ESSENT-SHARON HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

PEPORT 100.	HOSDITAL	BALANCE SHEET INFORMATION
KEPUKI 100 ·	· HUSPII AL	BALANCE SHEET INFURINATION

(1)	(2)				
	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
l. <u>A</u>	<u>ISSETS</u>				
A. <u>C</u>	Current Assets:				
1 C	Cash and Cash Equivalents	\$0	\$0	\$0	0%
2 S	Short Term Investments	\$0	\$0	\$0	0%
3 A	accounts Receivable (Less: Allowance for Doubtful Accounts)	\$6,927,031	\$7,018,848	\$91,817	1%
4 C	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5 D	Due From Affiliates	\$0	\$0	\$0	0%
6 D	Due From Third Party Payers	\$0	\$0	\$0	0%
7 In	nventories of Supplies	\$1,127,084	\$1,238,168	\$111,084	10%
8 P	Prepaid Expenses	\$515,802	\$1,722,975	\$1,207,173	234%
9 O	Other Current Assets	\$730,076	\$1,179,591	\$449,515	62%
Т	otal Current Assets	\$9,299,993	\$11,159,582	\$1,859,589	20%
B. <u>N</u>	Ioncurrent Assets Whose Use is Limited:				
1 H	leld by Trustee	\$0	\$0	\$0	0%
2 B	Soard Designated for Capital Acquisition	\$0	\$0	\$0	0%
3 F	unds Held in Escrow	\$0	\$0	\$0	0%
4 0	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
T	otal Noncurrent Assets Whose Use is Limited:	\$0	\$0	\$0	0%
5 In	nterest in Net Assets of Foundation	\$0	\$0	\$0	0%
6 L	ong Term Investments	\$0	\$0	\$0	0%
7 O	Other Noncurrent Assets	\$1,823,091	\$523,669	(\$1,299,422)	-71%
	let Fixed Assets:				
1 P	Property, Plant and Equipment	\$61,544,350	\$62,971,937	\$1,427,587	2%
2 L	ess: Accumulated Depreciation	\$26,040,539	\$28,550,693	\$2,510,154	10%
Р	Property, Plant and Equipment, Net	\$35,503,811	\$34,421,244	(\$1,082,567)	-3%
3 C	Construction in Progress	\$381,260	\$0	(\$381,260)	-100%
	otal Net Fixed Assets	\$35,885,071	\$34,421,244	(\$1,463,827)	-4%
	otal Not Fixed Addition	φοσισσίοι τ	ΨΟ-1, -1, -1	(\$1,400,021)	470
т	otal Assets	\$47,008,155	\$46,104,495	(\$903,660)	-2%
	Old Alexander	VIII,000,100	ψ 10,10 1,100	(4000,000)	=70
II. <u>L</u>	IABILITIES AND NET ASSETS				
A. C	Current Liabilities:				
	accounts Payable and Accrued Expenses	\$1,852,707	\$1,553,296	(\$299,411)	-16%
	Salaries, Wages and Payroll Taxes	\$3,362,358	\$3,501,910	\$139,552	4%

ESSENT-SHARON HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 <u>ACTUAL</u>	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
3	Due To Third Party Payers	\$0	\$291,175	\$291,175	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$9,120	\$54,591	\$45,471	499%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	Total Current Liabilities	\$5,224,185	\$5,400,972	\$176,787	3%
В.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$14,898,159	\$8,826,637	(\$6,071,522)	-41%
	Total Long Term Debt	\$14,898,159	\$8,826,637	(\$6,071,522)	-41%
3	Accrued Pension Liability	\$1,403,000	\$1,268,000	(\$135,000)	-10%
4	Other Long Term Liabilities	\$354,160	\$554,304	\$200,144	57%
	Total Long Term Liabilities	\$16,655,319	\$10,648,941	(\$6,006,378)	-36%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$250,000	\$0	(\$250,000)	-100%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$24,878,651	\$30,054,582	\$5,175,931	21%
2	Temporarily Restricted Net Assets	\$0	\$0	\$0	0%
3	Permanently Restricted Net Assets	\$0	\$0	\$0	0%
	Total Net Assets	\$24,878,651	\$30,054,582	\$5,175,931	21%
	Total Liabilities and Net Assets	\$47,008,155	\$46,104,495	(\$903,660)	-2%

ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 150 - HOSPITAL STATEMENT OF OPERA	TIONS INFORMATION
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	REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION						
(1)	(2) DESCRIPTION	(3) FY 2012 ACTUAL	(4) FY 2013 <u>ACTUAL</u>	(5) AMOUNT DIFFERENCE	(6) % <u>DIFFERENCE</u>		
LIIVE	<u>DECOMITION</u>	AOTOAL	AOTOAL	<u>DIFFERENCE</u>	DITTERCINOL		
Α.	Operating Revenue:						
1	Total Gross Patient Revenue	\$138,431,770	\$147,441,042	\$9,009,272	7%		
2	Less: Allowances	\$82,582,153	\$89,772,556	\$7,190,403	9%		
3	Less: Charity Care	\$760,089	\$941,923	\$181,834	24%		
4	Less: Other Deductions	\$530,703	\$686,153	\$155,450	29%		
	Total Net Patient Revenue	\$54,558,825	\$56,040,410	\$1,481,585	3%		
5	Provision for Bad Debts Net Patient Service Revenue less provision for bad	\$0	\$2,293,507	\$2,293,507	0%		
	debts	\$54,558,825	\$53,746,903	(\$811,922)	-1%		
6	Other Operating Revenue	\$453,530	\$429,185	(\$24,345)	-5%		
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%		
	Total Operating Revenue	\$55,012,355	\$54,176,088	(\$836,267)	-2%		
В.	Operating Expenses:						
1	Salaries and Wages	\$17,406,817	\$17,249,976	(\$156,841)	-1%		
2	Fringe Benefits	\$4,042,088	\$4,231,182	\$189,094	5%		
3	Physicians Fees	\$1,399,248	\$1,670,355	\$271,107	19%		
4	Supplies and Drugs	\$6,607,624	\$6,628,436	\$20,812	0%		
5	Depreciation and Amortization	\$3,051,773	\$3,004,141	(\$47,632)	-2%		
6	Bad Debts	\$2,999,367	\$0	(\$2,999,367)	-100%		
7	Interest Expense	\$136,325	\$0	(\$136,325)	-100%		
8	Malpractice Insurance Cost	\$1,113,805	\$1,146,180	\$32,375	3%		
9	Other Operating Expenses	\$14,988,067	\$15,471,215	\$483,148	3%		
	Total Operating Expenses	\$51,745,114	\$49,401,485	(\$2,343,629)	-5%		
	Income/(Loss) From Operations	\$3,267,241	\$4,774,603	\$1,507,362	46%		
C.	Non-Operating Revenue:						
1	Income from Investments	\$0	\$0	\$0	0%		
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%		
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%		
	Total Non-Operating Revenue	\$0	\$0	\$0	0%		
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$3,267,241	\$4,774,603	\$1,507,362	46%		
	Other Adjustments:						
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%		

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	TWELVE	MONTHS ACTUAL FII	LING		
	F	ISCAL YEAR 2013			
	REPORT 150 - HOSPITAL S	TATEMENT OF OPER	ATIONS INFORM	ATION	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$3,267,241	\$4,774,603	\$1,507,362	46%
	Principal Payments	\$33,687,500	\$1	(\$33,687,499)	-100%

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		E MONTHS ACTUAL FIL			
		FISCAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS R		JE AND STATISTIC	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
ļ		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	GROSS REVENUE BY PAYER				
A.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$35,467,622	\$36,676,202	\$1,208,580	3%
2	MEDICARE MANAGED CARE	\$2,076,585	\$2,429,623	\$353,038	179
3	MEDICAID	\$2,432,769	\$3,175,671	\$742,902	31%
4	MEDICAID MANAGED CARE	\$519,547	\$0	(\$519,547)	-100%
5	CHAMPUS/TRICARE	\$163,314	\$85,024	(\$78,290)	-48%
6	COMMERCIAL INSURANCE	\$836,166	\$831,093	(\$5,073)	-1%
7	NON-GOVERNMENT MANAGED CARE	\$9,493,463	\$12,763,569	\$3,270,106	34%
8	WORKER'S COMPENSATION	\$681,336	\$993,977	\$312,641	46%
9	SELF- PAY/UNINSURED	\$1,345,419	\$1,089,118	(\$256,301)	-19%
10	SAGA	\$0	\$0	ξ0 \$0	0%
11	OTHER	\$2,591,672	\$3,350,285	\$758,613	29%
	TOTAL INPATIENT GROSS REVENUE	\$55,607,893	\$61,394,562	\$5,786,669	10%
	OUTPATIENT GROSS REVENUE	\$55,007,095	ψ01,394,30Z	\$5,700,009	107
	MEDICARE TRADITIONAL	¢22.240.270	\$34,570,289	\$2,260,019	70/
1		\$32,310,270	' ' '		7%
3	MEDICARE MANAGED CARE	\$1,538,955	\$2,344,986	\$806,031	52%
	MEDICAID	\$4,582,520	\$5,267,908	\$685,388	15%
4	MEDICAID MANAGED CARE	\$529,525	\$0	(\$529,525)	-100%
5	CHAMPUS/TRICARE	\$200,223	\$190,495	(\$9,728)	-5%
6	COMMERCIAL INSURANCE	\$2,589,428	\$2,195,771	(\$393,657)	-15%
7	NON-GOVERNMENT MANAGED CARE	\$33,253,822	\$32,832,605	(\$421,217)	-1%
8	WORKER'S COMPENSATION	\$1,748,587	\$1,824,730	\$76,143	4%
9	SELF- PAY/UNINSURED	\$2,566,254	\$2,713,314	\$147,060	6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$3,504,293	\$4,106,382	\$602,089	17%
	TOTAL OUTPATIENT GROSS REVENUE	\$82,823,877	\$86,046,480	\$3,222,603	4%
С.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$67,777,892	\$71,246,491	\$3,468,599	5%
2	MEDICARE MANAGED CARE	\$3,615,540	\$4,774,609	\$1,159,069	32%
3	MEDICAID	\$7,015,289	\$8,443,579	\$1,428,290	20%
4	MEDICAID MANAGED CARE	\$1,049,072	\$0	(\$1,049,072)	-100%
5	CHAMPUS/TRICARE	\$363,537	\$275,519	(\$88,018)	-24%
6		\$3,425,594	\$3,026,864	(\$398,730)	-12%
7	NON-GOVERNMENT MANAGED CARE	\$42,747,285	\$45,596,174	\$2,848,889	7%
8		\$2,429,923	\$2,818,707	\$388,784	16%
9		\$3,911,673	\$3,802,432	(\$109,241)	-3%
10	SAGA	\$3,911,673	\$3,802,432	(\$109,241)	-37 0%
11	OTHER	\$6,095,965	\$7,456,667	\$1,360,702	22%
11	TOTAL GROSS REVENUE		\$147,441,042		7%
	IOTAL GROSS REVENUE	\$138,431,770	φ141,441,042	\$9,009,272	19
II.	NET REVENUE BY PAYER				
A.	INPATIENT NET REVENUE				
	MEDICARE TRADITIONAL	\$16,077,320	\$16,984,341	\$907,021	6%
1	MEDICARE MANAGED CARE	\$977,973	\$986,423	\$8,450	19
	I MEDICARE MANAGED CARE			Ŧ-, .J•	
2			\$819.553	\$146.031	22%
3	MEDICAID	\$673,522	\$819,553 \$0	\$146,031 (\$117.631)	
2			\$819,553 \$0 \$77,524	\$146,031 (\$117,631) (\$83,606)	229 -1009 -529

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		FISCAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS	REVENUE, NET REVENU	JE AND STATISTIC	CS BY PAYER	
4-1		45)	4.1	(-)	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$4,326,229	\$5,526,677	\$1,200,448	28%
8	WORKER'S COMPENSATION	\$208,858	\$216,707	\$7,849	4%
9	SELF- PAY/UNINSURED	\$215,382	\$224,283	\$8,901	4%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$743,895	\$1,196,216	\$452,321	61%
	TOTAL INPATIENT NET REVENUE	\$23,973,631	\$26,741,610	\$2,767,979	12%
	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$7,059,493	\$7,008,274	(\$51,219)	-1%
2	MEDICARE MANAGED CARE	\$358,752	\$519,504	\$160,752	45%
3	MEDICAID MANAGED CARE	\$1,093,344	\$1,271,376	\$178,032 (\$148,440)	16%
4 5	MEDICAID MANAGED CARE	\$118,410 \$55,611	\$0 \$41.071	(\$118,410) (\$13,640)	-100%
6	CHAMPUS/TRICARE COMMERCIAL INSURANCE	\$55,611 \$1,404,786	\$41,971 \$1,160,652	(\$13,640) (\$244,134)	-25% -17%
7	NON-GOVERNMENT MANAGED CARE	\$1,404,786	\$1,160,652	(\$244,134)	-17% -8%
8	WORKER'S COMPENSATION	\$581,029	\$518,962	(\$62,067)	-11%
9	SELF- PAY/UNINSURED	\$464,737	\$426,841	(\$37,896)	-8%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$522,404	\$565,931	\$43,527	8%
	TOTAL OUTPATIENT NET REVENUE	\$27,327,651	\$25,885,051	(\$1,442,600)	-5%
			. , , ,	(, , , ,	
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$23,136,813	\$23,992,615	\$855,802	4%
2	MEDICARE MANAGED CARE	\$1,336,725	\$1,505,927	\$169,202	13%
3	MEDICAID	\$1,766,866	\$2,090,929	\$324,063	18%
4	MEDICAID MANAGED CARE	\$236,041	\$0	(\$236,041)	-100%
5	CHAMPUS/TRICARE	\$216,741	\$119,495	(\$97,246)	-45%
6	COMMERCIAL INSURANCE	\$1,876,477	\$1,870,538	(\$5,939)	0%
7	NON-GOVERNMENT MANAGED CARE	\$19,995,314	\$19,898,217	(\$97,097)	0%
8	WORKER'S COMPENSATION	\$789,887	\$735,669	(\$54,218)	-7%
9	SELF- PAY/UNINSURED	\$680,119	\$651,124	(\$28,995)	-4%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,266,299	\$1,762,147	\$495,848	39%
	TOTAL NET REVENUE	\$51,301,282	\$52,626,661	\$1,325,379	3%
III.	STATISTICS BY PAYER				
	<u>DISCHARGES</u>				
1	MEDICARE TRADITIONAL	1,473	1,515	42	3%
2	MEDICARE MANAGED CARE	81	99	18	22%
3	MEDICAID MANAGER CARE	161	217	56	35%
4	MEDICAID MANAGED CARE	33	0	(33)	-100%
5 6	CHAMPUS/TRICARE	11 41	9 39	(2)	-18% 59/
7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	614	680	(2) 66	<u>-5%</u> 11%
8	WORKER'S COMPENSATION	15	18	3	20%
9	SELF- PAY/UNINSURED	73	93	20	27%
10	SAGA	0	0	0	0%
11	OTHER	183	208	25	14%
	TOTAL DISCHARGES	2,685	2,878	193	7%
	PATIENT DAYS	,,,,,,	, -		
1	MEDICARE TRADITIONAL	7,988	7,871	(117)	-1%
2	MEDICARE MANAGED CARE	481	620	139	29%
3	MEDICAID	516	615	99	19%

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	FSSENT	SHARON HOSPITA			
		NTHS ACTUAL FIL			
		CAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS REVE		IE AND STATISTIC	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
4	MEDICAID MANAGED CARE	86	0	(86)	-100%
5	CHAMPUS/TRICARE	29	21	(8)	-28%
6	COMMERCIAL INSURANCE	147	114	(33)	-22%
7 8	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	1,806 36	2,155 48	349 12	19% 33%
9	SELF- PAY/UNINSURED	273	241	(32)	-12%
10	SAGA	0	0	0	0%
11	OTHER	552	653	101	18%
	TOTAL PATIENT DAYS	11,914	12,338	424	4%
C.	<u>OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	40,771	40,407	(364)	-1%
2	MEDICARE MANAGED CARE	1,699	2,294	595	35%
3	MEDICAID MANAGED CARE	3,629	4,040	411	11%
5	MEDICAID MANAGED CARE CHAMPUS/TRICARE	649 191	0 157	(649) (34)	<u>-100%</u> -18%
6	COMMERCIAL INSURANCE	5,508	4,244	(1,264)	-23%
7	NON-GOVERNMENT MANAGED CARE	34,509	31,600	(2,909)	-8%
8	WORKER'S COMPENSATION	1,225	1,011	(214)	-17%
9	SELF- PAY/UNINSURED	3,972	3,824	(148)	-4%
10	SAGA	0	0	0	0%
11	OTHER	4,882	5,321	439	9%
	TOTAL OUTPATIENT VISITS	97,035	92,898	(4,137)	-4%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
IV.	EMERGENCI DEPARTMENT OUTFATIENT BY PATER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS				
	REVENUE				
1	MEDICARE TRADITIONAL	\$4,215,716	\$4,525,067	\$309,351	7%
2	MEDICARE MANAGED CARE	\$187,907	\$353,840	\$165,933	88%
3	MEDICAID	\$1,186,753	\$1,600,124	\$413,371	35%
4	MEDICAID MANAGED CARE	\$212,686	\$0	(\$212,686)	-100%
5	CHAMPUS/TRICARE	\$88,578	\$74,257	(\$14,321)	-16%
6 7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	\$1,098,789	\$869,695 \$6,479,973	(\$229,094)	<u>-21%</u> 4%
8	WORKER'S COMPENSATION	\$6,204,282 \$360,409	\$419,636	\$275,691 \$59,227	4% 16%
9	SELF- PAY/UNINSURED	\$1,454,532	\$1,785,744	\$331,212	23%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,625,696	\$2,153,882	\$528,186	32%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	GROSS REVENUE	\$16,635,348	\$18,262,218	\$1,626,870	10%
	EMERGENCY DEPARTMENT OUTPATIENT NET				
	<u>REVENUE</u>				
1	MEDICARE TRADITIONAL	\$735,669	\$830,096	\$94,427	13%
2	MEDICAID	\$31,694	\$55,177	\$23,483	74%
3	MEDICAID MEDICAID MANAGED CARE	\$275,408 \$5,761	\$377,800 \$0	\$102,392 (\$5,761)	37% -100%
5	CHAMPUS/TRICARE	\$17,559	\$11,958	(\$5,601)	-32%
6	COMMERCIAL INSURANCE	\$148,091	\$186,302	\$38,211	26%
7	NON-GOVERNMENT MANAGED CARE	\$1,669,213	\$1,799,157	\$129,944	8%
8	WORKER'S COMPENSATION	\$26,610	\$8,616	(\$17,994)	-68%
9	SELF- PAY/UNINSURED	\$51,682	\$39,257	(\$12,425)	-24%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$119,516	\$176,222	\$56,706	47%

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	ESSENT	-SHARON HOSPITAI			
	TWELVE MO	ONTHS ACTUAL FIL	ING		
	FIS	CAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS REVE	ENUE, NET REVENU	E 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	\$3,081,203	\$3,484,585	\$403,382	13%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	3,389	3,233	(156)	-5%
2	MEDICARE MANAGED CARE	149	228	79	53%
3	MEDICAID	1,043	1,240	197	19%
4	MEDICAID MANAGED CARE	209	0	(209)	-100%
5	CHAMPUS/TRICARE	72	76	4	6%
6	COMMERCIAL INSURANCE	781	696	(85)	-11%
7	NON-GOVERNMENT MANAGED CARE	6,427	6,092	(335)	-5%
8	WORKER'S COMPENSATION	543	522	(21)	-4%
9	SELF- PAY/UNINSURED	1,502	1,664	162	11%
10	SAGA	0	0	0	0%
11	OTHER	1,741	1,995	254	15%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				·
	VISITS	15,856	15,746	(110)	-1%

ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)	(6)
. ,	, ,	FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
-	ODEDATING EXPENSE BY CATEGORY				
I.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$7,016,561	\$6,922,138	(\$94,423)	-1%
2	Physician Salaries	\$0	\$0	\$0	0%
3	Non-Nursing, Non-Physician Salaries	\$10,390,256	\$10,327,838	(\$62,418)	
	Total Salaries & Wages	\$17,406,817	\$17,249,976	(\$156,841)	-1%
B.	Fringe Benefits:	A 4 00 7 404	44 007 000	* * * * * * * * * *	404
1	Nursing Fringe Benefits	\$1,687,424	\$1,697,890	\$10,466	1%
2	Physician Fringe Benefits	\$0	\$0	\$0	0%
3	Non-Nursing, Non-Physician Fringe Benefits Total Fringe Benefits	\$2,354,664	\$2,533,292	\$178,628	8% 5%
	Total Fringe Benefits	\$4,042,088	\$4,231,182	\$189,094	3%
C.	Contractual Labor Fees:				
1	Nursing Fees	\$517,404	\$592,835	\$75,431	15%
2	Physician Fees	\$1,399,248	\$1,670,355	\$271,107	19%
3	Non-Nursing, Non-Physician Fees	\$59,042	\$6,051	(\$52,991)	-90%
	Total Contractual Labor Fees	\$1,975,694	\$2,269,241	\$293,547	15%
D.	Madical Cumulian and Dharmanautical Costs				
	Medical Supplies and Pharmaceutical Cost:	Φ4 0F0 4C7	£4.000.404	(0 007 000)	70/
2	Medical Supplies Pharmaceutical Costs	\$4,953,467 \$4,654,457	\$4,626,181 \$2,002,255	(\$327,286)	-7%
	Total Medical Supplies and Pharmaceutical Cost	\$1,654,157 \$6,607,624	\$2,002,255 \$6,628,436	\$348,098 \$20,812	21% 0%
	Total mouldar cappings and i marmassariour cock	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ 	\$ 0,020,100		
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$1,602,667	\$1,612,648	\$9,981	1%
2	Depreciation-Equipment	\$1,449,106	\$1,391,493	(\$57,613)	
3	Amortization	\$0	\$0	\$0	0%
	Total Depreciation and Amortization	\$3,051,773	\$3,004,141	(\$47,632)	-2%
F.	Bad Debts:				
1	Bad Debts	\$2,999,367	\$0	(\$2,999,367)	-100%
		+ =,===,===	7 -	(+=,==,==,	
G.	Interest Expense:				
1	Interest Expense	\$136,325	\$0	(\$136,325)	-100%
H.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$1,113,805	\$1,146,180	\$32,375	3%
		, ,	, , ,	. , -	
I.	Utilities:				
1	Water	\$123,901	\$110,227	(\$13,674)	-11%
2	Natural Gas	\$22,310	\$21,393	(\$917)	
3	Oil	\$735,871	\$683,588	(\$52,283)	-7%
4	Electricity	\$695,948	\$696,690	\$742	0%
5	Telephone	\$102,873	\$72,905	(\$29,968)	-29%
6	Other Utilities	\$54,572	\$51,568 \$4 636 374	(\$3,004)	-6%
	Total Utilities	\$1,735,475	\$1,636,371	(\$99,104)	-6%
J.	Business Expenses:				
1	Accounting Fees	\$79,827	\$94,619	\$14,792	19%
2	Legal Fees	\$92,633	\$41,121	(\$51,512)	
3	Consulting Fees	\$146,377	\$359,516	\$213,139	146%

ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)	(6)
-	·	FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
1	Dues and Membership	\$0	\$0	\$0	0%
<u>4</u> 5	Equipment Leases	\$207,177	\$169,458	(\$37,719)	-18%
6	Building Leases	\$103,302	\$91,850	(\$11,452)	-11%
7	Repairs and Maintenance	\$1,715,096	\$1,478,859	(\$236,237)	-14%
8	Insurance	\$145,698	\$96,993	(\$48,705)	-33%
9	Travel	\$90,106	\$95,370	\$5,264	6%
10	Conferences	\$0	\$0	\$0	0%
11	Property Tax	\$294,613	\$298,358	\$3,745	1%
12	General Supplies	\$271,048	\$251,146	(\$19,902)	-7%
13	Licenses and Subscriptions	\$66,193	\$71,480	\$5,287	8%
14	Postage and Shipping	\$41,289	\$62,690	\$21,401	52%
15	Advertising	\$453,111	\$605,949	\$152,838	34%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$244,019	\$318,774	\$74,755	31%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$288,851	\$296,991	\$8,140	3%
20	Lab Fees / Red Cross charges	\$22,195	\$29,123	\$6,928	31%
21 22	Billing & Collection / Bank Fees	\$29,676	\$132,579 \$462,507	\$102,903	347%
23	Recruiting / Employee Education & Recognition Laundry / Linen	\$163,493 \$27,731	\$162,597 \$224,473	(\$896) \$196,742	-1% 709%
<u>23</u> 24	Professional / Physician Fees	\$0	\$224,473	\$196,742	0%
25	Waste disposal	\$2,429	\$41,156	\$38,727	1594%
26	Purchased Services - Medical	\$2,100,924	\$3,148,339	\$1,047,415	50%
27	Purchased Services - Non Medical	\$1,197,347	\$1,618,242	\$420,895	35%
28	Other Business Expenses	\$6,746,688	\$4,861,686	(\$1,885,002)	-28%
	Total Business Expenses	\$14,529,823	\$14,551,369	\$21,546	0%
K.	Other Operating Expense:	(\$ ()	(4)		
1	Miscellaneous Other Operating Expenses	(\$1,853,677)	(\$1,315,411)	\$538,266	-29%
	Total Operating Expenses - All Expense Categories*	\$51,745,114	\$49,401,485	(\$2,343,629)	-5%
	*AK.The total operating expenses amount above mus	st agree with the te	stal operating ever	ness amount on B	oport 150
	AN. The total operating expenses amount above mus	st agree with the to	nai operating expe	mses amount on N	eport 130
	ODED ATIMO EVDENOS DV DED ADTMENT				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$9,613,215	\$9,830,248	\$217,033	2%
2	General Accounting	\$0	\$0	\$0	0%
3	Patient Billing & Collection	\$0	\$0	\$0	0%
4	Admitting / Registration Office	\$0	\$0	\$0	0%
5	Data Processing	\$0	\$0	\$0	0%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$0	\$0	\$0	0%
8	Public Relations	\$802,351	\$859,923	\$57,572	7%
9	Purchasing	\$0 \$007.006	\$0 \$0.46.055	\$0	0%
10	Dietary and Cafeteria	\$907,996 \$480,004	\$946,955 \$474,835	\$38,959 (\$15,076)	4% -3%
11 12	Housekeeping Laundry & Linen	\$489,901 \$233,572	\$474,825 \$225,434	(\$15,076) (\$8,138)	-3% -3%
13	Operation of Plant	\$2,752,798	\$2,585,969	(\$166,829)	-3% -6%
14	Security	\$2,752,798	\$2,585,969	(\$166,829) \$0	-6% 0%
15	Repairs and Maintenance	\$0	\$0 \$0	\$0 \$0	0%
16	Central Sterile Supply	\$0	\$0 \$0	\$0 \$0	0%
. 0	100mm Otomo Ouppiy	ΨΟ	ΨΟ	ΨΟ	0 / 0

ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)	(6)
` '	.,	FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
47	Discourse Department	#0.000.000	Φ0 005 0 7 0	\$005.470	440/
17	Pharmacy Department	\$2,669,606	\$2,965,078	\$295,472	11%
18	Other General Services	\$11,590,019	\$9,960,518	(\$1,629,501)	-14%
	Total General Services	\$29,059,458	\$27,848,950	(\$1,210,508)	-4%
B.	Professional Services:				
1	Medical Care Administration	\$905,739	\$780,928	(\$124,811)	-14%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,073,272	\$945,300	(\$127,972)	-12%
4	Medical Records	\$0	\$0	\$0	0%
5	Social Service	\$421,651	\$583,388	\$161,737	38%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$2,400,662	\$2,309,616	(\$91,046)	-4%
C.	Special Services:				
1	Operating Room	\$1,895,658	\$1,866,286	(\$29,372)	-2%
2	Recovery Room	\$169,754	\$165,562	(\$4,192)	-2%
3	Anesthesiology	\$27,676	\$28,483	\$807	3%
4	Delivery Room	\$408,531	\$479,463	\$70,932	17%
5	Diagnostic Radiology	\$1,739,300	\$1,623,588	(\$115,712)	-7%
6	Diagnostic Ultrasound	\$0	\$0	\$0	0%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$315,574	\$291,512	(\$24,062)	-8%
9	CT Scan	\$203,153	\$160,547	(\$42,606)	-21%
10	Laboratory	\$3,004,598	\$2,426,927	(\$577,671)	-19%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$287,278	\$266,976	(\$20,302)	-7%
14	Electroencephalography	\$229,192	\$205,028	(\$24,164)	-11%
15	Occupational Therapy	\$87,300	\$95,225	\$7,925	9%
16	Speech Pathology	\$81,785	\$99,886	\$18,101	22%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$426,014	\$422,018	(\$3,996)	-1%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$53,255	\$0	(\$53,255)	-100%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$1,753,581	\$1,697,929	(\$55,652)	-3%
25	MRI	\$292,293	\$267,549	(\$24,744)	-8%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$67,159	\$41,708	(\$25,451)	-38%
32	Occupational Therapy / Physical Therapy	\$772,191	\$630,601	(\$141,590)	-18%
33	Dental Clinic	\$0	\$0	\$0 \$517.677	0%
34	Other Special Services Total Special Services	\$2,140,641 \$13,954,933	\$2,658,318 \$13,427,606	\$517,677 (\$527,327)	24% -4%
	Total Opecial Gel Vices	ψ10,304,300	ψ13,421,000	(4021,021)	-4/0
D.	Routine Services:				
1	Medical & Surgical Units	\$2,484,745	\$2,450,044	(\$34,701)	-1%
2	Intensive Care Unit	\$1,062,395	\$1,001,532	(\$60,863)	-6%
3	Coronary Care Unit	\$0	\$0	\$0	0%

ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
4	Psychiatric Unit	\$1,897,857	\$1,982,927	\$85,070	4%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
7	Newborn Nursery Unit	\$317,361	\$380,810	\$63,449	20%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$567,703	\$0	(\$567,703)	-100%
	Total Routine Services	\$6,330,061	\$5,815,313	(\$514,748)	-8%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses - All Departments*	\$51,745,114	\$49,401,485	(\$2,343,629)	-5%
	*A E. The total operating expenses amount above	must agree with the to	otal operating exp	enses amount on l	Report 150.

	ESSENT	-SHARON HOSPITAL						
	TWELVE M	ONTHS ACTUAL FILING						
	FISCAL YEAR 2013							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
(-7		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013				
Α.	Statement of Operations Summary							
1	Total Net Patient Revenue	\$55,537,559	\$54,558,825	\$53,746,903				
2	Other Operating Revenue	457,560	453,530	429,185				
3	Total Operating Revenue	\$55,995,119	\$55,012,355	\$54,176,088				
4	Total Operating Expenses	53,061,849	51,745,114	49,401,485				
5	Income/(Loss) From Operations	\$2,933,270	\$3,267,241	\$4,774,603				
6	Total Non-Operating Revenue	0	0	0				
7	Excess/(Deficiency) of Revenue Over Expenses	\$2,933,270	\$3,267,241	\$4,774,603				
В.	Profitability Summary							
1	Hospital Operating Margin	5.24%	5.94%	8.81%				
2	Hospital Non Operating Margin	0.00%	0.00%	0.00%				
3	Hospital Total Margin	5.24%	5.94%	8.81%				
4	Income/(Loss) From Operations	\$2,933,270	\$3,267,241	\$4,774,603				
5	Total Operating Revenue	\$55,995,119	\$55,012,355	\$54,176,088				
6	Total Non-Operating Revenue	\$0	\$0	\$0				
7	Total Revenue	\$55,995,119	\$55,012,355	\$54,176,088				
8	Excess/(Deficiency) of Revenue Over Expenses	\$2,933,270	\$3,267,241	\$4,774,603				
C.	Net Assets Summary							
1	Hospital Unrestricted Net Assets	\$21,632,914	\$24,878,651	\$30,054,582				
2	Hospital Total Net Assets	\$21,632,914	\$24,878,651	\$30,054,582				
3	Hospital Change in Total Net Assets	\$3,365,092	\$3,245,737	\$5,175,931				
4	Hospital Change in Total Net Assets %	118.4%	15.0%	20.8%				
D.	Cost Data Summary							
1	Ratio of Cost to Charges	0.41	0.37	0.33				
2	Total Operating Expenses	\$53,061,849	\$51,745,114	\$49,401,485				
3	Total Gross Revenue	\$129,742,905	\$138,431,770	\$147,441,042				
4	Total Other Operating Revenue	\$457,560	\$453,530	\$429,185				

	ESSE	NT-SHARON HOSPITAL						
	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				
5	Private Payment to Cost Ratio	1.19	1.25	1.31				
6	Total Non-Government Payments	\$24,075,381	\$23,341,797	\$23,155,548				
7	Total Uninsured Payments	\$250,966	\$680,119	\$651,124				
8	Total Non-Government Charges	\$52,184,837	\$52,514,475	\$55,244,177				
9	Total Uninsured Charges	\$3,222,487	\$3,911,673	\$3,802,432				
10	Medicare Payment to Cost Ratio	0.91	0.92	1.00				
11	Total Medicare Payments	\$24,162,906	\$24,473,538	\$25,498,542				
12	Total Medicare Charges	\$65,446,208	\$71,393,432	\$76,021,100				
13	Medicaid Payment to Cost Ratio	0.67	0.67	0.74				
14	Total Medicaid Payments	\$1,938,129	\$2,002,907	\$2,090,929				
15	Total Medicaid Charges	\$7,111,848	\$8,064,361	\$8,443,579				
16	Uncompensated Care Cost	\$1,825,630	\$1,400,677	\$1,080,914				
17	Charity Care	\$942,411	\$760,089	\$941,923				
18	Bad Debts	\$3,537,228	\$2,999,367	\$2,293,507				
19	Total Uncompensated Care	\$4,479,639	\$3,759,456	\$3,235,430				
20	Uncompensated Care % of Total Expenses	3.4%	2.7%	2.2%				
21	Total Operating Expenses	\$53,061,849	\$51,745,114	\$49,401,485				
E.	Liquidity Measures Summary							
1	Current Ratio	1	2	2				
2	Total Current Assets	\$9,594,446	\$9,299,993	\$11,159,582				
3	Total Current Liabilities	\$6,983,647	\$5,224,185	\$5,400,972				
4	Days Cash on Hand	0	0	0				
5	Cash and Cash Equivalents	\$0	\$0	\$0				
6	Short Term Investments	0	0	0				

	ESSENT-SHAR	ON HOSPITAL						
	TWELVE MONTHS	ACTUAL FILING						
	FISCAL 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	Total Cash and Short Term Investments	\$0	\$0	\$0				
8	Total Operating Expenses	\$53,061,849	\$51,745,114	\$49,401,485				
9	Depreciation Expense	\$3,122,389	\$3,051,773	\$3,004,141				
10	Operating Expenses less Depreciation Expense	\$49,939,460	\$48,693,341	\$46,397,344				
11	Days Revenue in Patient Accounts Receivable	42	46	46				
12	Net Patient Accounts Receivable	\$6,874,918	\$6,927,031	\$7,018,848				
13	Due From Third Party Payers	\$0	\$0	\$0				
14	Due To Third Party Payers	\$441,349	\$0	\$291,175				
	Total Net Patient Accounts Receivable and Third Party Payer	4	4					
15	Activity	\$6,433,569	\$6,927,031	\$6,727,673				
16	Total Net Patient Revenue	\$55,537,559	\$54,558,825	\$53,746,903				
17	Average Payment Period	51	39	42				
18	Total Current Liabilities	\$6,983,647	\$5,224,185	\$5,400,972				
19	Total Operating Expenses	\$53,061,849	\$51,745,114	\$49,401,485				
20	Depreciation Expense	\$3,122,389	\$3,051,773	\$3,004,141				
21	Total Operating Expenses less Depreciation Expense	\$49,939,460	\$48,693,341	\$46,397,344				
F.	Solvency Measures Summary							
	Equity Financing Ratio	33.6	52.9	65.2				
1								
2	Total Net Assets Total Assets	\$21,632,914	\$24,878,651 \$47,008,155	\$30,054,582				
3	Total Assets	\$64,431,247	\$47,008,155	\$46,104,495				
4	Cash Flow to Total Debt Ratio	15.0	31.4	54.7				
5	Excess/(Deficiency) of Revenues Over Expenses	\$2,933,270	\$3,267,241	\$4,774,603				
6	Depreciation Expense	\$3,122,389	\$3,051,773	\$3,004,141				
7	Excess of Revenues Over Expenses and Depreciation Expense	\$6,055,659	\$6,319,014	\$7,778,744				
8	Total Current Liabilities	\$6,983,647	\$5,224,185	\$5,400,972				
9	Total Long Term Debt	\$33,337,500	\$14,898,159	\$8,826,637				
10	Total Current Liabilities and Total Long Term Debt	\$40,321,147	\$20,122,344	\$14,227,609				

	ESSENT-SH	IARON HOSPITAL							
	TWELVE MON	THS ACTUAL FILING							
	FISCAL 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					
11	Long Term Debt to Capitalization Ratio	60.6	37.5	22.7					
12	Total Long Term Debt	\$33,337,500	\$14,898,159	\$8,826,637					
13	Total Net Assets	\$21,632,914	\$24,878,651	\$30,054,582					
14	Total Long Term Debt and Total Net Assets	\$54,970,414	\$39,776,810	\$38,881,219					
15	Debt Service Coverage Ratio	3.8	0.2	7,778,744.0					
16	Excess Revenues over Expenses	2,933,270	\$3,267,241	\$4,774,603					
17	Interest Expense	1,664,350	\$136,325	\$0					
18	Depreciation and Amortization Expense	3,122,389	\$3,051,773	\$3,004,141					
19	Principal Payments	350,000	\$33,687,500	\$1					
G.	Other Financial Ratios								
20	Average Age of Plant	7.2	8.5	9.5					
21	Accumulated Depreciation	22,455,088	26,040,539	28,550,693					
22	Depreciation and Amortization Expense	3,122,389	3,051,773	3,004,141					
н.	Utilization Measures Summary								
1	Patient Days	12,355	11,914	12,338					
2	Discharges	2,703	2,685	2,878					
3	ALOS	4.6	4.4	4.3					
4	Staffed Beds	49	49	49					
5	Available Beds	-	94	94					
6	Licensed Beds	94	94	78					
7	Occupancy of Staffed Beds	69.1%	66.6%	69.0%					
8	Occupancy of Available Beds	36.0%	34.7%	36.0%					
9	Full Time Equivalent Employees	271.5	255.6	247.4					
I.	Hospital Gross Revenue Payer Mix Percentage								
1	Non-Government Gross Revenue Payer Mix Percentage	37.7%	35.1%	34.9%					
2	Medicare Gross Revenue Payer Mix Percentage	50.4%	51.6%	51.6%					

	ESSENT-SHAF	RON HOSPITAL						
	TWELVE MONTH	S ACTUAL FILING						
	FISCAL 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				
3	Medicaid Gross Revenue Payer Mix Percentage	5.5%	5.8%	5.7%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	3.7%	4.4%	5.1%				
5	Uninsured Gross Revenue Payer Mix Percentage	2.5%	2.8%	2.6%				
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.3%	0.2%				
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Gross Revenue (Charges)	\$48,962,350	\$48,602,802	\$51,441,745				
9	Medicare Gross Revenue (Charges)	\$65,446,208	\$71,393,432	\$76,021,100				
10	Medicaid Gross Revenue (Charges)	\$7,111,848	\$8,064,361	\$8,443,579				
11	Other Medical Assistance Gross Revenue (Charges)	\$4,789,937	\$6,095,965	\$7,456,667				
12	Uninsured Gross Revenue (Charges)	\$3,222,487	\$3,911,673	\$3,802,432				
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$210,075	\$363,537	\$275,519				
14	Total Gross Revenue (Charges)	\$129,742,905	\$138,431,770	\$147,441,042				
	, and the second containing of	+ :==,: :=,:::	4 100, 101, 110	*···,··,··				
J.	Hospital Net Revenue Payer Mix Percentage							
1	Non-Government Net Revenue Payer Mix Percentage	46.4%	44.2%	42.8%				
2	Medicare Net Revenue Payer Mix Percentage	47.0%	47.7%	48.5%				
3	Medicaid Net Revenue Payer Mix Percentage	3.8%	3.9%	4.0%				
4	Other Medical Assistance Net Revenue Payer Mix Percentage	2.2%	2.5%	3.3%				
5	Uninsured Net Revenue Payer Mix Percentage	0.5%	1.3%	1.2%				
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.4%	0.2%				
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Net Revenue (Payments)	\$23,824,415	\$22,661,678	\$22,504,424				
9	Medicare Net Revenue (Payments)	\$24,162,906	\$24,473,538	\$25,498,542				
10	Medicaid Net Revenue (Payments)	\$1,938,129	\$2,002,907	\$2,090,929				
11	Other Medical Assistance Net Revenue (Payments)	\$1,107,480	\$1,266,299	\$1,762,147				
12	Uninsured Net Revenue (Payments)	\$250,966	\$680,119	\$651,124				
13	CHAMPUS / TRICARE Net Revenue Payments)	\$108,115	\$216,741	\$119,495				
14	Total Net Revenue (Payments)	\$51,392,011	\$51,301,282	\$52,626,661				
K.	<u>Discharges</u>							
1	Non-Government (Including Self Pay / Uninsured)	794	743	830				
2	Medicare	1,530	1,554	1,614				
3	Medical Assistance	371	377	425				
4	Medicaid	223	194	217				
5	Other Medical Assistance	148	183	208				
6	CHAMPUS / TRICARE	8	11	9				

	ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING							
	FI	SCAL 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	Uninsured (Included In Non-Government)	57	73	93				
8	Total	2,703	2,685	2,878				
L.	Case Mix Index							
1	Non-Government (Including Self Pay / Uninsured)	1.01270	0.98760	1.00670				
2	Medicare	1.20590	1.15760	1.18240				
3	Medical Assistance	0.89059	0.92894	0.93546				
4	Medicaid	0.84930	0.94870	0.91050				
5	Other Medical Assistance	0.95280	0.90800	0.96150				
6	CHAMPUS / TRICARE	0.66390	0.77580	1.02190				
7	Uninsured (Included In Non-Government)	1.10840	0.99190	0.89090				
8	Total Case Mix Index	1.10427	1.07689	1.09476				
М.	Emergency Department Visits							
1	Emergency Room - Treated and Admitted	1,720	1,766	1,878				
2	Emergency Room - Treated and Discharged	15,938	15,856	15,746				
3	Total Emergency Room Visits	17,658	17,622	17,624				

		IARON HOSPITAL			
		THS ACTUAL FILING	i		
		L YEAR 2013	ADE AOTIVITY	,	
	REPORT 200 - HOSPITAL ME	DICARE MANAGED C	SARE ACTIVITY		
(1)	(2)	(3)	(4)	(5)	(6)
(.)	\2)	FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$638,506	\$300,722	(\$337,784)	-53%
2	Inpatient Payments	\$265,659	\$108,190	(\$157,469)	-59%
3	Outpatient Charges	\$176,330	\$177,502	\$1,172	1%
4	Outpatient Payments	\$37,661	\$46,302	\$8,641	23%
5	Discharges	18	11	(7)	-39%
6	Patient Days	165	80	(85)	-52%
7	Outpatient Visits (Excludes ED Visits)	126	157	31	25%
8	Emergency Department Outpatient Visits	19	17 0	(2)	-11% 0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	\$814,836	\$478,224	(\$336,612)	-41%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$303,320	\$154,492	(\$148,828)	-49%
		\$330,623	ψ.σ.,.σ <u>-</u>	(\$1.0,020)	10 / 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%
4	Outpatient Payments	\$0	\$0	\$0	0%
5 6	Discharges	0	0	0	0% 0%
7	Patient Days Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Odipatient 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%
C.	CONNECTICARE, INC.	4		/4	
1	Inpatient Charges	\$317,713	\$248,934	(\$68,779)	-22%
2	Inpatient Payments	\$141,461	\$108,111	(\$33,350) \$177,675	-24%
3	Outpatient Charges Outpatient Payments	\$376,953 \$80,369	\$554,628 \$111,368	\$177,675 \$30,999	47% 39%
5	Discharges	\$60,369 11	<u> </u>	\$30,999 0	0%
6	Patient Days	55	38	(17)	-31%
7	Outpatient Visits (Excludes ED Visits)	446	456	10	2%
8	Emergency Department Outpatient Visits	24	24	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$694,666	\$803,562	\$108,896	16%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$221,830	\$219,479	(\$2,351)	-1%
	LIEAL TUNET OF CONNECTION				
D.	HEALTHNET OF CONNECTICUT	\$0	\$0		00/
2	Inpatient Charges Inpatient Payments	\$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
4	Outpatient Orlanges 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%

ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY (1) (2) (6) FY 2012 **AMÒÚNT** FY 2013 LINE DESCRIPTION **ACTUAL ACTUAL DIFFERENCE DIFFERENCE** E. OTHER MEDICARE MANAGED CARE 1 Inpatient Charges \$413,889 \$327,781 (\$86,108)-21% 2 Inpatient Payments \$205,074 \$144.816 (\$60,258)-29% 3 Outpatient Charges \$196.186 \$395,149 \$198.963 101% 4 **Outpatient Payments** \$45,126 \$77,997 \$32.871 73% 5 Discharges 16 14 (2)-13% 6 Patient Days 83 89 6 7% 7 Outpatient Visits (Excludes ED Visits) 85% 188 348 160 8 **Emergency Department Outpatient Visits** 21 29 38% 8 9 **Emergency Department Inpatient Admissions** n 0 0 0% TOTAL INPATIENT & OUTPATIENT CHARGES \$610,075 \$722,930 \$112,855 18% TOTAL INPATIENT & OUTPATIENT PAYMENTS \$250,200 \$222,813 -11% (\$27,387)**OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE** F. 1 Inpatient Charges \$0 \$0 \$0 0% 2 Inpatient Payments \$0 \$0 \$0 0% 3 Outpatient Charges \$16,230 \$23,376 \$7,146 44% 4 Outpatient Payments \$2.930 81% \$3.602 \$6,532 5 Discharges 0% 0 0 0 6 Patient Days 0 0 0 0% -43% 7 Outpatient Visits (Excludes ED Visits) 7 4 (3) **Emergency Department Outpatient Visits** 1 21 2000% 8 20 **Emergency Department Inpatient Admissions** 9 0 0 0% 0 **TOTAL INPATIENT & OUTPATIENT CHARGES** \$16,230 \$23,376 44% \$7,146 TOTAL INPATIENT & OUTPATIENT PAYMENTS \$3,602 81% \$6,532 \$2,930 UNITED HEALTHCARE INSURANCE COMPANY G. Inpatient Charges \$0 \$0 \$0 0% 2 Inpatient Payments \$0 \$0 \$0 0% 3 **Outpatient Charges** \$0 \$0 \$0 0% 4 Outpatient Payments \$0 0% \$0 \$0 Discharges 0% 5 0 0 0 Patient Days 6 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% WELLCARE OF CONNECTICUT Н. Inpatient Charges \$89,813 \$106,846 \$17,033 19% 1 2 Inpatient Payments -32% \$57,018 \$38,533 (\$18,485)**Outpatient Charges** \$27,823 \$14,914 54% 3 \$42,737 **Outpatient Payments** \$4.959 \$9.707 \$4.748 96% 4 5 Discharges 5 0 0% 5 6 Patient Days 14 21 7 50% 7 Outpatient Visits (Excludes ED Visits) 22 24 2 9% 8 **Emergency Department Outpatient Visits** 8 16 8 100% **Emergency Department Inpatient Admissions** 9 0 0 0 0% TOTAL INPATIENT & OUTPATIENT CHARGES \$117,636 \$149,583 \$31,947 27% **TOTAL INPATIENT & OUTPATIENT PAYMENTS** \$61,977 \$48,240 (\$13,737) -22% **AETNA**

	EQUENT OF	IARON HOSPITAL			
		THS ACTUAL FILING	1		
		L YEAR 2013			
	REPORT 200 - HOSPITAL ME		CARE ACTIVITY		
(1)	(2)	(3)	(4)	(5)	(6)
	DESCRIPTION	FY 2012	FY 2013	AMOUNT	% DIFFEDENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
1	Inpatient Charges	\$151,535	\$277,981	\$126,446	83%
2	Inpatient Payments	\$57,824	\$131,897	\$74,073	128%
3	Outpatient Charges	\$100,090	\$291,177	\$191,087	191%
4	Outpatient Payments	\$25,397	\$57,316	\$31,919	126%
5	Discharges	3	14	11	367%
6	Patient Days	38	75	37	97%
7	Outpatient Visits (Excludes ED Visits)	98	296	198	202%
8	Emergency Department Outpatient Visits	13	24	11	85%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$251,625	\$ 569,158	9 \$317,533	0% 126%
	TOTAL INPATIENT & COTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$83,221	\$189,213	\$105,992	120%
	TOTAL IN ATIENT & COTT ATIENT FATMENTS	ΨΟΟ,ΖΖΙ	Ψ103,213	Ψ100,332	121/0
J.	HUMANA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$1,609	\$1,609	0%
4	Outpatient Payments	\$0	\$357	\$357	0%
5	Discharges	0	0	0	0% 0%
7	Patient Days Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	<u>1</u>	1	0%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$1,609	\$1,609	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$357	\$357	0%
K.	SECURE HORIZONS				
1 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 TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	<u>0</u> \$0	0	0% 0 %
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL INFATILITY & COTTATIENT FATMENTS	\$0	Ψ	φυ	070
L.	UNICARE LIFE & HEALTH INSURANCE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0% 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%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ 0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
					37.
M.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

	FSSENT-SHA	RON HOSPITAL			
		IS ACTUAL FILING			
		YEAR 2013			
	REPORT 200 - HOSPITAL MEDI		ADE ACTIVITY		
	REPORT 200 - HOSFITAL WIEDI	CARE WANAGED C	ARE ACTIVITI		
(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	\$465,129	\$1,167,359	\$702,230	151%
2	Inpatient Payments	\$250,937	\$454,876	\$203,939	81%
3	Outpatient Charges	\$645,343	\$858,808	\$213,465	33%
4	Outpatient Payments	\$161,638	\$209,925	\$48,287	30%
5	Discharges	28	44	16	57%
6	Patient Days	126	317	191	152%
7	Outpatient Visits (Excludes ED Visits)	663	780	117	18%
8	Emergency Department Outpatient Visits	63	96	33	52%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,110,472	\$2,026,167	\$915,695	82%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$412,575	\$664,801	\$252,226	61%
II.	TOTAL MEDICARE MANAGED CARE	•			
	TOTAL INPATIENT CHARGES	\$2,076,585	\$2,429,623	\$353,038	17%
	TOTAL INPATIENT PAYMENTS	\$977,973	\$986,423	\$8,450	19
	TOTAL OUTPATIENT CHARGES	\$1,538,955	\$2,344,986	\$806,031	52%
	TOTAL OUTPATIENT PAYMENTS	\$358,752	\$519,504	\$160,752	45%
	TOTAL DISCHARGES	81	99	18	22%
	TOTAL PATIENT DAYS	481	620	139	29%
			020	.30	
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) TOTAL EMERGENCY DEPARTMENT OUTPATIENT	1,550	2,066	516	33%
		440	200	70	F00
	VISITS	149	228	79	53%
	TOTAL EMERGENCY DEPARTMENT INPATIENT		•	_	20
	ADMISSIONS	0	0 \$4,774,600	0 \$4.450.060	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,615,540	\$4,774,609	\$1,159,069	329
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,336,725	\$1,505,927	\$169,202	139

		T-SHARON HOSPITA			
		MONTHS ACTUAL FIL FISCAL YEAR 2013	LING		
	REPORT 250 - HOSPITAL		ED CARE ACTIVIT	ГҮ	
	N2. GN. 255 11651 117.			· ·	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT DIFFERENCE	0/ DIFFERENCE
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
A.	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 7	Patient Days 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%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$ 0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL INFATIENT & OUTFATIENT FATMENTS	\$ 0	Φ0	Φ0	076
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$373,099	\$0	(\$373,099)	-100%
2	Inpatient Payments	\$77,810	\$0	(\$77,810)	-100%
3	Outpatient Charges	\$368,221	\$0	(\$368,221)	-100%
4	Outpatient Payments	\$88,023	\$0	(\$88,023)	-100%
5	Discharges	21	0	(21)	-100%
6	Patient Days	60	0	(60)	-100%
7	Outpatient Visits (Excludes ED Visits)	333	0	(333)	-100%
8	Emergency Department Outpatient Visits	146	0	(146)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$741,320	\$0	(\$741,320)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$165,833	\$0	(\$165,833)	-100%
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0 \$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
		T			
D.	OTHER MEDICAID MANAGED CARE	400.010	A =	/ACC - 1-1	
1	Inpatient Charges	\$20,243	\$0	(\$20,243)	-100%
2	Inpatient Payments	\$8,629	\$0 \$0	(\$8,629)	-100%
3	Outpatient Charges	\$80,760	\$0 \$0	(\$80,760)	-100%
4	Outpatient Payments	\$9,293	\$0	(\$9,293)	-100%
	Discharges	2	0	(2)	-100%
5		_		/^\	1000
6	Patient Days	6	0	(6)	
6 7	Patient Days Outpatient Visits (Excludes ED Visits)	0	0	0	0%
6 7 8	Patient Days				-100% 0% -100% 0%

		SHARON HOSPIT			
		ONTHS ACTUAL FI	ILING		
	REPORT 250 - HOSPITAL		SED CARE ACTIVIT	ГҮ	
(1)	(2)	(3)	(4) EV 2012	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
		ACTUAL	ACTORE	DILLENCIA	/0 DII I LIXLIAOL
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$17,922	\$0	(\$17,922)	-100%
E.	WELLCARE OF CONNECTICUT	*	# 0	# 0	00/
2	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
4	Outpatient Orlanges 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 TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	0	0	0% 0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	\$0 \$0	\$0 \$0	0%
 	FIRST CHOICE OF CONNECTICUT, PREFERRED	Ψ0	Ψ	Ψ	<u> </u>
F.	ONE		ı	,	
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 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 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			,	
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$8,328	\$0	(\$8,328)	-100%
4	Outpatient Payments	\$1,671	\$0	(\$1,671)	-100%
5 6	Discharges Patient Days	0	0	0	0% 0%
7	Outpatient Visits (Excludes ED Visits)	15	0	(15)	-100%
8	Emergency Department Outpatient Visits	9	0	(9)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$8,328	\$0	(\$8,328)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,671	\$0	(\$1,671)	-100%
н.	AETNA				
1	Inpatient Charges	\$126,205	\$0	(\$126,205)	-100%
2	Inpatient Payments	\$31,192	\$0	(\$31,192)	-100%
3	Outpatient Charges	\$72,216	\$0	(\$72,216)	-100%
4	Outpatient Payments	\$19,423	\$0	(\$19,423)	-100%
5	Discharges	10	0	(10) (20)	-100%
6 7	Patient Days Outpatient Visits (Excludes ED Visits)	92	0	(20)	-100% -100%
8	Emergency Department Outpatient Visits	25	0	(25)	-100%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
<u> </u>	TOTAL INPATIENT & OUTPATIENT CHARGES	\$198,421	\$0	(\$198,421)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$50,615	\$0	(\$50,615)	-100%
				-	

	FOOTAIT	CHARON HOSBIT	A.1		
		-SHARON HOSPIT ONTHS ACTUAL F			
		ISCAL YEAR 2013	ILING		
	REPORT 250 - HOSPITAL		ED CARE ACTIVI	TY	
	KEI OKI 200 HOOFHAL	MEDIOAID MAIVAC	DED GAILE AGIIVI		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$519,547	\$0	(\$519,547)	-100%
	TOTAL INPATIENT PAYMENTS	\$117,631	\$0	(\$117,631)	-100%
	TOTAL OUTPATIENT CHARGES	\$529,525	\$0	(\$529,525)	-100%
	TOTAL OUTPATIENT PAYMENTS	\$118,410	\$0	(\$118,410)	-100%
	TOTAL DISCHARGES	33	0	(33)	-100%
	TOTAL PATIENT DAYS	86	0	(86)	-100%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	440	0	(440)	-100%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	209	0	(209)	-100%
	TOTAL EMERGENCY DEPARTMENT				
	INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,049,072	\$0	(\$1,049,072)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$236,041	\$0	(\$236,041)	-100%

	SHA	ARON HOSPITAL HOLD	DING CO, INC.		
	т	WELVE MONTHS ACT	UAL FILING		
		FISCAL YEAR 2	013		
	REPORT 300 - PARENT CORF	PORATION CONSOLIDA	ATED BALANCE SHE	ET INFORMATION	
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	<u>ASSETS</u>				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$0	\$117,062	\$117,062	0%
2	Short Term Investments	\$0	\$0	\$0	0%
	Accounts Receivable (Less: Allowance for				
3	Doubtful Accounts) Current Assets Whose Use is Limited for Current	\$7,516,850	\$7,934,530	\$417,680	6%
4	Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,143,076	\$1,271,046	\$127,970	11%
8	Prepaid Expenses	\$552,202	\$1,848,189	\$1,295,987	235%
9	Other Current Assets	\$730,076	\$1,179,591	\$449,515	62%
	Total Current Assets	\$9,942,204	\$12,350,418	\$2,408,214	24%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$0	\$0	\$0	0%
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:	\$0	\$0	\$0	0%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$1,942,091	\$667,672	(\$1,274,419)	-66%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$62,033,192	\$63,297,105	\$1,263,913	2%
2	Less: Accumulated Depreciation	\$26,189,685	\$28,688,271	\$2,498,586	\$0
	Property, Plant and Equipment, Net	\$35,843,507	\$34,608,834	(\$1,234,673)	-3%
3	Construction in Progress	\$429,573	\$0	(\$429,573)	-100%
	Total Net Fixed Assets	\$36,273,080	\$34,608,834	(\$1,664,246)	-5%
	Total Assets	\$48,157,375	\$47,626,924	(\$530,451)	-1%
II.	LIABILITIES AND NET ASSETS				
Α.	Current Liabilities:				

SHARON HOSPITAL HOLDING CO, INC. TWELVE MONTHS ACTUAL FILING

		FISCAL YEAR 20	13		
	REPORT 300 - PARENT CO	RPORATION CONSOLIDA	TED BALANCE SHE	ET INFORMATION	
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %
<u>LINE</u>	DESCRIPTION	<u>ACTUAL</u>	ACTUAL	DIFFERENCE	DIFFERENCE
1	Accounts Payable and Accrued Expenses	\$1,836,580	\$1,739,478	(\$97,102)	-5%
2	Salaries, Wages and Payroll Taxes	\$4,114,911	\$4,264,163	\$149,252	4%
3	Due To Third Party Payers	\$9,120	\$345,766	\$336,646	3691%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	Total Current Liabilities	\$5,960,611	\$6,349,407	\$388,796	7%
В.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$24,196,785	\$21,600,220	(\$2,596,565)	-11%
	Total Long Term Debt	\$24,196,785	\$21,600,220	(\$2,596,565)	-11%
3	Accrued Pension Liability	\$1,403,000	\$1,268,000	(\$135,000)	-10%
4	Other Long Term Liabilities	\$354,160	\$554,304	\$200,144	57%
	Total Long Term Liabilities	\$25,953,945	\$23,422,524	(\$2,531,421)	-10%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$250,000	\$250,000	\$0	0%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$15,992,819	\$17,604,993	\$1,612,174	10%
2	Temporarily Restricted Net Assets	\$0	\$0	\$0	0%
3	Permanently Restricted Net Assets	\$0	\$0	\$0	0%
	Total Net Assets	\$15,992,819	\$17,604,993	\$1,612,174	10%

\$48,157,375

\$47,626,924

(\$530,451)

-1%

Total Liabilities and Net Assets

SHARON HOSPITAL HOLDING CO, INC.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
	DECORIDATION	FY 2012	FY 2013	AMOUNT	% DIEEEDENGE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$146,615,022	\$161,643,985	\$15,028,963	10%
2	Less: Allowances	\$85,945,146	\$97,303,651	\$11,358,505	13%
3	Less: Charity Care	\$760,089	\$941,923	\$181,834	24%
4	Less: Other Deductions	\$530,703	\$682,983	\$152,280	29%
	Total Net Patient Revenue	\$59,379,084	\$62,715,428	\$3,336,344	6%
5	Provision for Bad Debts Net Patient Service Revenue less provision for bad	\$0	\$2,466,684	\$2,466,684	0%
	debts	\$59,379,084	\$60,248,744	\$869,660	1%
6	Other Operating Revenue	\$482,704	\$429,185	(\$53,519)	-11%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$59,861,788	\$60,677,929	\$816,141	1%
В.	Operating Expenses:				
1	Salaries and Wages	\$20,311,872	\$22,702,349	\$2,390,477	12%
2	Fringe Benefits	\$4,776,447	\$4,568,997	(\$207,450)	-4%
3	Physicians Fees	\$1,399,248	\$2,260,982	\$861,734	62%
4	Supplies and Drugs	\$6,837,410	\$6,890,427	\$53,017	1%
5	Depreciation and Amortization	\$3,213,579	\$2,992,573	(\$221,006)	-7%
6	Bad Debts	\$3,224,489	\$0	(\$3,224,489)	-100%
7	Interest Expense	\$136,325	(\$5,555)	(\$141,880)	-104%
8	Malpractice Insurance Cost	\$1,113,805	\$1,146,183	\$32,378	3%
9	Other Operating Expenses	\$18,869,214	\$18,597,746	(\$271,468)	-1%
	Total Operating Expenses	\$59,882,389	\$59,153,702	(\$728,687)	-1%
	Income/(Loss) From Operations	(\$20,601)	\$1,524,227	\$1,544,828	-7499%
C.	Non-Operating Revenue:				
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	Total Non-Operating Revenue	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$20,601)	\$1,524,227	\$1,544,828	-7499%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

		OSPITAL HOLDING C	·			
		FISCAL YEAR 2013				
	REPORT 350 - PARENT CORPORATION CO	NSOLIDATED STATE	MENT OF OPERA	TIONS INFORMATI	ON	
(1) (2) (3) (4) (5)						
		FY 2012	FY 2013	AMOUNT	(6) %	
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	(\$20,601)	\$1,524,227	\$1,544,828	-7499%	

SHARON HOSPITAL HOLDING CO, INC.

TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
(')	(-)	ACTUAL	ACTUAL	ACTUAL
IINF	DESCRIPTION	FY 2011	FY 2012	FY 2013
	DECOMM FIGH	112011	112012	1 1 2010
A.	Parent Corporation Statement of Operations Summary			
1	Net Patient Revenue	\$59,340,161	\$59,379,084	\$60,248,744
2	Other Operating Revenue	458,274	482,704	429,185
3	Total Operating Revenue	\$59,798,435	\$59,861,788	\$60,677,929
4	Total Operating Expenses	58,301,652	59,882,389	59,153,702
5	Income/(Loss) From Operations	\$1,496,783	(\$20,601)	\$1,524,227
6	Total Non-Operating Revenue	0	0	0
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,496,783	(\$20,601)	\$1,524,227
B.	Parent Corporation Profitability Summary			
1	Parent Corporation Operating Margin	2.50%	-0.03%	2.51%
2	Parent Corporation Non-Operating Margin	0.00%	0.00%	0.00%
3	Parent Corporation Total Margin	2.50%	-0.03%	2.51%
4	Income/(Loss) From Operations	\$1,496,783	(\$20,601)	\$1,524,227
5	Total Operating Revenue	\$59,798,435	\$59,861,788	\$60,677,929
6	Total Non-Operating Revenue	\$0	\$0	\$0
7	Total Revenue	\$59,798,435	\$59,861,788	\$60,677,929
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,496,783	(\$20,601)	\$1,524,227
C.	Parent Corporation Net Assets Summary			
1	Parent Corporation Unrestricted Net Assets	\$16,034,925	\$15,992,819	\$17,604,993
2	Parent Corporation Total Net Assets	\$16,034,925	\$15,992,819	\$17,604,993
3	Parent Corporation Change in Total Net Assets	\$1,515,969	(\$42,106)	\$1,612,174
4	Parent Corporation Change in Total Net Assets %	110.4%	-0.3%	10.1%
_	11:0011110			
D.	<u>Liquidity Measures Summary</u>			
1	Current Ratio	1.39	1.67	1.95
2	Total Current Assets	\$10,031,198	\$9,942,204	\$12,350,418
3	Total Current Liabilities	\$7,196,438	\$5,960,611	\$6,349,407

SHARON HOSPITAL HOLDING CO, INC.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
4	Days Cash on Hand	0	0	1
5	Cash and Cash Equivalents	\$0	\$0	\$117,062
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$0	\$0	\$117,062
8	Total Operating Expenses	\$58,301,652	\$59,882,389	\$59,153,702
9	Depreciation Expense	\$3,230,817	\$3,213,579	\$2,992,573
10	Operating Expenses less Depreciation Expense	\$55,070,835	\$56,668,810	\$56,161,129
11	Days Revenue in Patient Accounts Receivable	42	46	46
12	Net Patient Accounts Receivable	\$ 7,311,670	\$ 7,516,850	\$ 7,934,530
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$441,349	\$9,120	\$345,766
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 6,870,321	\$ 7,507,730	\$ 7,588,764
16	Total Net Patient Revenue	\$59,340,161	\$59,379,084	\$60,248,744
17	Average Payment Period	48	38	41
18	Total Current Liabilities	\$7,196,438	\$5,960,611	\$6,349,407
19	Total Operating Expenses	\$58,301,652	\$59,882,389	\$59,153,702
20	Depreciation Expense	\$3,230,817	\$3,213,579	\$2,992,573
20	Total Operating Expenses less Depreciation Expense	\$55,070,835	\$56,668,810	\$56,161,129
E.	Solvency Measures Summary			
1	Equity Financing Ratio	27.2	33.2	37.0
2	Total Net Assets	\$16,034,925	\$15,992,819	\$17,604,993
3	Total Assets	\$59,046,049	\$48,157,375	\$47,626,924
4	Cash Flow to Total Debt Ratio	11.7	10.6	16.2
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,496,783	(\$20,601)	\$1,524,227

	SHARON HOSPITAL HOL	DING CO, INC.		
	TWELVE MONTHS ACT	TUAL FILING		
	FISCAL YEAR	2013		
	REPORT 385 - PARENT CORPORATION CONSO	LIDATED FINANCIAL D	OATA ANALYSIS	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	FY 2013
6	Depreciation Expense	\$3,230,817	\$3,213,579	\$2,992,573
7	Excess of Revenues Over Expenses and Depreciation Expense	\$4,727,600	\$3,192,978	\$4,516,800
8	Total Current Liabilities	\$7,196,438	\$5,960,611	\$6,349,407
9	Total Long Term Debt	\$33,337,500	\$24,196,785	\$21,600,220
10	Total Current Liabilities and Total Long Term Debt	\$40,533,938	\$30,157,396	\$27,949,627
11	Long Term Debt to Capitalization Ratio	67.5	60.2	55.1
12	Total Long Term Debt	\$33,337,500	\$24,196,785	\$21,600,220
13	Total Net Assets	\$16,034,925	\$15,992,819	\$17,604,993
14	Total Long Term Debt and Total Net Assets	\$49,372,425	\$40,189,604	\$39,205,213

2 CU/CCU (Excludes Neonatal ICU) 999 401 0 7 11 39.1% 24		,						,	
REPORT 400 + HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT									
(1) (2) (3) (3a) (3a) (3b) (4) (5) (6) (7) (7) (7) (8) (8) (9) (7) (7) (8) (8) (9) (9) (7) (7) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9									
(1) (2) (3) (3a) (3b) (4) (5) (6) (7) OCCUPANCY OCCUPANCY OCCUPANCY DAYS OF ADMISSIONS STAFFED AVAILABLE OF STAFFED OF AVAILABLE DESCRIPTION DAYS CU/CCU # PATIENT DISCHARGES OR ADMISSIONS BEDS (A) BEDS BEDS (A) BEDS BEDS (A) BEDS (A) BEDS BEDS (A) BEDS BEDS (A) BE									
PATIENT DISCHARGES OR ADMISSIONS STAFFED AVAILABLE OF STAFFED OF AVAILABLE				REPORT 40	0 - HOSPITAL INI	PATIENT BED UT	LIZATION BY DE	PARTMENT	
PATIENT DISCHARGES OR ADMISSIONS STAFFED AVAILABLE OF STAFFED OF AVAILABLE	(1)	(2)	(3)	(32)	(3h)	(4)	(5)	(6)	(7)
PATIENT DISCHARGES OR ADMISSIONS STAFFED AVAILABLE OF STAFFED OF AVAILAB	(')	(2)	(0)	(Ja)	(35)	(+)	(5)		
LINE DESCRIPTION DAYS CU/CCU # PATIEN BEDS BEDS (A) BEDS			DATIENT	DISCHARGES OF	ADMISSIONS	STAFFED	AVAII ARI E		
Adult Medical/Surgical 6,647 2,024 1,365 22 47 82.8% 38	LINE	DESCRIPTION			ADMISSIONS				
Columbia	LIIVL	DEGOKII TION	DATO	CO/CCO # 1 ATILIN		DEDO (A)	<u>BLB0</u>	DEDO (A)	<u>DLD0</u>
2 CU/CCU (Excludes Neonatal ICU) 999 401 0 7 11 39.1% 24	1	Adult Medical/Surgical	6.647	2.024	1.365	22	47	82.8%	38.7%
3 Psychiatric: Ages 0 to 17		g.co.	-,		1,000			3-1070	
4 Psychiatric: Ages 18+ 3.371 311 312 12 12 77.0% 77 TOTAL PSYCHIATRIC 3,371 311 312 12 12 12 77.0% 77 5 Rehabilitation 0 0 0 0 0 0 0 0 0 0.0% 0 6 Maternity 733 294 270 4 8 50.2% 25 7 Newborn 588 249 248 4 16 40.3% 10 8 Neonatal ICU 0 0 0 0 0 0 0 0 0 0 0.0% 0 9 Pediatric 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2	ICU/CCU (Excludes Neonatal ICU)	999	401	0	7	11	39.1%	24.9%
4 Psychiatric: Ages 18+ 3.371 311 312 12 12 77.0% 77 TOTAL PSYCHIATRIC 3,371 311 312 12 12 12 77.0% 77 5 Rehabilitation 0 0 0 0 0 0 0 0 0 0.0% 0 6 Maternity 733 294 270 4 8 50.2% 25 7 Newborn 588 249 248 4 16 40.3% 10 8 Neonatal ICU 0 0 0 0 0 0 0 0 0 0 0.0% 0 9 Pediatric 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									
TOTAL PSYCHIATRIC 3,371 311 312 12 12 77.0% 77 5 Rehabilitation 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									0.0%
5 Rehabilitation 0 0 0 0 0 0.0% 0 6 Maternity 733 294 270 4 8 50.2% 25 7 Newborn 588 249 248 4 16 40.3% 10 8 Neonatal ICU 0	4								77.0%
6 Maternity 733 294 270 4 8 50.2% 25 7 Newborn 588 249 248 4 16 40.3% 10 8 Neonatal ICU 0 0 0 0 0 0 0 0 0 0.0% 0 9 Pediatric 0 0 0 0 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 TOTAL EXCLUDING NEWBORN 11,750 2,629 1,947 45 78 71.5% 41 TOTAL INPATIENT BED UTILIZATION 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT REPORTED YEAR 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT PRIOR YEAR 11,914 2,685 1,990 49 94 66.6% 34 DIFFERENCE #: REPORTED VS. PRIOR YEAR 424 193 205 0 0 2.4% 1 DIFFERENCE #: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.		TOTAL PSYCHIATRIC	3,371	311	312	12	12	77.0%	77.0%
6 Maternity 733 294 270 4 8 50.2% 25 7 Newborn 588 249 248 4 16 40.3% 10 8 Neonatal ICU 0 0 0 0 0 0 0 0 0 0.0% 0 9 Pediatric 0 0 0 0 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 TOTAL EXCLUDING NEWBORN 11,750 2,629 1,947 45 78 71.5% 41 TOTAL INPATIENT BED UTILIZATION 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT REPORTED YEAR 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT PRIOR YEAR 11,914 2,685 1,990 49 94 66.6% 34 DIFFERENCE #: REPORTED VS. PRIOR YEAR 424 193 205 0 0 2.4% 1 DIFFERENCE #: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.		Pohobilitation	0	0	0	0	0	0.00/	0.0%
7 Newborn 588 249 248 4 16 40.3% 10 8 Neonatal ICU 0	- 5	Renabilitation	0	U	0	0	U	0.0 /6	0.076
7 Newborn 588 249 248 4 16 40.3% 10 8 Neonatal ICU 0	6	Maternity	733	294	270	4	8	50.2%	25.1%
8 Neonatal ICU 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				_,		-	-	33.275	
9 Pediatric 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7	Newborn	588	249	248	4	16	40.3%	10.1%
9 Pediatric 0 0 0 0 0 0 0 0 0 0 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	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	0	Dedictric	0	0	0	0	0	0.00/	0.0%
TOTAL EXCLUDING NEWBORN 11,750 2,629 1,947 45 78 71.5% 41 TOTAL INPATIENT BED UTILIZATION 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT REPORTED YEAR 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT PRIOR YEAR 11,914 2,685 1,990 49 94 66.6% 34 DIFFERENCE #: REPORTED VS. PRIOR YEAR 424 193 205 0 0 2.4% 1 DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.	9	rediatric	0	U	U	U	U	0.0%	0.0%
TOTAL EXCLUDING NEWBORN 11,750 2,629 1,947 45 78 71.5% 41 TOTAL INPATIENT BED UTILIZATION 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT REPORTED YEAR 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT PRIOR YEAR 11,914 2,685 1,990 49 94 66.6% 34 DIFFERENCE #: REPORTED VS. PRIOR YEAR 424 193 205 0 0 2.4% 1 DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.	10	Other	0	0	0	0	0	0.0%	0.0%
TOTAL INPATIENT BED UTILIZATION 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT REPORTED YEAR 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT PRIOR YEAR 11,914 2,685 1,990 49 94 66.6% 34 DIFFERENCE #: REPORTED VS. PRIOR YEAR 424 193 205 0 0 2.4% 1 DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.			<u> </u>				-	3.3,5	
TOTAL INPATIENT REPORTED YEAR 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT PRIOR YEAR 11,914 2,685 1,990 49 94 66.6% 34 DIFFERENCE #: REPORTED VS. PRIOR YEAR 424 193 205 0 0 0 2.4% 1 DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.		TOTAL EXCLUDING NEWBORN	11,750	2,629	1,947	45	78	71.5%	41.3%
TOTAL INPATIENT REPORTED YEAR 12,338 2,878 2,195 49 94 69.0% 36 TOTAL INPATIENT PRIOR YEAR 11,914 2,685 1,990 49 94 66.6% 34 DIFFERENCE #: REPORTED VS. PRIOR YEAR 424 193 205 0 0 0 2.4% 1 DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.									
TOTAL INPATIENT PRIOR YEAR		TOTAL INPATIENT BED UTILIZATION	12,338	2,878	2,195	49	94	69.0%	36.0%
TOTAL INPATIENT PRIOR YEAR									
TOTAL INPATIENT PRIOR YEAR 11,914 2,685 1,990 49 94 66.6% 34		TOTAL INPATIENT REPORTED YEAR	12.338	2.878	2.195	49	94	69.0%	36.0%
DIFFERENCE #: REPORTED VS. PRIOR YEAR 424 193 205 0 0 2.4% 1 DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.									34.7%
DIFFERENCE %: REPORTED VS. PRIOR YEAR 4% 7% 10% 0% 0% 4% Total Licensed Beds and Bassinets 78 (A) This number may not exceed the number of available beds for each department or in total.									1.2%
Total Licensed Beds and Bassinets 78 (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%	7%	10%	0%	0%	4%	4%
(A) This number may not exceed the number of available beds for each department or in total.									
		Total Licensed Beds and Bassinets	78						
	/A) T	ala mumban may nat ayacad tha mumban at ayacad	ble bede for se-	h dependence of an in t	letel				
Note: Total discharges do not include ICU/CCU patients.	(A) II	is number may not exceed the number of availa	ible beas for eac	in department or in t	Uldi.				
The state of the s	Note	Total discharges do not include ICU/CCU paties	nts.						
		patient missing as a second missing a second patient							

		NT-SHARON HOSPIT			
		MONTHS ACTUAL F	ILING		
	REPORT 450 - HOSPITAL INPATIENT AN		ER SERVICES UTIL	ZATION AND FTES	i
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
A.	CT Scans (A)				
1	Inpatient Scans	395	427	32	8%
	Outpatient Scans (Excluding Emergency Department	4.500			- 0.4
2	Scans)	1,533	1,419	-114	-7%
	Emergency Department Scans	2,734	2,889	155	6%
4	Other Non-Hospital Providers' Scans (A) Total CT Scans	0	4.725	0	0% 2%
	Total CT Scans	4,662	4,735	73	2%
B.	MRI Scans (A)				
1	Inpatient Scans	231	208	-23	-10%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	1,641	1,503	-138	-8%
	Emergency Department Scans	101	80	-21	-21%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
-	Total MRI Scans	1,973	1,791	-182	-9%
C.	PET Scans (A)				
1	Inpatient Scans	0	0	0	0%
<u>'</u>	Outpatient Scans (Excluding Emergency Department		O O	0	070
2	Scans)	0	0	0	0%
	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
	DET/OT Occure (A)				
	PET/CT Scans (A)	0	0	0	00/
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	0	0	0	0%
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/CT Scans	0	0	0	
	(A) If the Hospital is not the primary provider of thes			scal year	
	volume of each of these types of scans from the	primary provider of t	ine scans.	=	
E.	Linear Accelerator Procedures				
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Linear Accelerator Procedures	0	0	0	0%
F.	Cardiac Catheterization Procedures				
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
	Cardiac Angioplasty Procedures				
1	Primary Procedures	0	0	0	0%
2	Elective Procedures Total Cardiae Angioplasty Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
Н.	Electrophysiology Studies				
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%

		ENT-SHARON HOSPITA			
		MONTHS ACTUAL FIL	LING		
		FISCAL YEAR 2013	D 050\((050 LITH	74TION AND ETC.	
	REPORT 450 - HOSPITAL INPATIENT AN	ND OUTPATIENT OTHE	R SERVICES UTILI	ZATION AND FIES	
(1)	(2)	(3)	(4)	(5)	(6)
(1)	(2)	(3)	(4)	(3)	(0)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
					•
	<u>Surgical Procedures</u>				
1	Inpatient Surgical Procedures	395	404	9	2%
2	Outpatient Surgical Procedures	1,352	1,376	24	2% 2 %
	Total Surgical Procedures	1,747	1,780	33	2%
J.	Endoscopy Procedures				
1	Inpatient Endoscopy Procedures	86	114	28	33%
2	Outpatient Endoscopy Procedures	974	852	-122	-13%
	Total Endoscopy Procedures	1,060	966	-94	-9%
	Hospital Emergency Room Visits				
	Emergency Room Visits: Treated and Admitted	1,766	1,878	112	6%
2	Emergency Room Visits: Treated and Discharged	15,856	15,746	-110	-1%
	Total Emergency Room Visits	17,622	17,624	2	0%
L.	Hospital Clinic Visits				
_ 	Substance Abuse Treatment Clinic Visits	0	0	0	0%
	Dental Clinic Visits	0	0	0	0%
	Psychiatric Clinic Visits	229	1	-228	-100%
	Medical Clinic Visits	0	0	0	0%
	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0%
	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
	Medical Clinic Visits - Other Medical Clinics Specialty Clinic Visits	3,978	0	0 -3,978	0% -100%
	Specialty Clinic Visits - Cardiac Clinic	3,978	0	-3,978	-100%
	Specialty Clinic Visits - Cardiac Clinic Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
	Specialty Clinic Visits - OB-GYN Clinic	0	405	405	0%
	Specialty Clinic Visits - Other Speciality Clinics	0	1,913	1,913	0%
-	Total Hospital Clinic Visits	4,207	2,319	-1,888	-45%
М.	Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	10,300	8,451	-1,849	-18%
2	Cardiac Rehabilitation	4,738	4,100	-638	-13%
3	Chemotherapy	836	834	-2	0%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits Total Other Hospital Outpatient Visits	49,894	50,300	406	1% -3%
	Total Other Hospital Outpatient Visits	65,768	63,685	-2,083	-3%
N.	Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	100.6	95.5	-5.1	-5%
2	Total Physician FTEs	0.0	0.0	0.0	0%
3	Total Non-Nursing and Non-Physician FTEs	155.0	151.9	-3.1	-2%
	Total Hospital Full Time Equivalent Employees	255.6	247.4	-8.2	-3%

OTTIC	E OF FIEALTH CARE ACCESS	13 ACTUAL FILING		LJJLINI	-SHARON HOSFITAL
	ESSENT-SHAF	RON HOSPITAL			
	TWELVE MONTH		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	AOTUAL	AMOUNT	0/
	DECORIDATION	ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	<u>DIFFERENCE</u>
Α.	Outpatient Surgical Procedures				
1	Sharon Hospital	1,352	1,376	24	2%
	Total Outpatient Surgical Procedures(A)	1,352	1,376	24	2%
В.	Outpatient Endoscopy Procedures				
	Sharon Hospital	974	852	-122	-13%
	Total Outpatient Endoscopy Procedures(B)	974	852	-122	-13%
C.	Outpatient Hospital Emergency Room Visits				
1	Sharon Hospital	15,856	15,746	-110	-1%
	Total Outpatient Hospital Emergency Room Visits(C)	15,856	15,746	-110	
	(A) Must agree with Total Outpatient Surgical Procedures on Report 450.				
	(1) made agree with rotal earpations danging roots and	oo on Roport 400	.		
	(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.				
	(O) March companies Francisco De con Visit Torris I	d Diaghanna i i	- Damant 450		
	(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.				

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

ı	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION					
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE	
I.	DATA BY MAJOR PAYER CATEGORY					
A.	MEDICARE					
	MEDICARE INPATIENT					
	INPATIENT ACCRUED CHARGES	\$37,544,207	\$39,105,825	\$1,561,618	4%	
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$17,055,293	\$17,970,764	\$915,471	5%	
	INPATIENT PAYMENTS / INPATIENT CHARGES	45.43%	45.95%	0.53%	1%	
	DISCHARGES	1,554	1,614	60	4%	
	CASE MIX INDEX (CMI)	1.15760	1.18240	0.02480	2%	
	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,798.91040	1,908.39360	109.48320	6%	
	INPATIENT ACCRUED PAYMENT / CMAD	\$9,480.90	\$9,416.70	(\$64.21)	-1%	
	PATIENT DAYS	8,469	8,491	(ψ04.21)	0%	
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,013.85	\$2,116.45	\$102.60	5%	
	AVERAGE LENGTH OF STAY	5.4	5.3	(0.2)	-3%	
10	AVEINGE LENGTH OF GIAT	5.4	3.3	(0.2)	-570	
	MEDICARE OUTPATIENT					
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$33,849,225	\$36,915,275	\$3,066,050	9%	
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,418,245	\$7,527,778	\$109,533	1%	
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.92%	20.39%	-1.52%	-7%	
	OUTPATIENT CHARGES / INPATIENT CHARGES	90.16%	94.40%	4.24%	5%	
	OUTPATIENT GUIVALENT DISCHARGES (OPED)	1,401.06024	1,523.59025	122.53001	9%	
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,294.74	\$4,940.82	(\$353.92)	-7%	
10	OUT ATIENT AGGREGAT ATMENTO FOR ED	ψ5,254.74	ψ+,5+0.02	(ψ333.32)	1 70	
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
	TOTAL ACCRUED CHARGES	\$71,393,432	\$76,021,100	\$4,627,668	6%	
	TOTAL ACCRUED PAYMENTS	\$24,473,538	\$25,498,542	\$1,025,004	4%	
	TOTAL ALLOWANCES	\$46,919,894	\$50,522,558	\$3,602,664	8%	
10	TOTAL ALLOWANCED	ψ+0,515,05+	ψ30,322,330	ψ5,002,004	070	
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
	NON-GOVERNMENT INPATIENT					
	INPATIENT ACCRUED CHARGES	\$12.356.384	\$15,677,757	\$3,321,373	27%	
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,222,160	\$6,677,553	\$1,455,393	28%	
	INPATIENT PAYMENTS / INPATIENT CHARGES	42.26%	42.59%	0.33%	1%	
	DISCHARGES	743	830	87	12%	
	CASE MIX INDEX (CMI)	0.98760	1.00670	0.01910	2%	
_	CASE MIX ADJUSTED DISCHARGES (CMAD)	733.78680	835.56100	101.77420	14%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,116.73	\$7,991.70	\$874.97	12%	
	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	\$2,364.18	\$1,425.00	(\$939.18)	-40%	
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,734,801	\$1,190,672	(\$544,129)	-31%	
	PATIENT DAYS	2,262	2,558	(\$344,129) 296	13%	
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,308.65	\$2,610.46	\$301.81	13%	
	AVERAGE LENGTH OF STAY	3.0	3.1	0.0	1%	
		3.0	0.1	5.0	170	
	NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$40,158,091	\$39,566,420	(\$591,671)	-1%	
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$18,119,637	\$16,477,995	(\$1,641,642)	-9%	
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	45.12%	41.65%	, ,	-8%	

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

170 CUPTATIENT EQUIVALENT ISSCHARGES (OPED) 2,414.74065 2,094.05560 (320.04496) 1-13% 1-		AND BASELINE UNDERPATMENT DATA: COMPARATIVE ANALYSIS					
16 OUTPATIENT CHARGES INPATIENT CHARGES 325.00% 252.27% -72.83% -22% 17 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 2.414.74056 2.094.09600 (320.04490) -13% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 2.414.74056 2.094.09600 (320.04490) -13% 18 OUTPATIENT ACCRUED PAYMENTS OPED (\$2.000.07) (82.200.07) (82.2572) (3716.69) 3.29% 2.000.070 (320.000.07) (82.20			ACTUAL	ACTUAL	AMOUNT	%	
17 OUTPATIENT POURMENT DISCHARGES (OPED) 2,414.74066 2,094.09600 (320.04496) 1.13%	LINE	DESCRIPTION				DIFFERENCE	
17 OUTPATIENT POURMENT DISCHARGES (OPED) 2,414.74066 2,094.09600 (320.04496) 1.13%							
18	16	OUTPATIENT CHARGES / INPATIENT CHARGES	325.00%	252.37%	-72.63%	-22%	
19 MEDICARE-NOR-GOVERNMENT OP PRITY OPED (\$2.209.02) (\$2.925.72) (\$716.89) 3.2%	17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,414.74056	2,094.69560	(320.04496)	-13%	
OUTPATIENT UPPER LIMIT (OVER) / LINGERPAYMENT	18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,503.76	\$7,866.53	\$362.77	5%	
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)	19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$2,209.02)	(\$2,925.72)	(\$716.69)	32%	
21 TOTAL ACCRUED D-AYMENTS \$2,729,702 5% \$23,341,797 \$23,155,548 \$18,62,491 -1% \$23,341,797 \$23,155,548 \$186,2491 -1% \$23,341,797 \$23,155,548 \$186,2491 -1% \$23,341,797 \$23,2155,548 \$186,2491 -1% \$23,341,797 \$23,2155,548 \$186,2491 -1% \$23,341,797 \$23,2155,548 \$186,2491 -1% \$23,341,797 \$23,2155,548 \$23,081,62491 -1% \$23,091,6249 -1% \$24,339,115 \$23,404,866 \$3,065,751 13% \$23,005,751 -13% -13%	20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$5,334,222)	(\$6,128,491)	(\$794,269)	15%	
21 TOTAL ACCRUED D-AYMENTS \$2,729,702 5% \$23,341,797 \$23,155,548 \$18,62,491 -1% \$23,341,797 \$23,155,548 \$186,2491 -1% \$23,341,797 \$23,155,548 \$186,2491 -1% \$23,341,797 \$23,2155,548 \$186,2491 -1% \$23,341,797 \$23,2155,548 \$186,2491 -1% \$23,341,797 \$23,2155,548 \$186,2491 -1% \$23,341,797 \$23,2155,548 \$23,081,62491 -1% \$23,091,6249 -1% \$24,339,115 \$23,404,866 \$3,065,751 13% \$23,005,751 -13% -13%							
TOTAL ACCRUED PAYMENTS \$23,417.97 \$23,155,548 \$186,249 \$-1%		NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
23 TOTAL ALLOWANCES \$29,172,678 \$32,088,629 \$2,915,951 10%	21	TOTAL ACCRUED CHARGES	\$52,514,475	\$55,244,177	\$2,729,702	5%	
24 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	22	TOTAL ACCRUED PAYMENTS	\$23,341,797	\$23,155,548	(\$186,249)	-1%	
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA	23	TOTAL ALLOWANCES	\$29,172,678	\$32,088,629	\$2,915,951	10%	
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA							
25 ACCRUED CHARGES ASSOCIATED WITH NGCA \$52,514,475 \$55,244,177 \$2,729,702 \$5% 28 ACCRUED PAYMENTS ASSOCIATED WITH NGCA \$22,175,360 \$27,839,311 \$(\$336,049) -1% 27 TOTAL NOT ANY REDUCTION FOR UNCOMPENSATED CARE) 28 TOTAL ACTUAL DISCOUNT PERCENTAGE 46,35% 49,61% 3,26% C. UNINSURED VINISURED VINISUR	24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$3,599,421)	(\$4,937,819)	(\$1,338,398)	37%	
ACCRUED PAYMENTS ASSOCIATED WITH NGCA \$28,175,360 \$27,839,311 \$(\$36,049) -1% (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)		NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$52,514,475	\$55,244,177	\$2,729,702	5%	
TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$24,339,115 \$27,404,866 \$3,065,751 13%	26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$28,175,360	\$27,839,311	(\$336,049)	-1%	
TOTAL ACTUAL DISCOUNT PERCENTAGE		(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)					
C. UNINSURED UNINSURED INPATIENT 1 1 INPATIENT ACCRUED CHARGES \$1,345,419 \$1,089,118 (\$256,301) -19% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$215,332 \$224,283 \$8,901 4% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 16.01% 20.59% 4.58% 29% 4 DISCHARGES 73 93 20 27% 5 CASE MIX INDEX (CMI) 0.99190 0.89090 (0.10100) -10% 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 72.40870 82.85370 10.44500 14% 8 NON-GOVERNMENT - UNINDURED IP PMT / CMAD \$2.974.53 \$2.706.98 (\$267.56) -9% 8 NON-GOVERNMENT - UNINDURED IP PMT / CMAD \$4,142.19 \$5,284.72 \$1,142.53 28% 9 MEDICARE - UNINSURED IP PMT / CMAD \$6,506.37 \$6,709.72 \$203.35 3% 10 INPATIENT OLY \$788.95 \$930.63 \$141.69 18% 11 PATIENT DAY \$788.95 <td>27</td> <td>TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES</td> <td>\$24,339,115</td> <td>\$27,404,866</td> <td>\$3,065,751</td> <td>13%</td>	27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$24,339,115	\$27,404,866	\$3,065,751	13%	
NAME			46.35%	49.61%	3.26%		
1 INPATIENT ACCRUED CHARGES \$1,345,419 \$1,089,118 \$(\$256,301) -19%	C.	UNINSURED					
2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$215,382 \$224,283 \$8,901 4% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 16.01% 20.59% 4.58% 29% 4 DISCHARGES 73 93 20 27% 5 CASE MIX INDEX (CMI) 0.99190 0.89090 (0.10100) -10% 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 72,40870 82,85370 10.44500 14% 7 INPATIENT ACCRUED PAYMENT / CMAD \$2,974.53 \$2,706.98 (\$267.56) -9% 8 NON-GOVERNMENT - UNINSURED IP PMT / CMAD \$4,142.19 \$5,284.72 \$1,142.53 28% 9 MEDICARE - UNINSURED IP PMT / CMAD \$6,506.37 \$6,709.72 \$203.35 3% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$471,118 \$555,925 \$84,807 18% 11 PATIENT DAYS 273 241 (32) -12% 12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$788.95 \$930.63 \$141.69 18% 13 AVERAGE LENGTH OF STAY 3.7 2.6 (1.1) -31% UNINSURED OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$464,737 \$426,841 (\$37,896) -8% 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$464,737 \$426,841 (\$37,896) -8% 16 OUTPATIENT CHARGES (OP CHGS) \$19,24030 231.69042 92,45012 66% 17 OUTPATIENT CHARGES (INPATIENT CHARGES 190,74% 249,13% 58.39% 31% 18 OUTPATIENT ACCRUED PAYMENTS (OPED \$3,337.66 \$1,842.29 (\$1,495.37) -45% 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT) \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT) \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT)		UNINSURED INPATIENT					
3 INPATIENT PAYMENTS / INPATIENT CHARGES 16.01% 20.59% 4.58% 29%	1	INPATIENT ACCRUED CHARGES	\$1,345,419	\$1,089,118	(\$256,301)	-19%	
DISCHARGES	2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$215,382	\$224,283	\$8,901	4%	
5 CASE MIX INDEX (CMI) 0.99190 0.89090 (0.10100) -10%	3	INPATIENT PAYMENTS / INPATIENT CHARGES	16.01%	20.59%	4.58%	29%	
6 CASE MIX ADJUSTED DISCHARGES (CMAD) 72.40870 82.85370 10.44500 14% 7 INPATIENT ACCRUED PAYMENT / CMAD \$2,974.53 \$2,706.98 (\$267.56) -9% 8 NON-GOVERNMENT - UNINSURED IP PMT / CMAD \$4,142.19 \$5,284.72 \$1,142.53 28% 9 MEDICARE - UNINSURED IP PMT / CMAD \$6,506.37 \$6,709.72 \$203.35 3% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$471,118 \$555,925 \$84,807 18% 11 PATIENT DAYS 273 241 (32) -12% 12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$788.95 \$930.63 \$141.69 18% 13 AVERAGE LENGTH OF STAY 3.7 2.6 (1.1) -31% UNINSURED OUTPATIENT 4 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$464,737 \$426,841 (\$37,896) -8% 16 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$464,737 \$426,841 (\$37,896) -8% 17 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 190.74% 249.13% 58.39% 31% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 139.24030 231.69042 92.45012 66% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,337.66 \$1,842.29 (\$1,495.37) -45% 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% UNINSURED TOTALS (INPATIENT AND OUTPATIENT)	4	DISCHARGES	73	93	20	27%	
To INPATIENT ACCRUED PAYMENT / CMAD \$2,974.53 \$2,706.98 (\$267.56) 9%	5	CASE MIX INDEX (CMI)	0.99190	0.89090	(0.10100)	-10%	
8 NON-GOVERNMENT - UNINSURED IP PMT / CMAD \$4,142.19 \$5,284.72 \$1,142.53 28% 9 MEDICARE - UNINSURED IP PMT / CMAD \$6,506.37 \$6,709.72 \$203.35 3% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$471,118 \$555,925 \$84,807 18% 11 PATIENT DAYS 273 241 (32) -12% 12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$788.95 \$930.63 \$141.69 18% 13 AVERAGE LENGTH OF STAY 3.7 2.6 (1.1) -31% UNINSURED OUTPATIENT 14 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$2,566,254 \$2,713,314 \$147,060 6% 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$464,737 \$426,841 (\$37,896) -8% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 18.11% 15.73% -2.38% -13% 17 OUTPATIENT CHARGES / INPATIENT CHARGES (OPED) 139.24030 231.69042 92.45012 66% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,337.66 \$1,422.29 (\$1,495.37) -45% 20 </td <td>6</td> <td>CASE MIX ADJUSTED DISCHARGES (CMAD)</td> <td>72.40870</td> <td>82.85370</td> <td>10.44500</td> <td>14%</td>	6	CASE MIX ADJUSTED DISCHARGES (CMAD)	72.40870	82.85370	10.44500	14%	
9 MEDICARE - UNINSURED IP PMT / CMAD	7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,974.53	\$2,706.98	(\$267.56)	-9%	
10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$471,118 \$555,925 \$84,807 18% 11 PATIENT DAYS 273 241 (32) -12% 12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$788.95 \$930.63 \$141.69 18% 13 AVERAGE LENGTH OF STAY 3.7 2.6 (1.1) -31% 14 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$2,566,254 \$2,713,314 \$147,060 6% 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$464,737 \$426,841 (\$37,896) -8% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 190.74% 249.13% 58.39% 31% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 190.74% 249.13% 58.39% 31% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 139.24030 231.69042 92.45012 66% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,337.66 \$1,842.29 (\$1,495.37) -45% 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT)	8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$4,142.19	\$5,284.72	\$1,142.53	28%	
PATIENT DAYS 273 241 (32) -12%	9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,506.37	\$6,709.72	\$203.35	3%	
12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$788.95 \$930.63 \$141.69 18% 13 AVERAGE LENGTH OF STAY 3.7 2.6 (1.1) -31% 14 OUTPATIENT	10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$471,118	\$555,925	\$84,807	18%	
3.7 2.6 (1.1) -31%	11	PATIENT DAYS	273	241	(32)	-12%	
UNINSURED OUTPATIENT	12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$788.95	\$930.63	\$141.69	18%	
14 OUTPATIENT ACCRUED CHARGES (OP CHGS) 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 17 OUTPATIENT CHARGES / INPATIENT CHARGES 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 18 OUTPATIENT ACCRUED PAYMENTS / OPED 19 OUTPATIENT ACCRUED PAYMENTS / OPED 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED 21 MEDICARE - UNINSURED OP PMT / OPED 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT 23 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT 24 UNINSURED TOTALS (INPATIENT AND OUTPATIENT) 25 OUTPATIENT ACCRUED TOTALS (INPATIENT AND OUTPATIENT)	13	AVERAGE LENGTH OF STAY	3.7	2.6	(1.1)	-31%	
15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$464,737 \$426,841 (\$37,896) -8% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 18.11% 15.73% -2.38% -13% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 190.74% 249.13% 58.39% 31% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 139.24030 231.69042 92.45012 66% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,337.66 \$1,842.29 (\$1,495.37) -45% 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT)		UNINSURED OUTPATIENT					
16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 18.11% 15.73% -2.38% -13% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 190.74% 249.13% 58.39% 31% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 139.24030 231.69042 92.45012 66% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,337.66 \$1,842.29 (\$1,495.37) -45% 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT)	14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,566,254	\$2,713,314	\$147,060	6%	
17 OUTPATIENT CHARGES / INPATIENT CHARGES 190.74% 249.13% 58.39% 31% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 139.24030 231.69042 92.45012 66% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,337.66 \$1,842.29 (\$1,495.37) -45% 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT) UNINSURED TOTALS (INPATIENT AND OUTPATIENT) \$1,957.08	15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$464,737	\$426,841	(\$37,896)	-8%	
18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 139.24030 231.69042 92.45012 66% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,337.66 \$1,842.29 (\$1,495.37) -45% 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT)	16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.11%	15.73%	-2.38%	-13%	
19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,337.66 \$1,842.29 (\$1,495.37) -45% 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT)	17	OUTPATIENT CHARGES / INPATIENT CHARGES	190.74%	249.13%	58.39%	31%	
20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$4,166.10 \$6,024.24 \$1,858.14 45% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT) UNINSURED TOTALS (INPATIENT AND OUTPATIENT) *** ***	18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	139.24030	231.69042	92.45012	66%	
21 MEDICARE - UNINSURED OP PMT / OPED \$1,957.08 \$3,098.52 \$1,141.45 58% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT) UNINSURED TOTALS (INPATIENT AND OUTPATIENT) Inches in the content of th	19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,337.66	\$1,842.29	(\$1,495.37)	-45%	
22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$272,504 \$717,899 \$445,395 163% UNINSURED TOTALS (INPATIENT AND OUTPATIENT)	20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$4,166.10	\$6,024.24	\$1,858.14	45%	
UNINSURED TOTALS (INPATIENT AND OUTPATIENT)	21	MEDICARE - UNINSURED OP PMT / OPED	\$1,957.08	\$3,098.52	\$1,141.45	58%	
	22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$272,504	\$717,899	\$445,395	163%	
		UNINSURED TOTALS (INPATIENT AND OUTPATIENT)					
	23		\$3,911,673	\$3,802,432	(\$109,241)	-3%	

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE	
<u>LIIVL</u>	DESCRIPTION .	112012	1 1 2013	DITTERENCE	DITTERENCE	
24	TOTAL ACCRUED PAYMENTS	\$680,119	\$651,124	(\$28,995)	-4%	
25	TOTAL ALLOWANCES	\$3,231,554	\$3,151,308	(\$80,246)	-2%	
				,		
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$743,621	\$1,273,824	\$530,202	71%	
D.	STATE OF CONNECTICUT MEDICAID					
	MEDICAID INPATIENT					
<u> </u>		₽2.052.246	ФО 47F 074	\$222.25F	00/	
1	INPATIENT ACCRUED CHARGES	\$2,952,316	\$3,175,671	\$223,355	8%	
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$791,153	\$819,553	\$28,400	4%	
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.80%	25.81%	-0.99%	-4%	
4	DISCHARGES	194	217	23	12%	
5	CASE MIX INDEX (CMI)	0.94870	0.91050	(0.03820)	-4%	
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	184.04780	197.57850	13.53070	7%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,298.63	\$4,147.99	(\$150.64)	-4%	
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,818.10	\$3,843.71	\$1,025.61	36%	
9	MEDICARE - MEDICAID IP PMT / CMAD	\$5,182.27	\$5,268.71	\$86.44	2%	
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$953,786	\$1,040,984	\$87,198	9%	
11	PATIENT DAYS	602	615	13	2%	
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,314.21	\$1,332.61	\$18.40	1%	
13	AVERAGE LENGTH OF STAY	3.1	2.8	(0.3)	-9%	
	MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$5,112,045	\$5,267,908	\$155,863	3%	
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,211,754	\$1,271,376	\$59,622	5%	
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.70%	24.13%	0.43%	2%	
	OUTPATIENT CHARGES / INPATIENT CHARGES	173.15%	165.88%	-7.27%	-4%	
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	335.91822	359.96677	24.04855	7%	
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,607.29	\$3,531.93	(\$75.36)	-2%	
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$3,896.47	\$4,334.61	\$438.14	11%	
21	MEDICARE - MEDICAID OP PMT / OPED	\$1,687.45	\$1,408.89	(\$278.56)	-17%	
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$566,845	\$507,153	(\$59,691)	-11%	
	OUT ATIENT OF FER LIMIT (OVER) / ONDER! ATMENT	ψ300,043	ψ507,155	(ψ59,091)	-11/0	
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$8,064,361	\$8,443,579	\$379,218	5%	
24	TOTAL ACCRUED PAYMENTS	\$2,002,907	\$2,090,929	\$88,022	4%	
25	TOTAL ALLOWANCES	\$6,061,454	\$6,352,650	\$291,196	5%	
		, , ,				
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,520,631	\$1,548,137	\$27,507	2%	
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)					
	OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$2,591,672	\$3,350,285	\$758,613	29%	
2	INPATIENT ACCRUED CHARGES INPATIENT ACCRUED PAYMENTS (IP PMT)	\$743,895	\$1,196,216	\$452,321	61%	
3	INPATIENT ACCROED FATMENTS (IF FMT)	28.70%	35.70%	7.00%	24%	
4	DISCHARGES	183	208	25	14%	
5	CASE MIX INDEX (CMI)	0.90800	0.96150	0.05350	6%	
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	166.16400	199.99200	33.82800	20%	
J	TOUR WILL ADDOLLED DIOCHARGES (OWAD)	100.10400	199.99200	33.02000	2070	

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DA	TA: COMPARAT	IVE ANALYSI	S			
		ACTUAL	AOTHAI	AMOUNT	0/		
		ACTUAL	ACTUAL	AMOUNT	%		
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE		
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,476.87	\$5,981.32	\$1,504.45	34%		
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$2,639.85	\$2,010.38	(\$629.47)	-24%		
9	MEDICARE - O.M.A. IP PMT / CMAD	\$5,004.03	\$3,435.38	(\$1,568.65)	-31%		
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$831,490	\$687,048	(\$144,442)	-17%		
11	PATIENT DAYS	552	653	101	18%		
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,347.64	\$1,831.88	\$484.24	36%		
13	AVERAGE LENGTH OF STAY	3.0	3.1	0.1	4%		
	OTHER MEDICAL ASSISTANCE OUTPATIENT						
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$3,504,293	\$4,106,382	\$602,089	17%		
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$522,404	\$565,931	\$43,527	8%		
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.91%	13.78%	-1.13%	-8%		
17	OUTPATIENT CHARGES / INPATIENT CHARGES	135.21%	122.57%	-12.65%	-9%		
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	247.44089	254.94173	7.50084	3%		
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,111.23	\$2,219.84	\$108.62	5%		
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$5,392.53	\$5,646.69	\$254.16	5%		
21	MEDICARE - O.M.A. OP PMT / CMAD	\$3,183.51	\$2,720.97	(\$462.54)	-15%		
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$787,730	\$693,689	(\$94,041)	-12%		
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIE	NT)					
23	TOTAL ACCRUED CHARGES	\$6,095,965	\$7,456,667	\$1,360,702	22%		
24	TOTAL ACCRUED PAYMENTS	\$1,266,299	\$1,762,147	\$495,848	39%		
25	TOTAL ALLOWANCES	\$4,829,666	\$5,694,520	\$864,854	18%		
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$1,619,220	\$1,380,737	(\$238,483)	-15%		
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)						
	TOTAL MEDICAL ASSISTANCE INPATIENT						
_	INPATIENT ACCRUED CHARGES	\$5,543,988	\$6,525,956	\$981,968	18%		
2		\$1,535,048	\$2,015,769	\$480,721	31%		
	INPATIENT ACCRUED PAYMENTS (IP PMT)	27.69%	30.89%		12%		
3	INPATIENT PAYMENTS / INPATIENT CHARGES DISCHARGES	377	425	3.20%	13%		
5	CASE MIX INDEX (CMI)	0.92894	0.93546	0.00652	1%		
	CASE MIX ADJUSTED DISCHARGES (CMAD)	350.21180	397.57050	47.35870	14%		
	INPATIENT ACCRUED PAYMENT / CMAD	\$4,383.20	\$5,070.22	\$687.02	16%		
-	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,733.53	\$2,921.48	\$187.95	7%		
	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,097.70	\$4,346.48	(\$751.22)	-15%		
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,785,276	\$1,728,032	(\$57,244)	-3%		
	PATIENT DAYS	1,154	1,268	(ψ37,244)	10%		
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,330.20	\$1,589.72	\$259.53	20%		
	AVERAGE LENGTH OF STAY	3.1	3.0	(0.1)	-3%		
10	AVEINGE EEROTT OF OTAT	3.1	3.0	(0.1)	370		
	TOTAL MEDICAL ASSISTANCE OUTPATIENT						
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$8,616,338	\$9,374,290	\$757,952	9%		
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,734,158	\$1,837,307	\$103,149	6%		
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.13%	19.60%	-0.53%	-3%		
17	OUTPATIENT CHARGES / INPATIENT CHARGES	155.42%	143.65%	-11.77%	-8%		
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	583.35911	614.90850	31.54940	5%		

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
		ACTUAL	ACTUAL	AMOUNT	%		
IINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE		
	2230Mir Hotel	112012	20.0	<u> </u>	DITT ENCENTEE		
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,972.71	\$2,987.94	\$15.22	1%		
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,531.05	\$4,878.60	\$347.55	8%		
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,322.03	\$1,952.88	(\$369.15)	-16%		
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,354,575	\$1,200,842	(\$153,733)	-11%		
	TOTAL MEDICAL ACCICTANCE TOTAL C (INDATIENT : OLITDATIEN	Τ\					
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT		\$15,000,246	¢4 720 020	120/		
23	TOTAL ACCRUED CHARGES	\$14,160,326	\$15,900,246	\$1,739,920	12%		
24	TOTAL ALLOWANCES	\$3,269,206	\$3,853,076	\$583,870	18%		
25	TOTAL ALLOWANCES	\$10,891,120	\$12,047,170	\$1,156,050	11%		
G.	CHAMPUS / TRICARE						
	CHAMPUS / TRICARE INPATIENT	*	***	(4=0.000)	400/		
	INPATIENT ACCRUED CHARGES	\$163,314	\$85,024	(\$78,290)	-48%		
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$161,130	\$77,524	(\$83,606)	-52%		
	INPATIENT PAYMENTS / INPATIENT CHARGES	98.66%	91.18%	-7.48%	-8%		
	DISCHARGES	0.77500	9	(2)	-18%		
	CASE MIX INDEX (CMI)	0.77580	1.02190	0.24610	32%		
	CASE MIX ADJUSTED DISCHARGES (CMAD)	8.53380	9.19710	0.66330	8%		
7 8	INPATIENT ACCRUED PAYMENT / CMAD PATIENT DAYS	\$18,881.39	\$8,429.18	(\$10,452.21)	-55% -28%		
9		29 \$5 556 21	\$2 601 62	(8)			
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$5,556.21	\$3,691.62	(\$1,864.59)	-34% -11%		
10	AVERAGE LENGTH OF STAY	2.6	2.3	(0.3)	-1170		
	CHAMPUS / TRICARE OUTPATIENT						
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$200,223	\$190,495	(\$9,728)	-5%		
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$55,611	\$41,971	(\$13,640)	-25%		
		, ,	· · · · · ·	(, , ,			
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)						
13	TOTAL ACCRUED CHARGES	\$363,537	\$275,519	(\$88,018)	-24%		
14	TOTAL ACCRUED PAYMENTS	\$216,741	\$119,495	(\$97,246)	-45%		
15	TOTAL ALLOWANCES	\$146,796	\$156,024	\$9,228	6%		
H.	OTHER DATA						
1	OTHER OPERATING REVENUE	\$453,530	\$429,185	(\$24,345)	-5%		
2	TOTAL OPERATING EXPENSES	\$51,745,114	\$49,401,485	(\$2,343,629)	-5%		
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%		
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)						
4	CHARITY CARE (CHARGES)	\$760,089	\$941,923	\$181,834	24%		
	BAD DEBTS (CHARGES)	\$2,999,367	\$2,293,507	(\$705,860)	-24%		
6	UNCOMPENSATED CARE (CHARGES)	\$3,759,456	\$3,235,430	(\$524,026)	-14%		
	COST OF UNCOMPENSATED CARE	\$1,393,213	\$1,154,833	(\$238,380)	-17%		
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOL		<u> </u>				
8	TOTAL ACCRUED CHARGES	\$14,160,326	\$15,900,246	\$1,739,920	12%		
9	TOTAL ACCRUED PAYMENTS	\$3,269,206	\$3,853,076	\$583,870	18%		
10	COST OF TOTAL MEDICAL ASSISTANCE	\$5,247,660	\$5,675,330	\$427,669	8%		

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>		
	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$1,978,454	\$1,822,254	(\$156,201)	-8%		
II.	AGGREGATE DATA						
Α.	TOTALS - ALL PAYERS						
1	TOTAL INPATIENT CHARGES	\$55,607,893	\$61,394,562	\$5,786,669	10%		
2	TOTAL INPATIENT PAYMENTS	\$23,973,631	\$26,741,610	\$2,767,979	12%		
3	TOTAL INPATIENT PAYMENTS / CHARGES	43.11%	43.56%	0.45%	1%		
4	TOTAL DISCHARGES	2,685	2,878	193	7%		
5	TOTAL CASE MIX INDEX	1.07689	1.09476	0.01787	2%		
6	TOTAL CASE MIX ADJUSTED DISCHARGES	2,891.44280	3,150.72220	259.27940	9%		
7	TOTAL OUTPATIENT CHARGES	\$82,823,877	\$86,046,480	\$3,222,603	4%		
8	OUTPATIENT CHARGES / INPATIENT CHARGES	148.94%	140.15%	-8.79%	-6%		
9	TOTAL OUTPATIENT PAYMENTS	\$27,327,651	\$25,885,051	(\$1,442,600)	-5%		
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.99%	30.08%	-2.91%	-9%		
11	TOTAL CHARGES	\$138,431,770	\$147,441,042	\$9,009,272	7%		
12	TOTAL PAYMENTS	\$51,301,282	\$52,626,661	\$1,325,379	3%		
13	TOTAL PAYMENTS / TOTAL CHARGES	37.06%	35.69%	-1.37%	-4%		
14	PATIENT DAYS	11,914	12,338	424	4%		
В.	TOTALS - ALL GOVERNMENT PAYERS						
1	INPATIENT CHARGES	\$43,251,509	\$45,716,805	\$2,465,296	6%		
2	INPATIENT PAYMENTS	\$18,751,471	\$20,064,057	\$1,312,586	7%		
3	GOVT. INPATIENT PAYMENTS / CHARGES	43.35%	43.89%	0.53%	1%		
4	DISCHARGES	1,942	2,048	106	5%		
5	CASE MIX INDEX	1.11105	1.13045	0.01940	2%		
6	CASE MIX ADJUSTED DISCHARGES	2,157.65600	2,315.16120	157.50520	7%		
7	OUTPATIENT CHARGES	\$42,665,786	\$46,480,060	\$3,814,274	9%		
8	OUTPATIENT CHARGES / INPATIENT CHARGES	98.65%	101.67%	3.02%	3%		
9	OUTPATIENT PAYMENTS	\$9,208,014	\$9,407,056	\$199,042	2%		
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.58%	20.24%	-1.34%	-6%		
11	TOTAL CHARGES	\$85,917,295	\$92,196,865	\$6,279,570	7%		
12	TOTAL PAYMENTS	\$27,959,485	\$29,471,113	\$1,511,628	5%		
13	TOTAL PAYMENTS / CHARGES	32.54%	31.97%	-0.58%	-2%		
14	PATIENT DAYS	9,652	9,780	128	1%		
15	TOTAL GOVERNMENT DEDUCTIONS	\$57,957,810	\$62,725,752	\$4,767,942	8%		
C.	AVERAGE LENGTH OF STAY						
	MEDICARE	5.4	5.3	(0.2)	-3%		
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.0	3.1	0.0	1%		
3	UNINSURED	3.7	2.6	(1.1)	-31%		
	MEDICAID	3.1	2.8	(0.3)	-9%		
5	OTHER MEDICAL ASSISTANCE	3.0	3.1	0.1	4%		
6	CHAMPUS / TRICARE	2.6	2.3	(0.3)	-11%		
7	TOTAL AVERAGE LENGTH OF STAY	4.4	4.3	(0.2)	-3%		
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION						
1	TOTAL CHARGES	\$138,431,770	\$147,441,042	\$9,009,272	7%		
2	TOTAL GOVERNMENT DEDUCTIONS	\$57,957,810	\$62,725,752	\$4,767,942	8%		

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS							
		ACTUAL	ACTUAL	AMOUNT	%			
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE			
	DESCRIPTION	1 1 2012	1 1 2010	<u> </u>	<u>DIFF ERCERGE</u>			
3	UNCOMPENSATED CARE	\$3,759,456	\$3,235,430	(\$524,026)				
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$24,339,115	\$27,404,866	\$3,065,751	13%			
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,074,105	\$1,448,354	\$374,249	35%			
6	TOTAL ADJUSTMENTS	\$87,130,486	\$94,814,402	\$7,683,916	9%			
7	TOTAL ACCRUED PAYMENTS	\$51,301,284	\$52,626,640	\$1,325,356	3%			
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%			
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$51,301,284	\$52,626,640	\$1,325,356	3%			
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3705889479	0.3569334514	(0.0136554965)	-4%			
11	COST OF UNCOMPENSATED CARE	\$1,393,213	\$1,154,833	(\$238,380)	-17%			
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$1,978,454	\$1,822,254	(\$156,201)	-8%			
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%			
14	TOTAL COST OF UNCOMPENSATED CARE AND							
	MEDICAL ASSISTANCE UNDERPAYMENT	\$3,371,667	\$2,977,087	(\$394,580)	-12%			
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLO	<u>GY)</u>						
1	MEDICAID	\$566,845	\$507,153	(\$59,691)	-11%			
2	OTHER MEDICAL ASSISTANCE	\$1,619,220	\$1,380,737	(\$238,483)	-15%			
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$743,621	\$1,273,824	\$530,202	71%			
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$2,929,686	\$3,161,714	\$232,028	8%			
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600	1						
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,654,961	\$2,174,989	\$520,028	31.42%			
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$4,774,811	\$1,120,243	(\$3,654,568)	-76.54%			
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$56,076,094	\$53,746,903	(\$2,329,191)	-4.15%			
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%			
	GROSS REVENUE FROM HOSP AUDIT. FINANCIAL STATEMENTS	\$138,431,770	\$147,441,041	\$9,009,271	6.51%			
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%			
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$3,759,456	\$3,235,430	(\$524,026)	-13.94%			

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
(.)	(2)	1	` '	` '
IINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
	<u>BECOMI HON</u>	112012	112010	DITTERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
Α.	INPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,356,384	\$15,677,757	\$3,321,373
	MEDICARE	\$37,544,207	39,105,825	\$1,561,618
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,543,988	6,525,956	\$981,968
5	MEDICAID OTHER MEDICAL ASSISTANCE	\$2,952,316 \$2,591,672	3,175,671 3,350,285	\$223,355 \$758,613
	CHAMPUS / TRICARE	\$163,314	85,024	(\$78,290)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,345,419	1,089,118	(\$256,301)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$43,251,509	\$45,716,805	\$2,465,296
	TOTAL INPATIENT CHARGES	\$55,607,893	\$61,394,562	\$5,786,669
В.	OUTPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$40,158,091	\$39,566,420	(\$591,671)
2	MEDICARE	\$33,849,225	36,915,275	\$3,066,050
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$8,616,338	9,374,290	\$757,952
4	MEDICAL ASSISTANCE	\$5,112,045	5,267,908	\$155,863 \$000,000
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$3,504,293 \$200,223	4,106,382 190,495	\$602,089 (\$9,728)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,566,254	2,713,314	\$147,060
Ė	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$42,665,786	\$46,480,060	\$3,814,274
	TOTAL OUTPATIENT CHARGES	\$82,823,877	\$86,046,480	\$3,222,603
<u>C.</u>	TOTAL ACCRUED CHARGES TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	¢50.544.475	ФББ 044 4 7 7	¢0.700.700
2	TOTAL NONGOVERNMENT (INCLUDING SELF PAT / UNINSURED)	\$52,514,475 \$71,393,432	\$55,244,177 \$76,021,100	\$2,729,702 \$4,627,668
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,160,326	\$15,900,246	\$1,739,920
4	TOTAL MEDICAID	\$8,064,361	\$8,443,579	\$379,218
	TOTAL OTHER MEDICAL ASSISTANCE	\$6,095,965	\$7,456,667	\$1,360,702
	TOTAL CHAMPUS / TRICARE	\$363,537	\$275,519	(\$88,018)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CHARGES	\$3,911,673	\$3,802,432	(\$109,241) \$6,279,570
	TOTAL GOVERNMENT CHARGES TOTAL CHARGES	\$85,917,295 \$138,431,770	\$92,196,865 \$147,441,042	\$9,009,272
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	INPATIENT ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$5,222,160	\$6,677,553	\$1,455,393
3	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$17,055,293 \$1,535,048	17,970,764 2,015,769	\$915,471 \$480,721
4	MEDICAL ASSISTANCE (INCESTING OTHER MEDICAL ASSISTANCE)	\$791,153	819,553	\$28,400
5	OTHER MEDICAL ASSISTANCE	\$743,895	1,196,216	\$452,321
6	CHAMPUS / TRICARE	\$161,130	77,524	(\$83,606)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$215,382	224,283	\$8,901
-	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$18,751,471	\$20,064,057	\$1,312,586
	TOTAL INPATIENT PAYMENTS	\$23,973,631	\$26,741,610	\$2,767,979
E.	OUTPATIENT ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$18,119,637	\$16,477,995	(\$1,641,642)
	MEDICARE	\$7,418,245	7,527,778	\$109,533
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$1,734,158	1,837,307	\$103,149
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	\$1,211,754 \$522,404	1,271,376 565,931	\$59,622 \$43,527
	CHAMPUS / TRICARE	\$55,611	41,971	(\$13,640)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$464,737	426,841	(\$37,896)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$9,208,014	\$9,407,056	\$199,042
	TOTAL OUTPATIENT PAYMENTS	\$27,327,651	\$25,885,051	(\$1,442,600)
F	TOTAL ACCRUED PAYMENTS			
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$23,341,797	\$23,155,548	(\$186,249)
	TOTAL MEDICARE	\$24,473,538	\$25,498,542	\$1,025,004
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,269,206	\$3,853,076	\$583,870
	TOTAL MEDICAL ACCIOTANCE	\$2,002,907	\$2,090,929	\$88,022
	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$1,266,299 \$216,741	\$1,762,147 \$119,495	\$495,848 (\$97,246)
	TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$216,741	\$651,124	(\$28,995)
	TOTAL GOVERNMENT PAYMENTS	\$27,959,485	\$29,471,113	\$1,511,628
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FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT <u>DIFFERENCE</u>
	TOTAL PAYMENTS	\$51,301,282	\$52,626,661	\$1,325,379
II.	PAYER MIX	, , , , , ,		¥ //-
111.	FATER WILA			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8.93%	10.63%	1.71%
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27.12% 4.00%	26.52% 4.43%	-0.60% 0.42%
4	MEDICAID	2.13%	2.15%	0.02%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	1.87% 0.12%	2.27% 0.06%	0.40% -0.06%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.12%	0.74%	-0.00%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	31.24%	31.01%	-0.24%
	TOTAL INPATIENT PAYER MIX	40.17%	41.64%	1.47%
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	29.01%	26.84%	-2.17%
2	MEDICARE	24.45%	25.04%	0.59%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	6.22% 3.69%	6.36% 3.57%	0.13% -0.12%
5	OTHER MEDICAL ASSISTANCE	2.53%	2.79%	0.25%
	CHAMPUS / TRICARE	0.14%	0.13%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYER MIX	1.85% 30.82%	1.84% 31.52%	-0.01% 0.70%
	TOTAL OUTPATIENT PAYER MIX	59.83%	58.36%	-1.47%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	10.18% 33.25%	12.69% 34.15%	2.51% 0.90%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.99%	3.83%	0.84%
	MEDICAID	1.54%	1.56%	0.02%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	1.45% 0.31%	2.27% 0.15%	0.82% -0.17%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.42%	0.43%	0.01%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	36.55%	38.13%	1.57%
	TOTAL INPATIENT PAYER MIX	46.73%	50.81%	4.08%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	35.32%	31.31%	-4.01%
2	MEDICARE	14.46%	14.30%	-0.16%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.38% 2.36%	3.49%	0.11% 0.05%
	MEDICAID OTHER MEDICAL ASSISTANCE	2.36% 1.02%	2.42% 1.08%	0.05% 0.06%
6	CHAMPUS / TRICARE	0.11%	0.08%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYER MIX	0.91% 17.95%	0.81% 17.88%	-0.09% - 0.07%
	TOTAL OUTPATIENT PAYER MIX	53.27%	49.19%	-4.08%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED I	DATA		
	DISCHARGES			
Α.	DIOCHARGEO			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	743	830	87
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,554 377	1,614 425	60 48
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	194	217	23
5	OTHER MEDICAL ASSISTANCE	183	208	25

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2012</u>	ACTUAL FY 2013	AMOUNT <u>DIFFERENCE</u>
6	CHAMPUS / TRICARE	11	9	(2)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	73	93	20
·	TOTAL GOVERNMENT DISCHARGES	1,942	2,048	106
	TOTAL DISCHARGES	2,685	2,878	193
В.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,262	2,558	296
	MEDICARE	8,469	8,491	22
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,154	1,268	114
	MEDICAID OTHER MEDICAL ACCIOTANCE	602	615	13
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	552 29	653 21	101
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	273	241	(32)
	TOTAL GOVERNMENT PATIENT DAYS	9,652	9,780	128
	TOTAL PATIENT DAYS	11,914	12,338	424
		·	·	
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.0	3.1	0.0
2	MEDICARE	5.4	5.3	(0.2)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.1	3.0	(0.1)
	MEDICAID	3.1	2.8	(0.3)
	OTHER MEDICAL ASSISTANCE	3.0	3.1	0.1
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.6 3.7	2.3 2.6	(0.3)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.0	4.8	(0.2)
	TOTAL AVERAGE LENGTH OF STAY	4.4	4.3	(0.2)
				`
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.98760	1.00670	0.01910
	MEDICARE	1.15760	1.18240	0.02480
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.92894	0.93546	0.00652
	MEDICAID	0.94870	0.91050	(0.03820)
	OTHER MEDICAL ASSISTANCE	0.90800	0.96150	0.05350
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.77580 0.99190	1.02190 0.89090	0.24610 (0.10100)
	TOTAL GOVERNMENT CASE MIX INDEX	1.11105	1.13045	0.01940
	TOTAL CASE MIX INDEX	1.07689	1.09476	0.01787
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$52,514,475	\$55,244,177	\$2,729,702
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$28,175,360	\$27,839,311	(\$336,049)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$24,339,115	\$27,404,866	\$3,065,751
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	46.35%	49.61%	3.26%
	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,654,961	\$2,174,989	\$520,028 \$374,240
6 7	EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-	\$1,074,105 \$0	\$1,448,354 \$0	\$374,249
	OHCA INPUT)	* -	·	\$0
	CHARITY CARE	\$760,089	\$941,923	\$181,834 (\$705,860)
	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$2,999,367 \$3,750,456	\$2,293,507 \$3,235,430	(\$705,860) (\$524,026)
10 11	TOTAL ONCOMPENSATED CARE TOTAL OTHER OPERATING REVENUE	\$3,759,456 \$453,530	\$3,235,430 \$429,185	(\$24,345)
12	TOTAL OPERATING EXPENSES	\$51,745,114	\$49,401,485	(\$2,343,629)
117	DOLLLIDDED DAVMENT LIMIT CALCUL ATIONS			
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
Α.	CASE MIX ADJUSTED DISCHARGES			
		700 7005	007 7015	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	733.78680	835.56100	101.77420

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
LIIVE	<u>DESCRIPTION</u>	1 1 2012	1 1 2013	DILLERCE
2	MEDICARE	1,798.91040	1,908.39360	109.48320
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	350.21180	397.57050	47.35870
	MEDICAID	184.04780	197.57850	13.53070
	OTHER MEDICAL ASSISTANCE	166.16400	199.99200	33.82800
	CHAMPUS / TRICARE	8.53380	9.19710	0.66330
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	72.40870	82.85370	10.44500 157.50520
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES TOTAL CASE MIX ADJUSTED DISCHARGES	2,157.65600 2.891.44280	2,315.16120 3,150.72220	259.27940
	TOTAL CASE WIIX ADJUSTED DISCHARGES	2,031.44200	3,130.72220	233.27340
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,414.74056	2,094.69560	-320.04496
2	MEDICARE	1,401.06024	1,523.59025	122.53001
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	583.35911	614.90850	31.54940
4	MEDICAID	335.91822	359.96677	24.04855
5	OTHER MEDICAL ASSISTANCE	247.44089	254.94173	7.50084
6	CHAMPUS / TRICARE	13.48600	20.16437 231.69042	6.67836
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	139.24030 1,997.90535	231.69042 2,158.66312	92.45012 160.75777
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES TOTAL OUTPATIENT EQUIVALENT DISCHARGES	4,412.64591	4.253.35872	-159.28719
	TOTAL COTTATIENT EQUIVALENT DISCHARGES	4,412.04001	4,200.00012	103.207 13
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,116.73	\$7,991.70	\$874.97
2	MEDICARE	\$9,480.90	\$9,416.70	(\$64.21)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,383.20	\$5,070.22	\$687.02
4	MEDICAID	\$4,298.63	\$4,147.99	(\$150.64)
5	OTHER MEDICAL ASSISTANCE	\$4,476.87	\$5,981.32	\$1,504.45
6	CHAMPUS / TRICARE	\$18,881.39	\$8,429.18	(\$10,452.21)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,974.53	\$2,706.98	(\$267.56)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,690.67 \$8,291.23	\$8,666.38 \$8,487.45	(\$24.29) \$196.22
	TOTAL INITATIENT LATMENT LEN GAGE MILA ADSOCIED DIGOTIANGE	\$5,25 HZ5	\$0,101110	Ų.00i22
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,503.76	\$7,866.53	\$362.77
2	MEDICARE	\$5,294.74	\$4,940.82	(\$353.92)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,972.71	\$2,987.94	\$15.22
4	MEDICAID			
5	IMEDICAID	\$3,607.29	\$3,531.93	(\$75.36)
	OTHER MEDICAL ASSISTANCE	\$3,607.29 \$2,111.23	\$3,531.93 \$2,219.84	(\$75.36) \$108.62
6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$3,607.29 \$2,111.23 \$4,123.61	\$3,531.93 \$2,219.84 \$2,081.44	(\$75.36) \$108.62 (\$2,042.16)
6 7	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,607.29 \$2,111.23	\$3,531.93 \$2,219.84	(\$75.36) \$108.62
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37)
_	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02)
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37)
_	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02)
7 V.	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24)
7 V.	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24)
7 V.	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$59,691) (\$238,483)
7 V.	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$59,691) (\$238,483) \$530,202
7 V.	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$59,691) (\$238,483)
7 V.	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$59,691) (\$238,483) \$530,202 \$232,028
7 V. 1 2 3 VI.	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686 OGY)	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$59,691) (\$238,483) \$530,202 \$232,028
7 V. 1 2 3 VI. 1 2	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) TOTAL CHARGES TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686 OGY) \$138,431,770 \$57,957,810	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714 \$147,441,042 \$62,725,752	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$238,483) \$530,202 \$232,028
7 V. 1 2 3 VI. 1 2 3	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686 OGY) \$138,431,770 \$57,957,810 \$3,759,456	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714 \$147,441,042 \$62,725,752 \$3,235,430	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$238,483) \$530,202 \$232,028 \$9,009,272 \$4,767,942 (\$524,026)
V. 1 2 3 VI. 1 2 3 4	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686 DGY) \$138,431,770 \$57,957,810 \$3,759,456 \$24,339,115	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714 \$147,441,042 \$62,725,752 \$3,235,430 \$27,404,866	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$238,483) \$530,202 \$232,028 \$9,009,272 \$4,767,942 (\$524,026) \$3,065,751
V. 1 2 3 VI. 1 2 3 4 5	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) TOTAL CHARGES TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES EMPLOYEE SELF INSURANCE ALLOWANCE	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686 \$138,431,770 \$57,957,810 \$3,759,456 \$24,339,115 \$1,074,105	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714 \$147,441,042 \$62,725,752 \$3,235,430 \$27,404,866 \$1,448,354	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$238,483) \$530,202 \$232,028 \$9,009,272 \$4,767,942 (\$524,026) \$3,065,751 \$374,249
V. 1 2 3 VI. 1 2 3 4 5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES EMPLOYEE SELF INSURANCE ALLOWANCE TOTAL ADJUSTMENTS	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686 \$2,929,686 \$3,759,456 \$24,339,115 \$1,074,105 \$87,130,486	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714 \$147,441,042 \$62,725,752 \$3,235,430 \$27,404,866	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$238,483) \$530,202 \$232,028 \$9,009,272 \$4,767,942 (\$524,026) \$3,065,751 \$374,249 \$7,683,916
V. 1 2 3 VI. 1 2 3 4 5 6 7 8	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY) TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES EMPLOYEE SELF INSURANCE ALLOWANCE TOTAL ACCRUED PAYMENTS TOTAL ACCRUED PAYMENTS UCP DSH PAYMENTS (OHCA INPUT)	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686 \$138,431,770 \$57,957,810 \$3,759,456 \$24,339,115 \$1,074,105	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714 \$147,441,042 \$62,725,752 \$3,235,430 \$27,404,866 \$1,448,354 \$94,814,402	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$238,483) \$530,202 \$232,028 \$9,009,272 \$4,767,942 (\$524,026) \$3,065,751 \$374,249
V. 1 2 3 VI. 1 2 3 4 5 6 7 8 9	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) MEDICAID OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES EMPLOYEE SELF INSURANCE ALLOWANCE TOTAL ADJUSTMENTS TOTAL ACCRUED PAYMENTS	\$3,607.29 \$2,111.23 \$4,123.61 \$3,337.66 \$4,608.83 \$6,193.03 \$566,845 \$1,619,220 \$743,621 \$2,929,686 \$24,339,115 \$1,074,105 \$87,130,486 \$51,301,284	\$3,531.93 \$2,219.84 \$2,081.44 \$1,842.29 \$4,357.82 \$6,085.79 \$507,153 \$1,380,737 \$1,273,824 \$3,161,714 \$147,441,042 \$62,725,752 \$3,235,430 \$27,404,866 \$1,448,354 \$94,814,402 \$52,626,640	(\$75.36) \$108.62 (\$2,042.16) (\$1,495.37) (\$251.02) (\$107.24) (\$107.24) (\$238,483) \$530,202 \$232,028 \$9,009,272 \$4,767,942 (\$524,026) \$3,065,751 \$374,249 \$7,683,916 \$1,325,356

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
		ACTUAL FY 2012	ACTUAL	AMOUNT DIFFERENCE
LINE	DESCRIPTION	<u>F1 2012</u>	<u>FY 2013</u>	DIFFERENCE
11	COST OF UNCOMPENSATED CARE	\$1,393,213	\$1,154,833	(\$238,380)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$1,978,454	\$1,822,254	(\$156,201)
	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	#0.074.007	# 0.077.007	(0004.500)
		\$3,371,667	\$2,977,087	(\$394,580)
VII.	RATIOS			
A.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	42.26%	42.59%	0.33%
	MEDICARE	45.43%	45.95%	0.53%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27.69%	30.89%	3.20%
4	MEDICAID	26.80%	25.81%	-0.99%
	OTHER MEDICAL ASSISTANCE	28.70%	35.70%	7.00%
	CHAMPUS / TRICARE	98.66%	91.18%	-7.48%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	16.01%	20.59%	4.58%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
		43.35%	43.89%	0.53%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	43.11%	43.56%	0.45%
_	DATIO OF CUITDATIFUT DAVMENTO TO CUITDATIFUT CUIADOFO			
	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	45.12%	41.65%	-3.47%
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	21.92%	20.39%	-3.47%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	20.13%	19.60%	-0.53%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.70%	24.13%	0.43%
	OTHER MEDICAL ASSISTANCE	14.91%	13.78%	-1.13%
	CHAMPUS / TRICARE	27.77%	22.03%	-5.74%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	18.11%	15.73%	-2.38%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	21.58% 32.99%	20.24% 30.08%	-1.34% -2.91%
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	IONS		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	3		
1	TOTAL ACCRUED PAYMENTS	\$51.301.282	\$52,626,661	\$1,325,379
	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA	ψο1,001,202	ψ02,020,001	\$0
_	INPUT)	\$0	\$0	Ψ3
	OHCA DEFINED NET REVENUE	\$51,301,282	\$52,626,661	\$1,325,379
	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$4,774,811	\$1,120,243	(\$3,654,568)
4	CALCULATED NET REVENUE	\$59,656,316	\$53,746,904	(\$5,909,412)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$56,076,094	\$53,746,903	(\$2,329,191)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$3,580,222	\$1	(\$3,580,221)
	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME			(, -,,,
	OHCA DEFINED GROSS REVENUE	\$138,431,770	\$147,441,042	\$9,009,272
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0 \$139,434,770	\$0 \$1.47.441.043	\$0 \$0,000,373
	CALCULATED GROSS REVENUE	\$138,431,770	\$147,441,042	\$9,009,272
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$138,431,770	\$147,441,041	\$9,009,271
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$1	\$1
			•	*
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	15		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,759,456	\$3,235,430	(\$524,026)
	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0

	ESSENT-SHARON HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2013			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA	<u> </u>		<u> </u>
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,759,456	\$3,235,430	(\$524,026)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$3,759,456	\$3,235,430	(\$524,026)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

	ESSENT-SHARON HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2013	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(2)
(1)	(2)	(3) ACTUAL
LINE	DESCRIPTION	FY 2013
LIIVE	DESCRIPTION	112013
I.	ACCRUED CHARGES AND PAYMENTS	
Α.	INPATIENT ACCRUED CHARGES	045.037.757
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$15,677,757 39,105,825
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,525,956
4	MEDICAID	3,175,671
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	3,350,285 85,024
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,089,118
	TOTAL INPATIENT GOVERNMENT CHARGES	\$45,716,805
	TOTAL INPATIENT CHARGES	\$61,394,562
В.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$39,566,420
2	MEDICARE	36,915,275
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	9,374,290
<u>4</u> 5	OTHER MEDICAL ASSISTANCE	5,267,908 4,106,382
6	CHAMPUS / TRICARE	190,495
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,713,314
-	TOTAL OUTPATIENT GOVERNMENT CHARGES TOTAL OUTPATIENT CHARGES	\$46,480,060 \$86,046,480
	TOTAL GOTT ATTENT OTTAINGED	ψου,υτυ,του
C.	TOTAL ACCRUED CHARGES	
2	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED) TOTAL GOVERNMENT ACCRUED CHARGES	\$55,244,177 92,196,865
	TOTAL ACCRUED CHARGES	\$147.441.042
		¥ : :: , : : : , ; : : =
D.	INPATIENT ACCRUED PAYMENTS	ФС CZZ 550
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$6,677,553 17,970,764
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,015,769
4	MEDICAID	819,553
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	1,196,216 77,524
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	224,283
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$20,064,057
-	TOTAL INPATIENT PAYMENTS	\$26,741,610
E.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$16,477,995
2	MEDICARE	7,527,778
3 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	1,837,307 1,271,376
5	OTHER MEDICAL ASSISTANCE	565,931
6	CHAMPUS / TRICARE	41,971
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	426,841 \$0.407.056
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$9,407,056 \$25,885,051
		420,000,001
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED) TOTAL GOVERNMENT ACCRUED PAYMENTS	\$23,155,548
2	TOTAL ACCRUED PAYMENTS	29,471,113 \$52,626,661
		402,020,001
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
	ACCRUIED DISCHARGES	
Α.	ACCRUED DISCHARGES	

	ESSENT-SHARON HOSPITAL	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)
		ACTÚAL
LINE	<u>DESCRIPTION</u>	FY 2013
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	83
2	MEDICARE	1,61
<u>3</u> 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	42 21
5	OTHER MEDICAL ASSISTANCE	20
6	CHAMPUS / TRICARE	
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT DISCHARGES	93 2,04
	TOTAL GOVERNMENT DISCHARGES TOTAL DISCHARGES	2,040
		_,01
B.	CASE MIX INDEX NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.00670
2	MEDICARE	1.18240
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.93546
4	MEDICAID OTHER MEDICAL ACCIOTANCE	0.91050
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.96150 1.02190
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.89090
	TOTAL GOVERNMENT CASE MIX INDEX	1.1304
	TOTAL CASE MIX INDEX	1.09476
C.	OTHER REQUIRED DATA	
2	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$55,244,177 \$27,839,311
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$27,039,311
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$27,404,866
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.61%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,174,989
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,448,354
7	LICE DOLL DAVMENTS (CDOSS DOLL DAVMENTS DILLS LIDDED LIMIT AD ILICEMENT OLICA INDILE)	\$0
	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$941,923
9	BAD DEBTS	\$2,293,507
10	TOTAL UNCOMPENSATED CARE	\$3,235,430
11	TOTAL OTHER OPERATING REVENUE	\$429,185
12	TOTAL OPERATING EXPENSES	\$49,401,485
TTT	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
		^
<u>1</u> 2	TOTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$52,626,661 \$0
	OHCA DEFINED NET REVENUE	\$52,626,661
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE CALCULATED NET REVENUE	\$1,120,243 \$53,746,90 4
	VALUALITED HET IVET HOL	φ33,140,904
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$53,746,903
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1
D		
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$147,441,042
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0

	ESSENT-SHARON HOSPITAL	
	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)
	DESCRIPTION	ACTÚAL FY 2013
	DESCRIPTION	112010
	CALCULATED GROSS REVENUE	\$147,441,042
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$147,441,041
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,235,430
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,235,430
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$3,235,430
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 650 - HOSPITAL UNCOMPENSATED CARE

(1)	(2)	(3)	(4)	(5)	(6)
	DECODIBITION	ACTUAL	ACTUAL	AMOUNT	% DIFFERENCE
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
Α.	Hospital Charity Care (from HRS Report 500)				
1	Number of Applicants	65	70	5	8%
2	Number of Approved Applicants	65	70	5	8%
3	Total Charges (A)	\$760,089	\$941,923	\$181,834	24%
4	Average Charges	\$11,694	\$13,456	\$1,762	15%
5	Ratio of Cost to Charges (RCC)	0.407540	0.372574	(0.034966)	-9%
6	Total Cost	\$309,767	\$350,936	\$41,169	13%
7	Average Cost	\$4,766	\$5,013	\$248	5%
8	Charity Care - Inpatient Charges	\$166,790	\$328,018	\$161,228	97%
9	Charity Care - Impatient Charges Charity Care - Outpatient Charges (Excludes ED Charges)	89,019	422,289	333,270	374%
10	Charity Care - Odipatient Charges (Excludes ED Charges) Charity Care - Emergency Department Charges	504,280	191,616	(312,664)	-62%
11	Total Charges (A)	\$760,089	\$941,923	\$181,834	24%
			•		
12	Charity Care - Number of Patient Days	59	119	60	102%
13	Charity Care - Number of Discharges	15	36	21	140%
14	Charity Care - Number of Outpatient ED Visits	89	205	116	130%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	212	259	47	22%
15	Visits)	212	259	47	22/0
В.	Hospital Bad Debts (from HRS Report 500)				
1	Bad Debts - Inpatient Services	\$949,731	\$597,322	(\$352,409)	-37%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,062,787	522,962	(539,825)	-51%
3	Bad Debts - Emergency Department	986,849	1,173,223	186,374	19%
4	Total Bad Debts (A)	\$2,999,367	\$2,293,507	(\$705,860)	-24%
C.	Hospital Uncompensated Care (from HRS Report 500)				
1	Charity Care (A)	\$760,089	\$941,923	\$181,834	24%
2	Bad Debts (A)	2,999,367	2,293,507	(705,860)	-24%
3	Total Uncompensated Care (A)	\$3,759,456	\$3,235,430	(\$524,026)	-14%
4	Uncompensated Care - Inpatient Services	\$1,116,521	\$925,340	(\$191,181)	-17%
	Uncompensated Care - Outpatient Services (Excludes ED				
5	Unc. Care)	1,151,806	945,251	(206,555)	-18%
6	Uncompensated Care - Emergency Department	1,491,129	1,364,839	(126,290)	-8%
7	Total Uncompensated Care (A)	\$3,759,456	\$3,235,430	(\$524,026)	-14%

		ESSENT-SHARON HOS	· · · · · · · · · · · · · · · · · · ·		
		TWELVE MONTHS ACTUA			
		FISCAL YEAR 201	<u>~</u>		
		L NON-GOVERNMENT GROSS RE		ALLOWANCES,	
	A	CCRUED PAYMENTS AND DISCOL	JNT PERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$52,514,475	\$55,244,177	\$2,729,702	5%
2	Total Contractual Allowances	\$24,339,115	\$27,404,866	\$3,065,751	13%
	Total Accrued Payments (A)	\$28,175,360	\$27,839,311	(\$336,049)	-1%
	Total Discount Percentage	46.35%	49.61%	3.26%	7%
(A) A	crued Payments associated with Non-Gove	ernment Contractual Allowances r	nust exclude any reduction	n for Uncompensated	l Care

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
A.	Gross and Net Revenue			
11	Inpatient Gross Revenue	\$56,413,431	\$55,607,893	\$61,394,562
2	Outpatient Gross Revenue	\$73,329,474	\$82,823,877	\$86,046,480
3	Total Gross Patient Revenue	\$129,742,905	\$138,431,770	\$147,441,042
4	Net Patient Revenue	\$55,537,559	\$54,558,825	\$53,746,903
В.	Total Operating Expenses			
1	Total Operating Expense	\$53,061,849	\$51,745,114	\$49,401,485
C.	Utilization Statistics			
1	Patient Days	12,355	11,914	12,338
2	Discharges	2,703	2,685	2,878
3	Average Length of Stay	4.6	4.4	4.3
4	Equivalent (Adjusted) Patient Days (EPD)	28,415	29,659	29,630
0	Equivalent (Adjusted) Discharges (ED)	6,217	6,684	6,912
D.	Case Mix Statistics			
1	Case Mix Index	1.10427	1.07689	1.09476
2	Case Mix Adjusted Patient Days (CMAPD)	13,643	12,830	13,507
3	Case Mix Adjusted Discharges (CMAD)	2,985	2,891	3,151
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	31,377	31,939	32,438
5	Case Mix Adjusted Equivalent Discharges (CMAED)	6,865	7,198	7,567
E.	Gross Revenue Per Statistic			
1	Total Gross Revenue per Patient Day	\$10,501	\$11,619	\$11,950
2	Total Gross Revenue per Discharge	\$48,000	\$51,557	\$51,230
3	Total Gross Revenue per EPD	\$4,566	\$4,667	\$4,976
4	Total Gross Revenue per ED	\$20,871	\$20,711	\$21,332
5	Total Gross Revenue per CMAEPD	\$4,135	\$4,334	\$4,545
6	Total Gross Revenue per CMAED	\$18,900	\$19,232	\$19,486
7	Inpatient Gross Revenue per EPD	\$1,985	\$1,875	\$2,072
8	Inpatient Gross Revenue per ED	\$9,075	\$8,319	\$8,883

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

	DESCRIPTION	ACTUAL FY 2011	ACTUAL	ACTUAL
	<u>DECOMPTION</u>		FY 2012	FY 2013
F.		011	112012	112010
	Net Revenue Per Statistic			
1	Net Patient Revenue per Patient Day	\$4,495	\$4,579	\$4,356
2	Net Patient Revenue per Discharge	\$20,547	\$20,320	\$18,675
3	Net Patient Revenue per EPD	\$1,955	\$1,840	\$1,814
4	Net Patient Revenue per ED	\$8,934	\$8,162	\$7,776
5	Net Patient Revenue per CMAEPD	\$1,770	\$1,708	\$1,657
6	Net Patient Revenue per CMAED	\$8,090	\$7,580	\$7,103
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$4,295	\$4,343	\$4,004
2	Total Operating Expense per Discharge	\$19,631	\$19,272	\$17,165
3	Total Operating Expense per EPD	\$1,867	\$1,745	\$1,667
4	Total Operating Expense per ED	\$8,536	\$7,742	\$7,148
5	Total Operating Expense per CMAEPD	\$1,691	\$1,620	\$1,523
6	Total Operating Expense per CMAED	\$7,730	\$7,189	\$6,529
Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$7,087,485	\$7,016,561	\$6,922,138
2	Nursing Fringe Benefits Expense	\$1,809,542	\$1,687,424	\$1,697,890
3	Total Nursing Salary and Fringe Benefits Expense	\$8,897,027	\$8,703,985	\$8,620,028
l.	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	\$9,259,124	\$10,390,256	\$10,327,838
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$2,328,842	\$2,354,664	\$2,533,292
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$11,587,966	\$12,744,920	\$12,861,130

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			
1	Total Salary Expense	\$16,346,609	\$17,406,817	\$17,249,976
2	Total Fringe Benefits Expense	\$4,138,384	\$4,042,088	\$4,231,182
3	Total Salary and Fringe Benefits Expense	\$20,484,993	\$21,448,905	\$21,481,158
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	97.2	100.6	95.5
2	Total Physician FTEs	0.0	0.0	0.0
3	Total Non-Nursing, Non-Physician FTEs	174.3	155.0	151.9
4	Total Full Time Equivalent Employees (FTEs)	271.5	255.6	247.4
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$72,917	\$69,747	\$72,483
2	Nursing Fringe Benefits Expense per FTE	\$18,617	\$16,774	\$17,779
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$91,533	\$86,521	\$90,262
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	per FTE		
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$53,122	\$67,034	\$67,991
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$13,361	\$15,191	\$16,677
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$66,483	\$82,225	\$84,668
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$60,209	\$68,102	\$69,725
2	Total Fringe Benefits Expense per FTE	\$15,243	\$15,814	\$17,103
3	Total Salary and Fringe Benefits Expense per FTE	\$75,451	\$83,916	\$86,828
Q.	Total Salary and Fringe Ben. Expense per Statistic			

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL FY 2012	ACTUAL FY 2013
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,658	\$1,800	\$1,741
2	Total Salary and Fringe Benefits Expense per Discharge	\$7,579	\$7,988	\$7,464
3	Total Salary and Fringe Benefits Expense per EPD	\$721	\$723	\$725
4	Total Salary and Fringe Benefits Expense per ED	\$3,295	\$3,209	\$3,108
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$653	\$672	\$662
6	Total Salary and Fringe Benefits Expense per CMAED	\$2,984	\$2,980	\$2,839