	CHARLOTTE HUNG	ERFORD HOSPITAL								
	TWELVE MONTH	S ACTUAL FILING								
		(EAR 2013								
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION									
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %					
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE					
Ι.	ASSETS									
Α.	Current Assets:	**	A A A 4A T AA	(\$222.222)						
1	Cash and Cash Equivalents	\$9,871,014	\$8,948,706	(\$922,308)	-9%					
2	Short Term Investments	\$0	\$0	\$0	0%					
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$13,441,101	\$13,504,471	\$63,370	0%					
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%					
5	Due From Affiliates	\$0	\$0	\$0	0%					
6	Due From Third Party Payers	\$971,585	\$840,007	(\$131,578)	-14%					
7	Inventories of Supplies	\$2,025,113	\$2,092,246	\$67,133	3%					
8	Prepaid Expenses	\$0	\$0	\$0	0%					
9	Other Current Assets	\$1,717,026	\$2,724,846	\$1,007,820	59%					
	Total Current Assets	\$28,025,839	\$28,110,276	\$84,437	0%					
В.	Noncurrent Assets Whose Use is Limited:									
1	Held by Trustee	\$18,116,227	\$20,525,079	\$2,408,852	13%					
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%					
3	Funds Held in Escrow	\$400,278	\$0	(\$400,278)	-100%					
4	Other Noncurrent Assets Whose Use is Limited	\$6,989,321	\$7,067,123	\$77,802	1%					
	Total Noncurrent Assets Whose Use is Limited:	\$25,505,826	\$27,592,202	\$2,086,376	8%					
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%					
6	Long Term Investments	\$33,807,880	\$38,742,293	\$4,934,413	15%					
7	Other Noncurrent Assets	\$1,334,720	\$1,135,267	(\$199,453)	-15%					
C.	Net Fixed Assets:									
1	Property, Plant and Equipment	\$143,527,470	\$148,532,515	\$5,005,045	3%					
2	Less: Accumulated Depreciation	\$106,694,984	\$112,631,179	\$5,936,195	6%					
	Property, Plant and Equipment, Net	\$36,832,486	\$35,901,336	(\$931,150)	-3%					
3	Construction in Progress	\$1,020,301	\$968,443	(\$51,858)	-5%					
	Total Net Fixed Assets	\$37,852,787	\$36,869,779	(\$983,008)	-3%					
	Total Assets	\$126,527,052	\$132,449,817	\$5,922,765	5%					
11.	LIABILITIES AND NET ASSETS									
Α.	Current Liabilities:									
1	Accounts Payable and Accrued Expenses	\$5,029,676	\$7,289,342	\$2,259,666	45%					
2	Salaries, Wages and Payroll Taxes	\$4,027,215	\$4,177,672	\$150,457	4%					

	CHARLOTTE	HUNGERFORD HOSPITAL									
	TWELVE M	ONTHS ACTUAL FILING									
	FISCAL YEAR 2013 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION										
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION										
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %						
<u>LINE</u>	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE						
3	Due To Third Party Payers	\$1,917,192	\$2,468,522	\$551,330	29%						
4	Due To Affiliates	\$0	\$0	\$0	0%						
5	Current Portion of Long Term Debt	\$1,200,000	\$0	(\$1,200,000)	-100%						
6	Current Portion of Notes Payable	\$198,100	\$3,219,468	\$3,021,368	1525%						
7	Other Current Liabilities	\$7,726,163	\$4,078,798	(\$3,647,365)	-47%						
	Total Current Liabilities	\$20,098,346	\$21,233,802	\$1,135,456	6%						
B.	Long Term Debt:										
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%						
2	Notes Payable (Net of Current Portion)	\$3,223,366	\$0	(\$3,223,366)	-100%						
	Total Long Term Debt	\$3,223,366	\$0	(\$3,223,366)	-100%						
3	Accrued Pension Liability	\$38,287,989	\$23,133,018	(\$15,154,971)	-40%						
4	Other Long Term Liabilities	\$3,125,672	\$3,527,218	\$401,546	13%						
	Total Long Term Liabilities	\$44,637,027	\$26,660,236	(\$17,976,791)	-40%						
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%						
C.	Net Assets:										
1	Unrestricted Net Assets or Equity	\$40,934,207	\$61,139,349	\$20,205,142	49%						
2	Temporarily Restricted Net Assets	\$3,236,940	\$3,314,742	\$77,802	2%						
3	Permanently Restricted Net Assets	\$17,620,532	\$20,101,688	\$2,481,156	14%						
	Total Net Assets	\$61,791,679	\$84,555,779	\$22,764,100	37%						
	Total Liabilities and Net Assets	\$126,527,052	\$132,449,817	\$5,922,765	5%						

	CHARLOTTE	HUNGERFORD HOS	SPITAL							
	TWELVE M	ONTHS ACTUAL FI	ING							
	FIS	CAL YEAR 2013								
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION										
(1)	(2)	(3)	(4)	(5)	(6)					
<u>LINE</u>	DESCRIPTION	FY 2012 <u>ACTUAL</u>	FY 2013 <u>ACTUAL</u>	AMOUNT <u>DIFFERENCE</u>	% <u>DIFFERENCE</u>					
Α.	Operating Revenue:									
1	Total Gross Patient Revenue	\$237,069,420	\$259,938,572	\$22,869,152	10%					
2	Less: Allowances	\$118,988,604	\$136,668,445	\$17,679,841	15%					
3	Less: Charity Care	\$1,766,984	\$3,214,518	\$1,447,534	82%					
4	Less: Other Deductions	\$0	\$0	\$0	0%					
	Total Net Patient Revenue	\$116,313,832	\$120,055,609	\$3,741,777	3%					
5	Provision for Bad Debts	\$0	\$3,378,061	\$3,378,061	0%					
	Net Patient Service Revenue less provision for bad debts	\$116,313,832	\$116,677,548	\$363,716	0%					
6	Other Operating Revenue	\$5,735,128	\$8,250,545	\$2,515,417	44%					
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%					
	Total Operating Revenue	_{\$0} \$122,048,960	۵0 \$124,928,093	۵۵ \$2,879,133	0% 2%					
В.	Operating Expenses:									
1	Salaries and Wages	\$54,928,730	\$58,472,497	\$3,543,767	6%					
2	Fringe Benefits	\$16,546,435	\$16,209,800	(\$336,635)	-2%					
3	Physicians Fees	\$3,306,463	\$4,669,548	\$1,363,085	41%					
4	Supplies and Drugs	\$12,272,846	\$12,520,721	\$247,875	2%					
5	Depreciation and Amortization	\$6,060,455	\$6,050,075	(\$10,380)	0%					
6	Bad Debts	\$3,125,364	\$0	(\$3,125,364)	-100%					
7	Interest Expense	\$264,153	\$250,825	(\$13,328)	-5%					
8	Malpractice Insurance Cost	\$1,748,531	\$1,842,449	\$93,918	5%					
9	Other Operating Expenses	\$23,629,704	\$24,884,070	\$1,254,366	5%					
	Total Operating Expenses	\$121,882,681	\$124,899,985	\$3,017,304	2%					
	Income/(Loss) From Operations	\$166,279	\$28,108	(\$138,171)	-83%					
C.	Non-Operating Revenue:									
1	Income from Investments	\$2,102,513	\$2,298,212	\$195,699	9%					
2	Gifts, Contributions and Donations	\$27,952	\$273,527	\$245,575	879%					
3	Other Non-Operating Gains/(Losses)	\$118,880	\$93,073	(\$25,807)	-22%					
	Total Non-Operating Revenue	\$2,249,345	\$2,664,812	\$415,467	18%					
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$2,415,624	\$2,692,920	\$277,296	11%					
	Other Adjustments:									
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%					

	CHARLOTT	E HUNGERFORD HO	SPITAL		
	TWELVE	MONTHS ACTUAL FI	LING		
	F	FISCAL 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>	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$2,415,624	\$2,692,920	\$277,296	11%
	Principal Payments	\$1,344,063	\$1,401,998	\$57,935	4%

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		TTE HUNGERFORD HOS			
	IWEL	VE MONTHS ACTUAL FIL FISCAL YEAR 2013	ING		
	REPORT 165 - HOSPITAL GROSS		F AND STATISTIC	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
<u>``</u>		FY 2012	FY 2013	AMOUNT	%
	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Ι.	GROSS REVENUE BY PAYER				
•	INPATIENT GROSS REVENUE				
A. 1	MEDICARE TRADITIONAL	\$49,563,629	\$54,904,987	\$5,341,358	11
2	MEDICARE MANAGED CARE	\$5,294,301	\$7,113,981	\$1,819,680	349
3	MEDICAID	\$11,223,800	\$14,098,153	\$2,874,353	26
4	MEDICAID MANAGED CARE	\$666,923	\$437,891	(\$229,032)	-349
5	CHAMPUS/TRICARE	\$483,092	\$353,945	(\$129,032)	-279
6		\$4,108,259	\$2,608,785	(\$1,499,474)	-27
7	NON-GOVERNMENT MANAGED CARE	\$15,794,964	\$19,441,893	\$3,646,929	239
8	WORKER'S COMPENSATION	\$13,794,904	\$859,081	\$42,018	
<u> </u>	SELF- PAY/UNINSURED	\$1,298,459	\$859,081	\$291,745	229
10	SAGA	\$1,290,439	\$1,590,204 \$0	\$291,745	00
11	OTHER	\$0	\$0 \$20,290	(\$51,023)	-729
11	TOTAL INPATIENT GROSS REVENUE	\$89,321,803	\$20,290 \$101,429,210	\$12,107,407	-72
В.	OUTPATIENT GROSS REVENUE	\$69,321,803	\$101,429,210	φ12,107,407	14
		.	#E 4,400,000	#0.074.000	
1	MEDICARE TRADITIONAL	\$47,463,367	\$51,138,290	\$3,674,923	8
2	MEDICARE MANAGED CARE	\$7,111,067	\$9,659,403	\$2,548,336	36
3	MEDICAID	\$26,472,475	\$32,529,315	\$6,056,840	23
4	MEDICAID MANAGED CARE	\$3,770,770	\$1,128,215	(\$2,642,555)	-709
5	CHAMPUS/TRICARE	\$523,735	\$620,095	\$96,360	189
6		\$10,818,859	\$5,540,715	(\$5,278,144)	-499
7	NON-GOVERNMENT MANAGED CARE	\$44,876,274	\$50,761,334	\$5,885,060	139
8	WORKER'S COMPENSATION	\$1,293,897	\$1,465,316	\$171,419	139
9	SELF- PAY/UNINSURED	\$5,212,131	\$5,513,269	\$301,138	69
10	SAGA	\$0	\$0	\$0	09
11	OTHER	\$205,041	\$153,409	(\$51,632)	-259
	TOTAL OUTPATIENT GROSS REVENUE	\$147,747,616	\$158,509,361	\$10,761,745	79
C.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$97,026,996	\$106,043,277	\$9,016,281	99
2	MEDICARE MANAGED CARE	\$12,405,368	\$16,773,384	\$4,368,016	359
3		\$37,696,275	\$46,627,468	\$8,931,193	249
4	MEDICAID MANAGED CARE	\$4,437,693	\$1,566,106	(\$2,871,587)	-65
5	CHAMPUS/TRICARE	\$1,006,827	\$974,040	(\$32,787)	-39
6					-45
-		\$14,927,118	\$8,149,500	(\$6,777,618)	
7		\$60,671,238	\$70,203,227	\$9,531,989	16
8	WORKER'S COMPENSATION	\$2,110,960	\$2,324,397	\$213,437	10
9	SELF- PAY/UNINSURED	\$6,510,590	\$7,103,473	\$592,883	9
10	SAGA	\$0	\$0	\$0	0
11	OTHER	\$276,354	\$173,699	(\$102,655)	-37
	TOTAL GROSS REVENUE	\$237,069,419	\$259,938,571	\$22,869,152	10
П.	NET REVENUE BY PAYER				
Α.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$29,385,497	\$30,589,686	\$1,204,189	4
2	MEDICARE MANAGED CARE	\$2,930,803	\$3,963,473	\$1,032,670	35
3	MEDICAID	\$4,710,422	\$4,905,020	\$194,598	4
4	MEDICAID MANAGED CARE	\$416,744	\$140,182	(\$276,562)	-66
5	CHAMPUS/TRICARE	\$282,459	\$220,612	(\$61,847)	-22
0		\$2,460,964	\$1,699,129	(\$761,835)	-22

		OTTE HUNGERFORD HOS						
TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER								
	REPORT 165 - HOSPITAL GROSS		E AND STATISTIC	CS BY PAYER				
(1)	(2)	(3)	(4)	(5)	(6)			
		FY 2012	FY 2013	AMOUNT	%			
NE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
7	NON-GOVERNMENT MANAGED CARE	\$11,198,947	\$12,436,823	\$1,237,876	119			
8 9		\$605,554	\$652,620	\$47,066	89			
, 0	SELF- PAY/UNINSURED	\$330,637 \$0	\$272,165 \$0	<u>(\$58,472)</u> \$0	-189 09			
0 1	OTHER	\$30,421	هو \$18,644	(\$11,777)	-399			
<u> </u>	TOTAL INPATIENT NET REVENUE	\$52,352,448	\$54,898,354	\$2,545,906	5			
3.	OUTPATIENT NET REVENUE	,, ,, ,, ,, ,,	** 1,000,001	<i> </i>	•			
	MEDICARE TRADITIONAL	\$18,547,928	\$18,505,307	(\$42,621)	00			
	MEDICARE MANAGED CARE	\$2,498,610	\$3,362,046	\$863,436	359			
	MEDICAID	\$7,758,161	\$10,437,386	\$2,679,225	359			
	MEDICAID MANAGED CARE	\$1,992,902	\$409,033	(\$1,583,869)	-79			
	CHAMPUS/TRICARE	\$189,582	\$228,839	\$39,257	21			
		\$5,418,974	\$2,136,171	(\$3,282,803)	-61			
	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	\$21,800,642 \$1,059,323	\$25,522,388 \$1,008,717	\$3,721,746 (\$50,606)	<u>17</u> -5			
	SELF- PAY/UNINSURED	\$1,327,208	\$943,602	(\$383,606)	-5 -29			
)	SAGA	\$0	<u>\$0</u>	(¢000,000) \$0	0			
1	OTHER	\$37,780	\$31,406	(\$6,374)	-17			
	TOTAL OUTPATIENT NET REVENUE	\$60,631,110	\$62,584,895	\$1,953,785	3			
		A (7 000 405	* 40,004,000	* 4 404 500				
1	MEDICARE TRADITIONAL	\$47,933,425	\$49,094,993	\$1,161,568	2 35'			
2	MEDICARE MANAGED CARE	\$5,429,413 \$12,468,583	\$7,325,519 \$15,342,406	\$1,896,106 \$2,873,823	23			
3 4		\$12,400,503	\$15,342,406 \$549,215	\$2,873,823 (\$1,860,431)	23 -77			
4 5	CHAMPUS/TRICARE	\$472,041	\$449,451	(\$1,860,431)	-77			
6		\$7,879,938	\$3,835,300	(\$4,044,638)	-51			
7	NON-GOVERNMENT MANAGED CARE	\$32,999,589	\$37,959,211	\$4,959,622	15			
8	WORKER'S COMPENSATION	\$1,664,877	\$1,661,337	(\$3,540)	0			
9	SELF- PAY/UNINSURED	\$1,657,845	\$1,215,767	(\$442,078)	-27			
0	SAGA	\$0	\$0	\$0	0			
1	OTHER	\$68,201	\$50,050	(\$18,151)	-27			
	TOTAL NET REVENUE	\$112,983,558	\$117,483,249	\$4,499,691	4			
	STATISTICS BY PAYER							
-	DISCHARGES							
<u>.</u>	MEDICARE TRADITIONAL	3,163	3,113	(50)	-2			
	MEDICARE MANAGED CARE	319	397	78	24			
	MEDICAID	1,020	1,136	116	11			
	MEDICAID MANAGED CARE	83	31	(52)	-63			
	CHAMPUS/TRICARE	31	32	1	3			
		337	397	60	18			
		1,240	1,192 32	(48)	-4			
_	WORKER'S COMPENSATION SELF- PAY/UNINSURED	29 114	<u> </u>	3 86	10 75			
)	SAGA	0	200	86 0				
, 	OTHER	2	3	1	50			
•	TOTAL DISCHARGES	6,338	6,533	195	3			
	PATIENT DAYS		0,000					
	MEDICARE TRADITIONAL	14,049	14,227	178	1			
_	MEDICARE MANAGED CARE	1,344	1,655	311	23			
2								

	CHARLOTTE	UNGERFORD HOS	PITAL					
	TWELVE MO	ONTHS ACTUAL FIL	ING					
	FISC	CAL YEAR 2013						
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER								
(1)	(2)	(3)	(4)	(5)	(6)			
(1)	(2)							
		FY 2012	FY 2013	AMOUNT	%			
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
4	MEDICAID MANAGED CARE	235	109	(126)	-54%			
5	CHAMPUS/TRICARE	120	132	120)				
6		1,135	1,446	311	27%			
7	NON-GOVERNMENT MANAGED CARE	3,943	3,715	(228)	-6%			
8	WORKER'S COMPENSATION	63	95	32	51%			
9	SELF- PAY/UNINSURED	392	696	304	78%			
10	SAGA	0	0	0	0%			
11	OTHER	31	5	(26)	-84%			
	TOTAL PATIENT DAYS	25,249	26,574	1,325	5%			
C.	OUTPATIENT VISITS							
1	MEDICARE TRADITIONAL	75,495	77,205	1,710	2%			
2	MEDICARE MANAGED CARE	11,354	14,176	2,822	25%			
3	MEDICAID	35,076	40,002	4,926	14%			
4	MEDICAID MANAGED CARE	5,649	1,469	(4,180)	-74%			
5	CHAMPUS/TRICARE	707	742	35	5%			
6	COMMERCIAL INSURANCE	17,982	17,781	(201)	-1%			
7	NON-GOVERNMENT MANAGED CARE	71,553	64,730	(6,823)	-10%			
8	WORKER'S COMPENSATION	1,462	1,282	(180)	-12%			
9	SELF- PAY/UNINSURED	10,861	11,915	1,054	10%			
10	SAGA	0	0	0	0%			
11	OTHER TOTAL OUTPATIENT VISITS	231 230,370	153 229,455	(78) (915)	-34% 0%			
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER EMERGENCY DEPARTMENT OUTPATIENT GROSS							
Α.	REVENUE							
1	MEDICARE TRADITIONAL	\$9,265,065	\$9,763,336	\$498,271	5%			
2	MEDICARE MANAGED CARE	\$1,096,262	\$1,426,960	\$330,698	30%			
3	MEDICAID	\$10,463,251	\$12,853,422	\$2,390,171	23%			
4	MEDICAID MANAGED CARE	\$1,361,416	\$269,400	(\$1,092,016)	-80%			
5	CHAMPUS/TRICARE	\$243,687	\$258,930	\$15,243	6%			
6	COMMERCIAL INSURANCE	*• • • • • • •						
7		\$2,547,650	\$2,696,856	\$149,206				
8	NON-GOVERNMENT MANAGED CARE	\$9,789,468	\$9,351,814	(\$437,654)	-4%			
	WORKER'S COMPENSATION	\$9,789,468 \$574,624	\$9,351,814 \$613,935	(\$437,654) \$39,311	-4% 7%			
9	WORKER'S COMPENSATION SELF- PAY/UNINSURED	\$9,789,468 \$574,624 \$2,620,861	\$9,351,814 \$613,935 \$2,731,280	(\$437,654) \$39,311 \$110,419	-4% 7% 4%			
9 10	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA	\$9,789,468 \$574,624 \$2,620,861 \$0	\$9,351,814 \$613,935 \$2,731,280 \$0	(\$437,654) \$39,311 \$110,419 \$0	-4% 7% 4%			
9	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER	\$9,789,468 \$574,624 \$2,620,861	\$9,351,814 \$613,935 \$2,731,280	(\$437,654) \$39,311 \$110,419	-4% 7% 4%			
9 10	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591)	-4% 7% 4% 0% -22%			
9 10	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$9,789,468 \$574,624 \$2,620,861 \$0	\$9,351,814 \$613,935 \$2,731,280 \$0	(\$437,654) \$39,311 \$110,419 \$0	-4% 7% 4% 0% -22%			
9 10 11	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591)	-4% 7% 4% 0% -22%			
9 10 11 B.	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058	-4% 7% 4% 0% -22% 5%			
9 10 11 B. 1	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$2,943,718	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035 \$2,261,948	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770)	-4% 7% 4% 0% -22% 5% -23%			
9 10 11 B. 1 2	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$2,943,718 \$345,171	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035 \$2,261,948 \$358,103	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770) \$12,932	-4% 7% 4% 0% -22% 5% -23% 4%			
9 10 11 B. 1	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$2,943,718 \$345,171 \$2,977,182	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035 \$2,261,948 \$358,103 \$3,678,697	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770) \$12,932 \$701,515	-4% 7% 4% 0% -22% 5% -23% 4% 24%			
9 10 11 B. 1 2 3	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$2,943,718 \$345,171 \$2,977,182 \$577,745	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035 \$2,261,948 \$358,103 \$3,678,697 \$72,549	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770) \$12,932 \$701,515 (\$505,196)	-4% 7% 4% 0% -22% 5% 5% -23% 4% 24% -87%			
9 10 11 B. 1 2 3 4	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$2,943,718 \$345,171 \$2,977,182	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035 \$2,261,948 \$358,103 \$3,678,697	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770) \$12,932 \$701,515	-4% 7% 4% 0% -22% 5% -23% -23% 4% 24% -87% -3%			
9 10 11 B. 1 2 3 4 5	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$2,943,718 \$345,171 \$2,977,182 \$577,745 \$67,787	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035 \$2,261,948 \$358,103 \$3,678,697 \$72,549 \$65,920	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770) \$12,932 \$701,515 (\$505,196) (\$1,867)	-4% 7% 4% 0% -22% 5% -23% -23% 4% 24% -87% -3% -11%			
9 10 11 B. 1 2 3 4 5 6	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$345,171 \$2,977,182 \$577,745 \$67,787 \$1,423,129	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035 \$2,261,948 \$358,103 \$3,678,697 \$72,549 \$65,920 \$1,270,620	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770) \$12,932 \$701,515 (\$505,196) (\$1,867) (\$152,509)	-4% 7% 4% 0% -22% 5% 5% -23% 4% 24% -87% -3% -11% -18%			
9 10 11 B. 1 2 3 4 5 6 7	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$38,120,977 \$345,171 \$2,977,182 \$577,745 \$67,787 \$1,423,129 \$4,782,192	\$9,351,814 \$613,935 \$2,731,280 \$123,102 \$40,089,035 \$2,261,948 \$358,103 \$3,678,697 \$72,549 \$65,920 \$1,270,620 \$3,916,626	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770) \$12,932 \$701,515 (\$505,196) (\$1,867) (\$152,509) (\$865,566)	-4% 7% 4% 0% -22% 5% 5% -23% 4% 24% -87% -3% -11% -18% 22%			
9 10 11 B. 1 2 3 4 5 6 7 8	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE MEDICARE TRADITIONAL MEDICARE TRADITIONAL MEDICAID MEDICAID MEDICAID MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	\$9,789,468 \$574,624 \$2,620,861 \$0 \$158,693 \$38,120,977 \$38,120,977 \$345,171 \$2,977,182 \$577,745 \$67,787 \$1,423,129 \$4,782,192 \$421,447	\$9,351,814 \$613,935 \$2,731,280 \$0 \$123,102 \$40,089,035 \$2,261,948 \$358,103 \$3,678,697 \$72,549 \$65,920 \$1,270,620 \$3,916,626 \$512,680	(\$437,654) \$39,311 \$110,419 \$0 (\$35,591) \$1,968,058 (\$681,770) \$12,932 \$701,515 (\$505,196) (\$1,867) (\$152,509) (\$865,566) \$91,233	6% 4% 7% 4% 0% 22% 5% 5% -23% 22% 23% 23% 22% 23% 22% 23% 22% 23% 22% 23% 22% 23% 23% 23% 23% 23% 23% 23% 23% 23% 24% 24% 24% 24% 24% 24% 24% 24% 24% 24% 24% 24% 24% 24% 24% 24% 24% 25% 			

	CHARLOTTE	HUNGERFORD HOS	SPITAL		
	TWELVE M	ONTHS ACTUAL FIL	ING		
	FIS	CAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS REVE	ENUE, NET REVENU	JE AND STATISTIC	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$13,802,747	\$13,763,968	(\$38,779)	0%
С.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	7,612	7,816	204	3%
2	MEDICARE MANAGED CARE	922	1,062	140	15%
3	MEDICAID	9,822	11,635	1,813	18%
4	MEDICAID MANAGED CARE	1,672	221	(1,451)	-87%
5	CHAMPUS/TRICARE	246	235	(11)	-4%
6	COMMERCIAL INSURANCE	2,437	2,382	(55)	-2%
7	NON-GOVERNMENT MANAGED CARE	9,358	8,439	(919)	-10%
8	WORKER'S COMPENSATION	737	692	(45)	-6%
9	SELF- PAY/UNINSURED	2,849	3,198	349	12%
10	SAGA	0	0	0	0%
11	OTHER	157	110	(47)	-30%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	35,812	35,790	(22)	0%

	CHARLOTTE H	UNGERFORD HOSP	ΠΤΔΙ						
		NTHS ACTUAL FILI							
	FISCAL YEAR 2013 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT								
(1) (2) (3) (4) (5) (6)									
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	<u>(6)</u> %				
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
I.	OPERATING EXPENSE BY CATEGORY								
Α.	Salaries & Wages:								
1	Nursing Salaries	\$21,604,919	\$22,590,903	\$985,984	5%				
2	Physician Salaries	\$7,857,318	\$8,984,103	\$1,126,785	14%				
3	Non-Nursing, Non-Physician Salaries	\$25,466,493	\$26,897,491	\$1,430,998	6%				
	Total Salaries & Wages	\$54,928,730	\$58,472,497	\$3,543,767	6%				
В.	Fringe Benefits:								
1	Nursing Fringe Benefits	\$6,508,150	\$6,262,671	(\$245,479)	-4%				
2	Physician Fringe Benefits	\$2,366,896	\$2,490,581	\$123,685	5%				
3	Non-Nursing, Non-Physician Fringe Benefits	\$7,671,389	\$7,456,548	(\$214,841)	-3%				
	Total Fringe Benefits	\$16,546,435	\$16,209,800	(\$336,635)	-2%				
C.	Contractual Labor Fees:								
1	Nursing Fees	\$639,573	\$613,655	(\$25,918)	-4%				
2	Physician Fees	\$3,306,463	\$4,669,548	\$1,363,085	41%				
3	Non-Nursing, Non-Physician Fees	\$438,753	\$234,519	(\$204,234)	-47%				
3	Total Contractual Labor Fees								
	Total Contractual Labor Fees	\$4,384,789	\$5,517,722	\$1,132,933	26%				
D.	Medical Supplies and Pharmaceutical Cost:								
1	Medical Supplies	\$8,625,979	\$8,819,965	\$193,986	2%				
2	Pharmaceutical Costs	\$3,646,867	\$3,700,756	\$53,889	1%				
	Total Medical Supplies and Pharmaceutical Cost	\$12,272,846	\$12,520,721	\$247,875	2%				
E.	Depreciation and Amortization:								
1	Depreciation-Building	\$3,121,665	\$3,129,852	\$8,187	0%				
2	Depreciation-Equipment	\$2,869,560	\$2,846,058	(\$23,502)	-1%				
3	Amortization	\$69,230	\$74,165	\$4,935	7%				
Ū	Total Depreciation and Amortization	\$6,060,455	\$6,050,075	(\$10,380)	0%				
F. 1	Bad Debts: Bad Debts	\$3,125,364	\$0	(\$3,125,364)	-100%				
I		ψ <u></u> 0,120,00 4	ψυ	(\$3,123,304)	-10070				
G.	Interest Expense:								
1	Interest Expense	\$264,153	\$250,825	(\$13,328)	-5%				
Н.	Malpractice Insurance Cost:								
1	Malpractice Insurance Cost	\$1,748,531	\$1,842,449	\$93,918	5%				
<u>l.</u>	Utilities:	¢50.000		ФЭ Г 4 Э	4 = 0/				
1	Water	\$50,888	\$58,435 \$474,262	\$7,547 \$11,200	15%				
2	Natural Gas Oil	\$462,973	\$474,363	\$11,390 \$4,712	2%				
3		\$11,267 \$1,200,775	\$15,980 \$1,242,722	\$4,713 (\$58,042)	42%				
4	Electricity	\$1,300,775 \$260,422	\$1,242,732 \$233,223	(\$58,043) (\$27,199)	-4% -10%				
<u>5</u> 6	Telephone Other Utilities	\$260,422	\$53,835	(\$27,199) \$2,270	-10%				
U	Total Utilities	\$2,137,890	\$2,078,568	(\$59,322)	-3%				
		. , ,	. ,	(+;=)	•				
J.	Business Expenses:	.		(\$22.2.10)					
<u>1</u> 2	Accounting Fees	\$131,256 \$257,120	\$109,008 \$253,533	(\$22,248) (\$3,587)	<u>-17%</u> -1%				
	ILEYAI FEES	φ207,120	\$253,533 \$570,512	(\$3,587) \$104,128	-1%				

	TWELVE MOI	UNGERFORD HOSP							
	FISC/ REPORT 175 - HOSPITAL OPERATING EXPE	AL YEAR 2013							
	REPORT 173 - HOSPITAL OPERATING EXPE	INSES DI EXFENS	E CATEGORT AN	DEFARIMENT					
(1)	(2)	(3)	(4)	(5)	(6)				
(1)	(2)	FY 2012	FY 2013	AMOUNT	<u>(0)</u> %				
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
4	Dues and Membership	\$330,293	\$359,416	\$29,123	9%				
5	Equipment Leases	\$1,304,916	\$1,297,634	(\$7,282)	-19				
6	Building Leases	\$990,352	\$1,103,507	\$113,155	119				
7	Repairs and Maintenance	\$1,942,055	\$2,525,670	\$583,615	30%				
8	Insurance	\$270,076	\$283,124	\$13,048	5%				
9	Travel	\$60,934	\$33,726	(\$27,208)	-45%				
10	Conferences	\$60,224	\$166,304	\$106,080	176%				
11	Property Tax	\$209,737	\$208,552	(\$1,185)	-19				
12	General Supplies	\$652,487	\$736,066	\$83,579	139				
12	Licenses and Subscriptions	\$106,523	\$145,149	\$38,626	369				
13	Postage and Shipping	\$100,523	\$146,736	\$5,271	49				
14	Advertising	\$266,455	\$250,728	(\$15,727)	-69				
15	Corporate parent/system fees	\$200,455 \$0	\$250,728 \$0	(\$15,727) \$0	-0%				
17		\$1,336,103	\$1,336,296	\$0 \$193	09				
	Computer Software Computer hardware & small equipment	\$1,336,103	\$1,336,296 \$437,390	\$62,933					
18					179				
19	Dietary / Food Services	\$1,749,668	\$1,822,885	\$73,217	49				
20	Lab Fees / Red Cross charges	\$2,641,805	\$2,290,720	(\$351,085)	-139				
21	Billing & Collection / Bank Fees	\$535,277	\$491,282	(\$43,995)	-89				
22	Recruiting / Employee Education & Recognition	\$445,308	\$393,613	(\$51,695)	-129				
23	Laundry / Linen	\$511,165	\$519,379	\$8,214	29				
24	Professional / Physician Fees	\$29,869	\$29,693	(\$176)	-19				
25	Waste disposal	\$134,908	\$154,468	\$19,560	149				
26	Purchased Services - Medical	\$874,035	\$1,033,842	\$159,807	189				
27	Purchased Services - Non Medical	\$3,760,818	\$4,124,487	\$363,669	109				
28	Other Business Expenses	\$780,721	\$1,110,989	\$330,268	429				
	Total Business Expenses	\$20,364,411	\$21,934,709	\$1,570,298	89				
К.	Other Operating Expense:								
1	Miscellaneous Other Operating Expenses	\$49,077	\$22,619	(\$26,458)	-549				
•		\$ 10,01 T	<i> </i>	(+=0,100)					
	Total Operating Expenses - All Expense Categories*	\$121,882,681	\$124,899,985	\$3,017,304	29				
	*AK.The total operating expenses amount above must agree with the total operating expenses amount on Report 150								
II.	OPERATING EXPENSE BY DEPARTMENT								
Α.	General Services:								
1	General Administration	\$32,240,541	\$29,263,477	(\$2,977,064)	-9				
2	General Accounting	\$869,256	\$877,749	(\$2,977,004) \$8,493	-9				
2	Patient Billing & Collection	\$869,256	\$877,749 \$1,176,951		-1				
<u> </u>	Admitting / Registration Office	\$1,210,326	\$1,207,135	(\$12,294) (\$3,191)	-1				
		\$2,857,814			17				
5	Data Processing		\$3,340,256	\$482,442					
6	Communications	\$302,798	\$289,800	(\$12,998)	-4				
7	Personnel	\$833,216	\$1,048,041	\$214,825 (\$41,750)	26				
8	Public Relations	\$500,772	\$459,022	(\$41,750)	-8				
9	Purchasing	\$955,409	\$765,511	(\$189,898)	-20				
10	Dietary and Cafeteria	\$1,586,480	\$1,610,770	\$24,290	2				
11	Housekeeping	\$1,597,443	\$1,512,537	(\$84,906)	-5				
12	Laundry & Linen	\$531,515	\$529,202	(\$2,313)	0				
	One retien of Diant	\$1,842,087	\$1,983,474	\$141,387	8				
13	Operation of Plant								
14	Security	\$307,069	\$309,577	\$2,508	1				

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	IWELV	<u>E MONTHS ACTUAL FILI</u> FISCAL YEAR 2013	NG							
	REPORT 175 - HOSPITAL OPERATING									
	REPORT 175 - HOSPITAL OPERATING	EAPENSES BI EAPENS	E CATEGORT AN	DEPARTMENT						
(4)										
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	<u>(6)</u> %					
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE					
		ACTORE	ACTUAL	DITTERENCE	DITTERENCE					
17	Pharmacy Department	\$4,789,318	\$4,873,185	\$83,867	2%					
18	Other General Services	\$0	\$0	\$0	0%					
	Total General Services	\$52,720,080	\$50,549,503	(\$2,170,577)	-4%					
В.	Professional Services:									
<u>в</u> . 1	Medical Care Administration	\$668,938	\$683,458	\$14,520	2%					
2	Residency Program	۵000,938 \$0	\$003,438 \$0	<u>\$14,520</u> \$0	0%					
3	Nursing Services Administration	\$1,303,152	\$1,350,351	\$47,199	4%					
4	Medical Records	\$2,049,493	\$1,996,826	(\$52,667)	-3%					
5	Social Service	\$1,394,999	\$1,490,296	\$95,297	7%					
6	Other Professional Services	\$0	\$0	\$0	0%					
	Total Professional Services	\$5,416,582	\$5,520,931	\$104,349	2%					
^	Special Services									
C.	Special Services:	#0.004.005	#0.005.000	¢400.007	4.07					
1 2	Operating Room Recovery Room	\$6,834,895 \$514,074	\$6,935,832 \$674,796	\$100,937 \$160,722	<u>1%</u> 31%					
3	Anesthesiology	\$195,221	\$213,591	\$18,370	9%					
4	Delivery Room	\$605,796	\$695,595	\$89,799	15%					
5	Diagnostic Radiology	\$3,085,284	\$2,941,459	(\$143,825)	-5%					
6	Diagnostic Ultrasound	\$412,212	\$417,796	\$5,584	1%					
7	Radiation Therapy	\$1,587,744	\$1,867,292	\$279,548	18%					
8	Radioisotopes	\$445,420	\$375,872	(\$69,548)	-16%					
9	CT Scan	\$725,805	\$754,602	\$28,797	4%					
10	Laboratory	\$6,556,019	\$6,201,518	(\$354,501)	-5%					
11	Blood Storing/Processing	\$1,118,312	\$1,085,406	(\$32,906)	-3%					
12	Cardiology	\$0	\$0	\$0	0%					
13	Electrocardiology	\$257,295	\$246,648	(\$10,647)	-4%					
14	Electroencephalography	\$4,882	\$12,863	\$7,981	163%					
15	Occupational Therapy	\$29,373	\$96,076	\$66,703	227%					
16 17	Speech Pathology Audiology	\$52,453 \$0	\$62,629 \$0	<u>\$10,176</u> \$0	<u> </u>					
17	Respiratory Therapy	\$843,344	هو \$894,513	\$0 \$51,169	0% 6%					
18	Pulmonary Function	\$233,169	\$247,358	\$14,189	<u> </u>					
20	Intravenous Therapy	\$0	\$0	\$0	0%					
21	Shock Therapy	\$0	\$0	\$0	0%					
22	Psychiatry / Psychology Services	\$4,581,600	\$5,071,382	\$489,782	11%					
23	Renal Dialysis	\$141,628	\$179,437	\$37,809	27%					
24	Emergency Room	\$6,160,646	\$6,729,539	\$568,893	9%					
25	MRI	\$262,902	\$281,375	\$18,473	7%					
26	PET Scan	\$138,402	\$182,813	\$44,411	32%					
27	PET/CT Scan	\$0	\$0	\$0	0%					
28	Endoscopy	\$349,381	\$389,648	\$40,267	12%					
29	Sleep Center	\$423,636	\$527,035	\$103,399	24%					
30 31	Lithotripsy Cardiac Catheterization/Rehabilitation	\$0 \$322,430	\$0 \$349,241	\$0 \$26,811	<u> </u>					
31	Occupational Therapy / Physical Therapy	\$322,430	\$963,081	\$26,811 \$52,150	<u> </u>					
33	Dental Clinic	\$910,931	\$903,081	\$52,150 \$0	0%					
34	Other Special Services	\$94,044	\$113,269	\$19,225	20%					
	Total Special Services	\$36,886,898	\$38,510,666	\$1,623,768	4%					
	Dereting Complete									
<u>D.</u> 1	Routine Services:	\$7,125,530	¢7 474 650	CO 1 O 1 CD	E0/					
2	Medical & Surgical Units Intensive Care Unit	\$7,125,530	\$7,474,652 \$2,552,372	\$349,122 \$343,849	<u> </u>					
3	Coronary Care Unit	\$2,200,523	\$2,552,572 \$0	۵343,849 \$0	0%					

	CHARLOTTE HUNGERFORD HOSPITAL TWELVE MONTHS ACTUAL FILING									
		SCAL YEAR 2013	NG							
	REPORT 175 - HOSPITAL OPERATING EX		E CATEGORY AN	D DEPARTMENT						
(1)	(2)	(3)	(4)	(5)	(6)					
		FY 2012	FY 2013	AMOUNT	%					
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE					
4	Psychiatric Unit	\$2,606,104	\$2,854,438	\$248,334	109					
5	Pediatric Unit	\$839,890	\$963,633	\$123,743	15%					
6	Maternity Unit	\$892,990	\$846,042	(\$46,948)	-5%					
7	Newborn Nursery Unit	\$286,782	\$327,067	\$40,285	149					
8	Neonatal ICU	\$0	\$0	\$0	00					
9	Rehabilitation Unit	\$0	\$0	\$0	09					
10	Ambulatory Surgery	\$606,896	\$610,049	\$3,153	19					
11	Home Care	\$0	\$0	\$0	00					
12	Outpatient Clinics	\$10,413,076	\$12,498,989	\$2,085,913	209					
13	Other Routine Services	\$1,572,968	\$1,913,976	\$341,008	229					
	Total Routine Services	\$26,552,759	\$30,041,218	\$3,488,459	139					
E.	Other Departments:									
1	Miscellaneous Other Departments	\$306,362	\$277,667	(\$28,695)	-9¢					
	Total Operating Expenses - All Departments*	\$121,882,681	\$124,899,985	\$3,017,304	20					
	*A E. The total operating expenses amount above	must agree with the to	otal operating exp	enses amount on l	Report 150.					

	CHARLOTTE HUNGERFORD 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	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>			
Α.	Statement of Operations Summary						
1	Total Net Patient Revenue	\$109,579,717	\$116,313,832	\$116,677,548			
2	Other Operating Revenue	4,949,386	5,735,128	8,250,545			
3	Total Operating Revenue	\$114,529,103	\$122,048,960	\$124,928,093			
4	Total Operating Expenses	113,880,767	121,882,681	124,899,985			
5	Income/(Loss) From Operations	\$648,336	\$166,279	\$28,108			
6	Total Non-Operating Revenue	2,011,113	2,249,345	2,664,812			
7	Excess/(Deficiency) of Revenue Over Expenses	\$2,659,449	\$2,415,624	\$2,692,920			
В.	Profitability Summary						
1	Hospital Operating Margin	0.56%	0.13% 1.81% 1.94%	0.02%			
2	Hospital Non Operating Margin	1.73%		2.09%			
3	Hospital Total Margin	2.28%		2.11%			
4	Income/(Loss) From Operations	\$648,336	\$166,279	\$28,108			
5	Total Operating Revenue	\$114,529,103	\$122,048,960	\$124,928,093			
6	Total Non-Operating Revenue	\$2,011,113	\$2,249,345	\$2,664,812			
7	Total Revenue	\$116,540,216	\$124,298,305	\$127,592,905			
8	Excess/(Deficiency) of Revenue Over Expenses	\$2,659,449	\$2,415,624	\$2,692,920			
C.	Net Assets Summary						
1	Hospital Unrestricted Net Assets	\$47,062,165	\$40,934,207	\$61,139,349			
2	Hospital Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779			
3	Hospital Change in Total Net Assets	\$7,444,266	(\$4,194,171)	\$22,764,100			
4	Hospital Change in Total Net Assets %	112.7%	-6.4%	36.8%			
D.	Cost Data Summary						
1	Ratio of Cost to Charges	0.53	0.50	0.47			
2	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985			
3	Total Gross Revenue	\$208,629,597	\$237,069,419	\$259,938,571			
4	Total Other Operating Revenue	\$4,949,386	\$5,735,128	\$8,250,545			

	CHARLOTTE HUNGERFORD HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)			
	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL			
<u>LINE</u>		<u> </u>	<u> </u>	<u>FY 2013</u>			
5	Private Payment to Cost Ratio	1.07	1.09	1.16			
6	Total Non-Government Payments	\$41,153,855	\$44,202,249	\$44,671,615			
7	Total Uninsured Payments	\$1,467,954	\$1,657,845	\$1,215,767			
8	Total Non-Government Charges	\$74,660,403	\$84,219,906	\$87,780,597			
9	Total Uninsured Charges	\$5,160,009	\$6,510,590	\$7,103,473			
10	Medicare Payment to Cost Ratio	1.01	0.97	0.99			
11	Total Medicare Payments	\$50,742,113	\$53,362,838	\$56,420,512			
12	Total Medicare Charges	\$94,315,886	\$109,432,364	\$122,816,661			
13	Medicaid Payment to Cost Ratio	0.72	0.70	0.71			
14	Total Medicaid Payments	\$14,852,649	\$14,878,229	\$15,891,621			
15	Total Medicaid Charges	\$38,541,692	\$42,133,968	\$48,193,574			
16	Uncompensated Care Cost	\$2,056,056	\$2,455,854	\$3,070,270			
17	Charity Care	\$1,726,098	\$1,766,984	\$3,214,518			
18	Bad Debts	\$2,129,955	\$3,125,364	\$3,378,061			
19	Total Uncompensated Care	\$3,856,053	\$4,892,348	\$6,592,579			
20	Uncompensated Care % of Total Expenses	1.8%	2.0%	2.5%			
21	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985			
E.	Liquidity Measures Summary						
1	Current Ratio	1	1	1			
2	Total Current Assets	\$25,471,279	\$28,025,839	\$28,110,276			
3	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802			
4	Days Cash on Hand	29	31	27			
5	Cash and Cash Equivalents	\$8,455,576	\$9,871,014	\$8,948,706			
6	Short Term Investments	0	0	0			

	CHARLOTTE HUNGERFORD HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
		ACTUAL	ACTUAL	ACTUAL			
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>			
7	Total Cash and Short Term Investments	\$8,455,576	\$9,871,014	\$8,948,706			
8	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985			
9	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075			
10	Operating Expenses less Depreciation Expense	\$107,702,685	\$115,822,226	\$118,849,910			
11	Days Revenue in Patient Accounts Receivable	37	39	37			
12	Net Patient Accounts Receivable	\$11,144,540	\$13,441,101	\$13,504,471			
13	Due From Third Party Payers	\$1,516,187	\$971,585	\$840,007			
14	Due To Third Party Payers	\$1,693,818	\$1,917,192	\$2,468,522			
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$10,966,909	\$12,495,494	\$11,875,956			
16	Total Net Patient Revenue	\$109,579,717	\$116,313,832	\$116,677,548			
17	Average Payment Period	65	63	65			
18	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802			
19	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985			
20	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075			
21	Total Operating Expenses less Depreciation Expense	\$107,702,685	\$115,822,226	\$118,849,910			
F.	Solvency Measures Summary						
1	Equity Financing Ratio	55.5	48.8	63.8			
2	Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779			
3	Total Assets	\$118,826,510	\$126,527,052	\$132,449,817			
4	Cash Flow to Total Debt Ratio	37.2	36.3	41.2			
5	Excess/(Deficiency) of Revenues Over Expenses	\$2,659,449	\$2,415,624	\$2,692,920			
6	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075			
7	Excess of Revenues Over Expenses and Depreciation Expense	\$8,837,531	\$8,476,079	\$8,742,995			
8	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802			
9	Total Long Term Debt	\$4,624,338	\$3,223,366	\$0			
10	Total Current Liabilities and Total Long Term Debt	\$23,785,996	\$23,321,712	\$21,233,802			

	CHARLOTTE HUNGERFORD HOSPITAL TWELVE MONTHS ACTUAL FILING						
		AL YEAR 2013					
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)			
		ACTUAL	ACTUAL	ACTUAL			
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>			
11	Long Term Debt to Capitalization Ratio	6.5	5.0	-			
12	Total Long Term Debt	\$4,624,338	\$3,223,366	\$0			
13	Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779			
14	otal Long Term Debt and Total Net Assets	\$70,610,188	\$65,015,045	\$84,555,779			
15	Debt Service Coverage Ratio	5.3	5.4	5.4			
16	Excess Revenues over Expenses	2,659,449	\$2,415,624	\$2,692,920			
17	Interest Expense	308,286	\$264,153	\$250,825			
18	Depreciation and Amortization Expense	6,178,082	\$6,060,455	\$6,050,075			
19	Principal Payments	1,411,317	\$1,344,063	\$1,401,998			
G.	Other Financial Ratios						
20	Average Age of Plant	16.6	17.6	18.6			
21	Accumulated Depreciation	102,493,235	106,694,984	112,631,179			
22	Depreciation and Amortization Expense	6,178,082	6,060,455	6,050,075			
Н.	Utilization Measures Summary						
1	Patient Days	27,425	25,249	26,574			
2	Discharges	6,512	6,338	6,533			
3	ALOS	4.2	4.0	4.1			
4	Staffed Beds	81	75	77			
5	Available Beds	-	122	122			
6	Licensed Beds	122	122	122			
7	Occupancy of Staffed Beds	92.8%	92.2%	94.6%			
8	Occupancy of Available Beds	61.6%	56.7%	59.7%			
9	Full Time Equivalent Employees	744.3	768.4	789.0			
I.	Hospital Gross Revenue Payer Mix Percentage						
1	Non-Government Gross Revenue Payer Mix Percentage	33.3%	32.8%	31.0%			
2	Medicare Gross Revenue Payer Mix Percentage	45.2%	46.2%	47.2%			

	CHARLOTTE HUNGERFORD 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	<u> </u>	<u>FY 2012</u>	FY 2013				
3	Medicaid Gross Revenue Payer Mix Percentage	18.5%	17.8%	18.5%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%				
5	Uninsured Gross Revenue Payer Mix Percentage	2.5%	2.7%	2.7%				
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.4%	0.4%	0.4%				
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Gross Revenue (Charges)	\$69,500,394	\$77,709,316	\$80,677,124				
9	Medicare Gross Revenue (Charges)	\$94,315,886	\$109,432,364	\$122,816,661				
10	Medicaid Gross Revenue (Charges)	\$38,541,692	\$42,133,968	\$48,193,574				
11	Other Medical Assistance Gross Revenue (Charges)	\$232,999	\$276,354	\$173,699				
12	Uninsured Gross Revenue (Charges)	\$5,160,009	\$6,510,590	\$7,103,473				
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$878,617	\$1,006,827	\$974,040				
14	Total Gross Revenue (Charges)	\$208,629,597	\$237,069,419	\$259,938,571				
J.	Hospital Net Revenue Payer Mix Percentage							
1	Non-Government Net Revenue Payer Mix Percentage	37.0%	37.7%	37.0%				
2	Medicare Net Revenue Payer Mix Percentage	47.3%	47.2%	48.0%				
3	Medicaid Net Revenue Payer Mix Percentage	13.8%	13.2%	13.5%				
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.1%	0.1%	0.0%				
5	Uninsured Net Revenue Payer Mix Percentage	1.4%	1.5%	1.0%				
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.4%	0.4%	0.4%				
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Net Revenue (Payments)	\$39,685,901	\$42,544,404	\$43,455,848				
9	Medicare Net Revenue (Payments)	\$50,742,113	\$53,362,838	\$56,420,512				
10	Medicaid Net Revenue (Payments)	\$14,852,649	\$14,878,229	\$15,891,621				
11	Other Medical Assistance Net Revenue (Payments)	\$67,869	\$68,201	\$50,050				
12	Uninsured Net Revenue (Payments)	\$1,467,954	\$1,657,845	\$1,215,767				
13	CHAMPUS / TRICARE Net Revenue Payments)	\$459,226	\$472,041	\$449,451				
14	Total Net Revenue (Payments)	\$107,275,712	\$112,983,558	\$117,483,249				
К.	<u>Discharges</u>							
1	Non-Government (Including Self Pay / Uninsured)	1,747	1,720	1,821				
2	Medicare	3,532	3,482	3,510				
3	Medical Assistance	1,200	1,105	1,170				
4	Medicaid	1,192	1,103	1,167				
5	Other Medical Assistance	8	2	3				
6	CHAMPUS / TRICARE	33	31	32				

	CHARLOTTE HUNGERFORD HOSPITAL TWELVE MONTHS ACTUAL FILING						
	FIS	CAL YEAR 2013					
	REPORT 185 - HOSPITAL FINAN	ICIAL AND STATISTICAL D	ATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)			
		ACTUAL	ACTUAL	ACTUAL			
<u>LINE</u>	DESCRIPTION	FY 2011	<u>FY 2012</u>	<u>FY 2013</u>			
7	Uninsured (Included In Non-Government)	90	114	200			
8	Total	6,512	6,338	6,533			
L.	Case Mix Index						
1	Non-Government (Including Self Pay / Uninsured)	1.15440	1.16030	1.08960			
2	Medicare	1.40620	1.35650	1.44760			
3	Medical Assistance	0.97323	1.00831	1.04819			
4	Medicaid	0.97260	1.00740	1.04800			
5	Other Medical Assistance	1.06700	1.51200	1.12350			
6	CHAMPUS / TRICARE	1.15050	1.06440	1.00330			
7	Uninsured (Included In Non-Government)	0.97450	1.09030	1.02690			
8	Total Case Mix Index	1.25757	1.24112	1.27411			
М.	Emergency Department Visits						
1	Emergency Room - Treated and Admitted	5,055	5,066	5,182			
2	Emergency Room - Treated and Discharged	34,480	35,812	35,790			
3	Total Emergency Room Visits	39,535	40,878	40,972			

	TWELVE MON	INGERFORD HOSPIT	AL		
	REPORT 200 - HOSPITAL ME		ARE ACTIVITY		
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$236,294	\$439,418	\$203,124	86%
2	Inpatient Payments	\$111,324	\$205,951	\$94,627	85%
3	Outpatient Charges	\$245,783	\$537,003	\$291,220	118%
4	Outpatient Payments	\$74,674	\$166,622	\$91,948	123%
5 6	Discharges Patient Days	17 70	23 92	<u>6</u> 22	<u>35%</u> 31%
6 7	Outpatient Visits (Excludes ED Visits)	472	<u>92</u> 822	350	31% 74%
8	Emergency Department Outpatient Visits	39	 71	330	82%
9	Emergency Department Inpatient Admissions	17	21	4	24%
0	TOTAL INPATIENT & OUTPATIENT CHARGES	\$482,077	\$976,421	\$494,344	103%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$185,998	\$372,573	\$186,575	100%
В.	CIGNA HEALTHCARE				
<u>в.</u> 1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$2,887,477	\$2,950,906	\$63,429	2%
2	Inpatient Payments	\$1,550,570	\$1,703,814	\$153,244	10%
3	Outpatient Charges	\$3,597,401	\$4,194,625	\$597,224	17%
4	Outpatient Payments	\$1,247,567	\$1,437,328	\$189,761	15%
5	Discharges	164	171	7	4%
6	Patient Days	673	677	4	1%
7	Outpatient Visits (Excludes ED Visits)	5,403	6,018	615	11%
8	Emergency Department Outpatient Visits	409	<u>421</u> 149	12 16	<u>3%</u> 12%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,484,878	\$7,145,531	\$660,653	12% 10%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0,404,676	\$7,145,531 \$3,141,142	\$060,653 \$343,005	10%
D.	HEALTHNET OF CONNECTICUT		A 2	^	
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments Outpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
4	Outpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

	CHARLOTTE HUN						
		IS ACTUAL FILING	i				
		YEAR 2013					
	REPORT 200 - HOSPITAL MEDI	CARE MANAGED C	CARE ACTIVITY				
(1)	(2)	(3)	(4)	(5)	(6)		
		FY 2012	FY 2013	AMOUNT	%		
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE		
E.	OTHER MEDICARE MANAGED CARE						
 .	Inpatient Charges	\$85,793	\$227,820	\$142,027	166%		
2	Inpatient Charges	\$52,677	\$227,820 \$115,019	\$62,342	118%		
3	Outpatient Charges	\$47,539	\$79,451	\$31,912	67%		
4	Outpatient Payments	\$10,120	\$31,376	\$21,256	210%		
5	Discharges	φ10,120 5	10	φ21,230 5	100%		
6	Patient Days	24	76	52	217%		
7	Outpatient Visits (Excludes ED Visits)	51	91	40	78%		
8	Emergency Department Outpatient Visits	18	28	10	56%		
9	Emergency Department Inpatient Admissions	4	9	5	125%		
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$133,332	\$307,271	\$173,939	120%		
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$62,797	\$146,395	\$83,598	133%		
		ψυΖ,1 51	ψι-0,000	ψ00,000	10070		
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAG	È					
1	Inpatient Charges	\$0	\$0	\$0	0%		
2	Inpatient Payments	\$0	\$0	\$0	0%		
3	Outpatient Charges	\$779	\$0	(\$779)	-100%		
4	Outpatient Payments	\$295	\$0	(\$295)	-100%		
5	Discharges	0	0	0	0%		
6	Patient Days	0	0	0	0%		
7	Outpatient Visits (Excludes ED Visits)	3	0	(3)	-100%		
8	Emergency Department Outpatient Visits	0	0	0	0%		
9	Emergency Department Inpatient Admissions	0	0	0	0%		
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$779	\$0	(\$779)	-100%		
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$295	\$0	(\$295)	-100%		
G.	UNITED HEALTHCARE INSURANCE COMPANY						
1	Inpatient Charges	\$1,318,395	\$1,725,808	\$407,413	31%		
2	Inpatient Payments	\$708,239	\$955,750	\$247,511	35%		
3	Outpatient Charges	\$2,028,879	\$2,494,934	\$466,055	23%		
4	Outpatient Payments	\$727,090	\$868,538	\$141,448	19%		
5	Discharges	86	100	14	16%		
6	Patient Days	369	394	25	7%		
7	Outpatient Visits (Excludes ED Visits)	2,631	2,995	364	14%		
8	Emergency Department Outpatient Visits	310	309	(1)	0%		
9	Emergency Department Inpatient Admissions	75	86	11	15%		
ļ	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,347,274	\$4,220,742	\$873,468	26%		
ļ	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,435,329	\$1,824,288	\$388,959	27%		
<u> </u>							
<u>Н.</u> 1	WELLCARE OF CONNECTICUT	\$0	\$0	\$0	0%		
2	Inpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0%		
3	Outpatient Charges	\$0 \$6,177		ه 0 (\$6,177)	-100%		
4	Outpatient Charges	\$2,733		(\$0,177)	-100%		
4 5	Discharges	\$2,733	<u> </u>	(\$2,733) 0	-100%		
5 6	Patient Days	0	0	0	0%		
7	Outpatient Visits (Excludes ED Visits)	3	0	(3)	-100%		
8	Emergency Department Outpatient Visits	1	0	(1)	-100%		
9	Emergency Department Inpatient Admissions	0	0	(1)	-100%		
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,177	\$0	(\$6,177)	-100%		
<u> </u>	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,733	<u>\$0</u> \$0	(\$0,177)	-100%		
		ψ2,7 33	ΨŪ	(ψ2,7 33)	10070		
١.	AETNA	+ +					
<u> </u>	1	1					

			ΔΙ		
		THS ACTUAL FILING			
		L YEAR 2013			
				,	
	REPORT 200 - HOSPITAL ME	DICARE MANAGED C	ARE ACTIVITY		
(4)		(0)	(1)	(5)	(0)
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMÓUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
1	Inpatient Charges	\$766,342	\$1,770,029	\$1,003,687	131%
2	Inpatient Payments	\$507,993	\$982,939	\$474,946	93%
3	Outpatient Charges	\$1,128,387	\$2,353,390	\$1,225,003	109%
4	Outpatient Payments	\$420,967	\$858,182	\$437,215	104%
5	Discharges	47	93	46	98%
6	Patient Days	208	416	208	100%
7	Outpatient Visits (Excludes ED Visits)	1,829	3,188	1,359	74%
8	Emergency Department Outpatient Visits	138	233	95	69%
9	Emergency Department Inpatient Admissions	46	70	24	52%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,894,729	\$4,123,419	\$2,228,690	118%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$928,960	\$1,841,121	\$912,161	98%
J.	HUMANA		* -	A -	
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$41,976	\$0	(\$41,976)	-100%
4	Outpatient Payments	\$11,301	\$0	(\$11,301)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	23	0	(23)	-100%
8	Emergency Department Outpatient Visits	6	0	(6)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
Ŭ	TOTAL INPATIENT & OUTPATIENT CHARGES	\$41,976	\$0	(\$41,976)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$11,301	\$0	(\$11,301)	-100%
		ψ11,001	ψυ	(@11,001)	10070
К.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
		\$6,691	<u>\$0</u> \$0	(\$6,691)	
3	Outpatient Charges				-100%
4	Outpatient Payments	\$1,727	\$0	(\$1,727)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	3	0	(3)	-100%
8	Emergency Department Outpatient Visits	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,691	\$0	(\$6,691)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,727	\$0	(\$1,727)	-100%
L.	UNICARE LIFE & HEALTH INSURANCE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
-		-	-	0	
9	Emergency Department Inpatient Admissions	0	0	-	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
<u>M.</u>			* ~	* -	
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

	CHARLOTTE HUNC				
		IS ACTUAL FILING			
		YEAR 2013			
	REPORT 200 - HOSPITAL MEDI	CARE MANAGED C	CARE ACTIVITY		
(1)	(2)	(3)	(4)	(5)	(6)
	DECODIDITION	FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
		• • • • •	•	·- ·-	
3	Outpatient Charges	\$3,284	\$0	(\$3,284)	-100%
4	Outpatient Payments	\$902	\$0	(\$902)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	9	0	(9)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,284	\$0	(\$3,284)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$902	\$0	(\$902)	-100%
Ν.	EVERCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$4,171	\$0	(\$4,171)	-100%
4	Outpatient Payments	\$1,234	\$0	(\$1,234)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	5	0	(5)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,171	\$0	(\$4,171)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,234	\$0	(\$1,234)	-100%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$5,294,301	\$7,113,981	\$1,819,680	34%
	TOTAL INPATIENT PAYMENTS	\$2,930,803	\$3,963,473	\$1,032,670	35%
	TOTAL OUTPATIENT CHARGES	\$7,111,067	\$9,659,403	\$2,548,336	36%
	TOTAL OUTPATIENT PAYMENTS	\$2,498,610	\$3,362,046	\$863,436	35%
	TOTAL DISCHARGES	319	397	78	24%
	TOTAL PATIENT DAYS	1,344	1,655	311	23%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) TOTAL EMERGENCY DEPARTMENT OUTPATIENT	10,432	13,114	2,682	26%
	VISITS	922	1,062	140	15%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	275	335	60	22%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,405,368	\$16,773,384		
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,429,413	\$7,325,519	\$4,368,016 \$1,896,106	35% 35%

	CHARLOTTE	HUNGERFORD HC	SPITAL	·	·
	TWELVE M	ONTHS ACTUAL F	ILING		
		ISCAL YEAR 2013			
	REPORT 250 - HOSPITAL	MEDICAID MANAG	ED CARE ACTIVI	TY	
(4)		(0)	(4)	(5)	(0)
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6)
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
		ACTUAL	ACTUAL	DITTERENCE	78 DITTERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
Α.	CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4 5	Outpatient Payments	\$0	\$0	\$0	0%
5 6	Discharges Patient Days	0	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%
0	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
			·	·	
в.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$365,986	\$437,891	\$71,905	20%
2	Inpatient Payments	\$247,447	\$140,182	(\$107,265)	-43%
3	Outpatient Charges	\$1,755,382	\$1,128,215	(\$627,167)	-36%
4	Outpatient Payments	\$1,034,498	\$409,033	(\$625,465)	-60%
5	Discharges	43	31	(12)	-28%
6	Patient Days	107	109	2	2%
7	Outpatient Visits (Excludes ED Visits)	1,851	1,248	(603)	-33%
8 9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	1,041 20	221 21	(820)	-79% 5%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,121,368	\$1,566,106	(\$555,262)	-26%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,281,945	\$549,215	(\$732,730)	-57%
		¢1,201,010	<i>\\</i>	(\$1.62), 66)	0170
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
		۵ ۵	ቅሀ	۵ ۵	0%
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$115,204	\$0	(\$115,204)	-100%
2	Inpatient Payments	\$60,918	\$0	(\$60,918)	-100%
3	Outpatient Charges	\$813,448	\$0	(\$813,448)	-100%
4	Outpatient Payments	\$362,196	\$0	(\$362,196)	-100%
5	Discharges	15	0	(15)	-100%
6	Patient Days	68	0	(68)	-100%
7	Outpatient Visits (Excludes ED Visits)	1,003	0	(1,003)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	13	0	(13)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$928,652	\$0	(\$928,652)	-100%

	CHARLOTTE	HUNGERFORD HO	SPITAI		
		ONTHS ACTUAL FI			
	F	ISCAL YEAR 2013			
	REPORT 250 - HOSPITAL	MEDICAID MANAG	ED CARE ACTIVI	ГҮ	[
(1)	(2)	(3)	(4)	(5)	(6)
(1)	(2)	(3) FY 2012	(+) FY 2013	AMOUNT	(0)
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$423,114	\$0	(\$423,114)	-100%
_					
E.	WELLCARE OF CONNECTICUT	\$0	<u>م</u>	ሰ ወ	00/
1	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges	\$0	\$0 \$0	<u>\$0</u> \$0	0%
4	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%
-	FIRST CHOICE OF CONNECTICUT, PREFERRED				
F.	ONE	¢0.	¢o		00/
1 2	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges	\$0	\$0 \$0	\$0\$0	0%
4	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%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$54,283	\$0	(\$54,283)	-100%
2	Inpatient Payments	\$21,291	\$0	(\$21,291)	-100%
3	Outpatient Charges	\$199,890	\$0	(\$199,890)	-100%
4	Outpatient Payments	\$113,568	\$0	(\$113,568)	-100%
5	Discharges	7	0	(7)	-100%
6	Patient Days	16	0	(16)	-100%
7	Outpatient Visits (Excludes ED Visits)	213	0	(213)	-100%
8	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	101	0	(101)	-100%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	1 \$254,173	0 \$0	(1) (\$254,173)	-100% -100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$134,859	\$0 \$0	(\$134,859)	-100%
		φ13 4 ,033	ΨU	(\$154,000)	-10070
н.	AETNA				
1	Inpatient Charges	\$131,450	\$0	(\$131,450)	-100%
2	Inpatient Payments	\$87,088	\$0	(\$87,088)	-100%
3	Outpatient Charges	\$1,002,050	\$0	(\$1,002,050)	-100%
4	Outpatient Payments	\$482,640	\$0	(\$482,640)	-100%
5	Discharges	18	0	(18)	-100%
6	Patient Days	44	0	(44)	-100%
7	Outpatient Visits (Excludes ED Visits)	910	0	(910)	-100%
<u>8</u> 9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	530	0	(530) (6)	-100% -100%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	ہ \$1,133,500	\$0	(5) (\$1,133,500)	-100% -100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$569,728	\$0 \$0	(\$1,133,500) (\$569,728)	-100%
		<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	ΨŪ	(#000,120)	100

FISCAL YEAR 2013									
REPORT 250 - HOSPITAL	MEDICAID MANAG	GED CARE ACTIVI	ТҮ						
(2)	(3)	(4)		(6)					
	FY 2012	FY 2013	AMOUNT						
	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE					
TOTAL MEDICAID MANAGED CARE									
TOTAL INPATIENT CHARGES	\$666,923	\$437,891	(\$229,032)	-34%					
TOTAL INPATIENT PAYMENTS	\$416,744	\$140,182		-66%					
TOTAL OUTPATIENT CHARGES	\$3,770,770	\$1,128,215	(\$2,642,555)	-70%					
TOTAL OUTPATIENT PAYMENTS	\$1,992,902	\$409,033	(\$1,583,869)	-79%					
TOTAL DISCHARGES	83	31	(52)	-63%					
TOTAL PATIENT DAYS	235	109	(126)	-54%					
TOTAL OUTPATIENT VISITS (EXCLUDES ED									
VISITS)	3,977	1,248	(2,729)	-69%					
TOTAL EMERGENCY DEPARTMENT									
OUTPATIENT VISITS	1,672	221	(1,451)	-87%					
TOTAL EMERGENCY DEPARTMENT									
INPATIENT ADMISSIONS	40	21	(19)	-48%					
TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,437,693	\$1,566,106	(\$2,871,587)						
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,409,646	\$549,215	(\$1,860,431)	-77%					
	TWELVE M FI REPORT 250 - HOSPITAL (2) TOTAL MEDICAID MANAGED CARE TOTAL INPATIENT CHARGES TOTAL INPATIENT CHARGES TOTAL OUTPATIENT CHARGES TOTAL OUTPATIENT CHARGES TOTAL OUTPATIENT PAYMENTS TOTAL DISCHARGES TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS TOTAL EMERGENCY DEPARTMENT INPATIENT VISITS TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS TOTAL INPATIENT & OUTPATIENT CHARGES	TWELVE MONTHS ACTUAL F FISCAL YEAR 2013 REPORT 250 - HOSPITAL MEDICAID MANAG(2)(3)(2)(3)(2)(3)FY 2012 ACTUALTOTAL MEDICAID MANAGED CARETOTAL INPATIENT CHARGES\$666,923TOTAL INPATIENT CHARGES\$416,744TOTAL OUTPATIENT CHARGES\$3,770,770TOTAL OUTPATIENT CHARGES\$3,770,770TOTAL OUTPATIENT CHARGES\$1,992,902TOTAL OUTPATIENT PAYMENTS\$1,992,902TOTAL OUTPATIENT VISITS (EXCLUDES ED3,977TOTAL OUTPATIENT VISITS (EXCLUDES ED3,977TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS1,672TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS40TOTAL INPATIENT & OUTPATIENT CHARGES\$4,437,693	REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVI(2)(3)(4)(2)(3)(4)FY 2012FY 2013ACTUALACTUALACTUALACTUALTOTAL MEDICAID MANAGED CARE	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY (2) (3) (4) (5) (2) (3) (4) (5) (2) (3) (4) (5) (2) (3) (4) (5) (2) (3) (4) (5) TOTAL MEDICAID MANAGED CARE TOTAL INPATIENT CHARGES \$\$6666,923 \$\$437,891 (\$229,032) TOTAL INPATIENT CHARGES \$\$\$416,744 \$\$\$410,182 (\$229,032) TOTAL OUTPATIENT PAYMENTS \$\$\$\$416,744 \$					

	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013										
FISCAL YEAR 2013 REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION											
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	<u>(6)</u> %						
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE						
I.	ASSETS										
Α.	Current Assets:										
1	Cash and Cash Equivalents	\$9,871,014	\$8,948,706	(\$922,308)	-9%						
2	Short Term Investments	\$0	\$0	\$0	0%						
4	Accounts Receivable (Less: Allowance for	φυ	φυ								
3	Doubtful Accounts)	\$13,441,101	\$13,504,471	\$63,370	0%						
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%						
5	Due From Affiliates	\$0	\$0	\$0	0%						
6	Due From Third Party Payers	\$971,585	\$840,007	(\$131,578)	-14%						
7	Inventories of Supplies	\$2,025,113	\$2,092,246	\$67,133	3%						
8	Prepaid Expenses	\$0	\$0	\$0	0%						
9	Other Current Assets	\$1,717,026	\$2,724,846	\$1,007,820	59%						
	Total Current Assets	\$28,025,839	\$28,110,276	\$84,437	0%						
В.	Noncurrent Assets Whose Use is Limited:										
1	Held by Trustee	\$18,116,227	\$20,525,079	\$2,408,852	13%						
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%						
3	Funds Held in Escrow	\$400,278	\$0	(\$400,278)	-100%						
4	Other Noncurrent Assets Whose Use is Limited	\$6,989,321	\$7,067,123	\$77,802	1%						
-	Total Noncurrent Assets Whose Use is	+ + + + + + + + + + + + + + + + + + + +	······································								
	Limited:	\$25,505,826	\$27,592,202	\$2,086,376	8%						
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%						
6	Long Term Investments	\$33,807,880	\$38,742,293	\$4,934,413	15%						
7	Other Noncurrent Assets	\$1,334,720	\$1,135,267	(\$199,453)	-15%						
C.	Net Fixed Assets:										
1	Property, Plant and Equipment	\$143,527,470	\$148,532,515	\$5,005,045	3%						
2	Less: Accumulated Depreciation	\$106,694,984	\$112,631,179	\$5,936,195	\$0						
	Property, Plant and Equipment, Net	\$36,832,486	\$35,901,336	(\$931,150)	-3%						
3	Construction in Progress	\$1,020,301	\$968,443	(\$51,858)	-5%						
	Total Net Fixed Assets	\$37,852,787	\$36,869,779	(\$983,008)	-3%						
	Total Assets	\$126,527,052	\$132,449,817	\$5,922,765	5%						
١١.	LIABILITIES AND NET ASSETS										
Α.	Current Liabilities:										

	THE	CHARLOTTE HUNGERFO	ORD HOSPITAL						
		TWELVE MONTHS ACTU	AL FILING						
FISCAL YEAR 2013 REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION									
	REPORT 300 - PARENT CO	RPORATION CONSOLIDA	TED BALANCE SHE	ET INFORMATION					
(1) <u>LINE</u>	(2) DESCRIPTION	(3) FY 2012 <u>ACTUAL</u>	(4) FY 2013 <u>ACTUAL</u>	(5) AMOUNT <u>DIFFERENCE</u>	(6) % <u>DIFFERENCE</u>				
1	Accounts Payable and Accrued Expenses	\$5,029,676	\$7,289,342	\$2,259,666	45%				
2	Salaries, Wages and Payroll Taxes	\$4,027,215	\$4,177,672	\$150,457	4%				
3	Due To Third Party Payers	\$1,917,192	\$2,468,522	\$551,330	29%				
4	Due To Affiliates	\$0	\$0	\$0	0%				
5	Current Portion of Long Term Debt	\$1,200,000	\$0	(\$1,200,000)	-100%				
6	Current Portion of Notes Payable	\$198,100	\$3,219,468	\$3,021,368	1525%				
7	Other Current Liabilities	\$7,726,163	\$4,078,798	(\$3,647,365)	-47%				
	Total Current Liabilities	\$20,098,346	\$21,233,802	\$1,135,456	6%				
В.	Long Term Debt:								
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%				
2	Notes Payable (Net of Current Portion)	\$3,223,366	\$0	(\$3,223,366)	-100%				
	Total Long Term Debt	\$3,223,366	\$0	(\$3,223,366)	-100%				
3	Accrued Pension Liability	\$38,287,989	\$23,133,018	(\$15,154,971)	-40%				
4	Other Long Term Liabilities	\$3,125,672	\$3,527,218	\$401,546	13%				
	Total Long Term Liabilities	\$44,637,027	\$26,660,236	(\$17,976,791)	-40%				
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%				
C.	Net Assets:								
1	Unrestricted Net Assets or Equity	\$40,934,207	\$61,139,349	\$20,205,142	49%				
2	Temporarily Restricted Net Assets	\$3,236,940	\$3,314,742	\$77,802	2%				
3	Permanently Restricted Net Assets	\$17,620,532	\$20,101,688	\$2,481,156	14%				
	Total Net Assets	\$61,791,679	\$84,555,779	\$22,764,100	37%				
	Total Liabilities and Net Assets	\$126,527,052	\$132,449,817	\$5,922,765	5%				

	THE CHARLOT	TE HUNGERFORD H	HOSPITAL		
	TWELVE	IONTHS ACTUAL F	ILING		
	F	ISCAL YEAR 2013			
	REPORT 350 - PARENT CORPORATION CON	SOLIDATED STATE	MENT OF OPERA	TIONS INFORMAT	ON
(1)	(2)	(3)	(4)	(5)	(6)
	DESCRIPTION	FY 2012 ACTUAL	FY 2013 <u>ACTUAL</u>	AMOUNT DIFFERENCE	% DIFFERENCE
		<u></u>	<u></u>	DITTERENCE	
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$237,069,420	\$259,938,572	\$22,869,152	10%
2	Less: Allowances	\$118,988,604	\$136,668,445	\$17,679,841	15%
3	Less: Charity Care	\$1,766,984	\$3,214,518	\$1,447,534	82%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$116,313,832	\$120,055,609	\$3,741,777	3%
5	Provision for Bad Debts	\$0	\$3,378,061	\$3,378,061	0%
	Net Patient Service Revenue less provision for bad debts	¢446 242 822	¢446 677 549	¢262 746	09/
0		\$116,313,832	\$116,677,548	\$363,716	0%
6	Other Operating Revenue	\$5,735,128	\$8,250,545	\$2,515,417	44%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$122,048,960	\$124,928,093	\$2,879,133	2%
В.	Operating Expenses:				
1	Salaries and Wages	\$54,928,730	\$58,472,497	\$3,543,767	6%
2	Fringe Benefits	\$16,546,435	\$16,209,800	(\$336,635)	-2%
3	Physicians Fees	\$3,306,463	\$4,669,548	\$1,363,085	41%
4	Supplies and Drugs	\$12,272,846	\$12,510,410	\$237,564	2%
5	Depreciation and Amortization	\$6,060,455	\$6,050,075	(\$10,380)	0%
6	Bad Debts	\$3,125,364	\$0	(\$3,125,364)	-100%
7	Interest Expense	\$264,153	\$250,825	(\$13,328)	-5%
8	Malpractice Insurance Cost	\$1,748,531	\$1,842,449	\$93,918	5%
9	Other Operating Expenses	\$23,629,704	\$24,894,381	\$1,264,677	5%
	Total Operating Expenses	\$121,882,681	\$124,899,985	\$3,017,304	2%
	Income/(Loss) From Operations	\$166,279	\$28,108	(\$138,171)	-83%
C.	Non-Operating Revenue:				
1	Income from Investments	\$2,102,513	\$2,298,212	\$195,699	9%
2	Gifts, Contributions and Donations	\$27,952	\$273,527	\$245,575	879%
3	Other Non-Operating Gains/(Losses)	\$118,880	\$93,073	(\$25,807)	-22%
	Total Non-Operating Revenue	\$2,249,345	\$2,664,812	\$415,467	18%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$2,415,624	\$2,692,920	\$277,296	11%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

	THE CHARLOTTE HUNGERFORD HOSPITAL								
	TWELVE MONTHS ACTUAL FILING								
		FISCAL YEAR 2013							
	REPORT 350 - PARENT CORPORATION CO	NSOLIDATED STATI	EMENT OF OPERA	TIONS INFORMAT	ION				
(1)	(2)	(3)	(4)	(5)	(6)				
		FY 2012	FY 2013	AMOUNT	%				
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
	All Other Adjustments	\$0	\$0	\$0	0%				
	Total Other Adjustments	\$0	\$0	\$0	0%				
	Excess/(Deficiency) of Revenue Over Expenses	\$2,415,624	\$2,692,920	\$277,296	11%				

	THE CHARLOTTE HUNG	ERFORD HOSPITAL							
	TWELVE MONTHS A	CTUAL FILING							
	FISCAL YEA	R 2013							
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS									
(4)		(2)	(4)	(5)					
(1)	(2)		(4)	(5)					
LINE	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL <u>FY 2012</u>	ACTUAL <u>FY 2013</u>					
	Parent Corporation Statement of Operations Summary	0 400 500 747	.	*					
1	Net Patient Revenue	\$109,569,717	\$116,313,832	\$116,677,548					
2	Other Operating Revenue	4,949,386	5,735,128	8,250,545					
3	Total Operating Revenue	\$114,519,103	\$122,048,960	\$124,928,093					
4	Total Operating Expenses	113,880,767	121,882,681	124,899,985					
5	Income/(Loss) From Operations	\$638,336	\$166,279	\$28,108					
6	Total Non-Operating Revenue	2,011,113	2,249,345	2,664,812					
7	Excess/(Deficiency) of Revenue Over Expenses	\$2,649,449	\$2,415,624	\$2,692,920					
в.	Parent Corporation Profitability Summary								
1	Parent Corporation Operating Margin	0.55%	0.13%	0.02%					
2		1.81%	2.09%						
3		2.27%	1.94%	2.11					
4	Income/(Loss) From Operations	\$638,336	\$166,279	\$28,108					
5	Total Operating Revenue	\$114,519,103	\$122,048,960	\$124,928,093					
6	Total Non-Operating Revenue	\$2,011,113	\$2,249,345	\$2,664,812					
7	Total Revenue	\$116,530,216	\$124,298,305	\$127,592,905					
8	Excess/(Deficiency) of Revenue Over Expenses	\$2,649,449	\$2,415,624	\$2,692,920					
C.	Parent Corporation Net Assets Summary								
1	Parent Corporation Unrestricted Net Assets	\$47,062,165	\$40,934,207	\$61,139,349					
2	Parent Corporation Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779					
3	Parent Corporation Change in Total Net Assets	\$7,444,266	(\$4,194,171)	\$22,764,100					
4	Parent Corporation Change in Total Net Assets %	112.7%	-6.4%	36.8%					
D.	Liquidity Measures Summary								
1	Current Ratio	1.33	1.39	1.32					
2	Total Current Assets	\$25,471,279	\$28,025,839	\$28,110,276					
3	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802					

	THE CHARLOTTE HUN	GERFORD HOSPITAL		
	TWELVE MONTHS	ACTUAL FILING		
	FISCAL YE	EAR 2013		
	REPORT 385 - PARENT CORPORATION COI	NSOLIDATED FINANCIAL D	OATA ANALYSIS	
(1)	(2)	(3)	(4)	(5)
	\ ~ /	ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
4	Days Cash on Hand	29	31	27
5	Cash and Cash Equivalents	\$8,455,576	\$9,871,014	\$8,948,706
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$8,455,576	\$9,871,014	\$8,948,706
8	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985
9	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
10	Operating Expenses less Depreciation Expense	\$107,702,685	\$115,822,226	\$118,849,910
11	Days Revenue in Patient Accounts Receivable	37	39	37
12	Net Patient Accounts Receivable	\$ 11,144,540 \$	13,441,101	\$ 13,504,471
13	Due From Third Party Payers	\$1,516,187	\$971,585	\$840,007
14	Due To Third Party Payers	\$1,693,818	\$1,917,192	\$2,468,522
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 10,966,909 \$	12,495,494	\$ 11,875,956
16	Total Net Patient Revenue	\$109,569,717	\$116,313,832	\$116,677,548
17	Average Payment Period	65	63	65
18	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802
19	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985
20	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
20	Total Operating Expenses less Depreciation Expense	\$107,702,685	\$115,822,226	\$118,849,910
E.	Solvency Measures Summary			
1	Equity Financing Ratio	55.5	48.8	63.8
2	Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779
3	Total Assets	\$118,826,510	\$126,527,052	\$132,449,817
4	Cash Flow to Total Debt Ratio	37.1	36.3	41.2
5	Excess/(Deficiency) of Revenues Over Expenses	\$2,649,449	\$2,415,624	\$2,692,920

	THE CHARLOTTE HUNGER	FORD HOSPITAL		
	TWELVE MONTHS ACT	TUAL FILING		
	FISCAL YEAR	2013		
	REPORT 385 - PARENT CORPORATION CONSO	LIDATED FINANCIAL D	ATA ANALYSIS	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
6	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
7	Excess of Revenues Over Expenses and Depreciation Expense	\$8,827,531	\$8,476,079	\$8,742,995
8	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802
9	Total Long Term Debt	\$4,624,338	\$3,223,366	\$0
10	Total Current Liabilities and Total Long Term Debt	\$23,785,996	\$23,321,712	\$21,233,802
11	Long Term Debt to Capitalization Ratio	6.5	5.0	-
12	Total Long Term Debt	\$4,624,338	\$3,223,366	\$0
13	Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779
14	Total Long Term Debt and Total Net Assets	\$70,610,188	\$65,015,045	\$84,555,779

				CHARLOTT	E HUNGERFORD	HOSPITAL		
					MONTHS ACTUA			
					ISCAL YEAR 201			
			REPORT 40	0 - HOSPITAL INF	PATIENT BED UTI	LIZATION BY DE	PARTMENT	
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
(1)	(2)	(3)	(34)	(30)	(4)	(5)		
		PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
	DESCRIPTION		CU/CCU # PATIEN	Admicolono	BEDS (A)	BEDS	BEDS (A)	BEDS
		27110			<u>2220 (</u>			2220
1	Adult Medical/Surgical	18,265	4,981	4,981	51	73	98.1%	68.5%
2	ICU/CCU (Excludes Neonatal ICU)	2,310	128	0	7	10	90.4%	63.3%
		10					0.00/	0.00/
3	Psychiatric: Ages 0 to 17 Psychiatric: Ages 18+	<u>12</u> 3,732	3 609	<u>3</u> 609	0 11	0 17	0.0% 93.0%	0.0%
4		<u> </u>		609 612	11	17	93.0% 93.3%	60.1% 60.3%
		5,744	012	012		17	55.570	00.376
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
0		0	Ű	0	0	0	0.070	0.070
6	Maternity	1,062	436	453	3	7	97.0%	41.6%
		·						
7	Newborn	1,095	453	453	4	13	75.0%	23.1%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	98	51	34	1	2	26.8%	13.4%
9		90	51		1	۷	20.0%	13.47
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	25,479	6,080	6,080	73	109	95.6%	64.0%
	TOTAL INPATIENT BED UTILIZATION	26,574	6,533	6,533	77	122	94.6%	59.7%
		20,374	0,000	0,000		122	54.078	55.770
	TOTAL INPATIENT REPORTED YEAR	26,574	6,533	6,533	77	122	94.6%	59.7%
	TOTAL INPATIENT REPORTED TEAR	25,249		6,338	75	122	94.0%	56.7%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	1,325		0,338 195	2	0	2.3%	3.0%
	DITERENCE #: REFORTED VO. TRIOR TEAR	1,525	195	195	2		2.370	5.070
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	5%	3%	3%	3%	0%	3%	5%
	Total Licensed Beds and Bassinets	122						
A) TI	his number may not exceed the number of availal	DIE DEOS FOR EAC	n department or in t	iotal.				
Note	Total discharges do not include ICU/CCU patien	te						
1016.	i otal alsonalges do not include 100/000 pallen							

		E HUNGERFORD HOS			
		MONTHS ACTUAL FIL	LING		
		ISCAL YEAR 2013			
	REPORT 450 - HOSPITAL INPATIENT ANI		R SERVICES UTILI	ZATION AND FIES	
(1)	(2)	(5)	(6)		
()		(3)	(4)		
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
Α.	CT Scans (A)				
1	Inpatient Scans	3,304	2,477	-827	-25%
	Outpatient Scans (Excluding Emergency Department		_,		
2	Scans)	5,706	4,583	-1,123	-20%
3	Emergency Department Scans	4,020	2,266	-1,754	-44%
4	Other Non-Hospital Providers' Scans (A)	1,642	1,538	-104	-6%
	Total CT Scans	14,672	10,864	-3,808	-26%
В.	MRI Scans (A)				
<u>в.</u> 1	Inpatient Scans	364	396	32	9%
1	Outpatient Scans (Excluding Emergency Department	504	390	52	370
2	Scans)	677	699	22	3%
3	Emergency Department Scans	25	15	-10	-40%
4	Other Non-Hospital Providers' Scans (A)	5,214	4,931	-283	-5%
	Total MRI Scans	6,280	6,041	-239	-4%
	PET Scans (A)			-	
1	Inpatient Scans	0	2	2	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	126	291	165	1210/
2 3	Emergency Department Scans	0	291	165	<u>131%</u> 0%
4	Other Non-Hospital Providers' Scans (A)	182	0	-182	-100%
4	Total PET Scans	308	293	-15	-100/a
					• • •
D.	PET/CT Scans (A)				
1	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
	(A) If the Hospital is not the primary provider of thes	a agana tha Uganital	must shtsin the fis		
	volume of each of these types of scans from the			cal year	
	volume of cach of these types of scans from the				
Ε.	Linear Accelerator Procedures				
1	Inpatient Procedures	78	75	-3	-4%
2	Outpatient Procedures	4,580	4,245	-335	-7%
	Total Linear Accelerator Procedures	4,658	4,320	-338	-7%
<u>F.</u>	Cardiac Catheterization Procedures				
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures Total Cardiac Catheterization Procedures	0	0	0	0%
	I Utal Caluac Calleterization Procedures	U	U	0	0%
G.	Cardiac Angioplasty Procedures				
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	ů O	0%
Н.	Electrophysiology Studies				
1	Inpatient Studies	60	51	-9	-15%
2	Outpatient Studies	67	39	-28	-42%
	Total Electrophysiology Studies	127	90	-37	-29%

		TE HUNGERFORD HOS						
		E MONTHS ACTUAL FIL	ING					
		FISCAL YEAR 2013						
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTHE	R SERVICES UTILI	ZATION AND FTES				
(1) (2) (3) (4) (5) (6								
(1)	(2)	(3)	(4)	(5)	(6)			
		ACTUAL	ACTUAL	AMOUNT	%			
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE			
	Surgical Procedures							
<u>I.</u> 1		1 1 1 0	1 221	101	160/			
-	Inpatient Surgical Procedures Outpatient Surgical Procedures	1,140 2,920	1,321 2,824	<u>181</u> -96	<u> </u>			
	Total Surgical Procedures	4.060	4,145	-90	<u>-3%</u>			
		4,000	4,145	05	2/0			
J.	Endoscopy Procedures							
	Inpatient Endoscopy Procedures	290	312	22	8%			
	Outpatient Endoscopy Procedures	604	482	-122	-20%			
-	Total Endoscopy Procedures	894	794	-100	-11%			
			104	100	117			
K.	Hospital Emergency Room Visits							
	Emergency Room Visits: Treated and Admitted	5,066	5,182	116	2%			
	Emergency Room Visits: Treated and Discharged	35,812	35,790	-22	0%			
	Total Emergency Room Visits	40,878	40,972	94	0%			
		,	,					
L.	Hospital Clinic Visits							
1	Substance Abuse Treatment Clinic Visits	4,783	4,685	-98	-2%			
2	Dental Clinic Visits	0	0	0	0%			
3	Psychiatric Clinic Visits	33,611	33,320	-291	-1%			
4	Medical Clinic Visits	18,703	0	-18,703	-100%			
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%			
6	Medical Clinic Visits - Urgent Care Clinic	0	10,951	10,951	0%			
	Medical Clinic Visits - Family Practice Clinic	0	9,037	9,037	0%			
	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%			
	Specialty Clinic Visits	20,464	0	-20,464	-100%			
	Specialty Clinic Visits - Cardiac Clinic	0	11,863	11,863	0%			
	Specialty Clinic Visits - Chronic Pain Clinic	0	1,806	1,806	0%			
	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%			
13	Specialty Clinic Visits - Other Speciality Clinics	0	24,048	24,048	0%			
	Total Hospital Clinic Visits	77,561	95,710	18,149	23%			
М.	Other Hospital Outpatient Visits							
1	Rehabilitation (PT/OT/ST)	6,907	7,478	571	8%			
2	Cardiac Rehabilitation	4,508	4,885	377	8%			
	Chemotherapy	130	411	281	216%			
4	Gastroenterology	1,000	537	-463	-46%			
5	Other Outpatient Visits	123,771	100,483	-23,288	-19%			
	Total Other Hospital Outpatient Visits	136,316	113,794	-22,522	-17%			
	Hospital Full Time Equivalent Employees		0.05 0	4				
1	Total Nursing FTEs	321.4	305.9	-15.5	-5%			
2	Total Physician FTEs	31.1	33.9	2.8	9%			
3	Total Non-Nursing and Non-Physician FTEs	415.9	449.2	33.3	8%			
	Total Hospital Full Time Equivalent Employees	768.4	789.0	20.6	3%			

REPORT 100

	CHARLOTTE HUNG	ERFORD HOSPI	TAL						
	TWELVE MONTH	S ACTUAL FILIN	G						
		'EAR 2013							
RE	PORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPY AND EMI	ERGENCY RO	OM SERVICES E	BY LOCATION				
(1)	(2)	(3)	(4)	(5)	(6)				
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE				
Α.	Outpatient Surgical Procedures								
1	Charlotte Hungerford Hospital	2,920	2,824	-96	-3%				
	Total Outpatient Surgical Procedures(A)	2,920	2,824	-96	-3%				
В.	Outpatient Endoscopy Procedures								
1	Charlotte Hungerford Hospital	604	482	-122	-20%				
	Total Outpatient Endoscopy Procedures(B)	604	482	-122	-20%				
C.	Outpatient Hospital Emergency Room Visits								
1	Charlotte Hungerford Hospital	29,291	29,714	423	1%				
2	HEMC	6,521	6,076	-445	-7%				
	Total Outpatient Hospital Emergency Room Visits(C)	35,812	35,790	-22	0%				
	(A) Must agree with Total Outpatient Surgical Procedure	es on Report 450	•						
	(B) Must agree with Total Outpatient Endoscopy Proced	lures on Report 4	450.						
	(C) Must agree with Emergency Room Visits Treated an	d Discharged on	Report 450.						
			·						

	CHARLOTTE HUNGERF TWELVE MONTHS AC		-		
	FISCAL YEAR				
	REPORT FORM 500 - CALCULATION O			Т	
	AND BASELINE UNDERPAYMENT DA				
		ACTUAL	ACTUAL	AMOUNT	%
	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
		112012	112015	DITTERENCE	DITERENCE
I.	DATA BY MAJOR PAYER CATEGORY				
Α.	MEDICARE				
	MEDICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$54,857,930	\$62,018,968	\$7,161,038	13%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$32,316,300	\$34,553,159	\$2,236,859	7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	58.91%	55.71%	-3.20%	-5%
4	DISCHARGES	3,482	3,510	28	1%
5	CASE MIX INDEX (CMI)	1.35650	1.44760	0.09110	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,723.33300	5,081.07600	357.74300	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,841.84	\$6,800.36	(\$41.48)	-1%
8	PATIENT DAYS	15,393	15,882	489	3%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,099.42	\$2,175.62	\$76.20	4%
10	AVERAGE LENGTH OF STAY	4.4	4.5	0.1	2%
	MEDICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$54,574,434	\$60,797,693	\$6,223,259	11%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$21,046,538	\$21,867,353	\$820,815	4%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	38.56%	35.97%	-2.60%	-7%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	99.48%	98.03%	-1.45%	-1%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,464.00564	3,440.88122	(23.12442)	-1%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,075.78	\$6,355.16	\$279.38	5%
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
17	TOTAL ACCRUED CHARGES	\$109,432,364	\$122,816,661	\$13,384,297	12%
18	TOTAL ACCRUED PAYMENTS	\$53,362,838	\$56,420,512	\$3,057,674	6%
	TOTAL ALLOWANCES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$56,069,526	\$66,396,149	\$10,326,623	18%
	NON-GOVERNMENT INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$22,018,745	\$24,499,963	\$2,481,218	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,596,102	\$15,060,737	\$464,635	3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	66.29%	61.47%	-4.82%	-7%
4	DISCHARGES	1,720	1,821	101	6%
5	CASE MIX INDEX (CMI)	1.16030	1.08960	(0.07070)	-6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,995.71600	1,984.16160	(11.55440)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,313.72	\$7,590.48	\$276.76	4%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$471.87)	(\$790.12)	(\$318.24)	67%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$941,728)	(\$1,567,719)	(\$625,991)	66%
10	PATIENT DAYS	5,533	5,952	419	8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,638.01	\$2,530.37	(\$107.64)	-4%
12	AVERAGE LENGTH OF STAY	3.2	3.3	0.1	2%
	NON-GOVERNMENT OUTPATIENT				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$62,201,161	\$63,280,634	\$1,079,473	2%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$29,606,147	\$29,610,878	\$4,731	0%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	47.60%	46.79%	-0.80%	-2%

			-		
	TWELVE MONTHS AC				
	FISCAL YEAR				
	REPORT FORM 500 - CALCULATION O				
	AND BASELINE UNDERPAYMENT DA	TA: COMPARAT	IVE ANALYSI	S 	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
40		000.400/	050.00%	04.000/	00/
-		282.49%	258.29%		-9%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED) OUTPATIENT ACCRUED PAYMENTS / OPED	4,858.85989	4,703.43708 \$6,295.58	(155.42281)	-3%
	MEDICARE- NON-GOVERNMENT OP PMT / OPED	\$6,093.23 (\$17.45)	۵ 6,295.58 \$59.58	\$202.35 \$77.03	3% -441%
-	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$17.43)	\$280,220	\$365,001	-441%
20	OUTPATIENT OFFER LIMIT (OVER)/ UNDERFATMENT	(\$04,701)	\$200,220	\$303,001	-431/0
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
		\$84,219,906	\$87,780,597	\$3,560,691	4%
_ ·	TOTAL ACCRUED PAYMENTS	\$44,202,249	\$44,671,615	\$469,366	1%
22	TOTAL ALLOWANCES	\$40,017,657	\$43,108,982	\$3,091,325	8%
		<i>Q</i> 10,017,007	φ 10,100,00Z	<i>\$0,001,020</i>	070
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,026,508)	(\$1,287,498)	(\$260,990)	25%
- 1		(\$1,020,000)	(+1,207,400)	(\$200,000)	2070
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$84,219,906	\$87,780,597	\$3,560,691	4%
_	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$49,094,597	\$51,264,194	\$2,169,597	4%
20	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$ 10,00 1,001		<i>\</i>	
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,125,309	\$36,516,403	\$1,391,094	4%
	TOTAL ACTUAL DISCOUNT PERCENTAGE	41.71%	41.60%	-0.11%	
-	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$1,298,459	\$1,590,204	\$291,745	22%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$330,637	\$272,165	(\$58,472)	-18%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.46%	17.12%	-8.35%	-33%
4	DISCHARGES	114	200	86	75%
5	CASE MIX INDEX (CMI)	1.09030	1.02690	(0.06340)	-6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	124.29420	205.38000	81.08580	65%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,660.12	\$1,325.18	(\$1,334.94)	-50%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$4,653.60	\$6,265.30	\$1,611.70	35%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$4,181.73	\$5,475.18	\$1,293.46	31%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$519,764	\$1,124,493	\$604,729	116%
11	PATIENT DAYS	392	696	304	78%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$843.46	\$391.04	(\$452.42)	-54%
13	AVERAGE LENGTH OF STAY	3.4	3.5	0.0	1%
	UNINSURED OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$5,212,131	\$5,513,269	\$301,138	6%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,327,208	\$943,602	(\$383,606)	-29%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.46%	17.12%	-8.35%	-33%
	OUTPATIENT CHARGES / INPATIENT CHARGES	401.41%	346.70%		-14%
		457.60623	693.40399	235.79776	52%
		\$2,900.33	\$1,360.83	(\$1,539.50)	-53%
	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$3,192.90	\$4,934.76	\$1,741.86	55%
		\$3,175.45	\$4,994.33	\$1,818.88	57%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,453,107	\$3,463,092	\$2,009,985	138%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)	AABA	A- i ac i - i	A -05-555	
23	TOTAL ACCRUED CHARGES	\$6,510,590	\$7,103,473	\$592,883	9

	CHARLOTTE HUNGER TWELVE MONTHS A		-		
	FISCAL YEA				
	REPORT FORM 500 - CALCULATION			ПТ	
	AND BASELINE UNDERPAYMENT D				
		ACTUAL	ACTUAL	AMOUNT	%
	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
		112012	112010	DITERENCE	DITTERCE
24	TOTAL ACCRUED PAYMENTS	\$1,657,845	\$1,215,767	(\$442,078)	-27%
25	TOTAL ALLOWANCES	\$4,852,745	\$5,887,706	\$1,034,961	21%
		+ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i>+-,,</i>	+ , , , , , , , , , , , , , , , , , , ,	
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,972,871	\$4,587,585	\$2,614,714	133%
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$11,890,723	\$14,536,044	\$2,645,321	22%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,127,166	\$5,045,202	(\$81,964)	-2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	43.12%	34.71%	-8.41%	-20%
4	DISCHARGES	1,103	1,167	64	6%
5	CASE MIX INDEX (CMI)	1.00740	1.04800	0.04060	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,111.16220	1,223.01600	111.85380	10%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,614.24	\$4,125.21	(\$489.02)	-11%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,699.48	\$3,465.27	\$765.79	28%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,227.61	\$2,675.15	\$447.54	20%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,475,231	\$3,271,750	\$796,520	32%
11	PATIENT DAYS	4,172	4,603	431	10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,228.95	\$1,096.07	(\$132.88)	-11%
13	AVERAGE LENGTH OF STAY	3.8	3.9	0.2	4%
		* ***	<u> </u>	* 0.444.005	4.40/
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$30,243,245	\$33,657,530	\$3,414,285	11%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,751,063	\$10,846,419	\$1,095,356	11%
-	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.24%	32.23%	-0.02% -22.80%	0% -9%
		254.34%	231.55%		
	OUTPATIENT EQUIVALENT DISCHARGES (OPED) OUTPATIENT ACCRUED PAYMENTS / OPED	2,805.40546	2,702.13392	(103.27154) \$538.21	-4% 15%
-	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$2,617.42	\$4,014.02 \$2,281.56	(\$335.85)	-13%
	MEDICARE - MEDICAID OP PMT / OPED	\$2,599.97	\$2,261.50	(\$353.83)	-13%
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,293,965	\$6,326,076	(\$258.85)	-13%
22	OUTPATIENT OFFER LIMIT (OVER) / UNDERFATIMENT	\$7,293,905	φ0,320,070	(\$907,009)	-1376
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$42,133,968	\$48,193,574	\$6,059,606	14%
24	TOTAL ACCRUED PAYMENTS	\$14,878,229	\$15,891,621	\$1,013,392	7%
25	TOTAL ALLOWANCES	\$27,255,739	\$32,301,953	\$5,046,214	19%
		+ , ,	+- , ,	+	
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,769,195	\$9,597,826	(\$171,369)	-2%
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
		_			
	OTHER MEDICAL ASSISTANCE INPATIENT	_			
	INPATIENT ACCRUED CHARGES	\$71,313	\$20,290	(\$51,023)	-72%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$30,421	\$18,644	(\$11,777)	-39%
	INPATIENT PAYMENTS / INPATIENT CHARGES	42.66%	91.89%	49.23%	115%
	DISCHARGES	2	3	1	50%
		1.51200	1.12350	(0.38850)	-26%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3.02400	3.37050	0.34650	11%

	CHARLOTTE HUNGERF TWELVE MONTHS AC		-		
	FISCAL YEAF	R 2013			
	REPORT FORM 500 - CALCULATION O	F DSH UPPER F	PAYMENT LIM	IIT	
	AND BASELINE UNDERPAYMENT DA	TA: COMPARAT	IVE ANALYSI	S	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,059.85	\$5,531.52	(\$4,528.33)	-45%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	(\$2,746.14)	\$2,058.96	\$4,805.09	-175%
9	MEDICARE - O.M.A. IP PMT / CMAD	(\$3,218.01)	\$1,268.84	\$4,486.85	-139%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$9,731)	\$4,277	\$14,008	-144%
11	PATIENT DAYS	31	5	(26)	-84%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$981.32	\$3,728.80	\$2,747.48	280%
13	AVERAGE LENGTH OF STAY	15.5	1.7	(13.8)	-89%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$205,041	\$153,409	(\$51,632)	-25%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$37,780	\$31,406	(\$6,374)	-17%
-	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.43%	20.47%	2.05%	11%
-	OUTPATIENT CHARGES / INPATIENT CHARGES	287.52%	756.08%	468.56%	163%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5.75045	22.68245	16.93200	294%
-	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,569.92	\$1,384.59	(\$5,185.32)	-79%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	(\$476.69)	\$4,910.99	\$5,387.68	-1130%
	MEDICARE - O.M.A. OP PMT / CMAD	(\$494.14)	\$4,970.57	\$5,464.70	-1106%
22		(\$2,842)	\$112,745	\$115,586	-4068%
22	OUTPATIENT OPPER LIMIT (OVER) / UNDERFATMENT	(\$2,042)	٦١١ <u>२,</u> 745	\$115,560	-4000%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIE	NT)			
22			¢172 600	(\$102.655)	270/
23 24		\$276,354	\$173,699	(\$102,655)	-37%
24 25	TOTAL ACCRUED PAYMENTS TOTAL ALLOWANCES	\$68,201	\$50,050	(\$18,151) (\$84,504)	-27%
25	TOTAL ALLOWANCES	\$208,153	\$123,649	(\$64,504)	-41%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	(\$12,573)	\$117,021	\$129,594	-1031%
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICA	AL ASSISTANCE	<u>)</u>		
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$11,962,036	\$14,556,334	\$2,594,298	22%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,157,587	\$5,063,846	(\$93,741)	-2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	43.12%	34.79%	-8.33%	-19%
4	DISCHARGES	1,105	1,170	65	6%
5	CASE MIX INDEX (CMI)	1.00831	1.04819	0.03988	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,114.18620	1,226.38650	112.20030	10%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,629.02	\$4,129.08	(\$499.94)	-11%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,684.70	\$3,461.40	\$776.70	29%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,212.83	\$2,671.28	\$458.46	21%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,465,499	\$3,276,027	\$810,527	33%
11	PATIENT DAYS	4,203	4,608	405	10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,227.12	\$1,098.92	(\$128.20)	-10%
13	AVERAGE LENGTH OF STAY	3.8	3.9	0.1	4%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
	TOTAL MEDICAL ASSISTANCE OUTPATIENT	\$30 448 286	\$33,810,030	\$3 362 653	11%
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$30,448,286 \$9,788,843	\$33,810,939 \$10,877,825	\$3,362,653	11%
14 15	OUTPATIENT ACCRUED CHARGES (OP CHGS) OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,788,843	\$10,877,825	\$1,088,982	11%
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)			\$1,088,982 0.02%	

	CHARLOTTE HUNGERF TWELVE MONTHS AC		L		
	FISCAL YEAR	2013			
	REPORT FORM 500 - CALCULATION O		PAYMENT LIN	ШТ	
	AND BASELINE UNDERPAYMENT DAT				
		ACTUAL	ACTUAL	AMOUNT	%
	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
		112012	112015	DITTERENCE	DITTERENCE
40	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,482.14	\$3,992.13	\$509.99	15%
-	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,611.09	\$2,303.45	(\$307.64)	-12%
-	MEDICARE - TOTAL MEDICAL ASSISTANCE OF PMT / OPED	\$2,593.64	\$2,363.03	(\$230.61)	-12/6
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,291,123	\$6,438,821	(\$852,302)	-12%
	OUTPATIENT OFFER LIMIT (OVER) / UNDERFATMENT	φ1,291,123	\$0,430,021	(\$052,502)	-12/0
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIEN	T)			
00	TOTAL MEDICAL ACCOUNTANCE TOTALS (INFAMENT + COTTATIENT	\$42,410,322	\$48,367,273	\$5,956,951	14%
23	TOTAL ACCRUED CHARGES	\$14,946,430	\$46,307,273	\$995,241	7%
24	TOTAL ALLOWANCES	\$14,946,430 \$27,463,892			
25	TOTAL ALLOWANCES	\$27,403,092	\$32,425,602	\$4,961,710	18%
G.	CHAMPUS / TRICARE				
0.	CHAMP 037 TRICARE				
	CHAMPUS / TRICARE INPATIENT				
		¢402.002	¢252.045	(\$400.447)	270/
		\$483,092	\$353,945	(\$129,147)	-27%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$282,459	\$220,612	(\$61,847)	-22%
-	INPATIENT PAYMENTS / INPATIENT CHARGES	58.47%	62.33%	3.86%	7%
	DISCHARGES	31	32	1	3%
		1.06440	1.00330	(0.06110)	-6%
-	CASE MIX ADJUSTED DISCHARGES (CMAD)	32.99640	32.10560	(0.89080)	-3%
	INPATIENT ACCRUED PAYMENT / CMAD	\$8,560.30	\$6,871.45	(\$1,688.85)	-20%
-	PATIENT DAYS	120	132	12	10%
-	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,353.83	\$1,671.30	(\$682.52)	-29%
10	AVERAGE LENGTH OF STAY	3.9	4.1	0.3	7%
	CHAMPUS / TRICARE OUTPATIENT	* ====	* ***	* ***	
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$523,735	\$620,095	\$96,360	18%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$189,582	\$228,839	\$39,257	21%
	<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>	• · • • • • • • • • • • • • • • • • • •	•··	(****	
13	TOTAL ACCRUED CHARGES	\$1,006,827	\$974,040	(\$32,787)	-3%
14	TOTAL ACCRUED PAYMENTS	\$472,041	\$449,451	(\$22,590)	-5%
15	TOTAL ALLOWANCES	\$534,786	\$524,589	(\$10,197)	-2%
Η.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$5,735,128	\$8,250,545	\$2,515,417	44%
2	TOTAL OPERATING EXPENSES	\$121,882,681	\$124,899,985	\$3,017,304	2%
	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
		~~	φ υ	\$	
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
4	CHARITY CARE (CHARGES)	\$1,766,984	\$3,214,518	\$1,447,534	82%
	BAD DEBTS (CHARGES)	\$3,125,364	\$3,378,061	\$252,697	8%
	UNCOMPENSATED CARE (CHARGES)	\$4,892,348	\$6,592,579	\$1,700,231	35%
	COST OF UNCOMPENSATED CARE	\$2,331,616	\$2,979,618	\$648,002	28%
		Ψ2,001,010	Ψ2,070,010	φ0+0,00Z	2070
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODO	067)			
				1	
0			¢10 267 272	\$5.056.054	1 /0/
8	TOTAL MEDICAL ASSISTANCE UNDERPATIMENT (BASELINE METHODO) TOTAL ACCRUED CHARGES TOTAL ACCRUED PAYMENTS	\$42,410,322 \$14,946,430	\$48,367,273 \$15,941,671	\$5,956,951 \$995,241	14% 7%

	TWELVE MONTHS AC							
				u 				
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS								
	AND BASELINE UNDERFAIMENT DAT	A. CONFARA	IVE ANALISI	5				
		ACTUAL	ACTUAL	AMOUNT	%			
	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE			
		1 2012	112013	DITTERENCE	DITTERENCE			
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$5,265,663	\$5,918,665	\$653,002	12%			
II.	AGGREGATE DATA			. ,				
Α.	TOTALS - ALL PAYERS							
1	TOTAL INPATIENT CHARGES	\$89,321,803	\$101,429,210	\$12,107,407	149			
2	TOTAL INPATIENT PAYMENTS	\$52,352,448	\$54,898,354	\$2,545,906	5%			
3	TOTAL INPATIENT PAYMENTS / CHARGES	58.61%	54.12%	-4.49%	-8%			
4	TOTAL DISCHARGES	6,338	6,533	195	3%			
5	TOTAL CASE MIX INDEX	1.24112	1.27411	0.03298	3%			
6	TOTAL CASE MIX ADJUSTED DISCHARGES	7,866.23160	8,323.72970	457.49810	6%			
7	TOTAL OUTPATIENT CHARGES	\$147,747,616	\$158,509,361	\$10,761,745	7%			
8	OUTPATIENT CHARGES / INPATIENT CHARGES	165.41%	156.28%	-9.13%	-6%			
9	TOTAL OUTPATIENT PAYMENTS	\$60,631,110	\$62,584,895	\$1,953,785	3%			
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	41.04%	39.48%	-1.55%	-49			
11	TOTAL CHARGES TOTAL PAYMENTS	\$237,069,419	\$259,938,571	\$22,869,152	10%			
12 13	TOTAL PAYMENTS / TOTAL CHARGES	\$112,983,558 47.66%	\$117,483,249 45.20%	\$4,499,691 -2.46%	49 -59			
-	PATIENT DAYS	25,249	26,574	1,325	-57			
14		23,249	20,374	1,323	57			
В.	TOTALS - ALL GOVERNMENT PAYERS							
1	INPATIENT CHARGES	\$67,303,058	\$76,929,247	\$9,626,189	14%			
2	INPATIENT PAYMENTS	\$37,756,346	\$39,837,617	\$2,081,271	6%			
3	GOVT. INPATIENT PAYMENTS / CHARGES	56.10%	51.78%	-4.31%	-8%			
4	DISCHARGES	4,618	4,712	94	2%			
5	CASE MIX INDEX	1.27122	1.34541	0.07418	6%			
6	CASE MIX ADJUSTED DISCHARGES	5,870.51560	6,339.56810	469.05250	8%			
7	OUTPATIENT CHARGES	\$85,546,455	\$95,228,727	\$9,682,272	11%			
8	OUTPATIENT CHARGES / INPATIENT CHARGES	127.11%	123.79%	-3.32%	-3%			
9	OUTPATIENT PAYMENTS	\$31,024,963	\$32,974,017	\$1,949,054	6%			
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	36.27%	34.63%	-1.64%	-5%			
11	TOTAL CHARGES	\$152,849,513	\$172,157,974	\$19,308,461	13%			
	TOTAL PAYMENTS	\$68,781,309	\$72,811,634	\$4,030,325	6%			
-	TOTAL PAYMENTS / CHARGES	45.00%	42.29%	-2.71%	-6%			
	PATIENT DAYS	19,716	20,622	906	5%			
15	TOTAL GOVERNMENT DEDUCTIONS	\$84,068,204	\$99,346,340	\$15,278,136	18%			
C.	AVERAGE LENGTH OF STAY							
1		4.4	4.5	0.1	2%			
1 2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.2	3.3	0.1	29			
2	UNINSURED	3.4	3.5	0.0				
	MEDICAID	3.4	3.9	0.0	49			
	OTHER MEDICAL ASSISTANCE	15.5	1.7	(13.8)	-89%			
6	CHAMPUS / TRICARE	3.9	4.1	0.3	7%			
7	TOTAL AVERAGE LENGTH OF STAY	4.0	4.1	0.1	2%			
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION							
1	TOTAL CHARGES	\$237,069,419	\$259,938,571	\$22,869,152	10%			
2	TOTAL GOVERNMENT DEDUCTIONS	\$84,068,204	\$99,346,340	\$15,278,136	18%			

	CHARLOTTE HUNGERF	ORD HOSPITAI	_		
	TWELVE MONTHS AC	TUAL FILING			
	FISCAL YEAR				
	REPORT FORM 500 - CALCULATION O				
	AND BASELINE UNDERPAYMENT DAT	A: COMPARAT		S	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
				• · - · · · · · ·	
-	UNCOMPENSATED CARE	\$4,892,348	\$6,592,579	\$1,700,231	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,125,309	\$36,516,403	\$1,391,094	4%
	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$124,085,861	\$142,455,322	\$18,369,461	15%
7	TOTAL ACCRUED PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691	4%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$112,983,558	\$117,483,249	\$4,499,691	4%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4765842785	0.4519654338	(0.0246188447)	-5%
11	COST OF UNCOMPENSATED CARE	\$2,331,616	\$2,979,618	\$648,002	28%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$5,265,663	\$5,918,665	\$653,002	12%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND				
	MEDICAL ASSISTANCE UNDERPAYMENT	\$7,597,279	\$8,898,282	\$1,301,003	17%
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLO	<u>GY)</u>			
1	MEDICAID	\$7,293,965	\$6,326,076	(\$967,889)	-13%
2	OTHER MEDICAL ASSISTANCE	(\$12,573)	\$117,021	\$129,594	-1031%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,972,871	\$4,587,585	\$2,614,714	133%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$9,254,263	\$11,030,683	\$1,776,419	19%
۷.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600	<u>)</u>			
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$3,330,273	(\$805,705)	(\$4,135,978)	-124.19%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$116,313,832	\$116,677,547	\$363,715	0.31%
1					
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	(\$3,214,517)	(\$3,214,517)	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$237,069,419	\$256,724,054	\$19,654,635	8.29%
-	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$4,892,348	\$6,592,579	\$1,700,231	34.75%

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	CHARLOTTE HUNGERFORD H TWELVE MONTHS ACTUAL							
	FISCAL YEAR 2013							
	REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL <u>FY</u>	AMOUNT				
LINE	DESCRIPTION	<u>FY 2012</u>	<u>2013</u>	DIFFERENCE				
-	ACCRUED CHARGES AND PAYMENTS							
I.	ACCRUED CHARGES AND PATMENTS							
Α.	INPATIENT ACCRUED CHARGES							
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$22,018,745	\$24,499,963	\$2,481,218				
	MEDICARE	\$54,857,930	62,018,968	\$7,161,038				
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,962,036	14,556,334	\$2,594,298				
		\$11,890,723	14,536,044	\$2,645,321				
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$71,313 \$483,092	20,290 353,945	(\$51,023) (\$129,147)				
		\$1,298,459	1,590,204	\$291,745				
	TOTAL INPATIENT GOVERNMENT CHARGES	\$67,303,058	\$76,929,247	\$9,626,189				
	TOTAL INPATIENT CHARGES	\$89,321,803	\$101,429,210	\$12,107,407				
		#00.001 (5)	#00.000.05	#4 ATA 175				
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$62,201,161 \$54,574,434	\$63,280,634	\$1,079,473				
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$54,574,434 \$30,448,286	<u>60,797,693</u> 33,810,939	\$6,223,259 \$3,362,653				
	MEDICAID	\$30,243,245	33,657,530	\$3,414,285				
	OTHER MEDICAL ASSISTANCE	\$205,041	153,409	(\$51,632)				
6	CHAMPUS / TRICARE	\$523,735	620,095	\$96,360				
7		\$5,212,131	5,513,269	\$301,138				
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$85,546,455	\$95,228,727	\$9,682,272				
	TOTAL OUTPATIENT CHARGES	\$147,747,616	\$158,509,361	\$10,761,745				
C.	TOTAL ACCRUED CHARGES							
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$84,219,906	\$87,780,597	\$3,560,691				
	TOTAL MEDICARE	\$109,432,364	\$122,816,661	\$13,384,297				
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$42,410,322	\$48,367,273	\$5,956,951				
	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$42,133,968 \$276,354	\$48,193,574 \$173,699	\$6,059,606 (\$102,655)				
	TOTAL CHAMPUS / TRICARE	\$1,006,827	\$974,040	(\$102,033)				
	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,510,590	\$7,103,473	\$592,883				
	TOTAL GOVERNMENT CHARGES	\$152,849,513	\$172,157,974	\$19,308,461				
	TOTAL CHARGES	\$237,069,419	\$259,938,571	\$22,869,152				
	INPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,596,102	\$15,060,737	\$464,635				
	MEDICARE	\$32,316,300		\$2,236,859				
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,157,587	5,063,846	(\$93,741)				
	MEDICAID	\$5,127,166	5,045,202	(\$81,964)				
	OTHER MEDICAL ASSISTANCE	\$30,421	18,644	(\$11,777)				
	CHAMPUS / TRICARE	\$282,459	220,612	(\$61,847)				
/	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYMENTS	\$330,637 \$37,756,346	272,165 \$30 837 617	(\$58,472) \$2,081,271				
	TOTAL INPATIENT GOVERNMENT PATMENTS	\$52,352,448	\$39,837,617 \$54,898,354	\$2,081,271 \$2,545,906				
		¥72,002,440		<i>\\</i> ,070,000				
	OUTPATIENT ACCRUED PAYMENTS							
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$29,606,147	\$29,610,878	\$4,731				
		\$21,046,538	21,867,353	\$820,815				
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$9,788,843 \$0,751,063	10,877,825	\$1,088,982				
	OTHER MEDICAL ASSISTANCE	\$9,751,063 \$37,780	<u>10,846,419</u> 31,406	\$1,095,356 (\$6,374)				
	CHAMPUS / TRICARE	\$189,582	228,839	\$39,257				
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,327,208	943,602	(\$383,606)				
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$31,024,963	\$32,974,017	\$1,949,054				
	TOTAL OUTPATIENT PAYMENTS	\$60,631,110	\$62,584,895	\$1,953,785				
F.	TOTAL ACCRUED PAYMENTS							
	TOTAL ACCROLE FAIMLING TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$44,202,249	\$44,671,615	\$469,366				
	TOTAL MEDICARE	\$53,362,838	\$56,420,512	\$3,057,674				
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,946,430	\$15,941,671	\$995,241				
		\$14,878,229	\$15,891,621	\$1,013,392				
	TOTAL OTHER MEDICAL ASSISTANCE	\$68,201	\$50,050	(\$18,151)				
	TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$472,041 \$1,657,845	\$449,451 \$1,215,767	(\$22,590) (\$442,078)				
	TOTAL ONINGURED (INCLUDED IN NON-GOVERNMENT)	\$1,657,645	\$72,811,634	\$4,030,325				
	TOTAL PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691				
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	TWELVE MONTHS ACTUAL FILING	i		
	FISCAL YEAR 2013 REPORT 550 - CALCULATION OF DSH UPPER PAY)	
	BASELINE UNDERPAYMENT DATA)	
	BASELINE ONDERFAIMENT DATA	•		
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL <u>FY</u>	AMOUNT
LINE	DESCRIPTION	<u>FY 2012</u>	<u>2013</u>	DIFFERENCE
П.	PAYER MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9.29%	9.43%	0.149
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	<u>23.14%</u> 5.05%	23.86% 5.60%	0.729
	MEDICAID	5.02%	5.59%	0.589
	OTHER MEDICAL ASSISTANCE	0.03%	0.01%	-0.029
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.20%	0.14%	-0.079
1	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYER MIX	0.55% 28.39%	0.61% 29.60%	0.069
	TOTAL INPATIENT PAYER MIX	37.68%	39.02%	1.34
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.24%	24.34%	-1.899
	MEDICARE	23.02%	23.39%	0.379
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12.84%	13.01%	0.169
		12.76%	12.95%	0.199
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.09%	0.06%	-0.039
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.20%	2.12%	-0.089
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	36.08%		0.55%
	TOTAL OUTPATIENT PAYER MIX	62.32%	60.98%	-1.34%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
		100.00%	100.00%	0.007
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
		10.000/	40.000	0.400
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	12.92% 28.60%	12.82% 29.41%	-0.109 0.819
	MEDICALE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.56%	4.31%	-0.25%
	MEDICAID	4.54%	4.29%	-0.24%
	OTHER MEDICAL ASSISTANCE	0.03%	0.02%	-0.019
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.25%		-0.069
1	TOTAL INPATIENT GOVERNMENT PAYER MIX	33.42%		0.49
	TOTAL INPATIENT PAYER MIX	46.34%	46.73%	0.399
	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
D.	OUTPATIENT PATER MIX BASED ON ACCRUED PATMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.20%	25.20%	-1.009
2	MEDICARE	18.63%	18.61%	-0.019
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.66%		0.609
	MEDICAID OTHER MEDICAL ASSISTANCE	8.63% 0.03%	9.23% 0.03%	0.609
	CHAMPUS / TRICARE	0.03%		-0.019
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.17%		-0.379
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	27.46%		0.619
	TOTAL OUTPATIENT PAYER MIX	53.66%	53.27%	-0.399
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA		
Α.	DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,720	1,821	101
	MEDICARE	3,482	3,510	28
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,105	,	65
	MEDICAID OTHER MEDICAL ASSISTANCE	1,103		64
	CHAMPUS / TRICARE	31	32	1
0				86
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT DISCHARGES	114 4,618		94

CHARLOTTE HUNGERFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA						
	DESCRIPTION	ACTUAL FY 2012	ACTUAL <u>FY</u> <u>2013</u>	AMOUNT DIFFERENCE		
в.	PATIENT DAYS					
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,533	5,952	419		
	MEDICARE	15,393	15,882	48		
-	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,203	4,608	40		
	MEDICAID OTHER MEDICAL ASSISTANCE	<u>4,172</u> 31	4,603 5	43 (2		
	CHAMPUS / TRICARE	120	132	1		
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	392	696	30		
	TOTAL GOVERNMENT PATIENT DAYS TOTAL PATIENT DAYS	<u>19,716</u> 25,249	20,622 26,574	90		
		23,249	20,574	1,32		
C.	AVERAGE LENGTH OF STAY (ALOS)					
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.2	3.3	0.		
		4.4	4.5	0.		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	<u>3.8</u> 3.8		0.		
	OTHER MEDICAL ASSISTANCE	15.5		(13.		
6	CHAMPUS / TRICARE	3.9	4.1	0.1		
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.4	3.5	0.		
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY TOTAL AVERAGE LENGTH OF STAY	4.3	4.4	<u> </u>		
D.	CASE MIX INDEX					
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1 16020	1 09060	(0.0707)		
	MEDICARE	<u>1.16030</u> 1.35650	1.08960 1.44760	<u>(0.0707)</u> 0.0911		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.00831	1.04819	0.0398		
	MEDICAID	1.00740		0.0406		
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	<u>1.51200</u> 1.06440	1.12350 1.00330	(0.3885) (0.0611		
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.09030	1.00330	(0.0634		
	TOTAL GOVERNMENT CASE MIX INDEX	1.27122	1.34541	0.0741		
	TOTAL CASE MIX INDEX	1.24112	1.27411	0.0329		
Ε.	OTHER REQUIRED DATA					
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$84,219,906	\$87,780,597	\$3,560,69		
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$49,094,597	\$51,264,194	\$2,169,59		
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)					
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,125,309	\$36,516,403	\$1,391,09		
	TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE	<u>41.71%</u> \$0	41.60% \$0	-0.11		
	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0 \$0	\$0 \$0	\$		
	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$		
8	CHARITY CARE	\$1,766,984	\$3,214,518	\$1,447,53		
9	BAD DEBTS	\$3,125,364	\$3,378,061	\$252,69		
	TOTAL UNCOMPENSATED CARE	\$4,892,348	\$6,592,579	\$1,700,23		
11 12	TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES	<u>\$5,735,128</u> \$121,882,681	\$8,250,545 \$124,899,985	<u>\$2,515,41</u> \$3,017,30		
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS					
A.	CASE MIX ADJUSTED DISCHARGES					
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,995.71600	1,984.16160	(11.5544		
	MEDICARE	4,723.33300	5,081.07600	357.7430		
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,114.18620	1,226.38650	112.2003		
		1,111.16220	1,223.01600	111.8538		
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	<u>3.02400</u> 32.99640	3.37050 32.10560	0.3465		
υ	UNINSURED (INCLUDED IN NON-GOVERNMENT)	124.29420	205.38000	81.0858		

	CHARLOTTE HUNGERFORD HOSPI			
	TWELVE MONTHS ACTUAL FILING	3		
	FISCAL YEAR 2013			
	REPORT 550 - CALCULATION OF DSH UPPER PAY)	
	BASELINE UNDERPAYMENT DAT	A		
(1)	(2)	(3)	(4)	(5)
(1)	(2)	(3)	(4)	(3)
		ACTUAL	ACTUAL FY	AMOUNT
INE	DESCRIPTION	FY 2012	<u>2013</u>	DIFFERENCE
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	5,870.51560 7.866.23160	6,339.56810 8.323.72970	469.0525
	TOTAL CASE MIX ADJUSTED DISCHARGES	7,000.23100	0,323.12910	437.490
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
_		4 050 05000	4 702 42700	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	4,858.85989 3,464.00564	,	-155.422 -23.124
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,811.15591	2,724.81637	-86.339
	MEDICAID	2,805.40546		-103.271
-	OTHER MEDICAL ASSISTANCE	5.75045		16.932
-	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	33.60806 457.60623		22.454 235.797
'	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	6,308.76962		-87.009
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	11,167.62951	10,925.19717	-242.432
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	+		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,313.72	\$7,590.48	\$276.
2	MEDICARE	\$6,841.84	\$6,800.36	(\$41.
-	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,629.02	\$4,129.08	(\$499.)
		\$4,614.24	\$4,125.21	(\$489.
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$10,059.85 \$8,560.30	\$5,531.52 \$6,871.45	<u>(</u> \$4,528. (\$1,688.
		\$2,660.12	\$1,325.18	(\$1,334.
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,431.52	\$6,283.96	(\$147.
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,655.34	\$6,595.40	(\$59.
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$6,093.23	\$6,295.58	\$202.
	MEDICARE	\$6,075.78	\$6,355.16	\$279.
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,482.14	\$3,992.13	\$509.
		\$3,475.81	\$4,014.02	\$538.
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$6,569.92 \$5,640.97	\$1,384.59 \$4,081.86	<u>(</u> \$5,185. (\$1,559.
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,900.33	\$1,360.83	(\$1,539.
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
		\$4,917.75	\$5,299.79	\$382.
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$5,429.18	\$5,728.49	\$299.
v	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
••				
	MEDICAID	\$7,293,965	\$6,326,076	(\$967,8
	OTHER MEDICAL ASSISTANCE	(\$12,573)	\$117,021	\$129,5
3		\$1,972,871	\$4,587,585	\$2,614,7
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$9,254,263	\$11,030,683	\$1,776,4
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOL	OGY)		
1	TOTAL CHARGES	\$237,069,419	\$259,938,571	\$22.869.1
	TOTAL CHARGES	\$84,068,204	\$99,346,340	\$22,869,1 \$15,278,1
	UNCOMPENSATED CARE	\$4,892,348	\$6,592,579	\$1,700,2
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,125,309	\$36,516,403	\$1,391,0
	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	¢40.000.4
6 7	TOTAL ADJUSTMENTS TOTAL ACCRUED PAYMENTS	\$124,085,861 \$112,983,558	\$142,455,322 \$117,483,249	\$18,369,4 \$4,499,6
	UCP DSH PAYMENTS (OHCA INPUT)	\$112,983,558	\$117,483,249	\$4,499,6
	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,6
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4765842785	0.4519654338	(0.02461884
	COST OF UNCOMPENSATED CARE	\$2,331,616	\$2,979,618	\$648,0
		\$5,265,663 \$0	\$5,918,665	\$653,0
	PLUS OHCA ADJUSTMENT (OHCA INPUT) TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$0	\$0	
		\$7,597,279	\$8,898,282	\$1,301,0
	RATIOS			

	CHARLOTTE HUNGERFORD HOSPIT TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013			
	REPORT 550 - CALCULATION OF DSH UPPER PAY BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
	DESCRIPTION	ACTUAL <u>FY 2012</u>	ACTUAL <u>FY</u> <u>2013</u>	AMOUNT DIFFERENCE
Α.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	66.29%	61.47%	-4.82%
		58.91%		-3.20%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	43.12% 43.12%	34.79% 34.71%	-8.33% -8.41%
	OTHER MEDICAL ASSISTANCE	42.66%	91.89%	49.23%
	CHAMPUS / TRICARE	58.47%	62.33%	3.86%
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	25.46% 56.10%	17.12% 51.78%	-8.35% - 4.31 %
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	58.61%	54.12%	-4.49%
В.				
	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	47.60%	46.79%	-0.80%
	MEDICARE	38.56%	35.97%	-2.60%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	32.15%	32.17%	0.02%
		32.24%	32.23%	-0.02%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	18.43% 36.20%	20.47% 36.90%	<u>2.05%</u> 0.71%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	25.46%	17.12%	-8.35%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	36.27%	34.63%	-1.64%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	41.04%		-1.55%
	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT			
	TOTAL ACCRUED PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691
	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$112,983,558	\$117,483,249	\$4,499,691
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,330,273	(\$805,705)	(\$4,135,978
	CALCULATED NET REVENUE	\$119,439,195	\$116,677,544	(\$2,761,651
	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$116,313,832	\$116,677,547	\$363,715
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$3,125,363	(\$3)	(\$3,125,366
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMEN	NTS		
			¢050.000.574	\$00,000,450
	OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$237,069,419 \$0	\$259,938,571 (\$3,214,517)	\$22,869,152 (\$3,214,517
2	CALCULATED GROSS REVENUE	\$237,069,419	\$256,724,054	\$19,654,635
	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$237,069,419	\$256,724,054	\$19,654,635
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENT	<u>[</u> [<u>S</u>		
	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$4,892,348	\$6,592,579	\$1,700,231
	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$4,892,348	\$6,592,579	\$1,700,231
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$4,892,348	\$6,592,579	\$1,700,231
-				

	CHARLOTTE HUNGERFORD HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2013	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(4)	(2)	(2)
(1)	(2)	
		ACTUAL
INE	DESCRIPTION	<u>FY 2013</u>
I.	ACCRUED CHARGES AND PAYMENTS	
1.		
Α.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$24,499,963
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	<u>62,018,968</u> 14,556,334
4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,536,334
5	OTHER MEDICAL ASSISTANCE	20,290
6	CHAMPUS / TRICARE	353,945
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,590,204
	TOTAL INPATIENT GOVERNMENT CHARGES	\$76,929,247
	TOTAL INPATIENT CHARGES	\$101,429,210
В.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$63,280,634
2	MEDICARE	60,797,693
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	33,810,939
4	MEDICAID	33,657,530
5		153,409
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	<u> </u>
1	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$95,228,727
	TOTAL OUTPATIENT CHARGES	\$158,509,361
_		
<u>C.</u>	TOTAL ACCRUED CHARGES TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$87,780,597
2	TOTAL GOVERNMENT ACCRUED CHARGES	172.157.974
-	TOTAL ACCRUED CHARGES	\$259,938,571
<u>D.</u>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$15,060,737
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	34,553,159 5,063,846
4		5,045,202
5	OTHER MEDICAL ASSISTANCE	18,644
6	CHAMPUS / TRICARE	220,612
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	272,165
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$39,837,617
	TOTAL INPATIENT PAYMENTS	\$54,898,354
E.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$29,610,878
2	MEDICARE	21,867,353
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,877,825
4	MEDICAID	10,846,419
5	OTHER MEDICAL ASSISTANCE	31,406
6		228,839
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	943,602
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$32,974,017 \$62,584,895
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$44,671,615
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	72,811,634
	TOTAL ACCRUED PAYMENTS	\$117,483,249
П.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	

4 MEDICAL 11.1 0 OTHER MEDICAL ASSISTANCE 11.1 0 CHAMPUS / TRICARE 4.7 1 UNINSURED (INCLUDED IN NON-GOVERNMENT) 2 1 TOTAL GOVERNMENT DISCHARGES 4.7 1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1.089 1 NON-GOVERNMENT (INCLUDING OTHER MEDICAL ASSISTANCE) 1.047 1 MEDICAL ASSISTANCE 1.047 1 MEDICAL ASSISTANCE 1.047 1 MEDICAL ASSISTANCE 1.042 1		CHARLOTTE HUNGERFORD HOSPITAL			
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (1) (2) (3) (2) (3) MEDICAL SUSTAINED (3) (3) (3) (4) (2) (4) (4) (4) (4) MEDICAL SASISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE). (4) (4) (1) (4) (4) (1) (4) (4) (4) (4) (1) (4) (4) (1) (4) (4) (4) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) <th (<="" colspan="2" th=""><th></th><th></th><th></th></th>	<th></th> <th></th> <th></th>				
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12 TOTAL OPERATING EXPENSES \$124,899,98 III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS III. A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 1 1 1 OTAL ACCRUED PAYMENTS 2 1 OTAL ACCRUED PAYMENTS 2 1 OTAL ACCRUED PAYMENTS 2 2 1 OTAL ACCRUED PAYMENTS 2 2 2 2 2 2 2 2 2 2 2	44		¢0.050.54		
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3 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE (\$805,70 3 CALCULATED NET REVENUE \$116,677,54 4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$116,677,54 4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$116,677,54 4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$116,677,54 4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$116,677,54 6 6 6 7 OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED GROSS REVENUE \$259,938,57	2				
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4 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) \$116,677,54 4 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) (\$ 8 RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS (\$ 1 OHCA DEFINED GROSS REVENUE \$259,938,57	3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$805,70		
VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) (\$ B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED GROSS REVENUE			\$116,677,54		
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED GROSS REVENUE	4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$116,677,54		
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS 1 OHCA DEFINED GROSS REVENUE			(\$		
1 OHCA DEFINED GROSS REVENUE \$259,938,57	R				
	Ъ.	RECONCILIATION OF ONCA DEFINED GROSS REVENUE TO ROSPITAL AUDITED FIN. STATEMENTS			
			\$259,938,57		

	CHARLOTTE HUNGERFORD 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)
		ACTUAL
LINE	DESCRIPTION	FY 2013
	CALCULATED GROSS REVENUE	\$256,724,054
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$256,724,054
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
		ψυ
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,592,579
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0 \$6 502 570
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,592,579
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$6,592,579
L	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

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		S ACTUAL FILING					
		(EAR 2013					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE							
(1)	(2)	(3)	(4)	(5)	(6)		
(1)	(2)	ACTUAL	ACTUAL	AMOUNT	(6) %		
	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE		
	DESCRIPTION	<u>F1 2012</u>	<u>FT 2015</u>	DIFFERENCE	DIFFERENCE		
Α.	Hospital Charity Care (from HRS Report 500)						
1	Number of Applicants	1,715	3,409	1,694	99%		
2	Number of Approved Applicants	1,708	3,409	1,701	100%		
		.,	0,100	.,			
3	Total Charges (A)	\$1,766,984	\$3,214,518	\$1,447,534	82%		
4	Average Charges	\$1,035	\$943	(\$92)	-9%		
		. ,					
5	Ratio of Cost to Charges (RCC)	0.533202	0.501979	(0.031223)	-6%		
6	Total Cost	\$942,159	\$1,613,621	\$671,461	71%		
7	Average Cost	\$552	\$473	(\$78)	-14%		
8	Charity Care - Inpatient Charges	\$510,564	\$748,931	\$238,367	47%		
9	Charity Care - Outpatient Charges (Excludes ED Charges)	618,186	1,278,080	659,894	107%		
10	Charity Care - Emergency Department Charges	638,234	1,187,507	549,273	86%		
11	Total Charges (A)	\$1,766,984	\$3,214,518	\$1,447,534	82%		
12	Charity Care - Number of Patient Days	160	194	34	21%		
13	Charity Care - Number of Discharges	47	64	17	36%		
14	Charity Care - Number of Outpatient ED Visits	981	2,380	1,399	143%		
	Charity Care - Number of Outpatient Visits (Excludes ED						
15	Visits)	2,466	4,499	2,033	82%		
В.	Hospital Bad Debts (from HRS Report 500)						
1	Bad Debts - Inpatient Services	\$710,803	\$846,765	\$135,962	19%		
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,013,150	1,146,291	133,141	13%		
3	Bad Debts - Emergency Department	1,401,411	1,385,005	(16,406)	-1%		
4	Total Bad Debts (A)	\$3,125,364	\$3,378,061	\$252,697	8%		
~	Hermitel Heremannested Core (from HDC Depart 500)						
C.	Hospital Uncompensated Care (from HRS Report 500)	¢4 700 004	Ф <u>р</u> рада Бар	<u>ФА ААТ ГОА</u>	0.00		
1	Charity Care (A)	\$1,766,984	\$3,214,518	\$1,447,534	82%		
2	Bad Debts (A) Total Uncompensated Care (A)	3,125,364 \$4,892,348	3,378,061 \$6,592,579	252,697 \$1,700,231	8% 35%		
Λ	Uncompanyated Care Innotient Services	¢1 004 067	¢1 E0E 600	¢274 220	240/		
4	Uncompensated Care - Inpatient Services Uncompensated Care - Outpatient Services (Excludes ED	\$1,221,367	\$1,595,696	\$374,329	31%		
F		1 621 226	2 101 271	702 025	400		
5 6	Unc. Care) Uncompensated Care - Emergency Department	1,631,336 2,039,645	2,424,371 2,572,512	793,035 532,867	49%		
<u>б</u> 7	Total Uncompensated Care - Emergency Department	\$4,892,348			26%		
1	rotai oncompensateu care (A)	₽ 4,09∠,340	\$6,592,579	\$1,700,231	35%		

	C	HARLOTTE HUNGERFORD	HOSPITAL		
		TWELVE MONTHS ACTUA	L FILING		
		FISCAL YEAR 201	-		
	REPORT 685 - HOSPITAL NON			ALLOWANCES,	
	ACCRUE	D PAYMENTS AND DISCOU	JNI PERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL TOTAL	FY 2013 ACTUAL TOTAL	AMOUNT	%
<u>LINE</u>	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$84,219,906	\$87,780,597	\$3,560,691	4%
2	Total Contractual Allowances	\$35,125,309	\$36,516,403	\$1,391,094	4%
	Total Accrued Payments (A)	\$49,094,597	\$51,264,194	\$2,169,597	4%
	Total Discount Percentage	41.71%	41.60%	-0.11%	0%
(<u>A</u>) Ar	ccrued Payments associated with Non-Governmer	t Contractual Allowances r	nust exclude any reductio	n for Uncompensate	d Care
		Allowances I		inter encompensate	

CHARLOTTE HUNGERFORD HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE

(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL <u>FY 2012</u>	ACTUAL <u>FY 2013</u>
Α.	Gross and Net Revenue			
1	Inpatient Gross Revenue	\$87,023,589	\$89,321,803	\$101,429,210
2	Outpatient Gross Revenue	\$121,606,008	\$147,747,616	\$158,509,361
3	Total Gross Patient Revenue	\$208,629,597	\$237,069,419	\$259,938,571
4	Net Patient Revenue	\$109,579,717	\$116,313,832	\$116,677,548
В.	Total Operating Expenses			
1	Total Operating Expense	\$113,880,767	\$121,882,681	\$124,899,985
C.	Utilization Statistics			
1	Patient Days	27,425	25,249	26,574
2	Discharges	6,512	6,338	6,533
3	Average Length of Stay	4.2	4.0	4.1
4	Equivalent (Adjusted) Patient Days (EPD)	65,748	67,013	68,103
0	Equivalent (Adjusted) Discharges (ED)	15,612	16,822	16,743
D.	Case Mix Statistics			
1	Case Mix Index	1.25757	1.24112	1.27411
2	Case Mix Adjusted Patient Days (CMAPD)	34,489	31,337	33,858
3	Case Mix Adjusted Discharges (CMAD)	8,189	7,866	8,324
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	82,683	83,172	86,770
5	Case Mix Adjusted Equivalent Discharges (CMAED)	19,633	20,878	21,332
E.	Gross Revenue Per Statistic			
1	Total Gross Revenue per Patient Day	\$7,607	\$9,389	\$9,782
2	Total Gross Revenue per Discharge	\$32,038	\$37,404	\$39,789
3	Total Gross Revenue per EPD	\$3,173	\$3,538	\$3,817
4	Total Gross Revenue per ED	\$13,364	\$14,093	\$15,526
5	Total Gross Revenue per CMAEPD	\$2,523	\$2,850	\$2,996
6	Total Gross Revenue per CMAED	\$10,627	\$11,355	\$12,186
7	Inpatient Gross Revenue per EPD	\$1,324	\$1,333	\$1,489
8	Inpatient Gross Revenue per ED	\$5,574	\$5,310	\$6,058

CHARLOTTE HUNGERFORD HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE

(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2011	FY 2012	FY 2013
F.	Net Revenue Per Statistic			
1	Net Patient Revenue per Patient Day	\$3,996	\$4,607	\$4,391
2	Net Patient Revenue per Discharge	\$16,827	\$18,352	\$17,860
3	Net Patient Revenue per EPD	\$1,667	\$1,736	\$1,713
4	Net Patient Revenue per ED	\$7,019	\$6,915	\$6,969
5	Net Patient Revenue per CMAEPD	\$1,325	\$1,398	\$1,345
6	Net Patient Revenue per CMAED	\$5,581	\$5,571	\$5,470
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$4,152	\$4,827	\$4,700
2	Total Operating Expense per Discharge	\$17,488	\$19,230	\$19,118
3	Total Operating Expense per EPD	\$1,732	\$1,819	\$1,834
4	Total Operating Expense per ED	\$7,295	\$7,246	\$7,460
5	Total Operating Expense per CMAEPD	\$1,377	\$1,465	\$1,439
6	Total Operating Expense per CMAED	\$5,801	\$5,838	\$5,855
Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$18,727,261	\$21,604,919	\$22,590,903
2	Nursing Fringe Benefits Expense	\$5,724,690	\$6,508,150	\$6,262,671
3	Total Nursing Salary and Fringe Benefits Expense	\$24,451,951	\$28,113,069	\$28,853,574
I.	Physician Salary and Fringe Expense			
1	Physician Salary Expense	\$5,949,173	\$7,857,318	\$8,984,103
2	Physician Fringe Benefits Expense	\$1,818,588	\$2,366,896	\$2,490,581
3	Total Physician Salary and Fringe Benefits Expense	\$7,767,761	\$10,224,214	\$11,474,684
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense			
1	Non-Nursing, Non-Physician Salary Expense	\$27,051,759	\$25,466,493	\$26,897,491
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$8,269,386	\$7,671,389	\$7,456,548
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$35,321,145	\$33,137,882	\$34,354,039

CHARLOTTE HUNGERFORD HOSPITAL **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE** (2) (1) (3) (4) (5) ACTUAL ACTUAL ACTUAL LINE DESCRIPTION FY 2011 FY 2012 FY 2013 K. **Total Salary and Fringe Benefits Expense** 1 Total Salary Expense \$51,728,193 \$54,928,730 \$58,472,497 2 Total Fringe Benefits Expense \$15,812,664 \$16,546,435 \$16,209,800 3 **Total Salary and Fringe Benefits Expense** \$67,540,857 \$71,475,165 \$74,682,297 L. Total Full Time Equivalent Employees (FTEs) 295.3 321.4 305.9 1 Total Nursing FTEs 2 **Total Physician FTEs** 26.3 31.1 33.9 422.7 449.2 3 Total Non-Nursing, Non-Physician FTEs 415.9 4 Total Full Time Equivalent Employees (FTEs) 744.3 768.4 789.0 Μ. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$63,418 \$67,221 \$73,851 2 Nursing Fringe Benefits Expense per FTE \$19,386 \$20,249 \$20,473 3 Total Nursing Salary and Fringe Benefits Expense per FTE \$82,804 \$87,471 \$94,324 N. Physician Salary and Fringe Expense per FTE 1 Physician Salary Expense per FTE \$226.204 \$252.647 \$265.018 2 \$73,468 Physician Fringe Benefits Expense per FTE \$69,148 \$76,106 3 Total Physician Salary and Fringe Benefits Expense per FTE \$295.352 \$328.753 \$338.486 0. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE 1 Non-Nursing, Non-Physician Salary Expense per FTE \$63,998 \$61,232 \$59,879 2 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$19,563 \$18,445 \$16,600 \$76,478 3 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE \$83,561 \$79,678 Ρ. Total Salary and Fringe Benefits Expense per FTE 1 Total Salary Expense per FTE \$69.499 \$71.485 \$74.110 2 Total Fringe Benefits Expense per FTE \$21,245 \$21,534 \$20,545 3 Total Salary and Fringe Benefits Expense per FTE \$90.744 \$93.018 \$94.654 Q. Total Salary and Fringe Ben. Expense per Statistic

CHARLOTTE HUNGERFORD HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE

		1		
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL <u>FY 2012</u>	ACTUAL <u>FY 2013</u>
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,463	\$2,831	\$2,810
2	Total Salary and Fringe Benefits Expense per Discharge	\$10,372	\$11,277	\$11,432
3	Total Salary and Fringe Benefits Expense per EPD	\$1,027	\$1,067	\$1,097
4	Total Salary and Fringe Benefits Expense per ED	\$4,326	\$4,249	\$4,461
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$817	\$859	\$861
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,440	\$3,424	\$3,501