28,586,425 \$267,793,841	\$721,416 (\$3,385) \$718,031 (\$1,239,805) \$16,131,796 32.77000 27.42770
7 8 9 10 11 12 IV. A. 1 2 3 4	OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES DSH UPPER PAYMENT LIMIT CALCULATIONS CASE MIX ADJUSTED DISCHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$0 \$710,025 \$4,548,779 \$5,258,804 \$29,826,230 \$251,662,045 4,958.68500 7.66230 5,311.19360 5,311.19360	\$1,431,441 \$4,545,394 \$5,976,835 \$28,586,425 \$267,793,841 4,991,45500 35,09000 5,296,00320 5,296,00320	\$721,416 (\$3,385) \$718,031 (\$1,239,805) \$16,131,796 32.77000 27.42770 (15.19040) (15.19040)
7 8 9 10 11 12 IV. A. 1 2 3 4 5	OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES DSH UPPER PAYMENT LIMIT CALCULATIONS CASE MIX ADJUSTED DISCHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$0 \$710,025 \$4,548,779 \$5,258,804 \$29,826,230 \$251,662,045 4,958.68500 7.66230 5,311.19360	\$1,431,441 \$4,545,394 \$5,976,835 \$28,586,425 \$267,793,841 4,991.45500 35.09000 5,296.00320	\$0 \$721,416 (\$3,385) \$718,031 (\$1,239,805) \$16,131,796 32.77000 27.42770 (15.19040) (15.19040) 0.00000 3.66700

FISCAL YEAR 2013

(4)	(0)	(0)	(4)	(F)
(1)	(2)	(3)	(4)	(5)
	DECORIDATION	ACTUAL	ACTUAL FY	AMOUNT
LINE	DESCRIPTION	FY 2012	<u>2013</u>	DIFFERENCE
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	5,414.67990	5,430.58420	15.90430
	TOTAL CASE MIX ADJUSTED DISCHARGES	10,373.36490	10,422.03920	48.67430
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,432.55282	2,070.58441	-361.96841
2	MEDICARE	0.86067	6.88894	6.02827
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	2,217.46531 2,217.46531	2,140.82975 2.140.82975	-76.63556 -76.63556
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	18.05122 117.85095	22.14317 75.51352	4.09196 -42.33743
- 1	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	2,236.37720		-66.51534
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	4,668.93002	4,240.44627	-428.48375
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$16,442.87	\$19,179.36	\$2,736.49
2	MEDICARE	\$296,799.39	\$57,511.20	(\$239,288.19)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$9,775.90 \$9,775.90	\$9,926.97 \$9,926.97	\$151.07 \$151.07
	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
	CHAMPUS / TRICARE	\$16,784.45	\$17,305.57	\$521.12
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,796.29 \$10,306.10	\$6,510.11 \$10.369.62	(\$1,286.19) \$63.52
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$13,239.60	\$14,588.89	\$1,349.29
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$20,515.56	\$26,316.29	\$5,800.72
	MEDICARE	\$786,986.18	\$112,253.82	(\$674,732.36)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,622.28	\$11,229.52	(\$3,392.76)
	MEDICAID OTHER MEDICAL ASSISTANCE	\$14,622.28 \$0.00	\$11,229.52 \$0.00	(\$3,392.76) \$0.00
6	CHAMPUS / TRICARE	\$36,429.78	\$39,016.85	\$2,587.07
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,391.67	\$5,991.99	(\$1,399.68)
	TOTAL GOVERNMENT COTT ATTENT FATMENT FER COTT ATTENT EQUIVALENT DISCHARGE	\$15,095.55	\$11,833.82	(\$3,261.73)
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$17,919.42	\$18,905.52	\$986.10
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
1	MEDICAID	\$1,712,690,157	\$216,275,832	(\$1.496.414.326)
	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$111,604,232	\$10,953,641	(\$100,650,590)
	TOTAL CALCULATED UNDERPATMENT (OPPER LIMIT METHODOLOGY)	\$1,824,294,389	\$227,229,473	(\$1,597,064,916)
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOL	OGY)		
1	TOTAL CHARGES	\$506,581,501	\$574,813,439	\$68,231,938
	TOTAL GOVERNMENT DEDUCTIONS	\$183,102,992	\$221,223,323	\$38,120,331
	UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$5,258,804 \$100,994,257	\$5,976,835 \$116,760,624	\$718,031 \$15,766,367
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
	TOTAL ADJUSTMENTS TOTAL ACCRUED PAYMENTS	\$289,356,053 \$217,225,448	\$343,960,782 \$230,852,657	\$54,604,729 \$13,627,209
	UCP DSH PAYMENTS (OHCA INPUT)	\$217,225,446	\$230,852,857	\$13,627,209
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$217,225,448	\$230,852,657	\$13,627,209
	RATIO OF NET REVENUE TO TOTAL CHARGES COST OF UNCOMPENSATED CARE	0.4288065150 \$2,255,009	0.4016131867 \$2,400,376	(0.0271933283) \$145,366
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$30,202,670	\$42,554,153	\$12,351,483
13 14	PLUS OHCA ADJUSTMENT (OHCA INPUT) TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$0	\$0	\$0
'7	TO THE STORY OF STREET OF THE PROPERTY OF STREET OF THE ST	\$32,457,679	\$44,954,529	\$12,496,850
VII	RATIOS	+		
111.	<u>IMATION</u>			
		L	l	

FISCAL YEAR 2013

ACTUAL ACTUAL FY 2013 FY 2015	(1)	(c)	(3)	(4)	(5)
RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	(1)	(2)	(3)	(4)	(5)
A RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES 1 NON-GOVERNMENT INOLUDING SELF PAY JUNINSURED) 9 0 90 90 90 90 90 90 90 90 90 90 90 90			ACTUAL	ACTUAL FY	
MON-GOVERNMENT INCLUDING SELF PAY JUNINSURED 58.95% 59.75% 3.12	LINE	<u>DESCRIPTION</u>	FY 2012	<u>2013</u>	DIFFERENCE
MON-GOVERNMENT INCLUDING SELF PAY JUNINSURED 58.95% 59.75% 3.12	Λ.	DATIO OF INDATIENT DAYMENTS TO INDATIENT CHARGES			
2 MEDICARE			61.40%	59.78%	-1.62%
MEDICAID 32,14% 29,02% 3.13*					-329.00%
0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00% 0.00	3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	32.14%	29.02%	-3.13%
CHAMPUS_TRICARE 42.82% 41.61% 1.21* 1.21* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01* 1.01*					-3.13%
TURNISURED INCLUDED IN NON-GOVERNMENT 30.55% 22.26% 3.27% 3.28% 30.55% 22.26% 3.368% 30.26% 30.26% 3.348% 30.26% 3.348% 30.26% 3.348% 30.26% 3.348% 30.26% 3.348% 30.26% 3.348% 30.26% 3.348% 30.26% 3.348% 30.26% 3.348% 3.368% 30.26% 3.348% 3.368% 30.26% 3.348% 3.368% 30.26% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348% 3.348%					0.00%
TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES 8. RATIO OF OUTPATIENT PAYMENTS TO INPATIENT CHARGES 8. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES 8. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES 9. MEDICARE 9.					
TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES 46.02% 43.91% 2.10			30.33%	22.2070	-0.2170
B. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES 46.02% 43.91% -2.10		TOTAL GOVERNMENT RATIO OF INFATILITY FATMENTO TO INFATILITY CHARGES	22 600/	20.269/	2 420/
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES 1. NON-GOVERNMENT (INCLUDING SELE PAY/ LUNINSURED) 49,35% 48,89% .0.46		TOTAL PATIO OF INDATIENT DAYMENTS TO INDATIENT CHARGES			
NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		TOTAL RATIO OF INPATIENT PATMENTS TO INPATIENT CHARGES	40.02 /0	43.3170	-2.1070
MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 30.70% 20.81% 9.90°	B.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 30.76% 20.81% 9.90°					-0.46%
MEDICALD 30.70% 20.81% 49.90					
SO CHAMPUS / TRICARE					-9.90%
6 CHAMPUS / TRICARE 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) 8 03.55% 16.78% 11.777 7 TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES 8 31.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 21.92% 9.83 8 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9.83 9 17.55% 9					
T. UNINSURED (INCLUDED IN NON-GOVERNMENT) 30.55% 16.78% -13.77*					
TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES 40.20% 35.67% -5.13*					-13.77%
TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES 40.20% 35.07% -5.13		TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES 40.20% 35.07% -5.13			31.55%	21.92%	-9.63%
A RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 TOTAL ACCRUED PAYMENTS 221,003,761 \$232,213,854 \$11,210,093 2 PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) 3 S \$0 \$0 3 S \$0 30 30 30 31 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE \$10,193,874 \$7,101,022 (\$3.092,855) 4 CALCULATED NET REVENUE \$235,746,414 \$239,314,876 \$3,568,46; 5 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$231,197,635 \$239,314,876 \$3,568,46; 6 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$44,548,779 \$2 (\$45,548,77) 8. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED GROSS REVENUE 2 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,931 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,931 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,931 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$50 \$90 \$90 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$90 \$90 5 CALCULATED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,931 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$90 \$90 5 \$90 \$90 \$90 5 \$90 \$90 \$90 5 \$90 \$90 5 \$90 \$90 5 \$90 \$90 5 \$90 \$90 5 \$90 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90		TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			-5.13%
A RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 TOTAL ACCRUED PAYMENTS 221,003,761 \$232,213,854 \$11,210,093 2 PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) 3 S \$0 \$0 3 S \$0 30 30 30 31 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE \$10,193,874 \$7,101,022 (\$3.092,855) 4 CALCULATED NET REVENUE \$235,746,414 \$239,314,876 \$3,568,46; 5 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$231,197,635 \$239,314,876 \$3,568,46; 6 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$44,548,779 \$2 (\$45,548,77) 8. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED GROSS REVENUE 2 PLUS/MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,931 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,931 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,931 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$50 \$90 \$90 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$90 \$90 5 CALCULATED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,931 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$90 \$90 5 \$90 \$90 \$90 5 \$90 \$90 \$90 5 \$90 \$90 5 \$90 \$90 5 \$90 \$90 5 \$90 \$90 5 \$90 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90 5 \$90					
TOTAL ACCRUED PAYMENTS \$221,003,761 \$232,213,854 \$11,210,09:	VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	<u> IONS</u>		
TOTAL ACCRUED PAYMENTS \$221,003,761 \$232,213,854 \$11,210,09:					
2 PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	5		
2 PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0					4
INPUT)			\$221,003,761	\$232,213,854	
OHCA DEFINED NET REVENUE \$221,003,761 \$232,213,854 \$11,210,092			60	¢0	\$0
3 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE \$10,193,874 \$7,101,022 (\$3,092,855 \$4 CALCULATED NET REVENUE \$235,746,414 \$239,314,876 \$3,568,465 \$3,568,465 \$3,568,465 \$3,684,548,779 \$2,3314,874 \$3,684,614 \$239,314,874 \$3,684,614 \$239,314,874 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614 \$3,684,614					\$11 210 093
CALCULATED NET REVENUE \$235,746,414 \$239,314,876 \$3,568,465 SET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$231,197,635 \$239,314,874 \$8,117,235 REPORTING) \$4,548,779 \$2 (\$4,548,777 B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,935 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,935 CALCULATED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,935 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,935 AVARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0		OHOA DEI INED NET NEVENOE	Ψ221,003,701	Ψ232,213,03 4	ψ11,210,093
5 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$231,197,635 \$239,314,874 \$8,117,236 6 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$4,548,779 \$2 (\$4,548,77) B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS \$506,581,501 \$574,813,439 \$68,231,931 1 OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,931 2 PLUS/(MINIUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$0 \$0 \$0 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$506,581,501 \$574,813,439 \$68,231,931 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 \$1 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$1 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$1 5 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS \$5,258,804 \$5,976,835 \$718,03 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 <	3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$10,193,874	\$7,101,022	(\$3,092,852)
REPORTING	4	CALCULATED NET REVENUE	\$235,746,414	\$239,314,876	\$3,568,462
REPORTING				*****	****
6 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$4,548,779 \$2 (\$4,548,777) B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,931 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0			\$231,197,635	\$239,314,874	\$8,117,239
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,938 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$0 \$0 \$0 CALCULATED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,938 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,938 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,938 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 5 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,037 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 \$2,2828,898 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$1,210,866 4 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENT		REPORTING)			
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,938 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$0 \$0 \$0 CALCULATED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,938 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,938 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,938 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 5 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,037 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 \$2,2828,898 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$2,2110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 \$1,210,866 4 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENT	6	VARIANCE (MUST RE LESS THAN OR FOLIAL TO \$500)	\$4 548 779	\$2	(\$4 548 777)
1 OHCA DEFINED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,936 2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$0 \$0 \$0 50 \$0 \$0 \$0 50 \$0 \$0 50 \$0 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0 50 \$0		With the Line of the Lead Time on Lead to 4000)	ψ-1,0-10,1 T 0	Ψ_	(\$4,545,111)
2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$0 \$0 \$6 CALCULATED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,936 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$506,581,501 \$574,813,439 \$68,231,936 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 \$0 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS \$5,258,804 \$5,976,835 \$718,03 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,896 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,866	B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$0 \$0 \$6 CALCULATED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,936 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$506,581,501 \$574,813,439 \$68,231,936 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 \$0 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS \$5,258,804 \$5,976,835 \$718,03 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,896 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,866					
CALCULATED GROSS REVENUE \$506,581,501 \$574,813,439 \$68,231,938 3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$506,581,501 \$574,813,439 \$68,231,938 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$6 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS \$5,258,804 \$5,976,835 \$718,03 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,896 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,856 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,866		***************************************	*****		φοσ <u>ή</u> =ο . ήσσσ
3 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$506,581,501 \$574,813,439 \$68,231,936 REPORTING) 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,03: 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,890 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,850) \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1,000 \$1				· ·	\$0
REPORTING) 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,03 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,890) CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,850) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)		CALCULATED GRUSS REVENUE	\$500,1°80,000	\$5/4,813,439	₹ 00,∠31,938
REPORTING) 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 \$0 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,03 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,890) CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,850) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)	3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$506.581.501	\$574.813.439	\$68,231,938
4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$0 \$0 C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,03* 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,890) CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,850) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)		,	‡ 1 2 3 3 3 3 3 3 3 3 3 3	Ţ,S.S, 100	Ţ 15,25 .,000
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,03* 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,896) CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,856) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,866)					
1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,03* 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,890) CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,850) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)	4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$5,258,804 \$5,976,835 \$718,03* 2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,890) CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,850) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)		DECOMOUNTION OF OURA DEFINED INCOME CARE TO MARKET AND THE PROPERTY.	<u> </u>		
2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,890) CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,850) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)	C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENT	<u> 5</u>		
2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$4,399,371 \$1,570,481 (\$2,828,890) CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,850) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)	1	OHCA DEFINED LINCOMPENSATED CARE (CHAPITY CARE AND RAD DERTS)	\$5 258 804	\$5 Q76 2 25	\$718 031
CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,658,175 \$7,547,316 (\$2,110,859) 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)					(\$2,828,890)
3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,658,176 \$7,547,316 (\$2,110,860)					(\$2,110,859)
		,			
4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) (\$1) \$0 \$:	3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$9,658,176	\$7,547,316	(\$2,110,860)
4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) (\$1) \$0 \$:					
4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) (\$1) \$0 \$:	A	VARIANCE (MUCT BE LECC THAN OR FOUND TO \$500)	(64)	**	A .
	4	VARIANCE (MUST BE LESS THAN UK EQUAL TU \$500)	(\$1)	\$0	\$1

	CT CHILDREN'S MEDICAL CENTER	1
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2013	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
(.,	(-)	ACTUAL
LINE	DESCRIPTION	FY 2013
I.	ACCRUED CHARGES AND PAYMENTS	
Α.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$160,141,585
2	MEDICARE	776,456
<u>3</u>	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	181,180,463 181,180,463
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	4,138,152
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,678,321 \$186.095.071
-	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$186,095,071
		\$0.10j200j000
В.	OUTPATIENT ACCRUED CHARGES	A
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$111,457,704 267,448
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	115,542,605
4	MEDICAID	115,542,605
5	OTHER MEDICAL ASSISTANCE	0
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,309,026 2,696,509
—	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$117,119,079
	TOTAL OUTPATIENT CHARGES	\$228,576,783
C .	TOTAL ACCRUED CHARGES TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$271,599,289
2	TOTAL GOVERNMENT ACCRUED CHARGES	303,214,150
	TOTAL ACCRUED CHARGES	\$574,813,439
_	INDATIFALT ACCRUSED DAVMENTO	
<u>D.</u>	INPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$95,732,931
2	MEDICARE	2,018,068
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	52,573,260
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	52,573,260
6	CHAMPUS / TRICARE	1,721,748
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	373,932
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$56,313,076
	TOTAL INPATIENT PAYMENTS	\$152,046,007
Ε.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$54,490,096
2	MEDICARE	773,310
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	24,040,484 24,040,484
5	OTHER MEDICAL ASSISTANCE	24,040,484
6	CHAMPUS / TRICARE	863,957
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	452,476
-	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$25,677,751
	TOTAL OUTPATIENT PAYMENTS	\$80,167,847
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$150,223,027
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	81,990,827
	TOTAL ACCRUED PAYMENTS	\$232,213,854
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
A.	ACCRUED DISCHARGES	

	CT CHILDREN`S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2013	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(4)	(0)	(2)
(1)	(2)	(3) ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2013
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,975
3	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,357
4	MEDICAID	3,357
<u>5</u>	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	70
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	47
	TOTAL GOVERNMENT DISCHARGES	3,447
	TOTAL DISCHARGES	6,422
В.	CASE MIX INDEX	1.0770
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	1.67780 1.75450
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.57760
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	1.57760 0.00000
6	CHAMPUS / TRICARE	1.42130
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	1.22210 1.57545
	TOTAL CASE MIX INDEX	1.62287
C.	OTHER REQUIRED DATA	
2	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$267,224,459 \$150,463,835
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$130,403,833
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$116,760,624
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	43.69%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$1,431,441
9 10	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$4,545,394 \$5,976,835
-10	TOTAL ONO MILL ENGINEES OF THE	φο,στο,σσο
11	TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES	\$28,586,425
12	TOTAL OPERATING EXPENSES	\$267,793,841
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	\$232,213,854
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) OHCA DEFINED NET REVENUE	\$0 \$232,213,854
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$7,101,022
	CALCULATED NET REVENUE	\$239,314,876
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$239,314,874
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$2
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$574,813,439
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0

CT CHILDREN'S MEDICAL CENTER	
BASELINE UNDERFATMENT DATA. AGREED-OFON PROCEDURES	
(2)	(3)
·	ACTUAL
DESCRIPTION	FY 2013
CALCULATED GROSS REVENUE	\$574,813,43
GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$574,813,43
VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$
RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$5,976,83
PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$1,570,48
CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,547,31
UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$7,547,31
VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$
	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)

CT CHILDREN'S MEDICAL CENTER TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2013 REPORT 650 - HOSPITAL UNCOMPENSATED CARE** (2) (1) (3) (4) (5) (6)**ACTUAL** ACTUAL **AMOUNT** % **DIFFERENCE** LINE DESCRIPTION FY 2012 FY 2013 **DIFFERENCE Hospital Charity Care (from HRS Report 500)** Number of Applicants 279% 156 591 435 Number of Approved Applicants 2 349 244% 143 492 3 **Total Charges (A)** \$721,416 \$710,025 \$1,431,441 102% **Average Charges** -41% \$4,965 \$2,909 (\$2,056)Ratio of Cost to Charges (RCC) 0.460090 0.469160 0.009070 2% 5 6 **Total Cost** \$326.675 \$671.575 \$344.899 106% **Average Cost** -40% 7 \$2,284 \$1.365 (\$919) Charity Care - Inpatient Charges \$413.190 \$1.005.529 \$592.339 143% 9 Charity Care - Outpatient Charges (Excludes ED Charges) -34% 200,585 132.833 (67,752)Charity Care - Emergency Department Charges 204% 10 96.250 293.079 196.829 **Total Charges (A)** 11 \$710,025 \$1,431,441 \$721,416 102% Charity Care - Number of Patient Days 164 706 542 330% Charity Care - Number of Discharges 88% 40 75 35 Charity Care - Number of Outpatient ED Visits 96 125 29 30% Charity Care - Number of Outpatient Visits (Excludes ED 242 321 79 33% 15 Visits) В. Hospital Bad Debts (from HRS Report 500) Bad Debts - Inpatient Services \$1,082,610 \$1,081,804 (\$806) 0% 2 Bad Debts - Outpatient Services (Excludes ED Bad Debts) 1.501.096 1,499,979 (1,117)0% Bad Debts - Emergency Department 3 1,965,073 1,963,611 (1,462)0% Total Bad Debts (A) \$4,548,779 0% \$4,545,394 (\$3,385)Hospital Uncompensated Care (from HRS Report 500)

\$710,025

4,548,779

\$5,258,804

\$1,495,800

1,701,681

2,061,323

\$5,258,804

\$1,431,441

4,545,394

\$5,976,835

\$2,087,333

1,632,812

2,256,690

\$5,976,835

\$721,416

\$718,031

\$591,533

(68.869)

195,367

\$718,031

(3.385)

102%

0%

14%

40%

-4%

9%

14%

Charity Care (A)

Total Uncompensated Care (A)

Total Uncompensated Care (A)

Uncompensated Care - Inpatient Services

Uncompensated Care - Emergency Department

Uncompensated Care - Outpatient Services (Excludes ED

(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

Bad Debts (A)

Unc. Care)

2

3

5

6

7

		CT CHILDREN'S MEDICAL	CENTER		
		TWELVE MONTHS ACTUA	L FILING		
		FISCAL YEAR 201	<u>~</u>		
		AL NON-GOVERNMENT GROSS RE		ALLOWANCES,	
		ACCRUED PAYMENTS AND DISCOL	JNT PERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	444011117	0.4
	DECORURTION	ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	% %
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$229,320,741	\$267,224,459	\$37,903,718	17%
2	Total Contractual Allowances	\$100,994,257	\$116,760,624	\$15,766,367	16%
	Total Accrued Payments (A)	\$128,326,484	\$150,463,835	\$22,137,351	17%
	Total Discount Percentage	44.04%	43.69%	-0.35%	-1%
(A) A	crued Payments associated with Non-Go	vernment Contractual Allowances n	nust exclude any reduction	n for Uncompensated	d Care.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	FY 2013
A.	Gross and Net Revenue			
1	Inpatient Gross Revenue	\$252,494,049	\$298,461,735	\$346,236,656
2	Outpatient Gross Revenue	\$182,375,521	\$208,119,766	\$228,576,783
3	Total Gross Patient Revenue	\$434,869,570	\$506,581,501	\$574,813,439
4	Net Patient Revenue	\$202,447,507	\$231,197,635	\$239,314,874
В.	Total Operating Expenses			
1	Total Operating Expense	\$212,457,955	\$251,662,045	\$267,793,841
C.	<u>Utilization Statistics</u>			
1	Patient Days	37,834	44,449	46,107
2	Discharges	6,203	6,642	6,422
3	Average Length of Stay	6.1	6.7	7.2
4	Equivalent (Adjusted) Patient Days (EPD)	65,161	75,444	76,546
0	Equivalent (Adjusted) Discharges (ED)	10,683	11,274	10,662
D.	Case Mix Statistics			
1	Case Mix Index	1.36228	1.56178	1.62287
2	Case Mix Adjusted Patient Days (CMAPD)	51,541	69,420	74,825
3	Case Mix Adjusted Discharges (CMAD)	8,450	10,373	10,422
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	88,768	117,827	124,223
5	Case Mix Adjusted Equivalent Discharges (CMAED)	14,554	17,607	17,302
E.	Gross Revenue Per Statistic			
1	Total Gross Revenue per Patient Day	\$11,494	\$11,397	\$12,467
2	Total Gross Revenue per Discharge	\$70,106	\$76,269	\$89,507
3	Total Gross Revenue per EPD	\$6,674	\$6,715	\$7,509
4	Total Gross Revenue per ED	\$40,705	\$44,936	\$53,914
5	Total Gross Revenue per CMAEPD	\$4,899	\$4,299	\$4,627
6	Total Gross Revenue per CMAED	\$29,880	\$28,772	\$33,222
7	Inpatient Gross Revenue per EPD	\$3,875	\$3,956	\$4,523
8	Inpatient Gross Revenue per ED	\$23,634	\$26,475	\$32,475

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
LIIVE	SEGGRII 11614	112011	112012	112010
F.	Net Revenue Per Statistic			
1	Net Patient Revenue per Patient Day	\$5,351	\$5,201	\$5,190
2	Net Patient Revenue per Discharge	\$32,637	\$34,808	\$37,265
3	Net Patient Revenue per EPD	\$3,107	\$3,065	\$3,126
4	Net Patient Revenue per ED	\$18,950	\$20,508	\$22,446
5	Net Patient Revenue per CMAEPD	\$2,281	\$1,962	\$1,926
6	Net Patient Revenue per CMAED	\$13,910	\$13,131	\$13,831
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$5,616	\$5,662	\$5,808
2	Total Operating Expense per Discharge	\$34,251	\$37,889	\$41,699
3	Total Operating Expense per EPD	\$3,260	\$3,336	\$3,498
4	Total Operating Expense per ED	\$19,887	\$22,323	\$25,118
5	Total Operating Expense per CMAEPD	\$2,393	\$2,136	\$2,156
6	Total Operating Expense per CMAED	\$14,598	\$14,293	\$15,477
Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$29,076,374	\$30,614,095	\$29,967,685
2	Nursing Fringe Benefits Expense	\$8,257,803	\$8,158,437	\$8,711,626
3	Total Nursing Salary and Fringe Benefits Expense	\$37,334,177	\$38,772,532	\$38,679,311
I.	Physician Salary and Fringe Expense			
1	Physician Salary Expense	\$0	\$0	\$0
2	Physician Fringe Benefits Expense	\$0	\$0	\$0
3	Total Physician Salary and Fringe Benefits Expense	\$0	\$0	\$0
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense			
1	Non-Nursing, Non-Physician Salary Expense	\$60,735,716	\$67,858,609	\$77,662,593
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$17,249,180	\$18,083,833	\$22,576,569
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$77,984,896	\$85,942,442	\$100,239,162

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
K.	Total Salary and Fringe Benefits Expense	112011	<u> 4014</u>	<u> 2010</u>
1	Total Salary Expense	\$89,812,090	\$98,472,704	\$107,630,278
2	Total Fringe Benefits Expense	\$25,506,983	\$26,242,270	\$31,288,195
3	Total Salary and Fringe Benefits Expense	\$115,319,073	\$124,714,974	\$138,918,473
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	329.3	341.1	329.6
2	Total Physician FTEs	39.0	42.9	43.6
3	Total Non-Nursing, Non-Physician FTEs	860.9	947.9	1056.5
4	Total Full Time Equivalent Employees (FTEs)	1,229.2	1,331.9	1,429.7
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$88,298	\$89,751	\$90,921
2	Nursing Fringe Benefits Expense per FTE	\$25,077	\$23,918	\$26,431
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$113,374	\$113,669	\$117,352
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$0	\$0	\$0
2	Physician Fringe Benefits Expense per FTE	\$0	\$0	\$0
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$0	\$0	\$0
0.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense	e per FTE		
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$70,549	\$71,588	\$73,509
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$20,036	\$19,078	\$21,369
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$90,585	\$90,666	\$94,879
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$73,065	\$73,934	\$75,282
2	Total Fringe Benefits Expense per FTE	\$20,751	\$19,703	\$21,884
3	Total Salary and Fringe Benefits Expense per FTE	\$93,816	\$93,637	\$97,166
Q.	Total Salary and Fringe Ben. Expense per Statistic			

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL FY 2012	ACTUAL <u>FY 2013</u>
1	Total Salary and Fringe Benefits Expense per Patient Day	\$3,048	\$2,806	\$3,013
2	Total Salary and Fringe Benefits Expense per Discharge	\$18,591	\$18,777	\$21,632
3	Total Salary and Fringe Benefits Expense per EPD	\$1,770	\$1,653	\$1,815
4	Total Salary and Fringe Benefits Expense per ED	\$10,794	\$11,063	\$13,030
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,299	\$1,058	\$1,118
6	Total Salary and Fringe Benefits Expense per CMAED	\$7,924	\$7,083	\$8,029