

## MIDSTATE MEDICAL CENTER

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2013

## REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION

(1)	(2)	(3) FY 2012 ACTUAL	(4) FY 2013 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
LINE	DESCRIPTION				
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$46,117,517	\$27,158,493	(\$18,959,024)	-41%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$25,147,640	\$27,767,137	\$2,619,497	10%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$6,319,474	\$2,663,150	(\$3,656,324)	-58%
6	Due From Third Party Payers	\$0	\$1,517,735	\$1,517,735	0%
7	Inventories of Supplies	\$2,649,756	\$2,719,853	\$70,097	3%
8	Prepaid Expenses	\$2,739,748	\$4,878,472	\$2,138,724	78%
9	Other Current Assets	\$8,170,030	\$6,718,647	(\$1,451,383)	-18%
<b>Total Current Assets</b>		<b>\$91,144,165</b>	<b>\$73,423,487</b>	<b>(\$17,720,678)</b>	<b>-19%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$13,223,292	\$13,953,158	\$729,866	6%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$6,312,325	\$6,312,325	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$65,932	\$62,809	(\$3,123)	-5%
<b>Total Noncurrent Assets Whose Use is Limited:</b>		<b>\$19,601,549</b>	<b>\$20,328,292</b>	<b>\$726,743</b>	<b>4%</b>
5	Interest in Net Assets of Foundation	\$0	\$38,819,627	\$38,819,627	0%
6	Long Term Investments	\$14,919,838	\$0	(\$14,919,838)	-100%
7	Other Noncurrent Assets	\$38,650,167	\$18,517,286	(\$20,132,881)	-52%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$249,735,660	\$252,854,982	\$3,119,322	1%
2	Less: Accumulated Depreciation	\$124,211,246	\$132,718,605	\$8,507,359	7%
<b>Property, Plant and Equipment, Net</b>		<b>\$125,524,414</b>	<b>\$120,136,377</b>	<b>(\$5,388,037)</b>	<b>-4%</b>
3	Construction in Progress	\$1,581,507	\$1,879,662	\$298,155	19%
<b>Total Net Fixed Assets</b>		<b>\$127,105,921</b>	<b>\$122,016,039</b>	<b>(\$5,089,882)</b>	<b>-4%</b>
<b>Total Assets</b>		<b>\$291,421,640</b>	<b>\$273,104,731</b>	<b>(\$18,316,909)</b>	<b>-6%</b>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$11,318,779	\$12,841,942	\$1,523,163	13%
2	Salaries, Wages and Payroll Taxes	\$10,060,359	\$9,070,645	(\$989,714)	-10%

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LINE	DESCRIPTION				
3	Due To Third Party Payers	\$3,562,417	\$0	(\$3,562,417)	-100%
4	Due To Affiliates	\$0	\$1,445,398	\$1,445,398	0%
5	Current Portion of Long Term Debt	\$0	\$669,578	\$669,578	0%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$4,665,737	\$6,458,439	\$1,792,702	38%
<b>Total Current Liabilities</b>		<b>\$29,607,292</b>	<b>\$30,486,002</b>	<b>\$878,710</b>	<b>3%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$88,731,315	\$87,806,192	(\$925,123)	-1%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
<b>Total Long Term Debt</b>		<b>\$88,731,315</b>	<b>\$87,806,192</b>	<b>(\$925,123)</b>	<b>-1%</b>
3	Accrued Pension Liability	\$56,785,518	\$18,941,059	(\$37,844,459)	-67%
4	Other Long Term Liabilities	\$26,378,887	\$22,285,452	(\$4,093,435)	-16%
<b>Total Long Term Liabilities</b>		<b>\$171,895,720</b>	<b>\$129,032,703</b>	<b>(\$42,863,017)</b>	<b>-25%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$73,637,750	\$96,806,371	\$23,168,621	31%
2	Temporarily Restricted Net Assets	\$2,279,087	\$2,047,687	(\$231,400)	-10%
3	Permanently Restricted Net Assets	\$14,001,791	\$14,731,968	\$730,177	5%
<b>Total Net Assets</b>		<b>\$89,918,628</b>	<b>\$113,586,026</b>	<b>\$23,667,398</b>	<b>26%</b>
<b>Total Liabilities and Net Assets</b>		<b>\$291,421,640</b>	<b>\$273,104,731</b>	<b>(\$18,316,909)</b>	<b>-6%</b>

**MIDSTATE MEDICAL CENTER**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2013**

**REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION**

(1)	(2)	(3) FY 2012 <u>ACTUAL</u>	(4) FY 2013 <u>ACTUAL</u>	(5) AMOUNT <u>DIFFERENCE</u>	(6) % <u>DIFFERENCE</u>
<u>LINE</u>	<u>DESCRIPTION</u>				
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$479,645,635	\$505,047,658	\$25,402,023	5%
2	Less: Allowances	\$257,058,291	\$277,904,920	\$20,846,629	8%
3	Less: Charity Care	\$4,233,596	\$7,131,143	\$2,897,547	68%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$218,353,748</b>	<b>\$220,011,595</b>	<b>\$1,657,847</b>	<b>1%</b>
5	Provision for Bad Debts	\$0	\$2,265,391	\$2,265,391	0%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$218,353,748</b>	<b>\$217,746,204</b>	<b>(\$607,544)</b>	<b>0%</b>
6	Other Operating Revenue	\$27,519,593	\$8,871,000	(\$18,648,593)	-68%
7	Net Assets Released from Restrictions	\$327,257	\$245,321	(\$81,936)	-25%
	<b>Total Operating Revenue</b>	<b>\$246,200,598</b>	<b>\$226,862,525</b>	<b>(\$19,338,073)</b>	<b>-8%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$75,938,860	\$75,257,780	(\$681,080)	-1%
2	Fringe Benefits	\$28,088,853	\$22,649,817	(\$5,439,036)	-19%
3	Physicians Fees	\$3,200,313	\$3,631,661	\$431,348	13%
4	Supplies and Drugs	\$29,954,294	\$31,535,293	\$1,580,999	5%
5	Depreciation and Amortization	\$12,961,930	\$13,104,256	\$142,326	1%
6	Bad Debts	\$6,461,499	\$0	(\$6,461,499)	-100%
7	Interest Expense	\$3,996,300	\$3,987,276	(\$9,024)	0%
8	Malpractice Insurance Cost	\$4,164,372	\$2,356,019	(\$1,808,353)	-43%
9	Other Operating Expenses	\$56,539,874	\$57,998,046	\$1,458,172	3%
	<b>Total Operating Expenses</b>	<b>\$221,306,295</b>	<b>\$210,520,148</b>	<b>(\$10,786,147)</b>	<b>-5%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$24,894,303</b>	<b>\$16,342,377</b>	<b>(\$8,551,926)</b>	<b>-34%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$92,682	\$51,290	(\$41,392)	-45%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$1,355,485	\$4,886,057	\$3,530,572	260%
	<b>Total Non-Operating Revenue</b>	<b>\$1,448,167</b>	<b>\$4,937,347</b>	<b>\$3,489,180</b>	<b>241%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$26,342,470</b>	<b>\$21,279,724</b>	<b>(\$5,062,746)</b>	<b>-19%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$1,362,036	(\$1,295,573)	(\$2,657,609)	-195%

## MIDSTATE MEDICAL CENTER

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## REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 <u>ACTUAL</u>	FY 2013 <u>ACTUAL</u>	AMOUNT <u>DIFFERENCE</u>	% <u>DIFFERENCE</u>
	All Other Adjustments	(\$1,587,712)	\$586,303	\$2,174,015	-137%
	<b>Total Other Adjustments</b>	<b>(\$225,676)</b>	<b>(\$709,270)</b>	<b>(\$483,594)</b>	<b>214%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$26,116,794</b>	<b>\$20,570,454</b>	<b>(\$5,546,340)</b>	<b>-21%</b>
	Principal Payments	\$23,328	\$255,545	\$232,217	995%

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1 MEDICARE TRADITIONAL	\$98,162,113	\$100,322,769	\$2,160,656		2%
2 MEDICARE MANAGED CARE	\$24,475,499	\$29,868,404	\$5,392,905		22%
3 MEDICAID	\$30,728,477	\$36,142,007	\$5,413,530		18%
4 MEDICAID MANAGED CARE	\$2,412,193	\$0	(\$2,412,193)		-100%
5 CHAMPUS/TRICARE	\$353,256	\$291,509	(\$61,747)		-17%
6 COMMERCIAL INSURANCE	\$2,328,421	\$2,625,959	\$297,538		13%
7 NON-GOVERNMENT MANAGED CARE	\$48,707,622	\$44,753,224	(\$3,954,398)		-8%
8 WORKER'S COMPENSATION	\$1,314,220	\$1,090,524	(\$223,696)		-17%
9 SELF- PAY/UNINSURED	\$3,563,947	\$4,451,612	\$887,665		25%
10 SAGA	\$0	\$0	\$0		0%
11 OTHER	\$0	\$0	\$0		0%
<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$212,045,748</b>	<b>\$219,546,008</b>	<b>\$7,500,260</b>		<b>4%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1 MEDICARE TRADITIONAL	\$68,415,388	\$70,829,456	\$2,414,068		4%
2 MEDICARE MANAGED CARE	\$20,200,256	\$26,050,244	\$5,849,988		29%
3 MEDICAID	\$52,241,500	\$64,876,057	\$12,634,557		24%
4 MEDICAID MANAGED CARE	\$5,300,896	\$0	(\$5,300,896)		-100%
5 CHAMPUS/TRICARE	\$685,597	\$894,335	\$208,738		30%
6 COMMERCIAL INSURANCE	\$4,546,403	\$3,725,589	(\$820,814)		-18%
7 NON-GOVERNMENT MANAGED CARE	\$104,982,504	\$107,453,867	\$2,471,363		2%
8 WORKER'S COMPENSATION	\$3,561,352	\$3,623,773	\$62,421		2%
9 SELF- PAY/UNINSURED	\$7,665,991	\$8,048,329	\$382,338		5%
10 SAGA	\$0	\$0	\$0		0%
11 OTHER	\$0	\$0	\$0		0%
<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$267,599,887</b>	<b>\$285,501,650</b>	<b>\$17,901,763</b>		<b>7%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1 MEDICARE TRADITIONAL	\$166,577,501	\$171,152,225	\$4,574,724		3%
2 MEDICARE MANAGED CARE	\$44,675,755	\$55,918,648	\$11,242,893		25%
3 MEDICAID	\$82,969,977	\$101,018,064	\$18,048,087		22%
4 MEDICAID MANAGED CARE	\$7,713,089	\$0	(\$7,713,089)		-100%
5 CHAMPUS/TRICARE	\$1,038,853	\$1,185,844	\$146,991		14%
6 COMMERCIAL INSURANCE	\$6,874,824	\$6,351,548	(\$523,276)		-8%
7 NON-GOVERNMENT MANAGED CARE	\$153,690,126	\$152,207,091	(\$1,483,035)		-1%
8 WORKER'S COMPENSATION	\$4,875,572	\$4,714,297	(\$161,275)		-3%
9 SELF- PAY/UNINSURED	\$11,229,938	\$12,499,941	\$1,270,003		11%
10 SAGA	\$0	\$0	\$0		0%
11 OTHER	\$0	\$0	\$0		0%
<b>TOTAL GROSS REVENUE</b>	<b>\$479,645,635</b>	<b>\$505,047,658</b>	<b>\$25,402,023</b>		<b>5%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1 MEDICARE TRADITIONAL	\$42,146,127	\$39,218,991	(\$2,927,136)		-7%
2 MEDICARE MANAGED CARE	\$9,660,667	\$11,628,291	\$1,967,624		20%
3 MEDICAID	\$10,399,937	\$12,657,458	\$2,257,521		22%
4 MEDICAID MANAGED CARE	\$630,381	\$0	(\$630,381)		-100%
5 CHAMPUS/TRICARE	\$105,326	\$60,612	(\$44,714)		-42%
6 COMMERCIAL INSURANCE	\$1,503,132	\$1,988,185	\$485,053		32%

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$32,938,873	\$31,085,059	(\$1,853,814)	-6%
8	WORKER'S COMPENSATION	\$1,119,205	\$993,725	(\$125,480)	-11%
9	SELF- PAY/UNINSURED	\$276,890	\$943,085	\$666,195	241%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
<b>TOTAL INPATIENT NET REVENUE</b>		<b>\$98,780,538</b>	<b>\$98,575,406</b>	<b>(\$205,132)</b>	<b>0%</b>
<b>B. OUTPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$19,898,084	\$20,129,801	\$231,717	1%
2	MEDICARE MANAGED CARE	\$5,520,277	\$6,863,581	\$1,343,304	24%
3	MEDICAID	\$13,152,934	\$15,757,381	\$2,604,447	20%
4	MEDICAID MANAGED CARE	\$1,367,631	\$0	(\$1,367,631)	-100%
5	CHAMPUS/TRICARE	\$204,418	\$185,955	(\$18,463)	-9%
6	COMMERCIAL INSURANCE	\$3,589,838	\$2,820,180	(\$769,658)	-21%
7	NON-GOVERNMENT MANAGED CARE	\$70,795,912	\$75,024,670	\$4,228,758	6%
8	WORKER'S COMPENSATION	\$3,012,175	\$3,302,115	\$289,940	10%
9	SELF- PAY/UNINSURED	\$908,179	\$2,160,322	\$1,252,143	138%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
<b>TOTAL OUTPATIENT NET REVENUE</b>		<b>\$118,449,448</b>	<b>\$126,244,005</b>	<b>\$7,794,557</b>	<b>7%</b>
<b>C. TOTAL NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$62,044,211	\$59,348,792	(\$2,695,419)	-4%
2	MEDICARE MANAGED CARE	\$15,180,944	\$18,491,872	\$3,310,928	22%
3	MEDICAID	\$23,552,871	\$28,414,839	\$4,861,968	21%
4	MEDICAID MANAGED CARE	\$1,998,012	\$0	(\$1,998,012)	-100%
5	CHAMPUS/TRICARE	\$309,744	\$246,567	(\$63,177)	-20%
6	COMMERCIAL INSURANCE	\$5,092,970	\$4,808,365	(\$284,605)	-6%
7	NON-GOVERNMENT MANAGED CARE	\$103,734,785	\$106,109,729	\$2,374,944	2%
8	WORKER'S COMPENSATION	\$4,131,380	\$4,295,840	\$164,460	4%
9	SELF- PAY/UNINSURED	\$1,185,069	\$3,103,407	\$1,918,338	162%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
<b>TOTAL NET REVENUE</b>		<b>\$217,229,986</b>	<b>\$224,819,411</b>	<b>\$7,589,425</b>	<b>3%</b>
<b>III. STATISTICS BY PAYER</b>					
<b>A. DISCHARGES</b>					
1	MEDICARE TRADITIONAL	4,067	3,799	(268)	-7%
2	MEDICARE MANAGED CARE	987	1,109	122	12%
3	MEDICAID	1,946	2,111	165	8%
4	MEDICAID MANAGED CARE	205	0	(205)	-100%
5	CHAMPUS/TRICARE	27	24	(3)	-11%
6	COMMERCIAL INSURANCE	119	113	(6)	-5%
7	NON-GOVERNMENT MANAGED CARE	2,691	2,418	(273)	-10%
8	WORKER'S COMPENSATION	34	31	(3)	-9%
9	SELF- PAY/UNINSURED	254	242	(12)	-5%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
<b>TOTAL DISCHARGES</b>		<b>10,330</b>	<b>9,847</b>	<b>(483)</b>	<b>-5%</b>
<b>B. PATIENT DAYS</b>					
1	MEDICARE TRADITIONAL	19,323	18,756	(567)	-3%
2	MEDICARE MANAGED CARE	4,568	5,501	933	20%
3	MEDICAID	7,636	8,183	547	7%

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<b>REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	536	0	(536)	-100%
5	CHAMPUS/TRICARE	84	70	(14)	-17%
6	COMMERCIAL INSURANCE	409	421	12	3%
7	NON-GOVERNMENT MANAGED CARE	8,939	8,001	(938)	-10%
8	WORKER'S COMPENSATION	110	84	(26)	-24%
9	SELF- PAY/UNINSURED	925	882	(43)	-5%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
<b>TOTAL PATIENT DAYS</b>		<b>42,530</b>	<b>41,898</b>	<b>(632)</b>	<b>-1%</b>
<b>C. OUTPATIENT VISITS</b>					
1	MEDICARE TRADITIONAL	33,398	32,754	(644)	-2%
2	MEDICARE MANAGED CARE	9,772	11,447	1,675	17%
3	MEDICAID	39,551	48,221	8,670	22%
4	MEDICAID MANAGED CARE	6,289	0	(6,289)	-100%
5	CHAMPUS/TRICARE	510	539	29	6%
6	COMMERCIAL INSURANCE	2,548	2,377	(171)	-7%
7	NON-GOVERNMENT MANAGED CARE	66,636	65,015	(1,621)	-2%
8	WORKER'S COMPENSATION	2,340	2,391	51	2%
9	SELF- PAY/UNINSURED	8,339	7,718	(621)	-7%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
<b>TOTAL OUTPATIENT VISITS</b>		<b>169,383</b>	<b>170,462</b>	<b>1,079</b>	<b>1%</b>
<b>IV. EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>					
<b>A. EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$16,500,000	\$17,000,000	\$500,000	3%
2	MEDICARE MANAGED CARE	\$4,385,000	\$5,500,000	\$1,115,000	25%
3	MEDICAID	\$30,800,000	\$35,500,000	\$4,700,000	15%
4	MEDICAID MANAGED CARE	\$3,300,000	\$0	(\$3,300,000)	-100%
5	CHAMPUS/TRICARE	\$260,000	\$280,000	\$20,000	8%
6	COMMERCIAL INSURANCE	\$1,365,000	\$1,200,000	(\$165,000)	-12%
7	NON-GOVERNMENT MANAGED CARE	\$27,600,000	\$25,370,000	(\$2,230,000)	-8%
8	WORKER'S COMPENSATION	\$845,000	\$900,000	\$55,000	7%
9	SELF- PAY/UNINSURED	\$6,650,000	\$6,250,000	(\$400,000)	-6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>		<b>\$91,705,000</b>	<b>\$92,000,000</b>	<b>\$295,000</b>	<b>0%</b>
<b>B. EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$3,400,000	\$3,450,000	\$50,000	1%
2	MEDICARE MANAGED CARE	\$950,000	\$1,150,000	\$200,000	21%
3	MEDICAID	\$5,900,000	\$6,500,000	\$600,000	10%
4	MEDICAID MANAGED CARE	\$800,000	\$0	(\$800,000)	-100%
5	CHAMPUS/TRICARE	\$60,000	\$55,000	(\$5,000)	-8%
6	COMMERCIAL INSURANCE	\$700,000	\$600,000	(\$100,000)	-14%
7	NON-GOVERNMENT MANAGED CARE	\$16,400,000	\$15,500,000	(\$900,000)	-5%
8	WORKER'S COMPENSATION	\$700,000	\$750,000	\$50,000	7%
9	SELF- PAY/UNINSURED	\$300,000	\$250,000	(\$50,000)	-17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$29,210,000</b>	<b>\$28,255,000</b>	<b>(\$955,000)</b>	<b>-3%</b>
<b>C.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	10,287	7,492	(2,795)	-27%
2	MEDICARE MANAGED CARE	2,383	2,171	(212)	-9%
3	MEDICAID	28,640	23,383	(5,257)	-18%
4	MEDICAID MANAGED CARE	4,857	0	(4,857)	-100%
5	CHAMPUS/TRICARE	324	193	(131)	-40%
6	COMMERCIAL INSURANCE	1,240	686	(554)	-45%
7	NON-GOVERNMENT MANAGED CARE	28,923	13,770	(15,153)	-52%
8	WORKER'S COMPENSATION	1,134	832	(302)	-27%
9	SELF- PAY/UNINSURED	7,119	4,370	(2,749)	-39%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>84,907</b>	<b>52,897</b>	<b>(32,010)</b>	<b>-38%</b>

**MIDSTATE MEDICAL CENTER**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2013**

**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 <u>ACTUAL</u>	FY 2013 <u>ACTUAL</u>	AMOUNT <u>DIFFERENCE</u>	% <u>DIFFERENCE</u>
<b>I. OPERATING EXPENSE BY CATEGORY</b>					
<b>A. Salaries &amp; Wages:</b>					
1	Nursing Salaries	\$28,460,163	\$27,207,529	(\$1,252,634)	-4%
2	Physician Salaries	\$7,503,379	\$7,916,881	\$413,502	6%
3	Non-Nursing, Non-Physician Salaries	\$39,975,318	\$40,133,370	\$158,052	0%
	<b>Total Salaries &amp; Wages</b>	<b>\$75,938,860</b>	<b>\$75,257,780</b>	<b>(\$681,080)</b>	<b>-1%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$10,526,845	\$8,488,460	(\$2,038,385)	-19%
2	Physician Fringe Benefits	\$2,025,011	\$1,632,894	(\$392,117)	-19%
3	Non-Nursing, Non-Physician Fringe Benefits	\$15,536,997	\$12,528,463	(\$3,008,534)	-19%
	<b>Total Fringe Benefits</b>	<b>\$28,088,853</b>	<b>\$22,649,817</b>	<b>(\$5,439,036)</b>	<b>-19%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$383,349	\$351,733	(\$31,616)	-8%
2	Physician Fees	\$3,200,313	\$3,631,661	\$431,348	13%
3	Non-Nursing, Non-Physician Fees	\$20,533,330	\$21,550,046	\$1,016,716	5%
	<b>Total Contractual Labor Fees</b>	<b>\$24,116,992</b>	<b>\$25,533,440</b>	<b>\$1,416,448</b>	<b>6%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$16,752,117	\$16,121,782	(\$630,335)	-4%
2	Pharmaceutical Costs	\$13,202,177	\$15,413,511	\$2,211,334	17%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$29,954,294</b>	<b>\$31,535,293</b>	<b>\$1,580,999</b>	<b>5%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$5,867,844	\$6,025,688	\$157,844	3%
2	Depreciation-Equipment	\$7,016,343	\$7,000,825	(\$15,518)	0%
3	Amortization	\$77,743	\$77,743	\$0	0%
	<b>Total Depreciation and Amortization</b>	<b>\$12,961,930</b>	<b>\$13,104,256</b>	<b>\$142,326</b>	<b>1%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$6,461,499	\$0	(\$6,461,499)	-100%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$3,996,300	\$3,987,276	(\$9,024)	0%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$4,164,372	\$2,356,019	(\$1,808,353)	-43%
<b>I. Utilities:</b>					
1	Water	\$315,000	\$300,000	(\$15,000)	-5%
2	Natural Gas	\$772,701	\$604,961	(\$167,740)	-22%
3	Oil	\$28,306	\$148,208	\$119,902	424%
4	Electricity	\$1,752,386	\$1,874,238	\$121,852	7%
5	Telephone	\$380,782	\$395,177	\$14,395	4%
6	Other Utilities	\$16,840	\$17,522	\$682	4%
	<b>Total Utilities</b>	<b>\$3,266,015</b>	<b>\$3,340,106</b>	<b>\$74,091</b>	<b>2%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$193,289	\$185,417	(\$7,872)	-4%
2	Legal Fees	\$277,401	\$171,712	(\$105,689)	-38%
3	Consulting Fees	\$2,549,360	\$2,083,666	(\$465,694)	-18%

**MIDSTATE MEDICAL CENTER**  
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**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	Dues and Membership	\$2,406,673	\$486,820	(\$1,919,853)	-80%
5	Equipment Leases	\$874,487	\$832,665	(\$41,822)	-5%
6	Building Leases	\$2,857,322	\$3,071,032	\$213,710	7%
7	Repairs and Maintenance	\$3,738,811	\$4,774,218	\$1,035,407	28%
8	Insurance	\$315,398	\$321,937	\$6,539	2%
9	Travel	\$82,668	\$91,772	\$9,104	11%
10	Conferences	\$163,201	\$29,571	(\$133,630)	-82%
11	Property Tax	\$126,122	\$141,109	\$14,987	12%
12	General Supplies	\$1,241,148	\$2,434,462	\$1,193,314	96%
13	Licenses and Subscriptions	\$147,972	\$100,962	(\$47,010)	-32%
14	Postage and Shipping	\$124,565	\$163,065	\$38,500	31%
15	Advertising	\$813,002	\$712,202	(\$100,800)	-12%
16	Corporate parent/system fees	\$1,895,892	\$3,179,898	\$1,284,006	68%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$1,101,157	\$1,092,054	(\$9,103)	-1%
20	Lab Fees / Red Cross charges	\$919,352	\$990,532	\$71,180	8%
21	Billing & Collection / Bank Fees	\$767,609	\$320,756	(\$446,853)	-58%
22	Recruiting / Employee Education & Recognition	\$762,984	\$763,130	\$146	0%
23	Laundry / Linen	\$652,045	\$594,827	(\$57,218)	-9%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$144,384	\$154,221	\$9,837	7%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$10,202,338	\$10,060,133	(\$142,205)	-1%
<b>Total Business Expenses</b>		<b>\$32,357,180</b>	<b>\$32,756,161</b>	<b>\$398,981</b>	<b>1%</b>

**K. Other Operating Expense:**

1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
<b>Total Operating Expenses - All Expense Categories*</b>		<b>\$221,306,295</b>	<b>\$210,520,148</b>	<b>(\$10,786,147)</b>	<b>-5%</b>

**\*A.-K.The total operating expenses amount above must agree with the total operating expenses amount on Report 150**

**II. OPERATING EXPENSE BY DEPARTMENT****A. General Services:**

1	General Administration	\$56,124,474	\$58,902,500	\$2,778,026	5%
2	General Accounting	\$2,059,849	\$2,059,869	\$20	0%
3	Patient Billing & Collection	\$3,824,509	\$4,350,292	\$525,783	14%
4	Admitting / Registration Office	\$1,661,010	\$1,711,781	\$50,771	3%
5	Data Processing	\$5,303,858	\$6,012,543	\$708,685	13%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$1,027,630	\$1,267,566	\$239,936	23%
8	Public Relations	\$1,853,009	\$1,730,158	(\$122,851)	-7%
9	Purchasing	\$951,877	\$980,434	\$28,557	3%
10	Dietary and Cafeteria	\$3,396,188	\$3,389,564	(\$6,624)	0%
11	Housekeeping	\$3,153,217	\$2,500,274	(\$652,943)	-21%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$6,163,187	\$6,469,654	\$306,467	5%
14	Security	\$0	\$0	\$0	0%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$0	\$0	\$0	0%

**MIDSTATE MEDICAL CENTER**  
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**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 <u>ACTUAL</u>	FY 2013 <u>ACTUAL</u>	AMOUNT <u>DIFFERENCE</u>	% <u>DIFFERENCE</u>
17	Pharmacy Department	\$15,027,295	\$17,569,388	\$2,542,093	17%
18	Other General Services	\$16,958,230	\$0	(\$16,958,230)	-100%
	<b>Total General Services</b>	<b>\$117,504,333</b>	<b>\$106,944,023</b>	<b>(\$10,560,310)</b>	<b>-9%</b>
	<b>B. Professional Services:</b>				
1	Medical Care Administration	\$1,112,264	\$1,047,804	(\$64,460)	-6%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,755,182	\$1,846,633	\$91,451	5%
4	Medical Records	\$2,448,511	\$2,207,906	(\$240,605)	-10%
5	Social Service	\$1,649,599	\$1,626,449	(\$23,150)	-1%
6	Other Professional Services	\$4,674,081	\$4,835,268	\$161,187	3%
	<b>Total Professional Services</b>	<b>\$11,639,637</b>	<b>\$11,564,060</b>	<b>(\$75,577)</b>	<b>-1%</b>
	<b>C. Special Services:</b>				
1	Operating Room	\$18,016,268	\$17,749,198	(\$267,070)	-1%
2	Recovery Room	\$2,556,264	\$2,490,713	(\$65,551)	-3%
3	Anesthesiology	\$396,534	\$390,198	(\$6,336)	-2%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$6,803,348	\$6,694,816	(\$108,532)	-2%
6	Diagnostic Ultrasound	\$1,034,908	\$1,062,639	\$27,731	3%
7	Radiation Therapy	\$3,692,533	\$4,244,945	\$552,412	15%
8	Radioisotopes	\$755,676	\$720,845	(\$34,831)	-5%
9	CT Scan	\$1,100,163	\$1,103,819	\$3,656	0%
10	Laboratory	\$7,487,753	\$7,684,942	\$197,189	3%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$1,094,252	\$1,131,801	\$37,549	3%
14	Electroencephalography	\$0	\$0	\$0	0%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,322,920	\$1,249,534	(\$73,386)	-6%
19	Pulmonary Function	\$109,148	\$90,807	(\$18,341)	-17%
20	Intravenous Therapy	\$332,509	\$364,203	\$31,694	10%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$12,691,211	\$12,920,123	\$228,912	2%
25	MRI	\$1,515,570	\$1,407,343	(\$108,227)	-7%
26	PET Scan	\$74,222	\$0	(\$74,222)	-100%
27	PET/CT Scan	\$0	\$138,841	\$138,841	0%
28	Endoscopy	\$2,896,891	\$3,128,938	\$232,047	8%
29	Sleep Center	\$905,188	\$967,822	\$62,634	7%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$177,999	\$148,047	(\$29,952)	-17%
32	Occupational Therapy / Physical Therapy	\$873,582	\$800,049	(\$73,533)	-8%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,230,331	\$2,097,175	(\$133,156)	-6%
	<b>Total Special Services</b>	<b>\$66,067,270</b>	<b>\$66,586,798</b>	<b>\$519,528</b>	<b>1%</b>
	<b>D. Routine Services:</b>				
1	Medical & Surgical Units	\$19,212,084	\$18,651,936	(\$560,148)	-3%
2	Intensive Care Unit	\$0	\$0	\$0	0%
3	Coronary Care Unit	\$0	\$0	\$0	0%

**MIDSTATE MEDICAL CENTER**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2013**  
**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 <u>ACTUAL</u>	FY 2013 <u>ACTUAL</u>	AMOUNT <u>DIFFERENCE</u>	% <u>DIFFERENCE</u>
4	Psychiatric Unit	\$2,076,441	\$1,856,551	(\$219,890)	-11%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,806,530	\$4,916,780	\$110,250	2%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
<b>Total Routine Services</b>		<b>\$26,095,055</b>	<b>\$25,425,267</b>	<b>(\$669,788)</b>	<b>-3%</b>
<b>E. Other Departments:</b>					
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
<b>Total Operating Expenses - All Departments*</b>		<b>\$221,306,295</b>	<b>\$210,520,148</b>	<b>(\$10,786,147)</b>	<b>-5%</b>
<b>*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>					

<b>MIDSTATE MEDICAL CENTER</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
		<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
<b>A. Statement of Operations Summary</b>				
1	Total Net Patient Revenue	\$196,755,436	\$218,353,748	\$217,746,204
2	Other Operating Revenue	14,584,411	27,846,850	9,116,321
3	Total Operating Revenue	\$211,339,847	\$246,200,598	\$226,862,525
4	Total Operating Expenses	203,675,287	221,306,295	210,520,148
5	Income/(Loss) From Operations	\$7,664,560	\$24,894,303	\$16,342,377
6	Total Non-Operating Revenue	455,490	1,222,491	4,228,077
7	Excess/(Deficiency) of Revenue Over Expenses	\$8,120,050	\$26,116,794	\$20,570,454
<b>B. Profitability Summary</b>				
1	Hospital Operating Margin	3.62%	10.06%	7.07%
2	Hospital Non Operating Margin	0.22%	0.49%	1.83%
3	Hospital Total Margin	3.83%	10.56%	8.90%
4	Income/(Loss) From Operations	\$7,664,560	\$24,894,303	\$16,342,377
5	Total Operating Revenue	\$211,339,847	\$246,200,598	\$226,862,525
6	Total Non-Operating Revenue	\$455,490	\$1,222,491	\$4,228,077
7	Total Revenue	\$211,795,337	\$247,423,089	\$231,090,602
8	Excess/(Deficiency) of Revenue Over Expenses	\$8,120,050	\$26,116,794	\$20,570,454
<b>C. Net Assets Summary</b>				
1	Hospital Unrestricted Net Assets	\$52,820,335	\$73,637,750	\$96,806,371
2	Hospital Total Net Assets	\$67,247,606	\$89,918,628	\$113,586,026
3	Hospital Change in Total Net Assets	(\$6,496,401)	\$22,671,022	\$23,667,398
4	Hospital Change in Total Net Assets %	91.2%	33.7%	26.3%
<b>D. Cost Data Summary</b>				
1	<b>Ratio of Cost to Charges</b>	<b>0.47</b>	<b>0.44</b>	<b>0.41</b>
2	Total Operating Expenses	\$203,675,287	\$221,306,295	\$210,520,148
3	Total Gross Revenue	\$423,415,942	\$479,645,635	\$505,047,658
4	Total Other Operating Revenue	\$14,584,411	\$27,519,593	\$9,116,321

<b>MIDSTATE MEDICAL CENTER</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
<b>5</b>	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.47</b>	<b>1.56</b>	<b>1.72</b>
6	Total Non-Government Payments	\$101,704,474	\$114,144,204	\$118,317,341
7	Total Uninsured Payments	\$823,172	\$1,185,069	\$3,103,407
8	Total Non-Government Charges	\$158,613,621	\$176,670,460	\$175,772,877
9	Total Uninsured Charges	\$10,698,278	\$11,229,938	\$12,499,941
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.79</b>	<b>0.84</b>	<b>0.84</b>
11	Total Medicare Payments	\$70,035,314	\$77,225,155	\$77,840,664
12	Total Medicare Charges	\$190,740,350	\$211,253,256	\$227,070,873
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.62</b>	<b>0.65</b>	<b>0.69</b>
14	Total Medicaid Payments	\$20,754,012	\$25,550,883	\$28,414,839
15	Total Medicaid Charges	\$71,590,248	\$90,683,066	\$101,018,064
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$5,068,840</b>	<b>\$4,666,905</b>	<b>\$3,847,332</b>
17	Charity Care	\$3,025,038	\$4,233,596	\$7,131,143
18	Bad Debts	\$7,875,420	\$6,461,499	\$2,265,391
19	Total Uncompensated Care	\$10,900,458	\$10,695,095	\$9,396,534
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>2.5%</b>	<b>2.1%</b>	<b>1.8%</b>
21	Total Operating Expenses	\$203,675,287	\$221,306,295	\$210,520,148
<b>E. Liquidity Measures Summary</b>				
1	<b><u>Current Ratio</u></b>	2	3	2
2	Total Current Assets	\$48,912,681	\$91,144,165	\$73,423,487
3	Total Current Liabilities	\$25,390,909	\$29,607,292	\$30,486,002
4	<b><u>Days Cash on Hand</u></b>	37	81	50
5	Cash and Cash Equivalents	\$19,361,929	\$46,117,517	\$27,158,493
6	Short Term Investments	0	0	0

<b>MIDSTATE MEDICAL CENTER</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
7	Total Cash and Short Term Investments	\$19,361,929	\$46,117,517	\$27,158,493
8	Total Operating Expenses	\$203,675,287	\$221,306,295	\$210,520,148
9	Depreciation Expense	\$12,845,628	\$12,961,930	\$13,104,256
10	Operating Expenses less Depreciation Expense	\$190,829,659	\$208,344,365	\$197,415,892
11	<b>Days Revenue in Patient Accounts Receivable</b>	<b>41</b>	<b>36</b>	<b>49</b>
12	Net Patient Accounts Receivable	\$23,676,854	\$25,147,640	\$27,767,137
13	Due From Third Party Payers	\$0	\$0	\$1,517,735
14	Due To Third Party Payers	\$1,800,530	\$3,562,417	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$21,876,324	\$21,585,223	\$29,284,872
16	Total Net Patient Revenue	\$196,755,436	\$218,353,748	\$217,746,204
17	<b>Average Payment Period</b>	<b>49</b>	<b>52</b>	<b>56</b>
18	Total Current Liabilities	\$25,390,909	\$29,607,292	\$30,486,002
19	Total Operating Expenses	\$203,675,287	\$221,306,295	\$210,520,148
20	Depreciation Expense	\$12,845,628	\$12,961,930	\$13,104,256
21	Total Operating Expenses less Depreciation Expense	\$190,829,659	\$208,344,365	\$197,415,892
<b>F. Solvency Measures Summary</b>				
1	<b>Equity Financing Ratio</b>	<b>27.9</b>	<b>30.9</b>	<b>41.6</b>
2	Total Net Assets	\$67,247,606	\$89,918,628	\$113,586,026
3	Total Assets	\$241,095,990	\$291,421,640	\$273,104,731
4	<b>Cash Flow to Total Debt Ratio</b>	<b>18.4</b>	<b>33.0</b>	<b>28.5</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$8,120,050	\$26,116,794	\$20,570,454
6	Depreciation Expense	\$12,845,628	\$12,961,930	\$13,104,256
7	Excess of Revenues Over Expenses and Depreciation Expense	\$20,965,678	\$39,078,724	\$33,674,710
8	Total Current Liabilities	\$25,390,909	\$29,607,292	\$30,486,002
9	Total Long Term Debt	\$88,754,643	\$88,731,315	\$87,806,192
10	Total Current Liabilities and Total Long Term Debt	\$114,145,552	\$118,338,607	\$118,292,194

<b>MIDSTATE MEDICAL CENTER</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
11	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>56.9</b>	<b>49.7</b>	<b>43.6</b>
12	Total Long Term Debt	\$88,754,643	\$88,731,315	\$87,806,192
13	Total Net Assets	\$67,247,606	\$89,918,628	\$113,586,026
14	Total Long Term Debt and Total Net Assets	\$156,002,249	\$178,649,943	\$201,392,218
15	<b><u>Debt Service Coverage Ratio</u></b>	<b>0.3</b>	<b>10.7</b>	<b>8.9</b>
16	Excess Revenues over Expenses	8,120,050	\$26,116,794	\$20,570,454
17	Interest Expense	2,222,925	\$3,996,300	\$3,987,276
18	Depreciation and Amortization Expense	12,845,628	\$12,961,930	\$13,104,256
19	Principal Payments	82,915,000	\$23,328	\$255,545
<b>G. Other Financial Ratios</b>				
20	<b><u>Average Age of Plant</u></b>	<b>8.7</b>	<b>9.6</b>	<b>10.1</b>
21	Accumulated Depreciation	111,313,262	124,211,246	132,718,605
22	Depreciation and Amortization Expense	12,845,628	\$12,961,930	\$13,104,256
<b>H. Utilization Measures Summary</b>				
1	Patient Days	44,604	42,530	41,898
2	Discharges	10,235	10,330	9,847
3	ALOS	4.4	4.1	4.3
4	Staffed Beds	144	144	139
5	Available Beds	-	156	156
6	Licensed Beds	156	156	156
7	Occupancy of Staffed Beds	84.9%	80.9%	82.6%
8	Occupancy of Available Beds	78.3%	74.7%	73.6%
9	Full Time Equivalent Employees	1,018.6	1,054.6	1,028.1
<b>I. Hospital Gross Revenue Payer Mix Percentage</b>				
1	Non-Government Gross Revenue Payer Mix Percentage	34.9%	34.5%	32.3%
2	Medicare Gross Revenue Payer Mix Percentage	45.0%	44.0%	45.0%

<b>MIDSTATE MEDICAL CENTER</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
3	Medicaid Gross Revenue Payer Mix Percentage	16.9%	18.9%	20.0%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.4%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	2.5%	2.3%	2.5%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.2%	0.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$147,915,343	\$165,440,522	\$163,272,936
9	Medicare Gross Revenue (Charges)	\$190,740,350	\$211,253,256	\$227,070,873
10	Medicaid Gross Revenue (Charges)	\$71,590,248	\$90,683,066	\$101,018,064
11	Other Medical Assistance Gross Revenue (Charges)	\$1,707,166	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$10,698,278	\$11,229,938	\$12,499,941
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$764,557	\$1,038,853	\$1,185,844
14	Total Gross Revenue (Charges)	\$423,415,942	\$479,645,635	\$505,047,658
<b>J.</b>	<b><u>Hospital Net Revenue Payer Mix Percentage</u></b>			
1	Non-Government Net Revenue Payer Mix Percentage	52.2%	52.0%	51.2%
2	Medicare Net Revenue Payer Mix Percentage	36.2%	35.5%	34.6%
3	Medicaid Net Revenue Payer Mix Percentage	10.7%	11.8%	12.6%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.3%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.4%	0.5%	1.4%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$100,881,302	\$112,959,135	\$115,213,934
9	Medicare Net Revenue (Payments)	\$70,035,314	\$77,225,155	\$77,840,664
10	Medicaid Net Revenue (Payments)	\$20,754,012	\$25,550,883	\$28,414,839
11	Other Medical Assistance Net Revenue (Payments)	\$519,190	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$823,172	\$1,185,069	\$3,103,407
13	CHAMPUS / TRICARE Net Revenue Payments)	\$285,677	\$309,744	\$246,567
14	Total Net Revenue (Payments)	\$193,298,667	\$217,229,986	\$224,819,411
<b>K.</b>	<b><u>Discharges</u></b>			
1	Non-Government (Including Self Pay / Uninsured)	3,252	3,098	2,804
2	Medicare	4,826	5,054	4,908
3	Medical Assistance	2,138	2,151	2,111
4	Medicaid	2,106	2,151	2,111
5	Other Medical Assistance	32	-	-
6	CHAMPUS / TRICARE	19	27	24

## MIDSTATE MEDICAL CENTER

## TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

## REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
7	Uninsured (Included In Non-Government)	209	254	242
8	Total	10,235	10,330	9,847
<b>L. Case Mix Index</b>				
1	Non-Government (Including Self Pay / Uninsured)	1.02963	1.09210	1.10877
2	Medicare	1.40688	1.38600	1.52013
3	Medical Assistance	0.90426	0.93073	0.98576
4	Medicaid	0.90081	0.93073	0.98576
5	Other Medical Assistance	1.13153	0.00000	0.00000
6	CHAMPUS / TRICARE	0.91139	0.70038	0.72830
7	Uninsured (Included In Non-Government)	0.97810	0.97825	0.94379
8	Total Case Mix Index	1.18110	1.20127	1.28650
<b>M. Emergency Department Visits</b>				
1	Emergency Room - Treated and Admitted	6,629	7,232	6,894
2	Emergency Room - Treated and Discharged	78,336	84,907	52,897
3	Total Emergency Room Visits	84,965	92,139	59,791

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY</b>					
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>	<b>(6)</b>
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$4,050,424	\$3,095,986	(\$954,438)	-24%
2	Inpatient Payments	\$1,499,223	\$1,192,066	(\$307,157)	-20%
3	Outpatient Charges	\$3,124,031	\$2,239,987	(\$884,044)	-28%
4	Outpatient Payments	\$996,254	\$713,884	(\$282,370)	-28%
5	Discharges	144	115	(29)	-20%
6	Patient Days	798	602	(196)	-25%
7	Outpatient Visits (Excludes ED Visits)	1,016	925	(91)	-9%
8	Emergency Department Outpatient Visits	299	188	(111)	-37%
9	Emergency Department Inpatient Admissions	124	104	(20)	-16%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$7,174,455</b>	<b>\$5,335,973</b>	<b>(\$1,838,482)</b>	<b>-26%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$2,495,477</b>	<b>\$1,905,950</b>	<b>(\$589,527)</b>	<b>-24%</b>
<b>B. CIGNA HEALTHCARE</b>					
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%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$5,322,990	\$6,763,542	\$1,440,552	27%
2	Inpatient Payments	\$2,029,217	\$2,766,769	\$737,552	36%
3	Outpatient Charges	\$5,685,531	\$8,287,112	\$2,601,581	46%
4	Outpatient Payments	\$1,628,336	\$2,252,437	\$624,101	38%
5	Discharges	208	252	44	21%
6	Patient Days	891	1,171	280	31%
7	Outpatient Visits (Excludes ED Visits)	2,246	2,720	474	21%
8	Emergency Department Outpatient Visits	519	475	(44)	-8%
9	Emergency Department Inpatient Admissions	162	210	48	30%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$11,008,521</b>	<b>\$15,050,654</b>	<b>\$4,042,133</b>	<b>37%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$3,657,553</b>	<b>\$5,019,206</b>	<b>\$1,361,653</b>	<b>37%</b>
<b>D. HEALTHNET OF CONNECTICUT</b>					
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%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY</b>					
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>	<b>(6)</b>
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>E. OTHER MEDICARE MANAGED CARE</b>					
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%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$242,889	\$0	(\$242,889)	-100%
2	Inpatient Payments	\$119,268	\$0	(\$119,268)	-100%
3	Outpatient Charges	\$190,529	\$0	(\$190,529)	-100%
4	Outpatient Payments	\$46,680	\$0	(\$46,680)	-100%
5	Discharges	12	0	(12)	-100%
6	Patient Days	43	0	(43)	-100%
7	Outpatient Visits (Excludes ED Visits)	63	0	(63)	-100%
8	Emergency Department Outpatient Visits	28	0	(28)	-100%
9	Emergency Department Inpatient Admissions	9	0	(9)	-100%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$433,418</b>	<b>\$0</b>	<b>(\$433,418)</b>	<b>-100%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$165,948</b>	<b>\$0</b>	<b>(\$165,948)</b>	<b>-100%</b>
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
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%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$912,818	\$1,310,984	\$398,166	44%
2	Inpatient Payments	\$307,983	\$489,514	\$181,531	59%
3	Outpatient Charges	\$714,287	\$909,039	\$194,752	27%
4	Outpatient Payments	\$127,929	\$219,624	\$91,695	72%
5	Discharges	34	46	12	35%
6	Patient Days	194	223	29	15%
7	Outpatient Visits (Excludes ED Visits)	230	312	82	36%
8	Emergency Department Outpatient Visits	88	145	57	65%
9	Emergency Department Inpatient Admissions	34	43	9	26%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$1,627,105</b>	<b>\$2,220,023</b>	<b>\$592,918</b>	<b>36%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$435,912</b>	<b>\$709,138</b>	<b>\$273,226</b>	<b>63%</b>
<b>I. AETNA</b>					

<b>MIDSTATE MEDICAL CENTER</b>					
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<b>FISCAL YEAR 2013</b>					
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<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>	<b>(6)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2012 ACTUAL</b>	<b>FY 2013 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
1	Inpatient Charges	\$1,225,483	\$3,597,321	\$2,371,838	194%
2	Inpatient Payments	\$448,723	\$1,388,831	\$940,108	210%
3	Outpatient Charges	\$1,090,004	\$3,163,088	\$2,073,084	190%
4	Outpatient Payments	\$318,499	\$777,803	\$459,304	144%
5	Discharges	49	134	85	173%
6	Patient Days	230	669	439	191%
7	Outpatient Visits (Excludes ED Visits)	382	1,169	787	206%
8	Emergency Department Outpatient Visits	117	233	116	99%
9	Emergency Department Inpatient Admissions	47	119	72	153%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$2,315,487</b>	<b>\$6,760,409</b>	<b>\$4,444,922</b>	<b>192%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$767,222</b>	<b>\$2,166,634</b>	<b>\$1,399,412</b>	<b>182%</b>
<b>J. HUMANA</b>					
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%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>K. SECURE HORIZONS</b>					
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%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
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%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>M. UNIVERSAL AMERICAN</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N. EVERCARE</b>					
1	Inpatient Charges	\$12,720,895	\$15,100,571	\$2,379,676	19%
2	Inpatient Payments	\$5,256,253	\$5,791,111	\$534,858	10%
3	Outpatient Charges	\$9,395,874	\$11,451,018	\$2,055,144	22%
4	Outpatient Payments	\$2,402,579	\$2,899,833	\$497,254	21%
5	Discharges	540	562	22	4%
6	Patient Days	2,412	2,836	424	18%
7	Outpatient Visits (Excludes ED Visits)	3,452	4,150	698	20%
8	Emergency Department Outpatient Visits	1,332	1,130	(202)	-15%
9	Emergency Department Inpatient Admissions	497	506	9	2%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$22,116,769</b>	<b>\$26,551,589</b>	<b>\$4,434,820</b>	<b>20%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$7,658,832</b>	<b>\$8,690,944</b>	<b>\$1,032,112</b>	<b>13%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
<b>TOTAL INPATIENT CHARGES</b>		<b>\$24,475,499</b>	<b>\$29,868,404</b>	<b>\$5,392,905</b>	<b>22%</b>
<b>TOTAL INPATIENT PAYMENTS</b>		<b>\$9,660,667</b>	<b>\$11,628,291</b>	<b>\$1,967,624</b>	<b>20%</b>
<b>TOTAL OUTPATIENT CHARGES</b>		<b>\$20,200,256</b>	<b>\$26,050,244</b>	<b>\$5,849,988</b>	<b>29%</b>
<b>TOTAL OUTPATIENT PAYMENTS</b>		<b>\$5,520,277</b>	<b>\$6,863,581</b>	<b>\$1,343,304</b>	<b>24%</b>
<b>TOTAL DISCHARGES</b>		987	1,109	122	12%
<b>TOTAL PATIENT DAYS</b>		4,568	5,501	933	20%
<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>		7,389	9,276	1,887	26%
<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>		2,383	2,171	(212)	-9%
<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>		873	982	109	12%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$44,675,755</b>	<b>\$55,918,648</b>	<b>\$11,242,893</b>	<b>25%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$15,180,944</b>	<b>\$18,491,872</b>	<b>\$3,310,928</b>	<b>22%</b>

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY</b>					
<b>(1)</b>	<b>(2)</b>	<b>(3)</b> <b>FY 2012</b> <b>ACTUAL</b>	<b>(4)</b> <b>FY 2013</b> <b>ACTUAL</b>	<b>(5)</b> <b>AMOUNT</b> <b>DIFFERENCE</b>	<b>(6)</b> <b>% DIFFERENCE</b>
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
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%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1 Inpatient Charges		\$2,019,081	\$0	(\$2,019,081)	-100%
2 Inpatient Payments		\$473,526	\$0	(\$473,526)	-100%
3 Outpatient Charges		\$4,591,255	\$0	(\$4,591,255)	-100%
4 Outpatient Payments		\$1,186,256	\$0	(\$1,186,256)	-100%
5 Discharges		160	0	(160)	-100%
6 Patient Days		437	0	(437)	-100%
7 Outpatient Visits (Excludes ED Visits)		1,266	0	(1,266)	-100%
8 Emergency Department Outpatient Visits		4,091	0	(4,091)	-100%
9 Emergency Department Inpatient Admissions		46	0	(46)	-100%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$6,610,336</b>	<b>\$0</b>	<b>(\$6,610,336)</b>	<b>-100%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$1,659,782</b>	<b>\$0</b>	<b>(\$1,659,782)</b>	<b>-100%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
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%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>D. OTHER MEDICAID MANAGED CARE</b>					
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%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3) FY 2012 ACTUAL	(4) FY 2013 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>E. WELLCARE OF CONNECTICUT</b>					
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%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>					
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%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>G. UNITED HEALTHCARE</b>					
1	Inpatient Charges	\$98,280	\$0	(\$98,280)	-100%
2	Inpatient Payments	\$22,839	\$0	(\$22,839)	-100%
3	Outpatient Charges	\$285,922	\$0	(\$285,922)	-100%
4	Outpatient Payments	\$78,962	\$0	(\$78,962)	-100%
5	Discharges	9	0	(9)	-100%
6	Patient Days	19	0	(19)	-100%
7	Outpatient Visits (Excludes ED Visits)	65	0	(65)	-100%
8	Emergency Department Outpatient Visits	271	0	(271)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$384,202</b>	<b>\$0</b>	<b>(\$384,202)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$101,801</b>	<b>\$0</b>	<b>(\$101,801)</b>	<b>-100%</b>
<b>H. AETNA</b>					
1	Inpatient Charges	\$294,832	\$0	(\$294,832)	-100%
2	Inpatient Payments	\$134,016	\$0	(\$134,016)	-100%
3	Outpatient Charges	\$423,719	\$0	(\$423,719)	-100%
4	Outpatient Payments	\$102,413	\$0	(\$102,413)	-100%
5	Discharges	36	0	(36)	-100%
6	Patient Days	80	0	(80)	-100%
7	Outpatient Visits (Excludes ED Visits)	101	0	(101)	-100%
8	Emergency Department Outpatient Visits	495	0	(495)	-100%
9	Emergency Department Inpatient Admissions	3	0	(3)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$718,551</b>	<b>\$0</b>	<b>(\$718,551)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$236,429</b>	<b>\$0</b>	<b>(\$236,429)</b>	<b>-100%</b>

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3) FY 2012 ACTUAL	(4) FY 2013 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>II. TOTAL MEDICAID MANAGED CARE</b>					
TOTAL INPATIENT CHARGES		\$2,412,193	\$0	(\$2,412,193)	-100%
TOTAL INPATIENT PAYMENTS		\$630,381	\$0	(\$630,381)	-100%
TOTAL OUTPATIENT CHARGES		\$5,300,896	\$0	(\$5,300,896)	-100%
TOTAL OUTPATIENT PAYMENTS		\$1,367,631	\$0	(\$1,367,631)	-100%
TOTAL DISCHARGES		205	0	(205)	-100%
TOTAL PATIENT DAYS		536	0	(536)	-100%
TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)		1,432	0	(1,432)	-100%
TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS		4,857	0	(4,857)	-100%
TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS		49	0	(49)	-100%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$7,713,089	\$0	(\$7,713,089)	-100%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$1,998,012	\$0	(\$1,998,012)	-100%

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2013

## REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION

(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$47,972,840	\$28,465,876	(\$19,506,964)	-41%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$25,147,640	\$27,767,137	\$2,619,497	10%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$6,319,474	\$2,663,150	(\$3,656,324)	-58%
6	Due From Third Party Payers	\$0	\$1,517,735	\$1,517,735	0%
7	Inventories of Supplies	\$2,649,756	\$2,719,853	\$70,097	3%
8	Prepaid Expenses	\$2,789,213	\$4,945,131	\$2,155,918	77%
9	Other Current Assets	\$9,036,167	\$7,456,493	(\$1,579,674)	-17%
<b>Total Current Assets</b>		<b>\$93,915,090</b>	<b>\$75,535,375</b>	<b>(\$18,379,715)</b>	<b>-20%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$13,223,292	\$13,953,158	\$729,866	6%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$6,312,325	\$6,312,325	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$65,932	\$62,809	(\$3,123)	-5%
<b>Total Noncurrent Assets Whose Use is Limited:</b>		<b>\$19,601,549</b>	<b>\$20,328,292</b>	<b>\$726,743</b>	<b>4%</b>
5	Interest in Net Assets of Foundation	\$0	\$38,819,627	\$38,819,627	0%
6	Long Term Investments	\$14,919,838	\$0	(\$14,919,838)	-100%
7	Other Noncurrent Assets	\$36,966,559	\$15,933,679	(\$21,032,880)	-57%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$252,998,135	\$255,439,409	\$2,441,274	1%
2	Less: Accumulated Depreciation	\$126,840,826	\$134,829,314	\$7,988,488	\$0
<b>Property, Plant and Equipment, Net</b>		<b>\$126,157,309</b>	<b>\$120,610,095</b>	<b>(\$5,547,214)</b>	<b>-4%</b>
3	Construction in Progress	\$1,631,461	\$1,879,662	\$248,201	15%
<b>Total Net Fixed Assets</b>		<b>\$127,788,770</b>	<b>\$122,489,757</b>	<b>(\$5,299,013)</b>	<b>-4%</b>
<b>Total Assets</b>					
<b>Total Assets</b>		<b>\$293,191,806</b>	<b>\$273,106,730</b>	<b>(\$20,085,076)</b>	<b>-7%</b>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2013

## REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION

(1)	(2)	(3) FY 2012 <u>ACTUAL</u>	(4) FY 2013 <u>ACTUAL</u>	(5) AMOUNT <u>DIFFERENCE</u>	(6) % <u>DIFFERENCE</u>
LINE	DESCRIPTION				
1	Accounts Payable and Accrued Expenses	\$11,891,063	\$13,352,496	\$1,461,433	12%
2	Salaries, Wages and Payroll Taxes	\$10,062,117	\$9,070,645	(\$991,472)	-10%
3	Due To Third Party Payers	\$3,562,417	\$0	(\$3,562,417)	-100%
4	Due To Affiliates	\$0	\$1,445,398	\$1,445,398	0%
5	Current Portion of Long Term Debt	\$0	\$669,578	\$669,578	0%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$4,665,737	\$6,458,439	\$1,792,702	38%
<b>Total Current Liabilities</b>		<b>\$30,181,334</b>	<b>\$30,996,556</b>	<b>\$815,222</b>	<b>3%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$88,731,315	\$87,806,192	(\$925,123)	-1%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
<b>Total Long Term Debt</b>		<b>\$88,731,315</b>	<b>\$87,806,192</b>	<b>(\$925,123)</b>	<b>-1%</b>
3	Accrued Pension Liability	\$56,785,518	\$18,941,059	(\$37,844,459)	-67%
4	Other Long Term Liabilities	\$26,866,681	\$22,700,592	(\$4,166,089)	-16%
<b>Total Long Term Liabilities</b>		<b>\$172,383,514</b>	<b>\$129,447,843</b>	<b>(\$42,935,671)</b>	<b>-25%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$74,346,080	\$95,882,676	\$21,536,596	29%
2	Temporarily Restricted Net Assets	\$2,279,087	\$2,047,687	(\$231,400)	-10%
3	Permanently Restricted Net Assets	\$14,001,791	\$14,731,968	\$730,177	5%
<b>Total Net Assets</b>		<b>\$90,626,958</b>	<b>\$112,662,331</b>	<b>\$22,035,373</b>	<b>24%</b>
<b>Total Liabilities and Net Assets</b>		<b>\$293,191,806</b>	<b>\$273,106,730</b>	<b>(\$20,085,076)</b>	<b>-7%</b>

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2013

## REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION

(1)	(2)	(3) FY 2012 <u>ACTUAL</u>	(4) FY 2013 <u>ACTUAL</u>	(5) AMOUNT <u>DIFFERENCE</u>	(6) % <u>DIFFERENCE</u>
<u>LINE</u>	<u>DESCRIPTION</u>				
<b>A. <u>Operating Revenue:</u></b>					
1	Total Gross Patient Revenue	\$479,645,635	\$505,047,658	\$25,402,023	5%
2	Less: Allowances	\$257,058,291	\$277,904,920	\$20,846,629	8%
3	Less: Charity Care	\$4,233,596	\$7,131,143	\$2,897,547	68%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$218,353,748</b>	<b>\$220,011,595</b>	<b>\$1,657,847</b>	<b>1%</b>
5	Provision for Bad Debts	\$0	\$2,265,391	\$2,265,391	0%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$218,353,748</b>	<b>\$217,746,204</b>	<b>(\$607,544)</b>	<b>0%</b>
6	Other Operating Revenue	\$41,887,116	\$18,894,548	(\$22,992,568)	-55%
7	Net Assets Released from Restrictions	\$327,257	\$245,321	(\$81,936)	-25%
	<b>Total Operating Revenue</b>	<b>\$260,568,121</b>	<b>\$236,886,073</b>	<b>(\$23,682,048)</b>	<b>-9%</b>
<b>B. <u>Operating Expenses:</u></b>					
1	Salaries and Wages	\$78,095,938	\$76,115,980	(\$1,979,958)	-3%
2	Fringe Benefits	\$28,749,594	\$22,947,534	(\$5,802,060)	-20%
3	Physicians Fees	\$6,593,565	\$6,572,446	(\$21,119)	0%
4	Supplies and Drugs	\$30,249,936	\$32,274,734	\$2,024,798	7%
5	Depreciation and Amortization	\$13,214,810	\$13,310,897	\$96,087	1%
6	Bad Debts	\$6,461,499	\$0	(\$6,461,499)	-100%
7	Interest Expense	\$3,996,300	\$3,987,276	(\$9,024)	0%
8	Malpractice Insurance Cost	\$4,164,372	\$2,356,019	(\$1,808,353)	-43%
9	Other Operating Expenses	\$72,620,142	\$65,347,599	(\$7,272,543)	-10%
	<b>Total Operating Expenses</b>	<b>\$244,146,156</b>	<b>\$222,912,485</b>	<b>(\$21,233,671)</b>	<b>-9%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$16,421,965</b>	<b>\$13,973,588</b>	<b>(\$2,448,377)</b>	<b>-15%</b>
<b>C. <u>Non-Operating Revenue:</u></b>					
1	Income from Investments	\$92,682	\$51,290	(\$41,392)	-45%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$1,355,485	\$4,886,057	\$3,530,572	260%
	<b>Total Non-Operating Revenue</b>	<b>\$1,448,167</b>	<b>\$4,937,347</b>	<b>\$3,489,180</b>	<b>241%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$17,870,132</b>	<b>\$18,910,935</b>	<b>\$1,040,803</b>	<b>6%</b>
	<b>Other Adjustments:</b>				
	Unrealized Gains/(Losses)	\$1,362,036	(\$1,295,573)	(\$2,657,609)	-195%

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

## REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION

(1)	(2)	(3) FY 2012 <u>ACTUAL</u>	(4) FY 2013 <u>ACTUAL</u>	(5) AMOUNT <u>DIFFERENCE</u>	(6) % <u>DIFFERENCE</u>
	All Other Adjustments	(\$1,587,712)	\$586,303	\$2,174,015	-137%
	<b>Total Other Adjustments</b>	<b>(\$225,676)</b>	<b>(\$709,270)</b>	<b>(\$483,594)</b>	<b>214%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$17,644,456</b>	<b>\$18,201,665</b>	<b>\$557,209</b>	<b>3%</b>

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		FY 2011	FY 2012	FY 2013
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$196,755,436	\$218,353,748	\$217,746,204
2	Other Operating Revenue	27,400,731	42,214,373	19,139,869
3	Total Operating Revenue	\$224,156,167	\$260,568,121	\$236,886,073
4	Total Operating Expenses	216,717,629	244,146,156	222,912,485
5	Income/(Loss) From Operations	\$7,438,538	\$16,421,965	\$13,973,588
6	Total Non-Operating Revenue	455,490	1,222,491	4,228,077
7	Excess/(Deficiency) of Revenue Over Expenses	\$7,894,028	\$17,644,456	\$18,201,665
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	3.31%	6.27%	5.80%
2	Parent Corporation Non-Operating Margin	0.20%	0.47%	1.75%
3	Parent Corporation Total Margin	3.51%	6.74%	7.55%
4	Income/(Loss) From Operations	\$7,438,538	\$16,421,965	\$13,973,588
5	Total Operating Revenue	\$224,156,167	\$260,568,121	\$236,886,073
6	Total Non-Operating Revenue	\$455,490	\$1,222,491	\$4,228,077
7	Total Revenue	\$224,611,657	\$261,790,612	\$241,114,150
8	Excess/(Deficiency) of Revenue Over Expenses	\$7,894,028	\$17,644,456	\$18,201,665
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$57,976,004	\$74,346,080	\$95,882,676
2	Parent Corporation Total Net Assets	\$72,403,275	\$90,626,958	\$112,662,331
3	Parent Corporation Change in Total Net Assets	(\$4,672,423)	\$18,223,683	\$22,035,373
4	Parent Corporation Change in Total Net Assets %	93.9%	25.2%	24.3%
<b>D. Liquidity Measures Summary</b>				
1	<b>Current Ratio</b>	<b>2.17</b>	<b>3.11</b>	<b>2.44</b>
2	Total Current Assets	\$56,418,567	\$93,915,090	\$75,535,375
3	Total Current Liabilities	\$26,021,890	\$30,181,334	\$30,996,556

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		FY 2011	FY 2012	FY 2013
4	<b>Days Cash on Hand</b>	37	76	50
5	Cash and Cash Equivalents	\$20,898,243	\$47,972,840	\$28,465,876
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$20,898,243	\$47,972,840	\$28,465,876
8	Total Operating Expenses	\$216,717,629	\$244,146,156	\$222,912,485
9	Depreciation Expense	\$13,144,617	\$13,214,810	\$13,310,897
10	Operating Expenses less Depreciation Expense	\$203,573,012	\$230,931,346	\$209,601,588
11	<b>Days Revenue in Patient Accounts Receivable</b>	52	36	49
12	Net Patient Accounts Receivable	\$ 29,581,747	\$ 25,147,640	\$ 27,767,137
13	Due From Third Party Payers	\$0	\$0	\$1,517,735
14	Due To Third Party Payers	\$1,800,530	\$3,562,417	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 27,781,217	\$ 21,585,223	\$ 29,284,872
16	Total Net Patient Revenue	\$196,755,436	\$218,353,748	\$217,746,204
17	<b>Average Payment Period</b>	47	48	54
18	Total Current Liabilities	\$26,021,890	\$30,181,334	\$30,996,556
19	Total Operating Expenses	\$216,717,629	\$244,146,156	\$222,912,485
20	Depreciation Expense	\$13,144,617	\$13,214,810	\$13,310,897
20	Total Operating Expenses less Depreciation Expense	\$203,573,012	\$230,931,346	\$209,601,588
E.	<b>Solvency Measures Summary</b>			
1	<b>Equity Financing Ratio</b>	29.3	30.9	41.3
2	Total Net Assets	\$72,403,275	\$90,626,958	\$112,662,331
3	Total Assets	\$247,362,082	\$293,191,806	\$273,106,730
4	<b>Cash Flow to Total Debt Ratio</b>	18.3	26.0	26.5
5	Excess/(Deficiency) of Revenues Over Expenses	\$7,894,028	\$17,644,456	\$18,201,665

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
6	Depreciation Expense	\$13,144,617	\$13,214,810	\$13,310,897
7	Excess of Revenues Over Expenses and Depreciation Expense	\$21,038,645	\$30,859,266	\$31,512,562
8	Total Current Liabilities	\$26,021,890	\$30,181,334	\$30,996,556
9	Total Long Term Debt	\$88,754,643	\$88,731,315	\$87,806,192
10	Total Current Liabilities and Total Long Term Debt	\$114,776,533	\$118,912,649	\$118,802,748
11	<u>Long Term Debt to Capitalization Ratio</u>	55.1	49.5	43.8
12	Total Long Term Debt	\$88,754,643	\$88,731,315	\$87,806,192
13	Total Net Assets	\$72,403,275	\$90,626,958	\$112,662,331
14	Total Long Term Debt and Total Net Assets	\$161,157,918	\$179,358,273	\$200,468,523

<b>MIDSTATE MEDICAL CENTER</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2013</b> <b>REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT</b>								
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
LINE	DESCRIPTION	PATIENT DAYS	DISCHARGES OR CU/CCU # PATIENT	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS
1	Adult Medical/Surgical	33,608	7,777	7,777	106	116	86.9%	79.4%
2	ICU/CCU (Excludes Neonatal ICU)	1,673	579	0	7	9	65.5%	50.9%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	2,031	196	196	6	6	92.7%	92.7%
	<b>TOTAL PSYCHIATRIC</b>	<b>2,031</b>	<b>196</b>	<b>196</b>	<b>6</b>	<b>6</b>	<b>92.7%</b>	<b>92.7%</b>
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	2,365	949	949	10	13	64.8%	49.8%
7	Newborn	2,221	925	925	10	12	60.8%	50.7%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>39,677</b>	<b>8,922</b>	<b>8,922</b>	<b>129</b>	<b>144</b>	<b>84.3%</b>	<b>75.5%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>41,898</b>	<b>9,847</b>	<b>9,847</b>	<b>139</b>	<b>156</b>	<b>82.6%</b>	<b>73.6%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>41,898</b>	<b>9,847</b>	<b>9,847</b>	<b>139</b>	<b>156</b>	<b>82.6%</b>	<b>73.6%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>42,530</b>	<b>10,330</b>	<b>10,330</b>	<b>144</b>	<b>156</b>	<b>80.9%</b>	<b>74.7%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-632</b>	<b>-483</b>	<b>-483</b>	<b>-5</b>	<b>0</b>	<b>1.7%</b>	<b>-1.1%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-1%</b>	<b>-5%</b>	<b>-5%</b>	<b>-3%</b>	<b>0%</b>	<b>2%</b>	<b>-1%</b>
	Total Licensed Beds and Bassinets	156						
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>								
<b>Note: Total discharges do not include ICU/CCU patients.</b>								

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	5,389	4,903	-486	-9%
2	Outpatient Scans (Excluding Emergency Department Scans)	4,293	3,717	-576	-13%
3	Emergency Department Scans	7,660	7,733	73	1%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>17,342</b>	<b>16,353</b>	<b>-989</b>	<b>-6%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	1,700	1,486	-214	-13%
2	Outpatient Scans (Excluding Emergency Department Scans)	5,754	5,177	-577	-10%
3	Emergency Department Scans	507	634	127	25%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>7,961</b>	<b>7,297</b>	<b>-664</b>	<b>-8%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	14	8	-6	-43%
2	Outpatient Scans (Excluding Emergency Department Scans)	490	476	-14	-3%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>504</b>	<b>484</b>	<b>-20</b>	<b>-4%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	126	115	-11	-9%
2	Outpatient Procedures	5,095	5,128	33	1%
	<b>Total Linear Accelerator Procedures</b>	<b>5,221</b>	<b>5,243</b>	<b>22</b>	<b>0%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Cardiac Catheterization Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>

<b>MIDSTATE MEDICAL CENTER</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	2,301	2,267	-34	-1%
2	Outpatient Surgical Procedures	6,213	6,055	-158	-3%
	<b>Total Surgical Procedures</b>	<b>8,514</b>	<b>8,322</b>	<b>-192</b>	<b>-2%</b>
<b>J. Endoscopy Procedures</b>					
1	Inpatient Endoscopy Procedures	1,182	1,145	-37	-3%
2	Outpatient Endoscopy Procedures	7,046	7,319	273	4%
	<b>Total Endoscopy Procedures</b>	<b>8,228</b>	<b>8,464</b>	<b>236</b>	<b>3%</b>
<b>K. Hospital Emergency Room Visits</b>					
1	Emergency Room Visits: Treated and Admitted	7,232	6,894	-338	-5%
2	Emergency Room Visits: Treated and Discharged	84,907	52,897	-32,010	-38%
	<b>Total Emergency Room Visits</b>	<b>92,139</b>	<b>59,791</b>	<b>-32,348</b>	<b>-35%</b>
<b>L. Hospital Clinic Visits</b>					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	33,972	33,972	0%
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%
9	Specialty Clinic Visits	2,298	0	-2,298	-100%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%
13	Specialty Clinic Visits - Other Speciality Clinics	0	2,306	2,306	0%
	<b>Total Hospital Clinic Visits</b>	<b>2,298</b>	<b>36,278</b>	<b>33,980</b>	<b>1479%</b>
<b>M. Other Hospital Outpatient Visits</b>					
1	Rehabilitation (PT/OT/ST)	444	613	169	38%
2	Cardiac Rehabilitation	2,567	2,254	-313	-12%
3	Chemotherapy	3,701	931	-2,770	-75%
4	Gastroenterology	7,046	7,319	273	4%
5	Other Outpatient Visits	68,420	62,972	-5,448	-8%
	<b>Total Other Hospital Outpatient Visits</b>	<b>82,178</b>	<b>74,089</b>	<b>-8,089</b>	<b>-10%</b>
<b>N. Hospital Full Time Equivalent Employees</b>					
1	Total Nursing FTEs	332.6	310.2	-22.4	-7%
2	Total Physician FTEs	43.8	44.7	0.9	2%
3	Total Non-Nursing and Non-Physician FTEs	678.2	673.2	-5.0	-1%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>1,054.6</b>	<b>1,028.1</b>	<b>-26.5</b>	<b>-3%</b>

MIDSTATE MEDICAL CENTER					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT	%
		<u>FY 2012</u>	<u>FY 2013</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
<b>A.</b>	<b><u>Outpatient Surgical Procedures</u></b>				
1	Main hospital campus	6,213	6,055	-158	-3%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>6,213</b>	<b>6,055</b>	<b>-158</b>	<b>-3%</b>
<b>B.</b>	<b><u>Outpatient Endoscopy Procedures</u></b>				
1	Main hospital campus	7,046	7,319	273	4%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>7,046</b>	<b>7,319</b>	<b>273</b>	<b>4%</b>
<b>C.</b>	<b><u>Outpatient Hospital Emergency Room Visits</u></b>				
1	680 S. Main St Cheshire	4,567	0	-4,567	-100%
2	61 Pomeroy Ave	27,877	0	-27,877	-100%
3	Main hospital campus	52,463	52,897	434	1%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>84,907</b>	<b>52,897</b>	<b>-32,010</b>	<b>-38%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

**MIDSTATE MEDICAL CENTER**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2013**

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

LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT	%	
		FY 2012	FY 2013	DIFFERENCE	DIFFERENCE	
<b>I. DATA BY MAJOR PAYER CATEGORY</b>						
<b>A. MEDICARE</b>						
<b>MEDICARE INPATIENT</b>						
1	INPATIENT ACCRUED CHARGES	\$122,637,612	\$130,191,173	\$7,553,561	6%	
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$51,806,794	\$50,847,282	(\$959,512)	-2%	
3	INPATIENT PAYMENTS / INPATIENT CHARGES	42.24%	39.06%	-3.19%	-8%	
4	DISCHARGES	5,054	4,908	(146)	-3%	
5	CASE MIX INDEX (CMI)	1.38600	1.52013	0.13413	10%	
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,004.84400	7,460.79804	455.95404	7%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,395.85	\$6,815.26	(\$580.59)	-8%	
8	PATIENT DAYS	23,891	24,257	366	2%	
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,168.46	\$2,096.19	(\$72.27)	-3%	
10	AVERAGE LENGTH OF STAY	4.7	4.9	0.2	5%	
<b>MEDICARE OUTPATIENT</b>						
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$88,615,644	\$96,879,700	\$8,264,056	9%	
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$25,418,361	\$26,993,382	\$1,575,021	6%	
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	28.68%	27.86%	-0.82%	-3%	
14	OUTPATIENT CHARGES / INPATIENT CHARGES	72.26%	74.41%	2.16%	3%	
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,651.92584	3,652.21049	0.28464	0%	
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,960.26	\$7,390.97	\$430.71	6%	
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>						
17	TOTAL ACCRUED CHARGES	\$211,253,256	\$227,070,873	\$15,817,617	7%	
18	TOTAL ACCRUED PAYMENTS	\$77,225,155	\$77,840,664	\$615,509	1%	
19	TOTAL ALLOWANCES	\$134,028,101	\$149,230,209	\$15,202,108	11%	
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>						
<b>NON-GOVERNMENT INPATIENT</b>						
1	INPATIENT ACCRUED CHARGES	\$55,914,210	\$52,921,319	(\$2,992,891)	-5%	
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$35,838,100	\$35,010,054	(\$828,046)	-2%	
3	INPATIENT PAYMENTS / INPATIENT CHARGES	64.09%	66.15%	2.06%	3%	
4	DISCHARGES	3,098	2,804	(294)	-9%	
5	CASE MIX INDEX (CMI)	1.09210	1.10877	0.01667	2%	
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,383.32580	3,108.99108	(274.33472)	-8%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,592.57	\$11,260.91	\$668.34	6%	
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,196.71)	(\$4,445.64)	(\$1,248.93)	39%	
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$10,815,521)	(\$13,821,470)	(\$3,005,949)	28%	
10	PATIENT DAYS	10,383	9,388	(995)	-10%	
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,451.61	\$3,729.23	\$277.62	8%	
12	AVERAGE LENGTH OF STAY	3.4	3.3	(0.0)	0%	
<b>NON-GOVERNMENT OUTPATIENT</b>						
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$120,756,250	\$122,851,558	\$2,095,308	2%	
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$78,306,104	\$83,307,287	\$5,001,183	6%	
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	64.85%	67.81%	2.96%	5%	

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
16	OUTPATIENT CHARGES / INPATIENT CHARGES	215.97%	232.14%	16.17%	7%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,690,658.11	6,509,206.03	(181,452.08)	-3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$11,703.80	\$12,798.38	\$1,094.58	9%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$4,743.53)	(\$5,407.41)	(\$663.87)	14%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$31,737,370)	(\$35,197,934)	(\$3,460,564)	11%
<b>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</b>					
21	TOTAL ACCRUED CHARGES	\$176,670,460	\$175,772,877	(\$897,583)	-1%
22	TOTAL ACCRUED PAYMENTS	\$114,144,204	\$118,317,341	\$4,173,137	4%
23	TOTAL ALLOWANCES	\$62,526,256	\$57,455,536	(\$5,070,720)	-8%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$42,552,891)	(\$49,019,404)	(\$6,466,513)	15%
<b>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$165,440,521	\$163,272,936	(\$2,167,585)	-1%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$113,609,361	\$115,287,227	\$1,677,866	1%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$51,831,160	\$47,985,709	(\$3,845,451)	-7%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	31.33%	29.39%	-1.94%	
<b>C. UNINSURED</b>					
<b>UNINSURED INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$3,563,947	\$4,451,612	\$887,665	25%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$276,890	\$943,085	\$666,195	241%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	7.77%	21.19%	13.42%	173%
4	DISCHARGES	254	242	(12)	-5%
5	CASE MIX INDEX (CMI)	0.97825	0.94379	(0.03446)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	248,475.50	228,397.18	(20,078.32)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,114.36	\$4,129.14	\$3,014.79	271%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$9,478.21	\$7,131.76	(\$2,346.45)	-25%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,281.50	\$2,686.12	(\$3,595.38)	-57%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,560,798	\$613,501	(\$947,297)	-61%
11	PATIENT DAYS	925	882	(43)	-5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$299.34	\$1,069.26	\$769.92	257%
13	AVERAGE LENGTH OF STAY	3.6	3.6	0.0	0%
<b>UNINSURED OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,665,991	\$8,048,329	\$382,338	5%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$908,179	\$2,160,322	\$1,252,143	138%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	11.85%	26.84%	15.00%	127%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	215.10%	180.80%	-34.30%	-16%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	546,349.80	437,525.92	(108,823.88)	-20%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,662.27	\$4,937.59	\$3,275.32	197%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$10,041.53	\$7,860.79	(\$2,180.74)	-22%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,298.00	\$2,453.38	(\$2,844.61)	-54%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,894,559	\$1,073,419	(\$1,821,139)	-63%
<b>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$11,229,938	\$12,499,941	\$1,270,003	11%

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LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT	%
		FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
24	TOTAL ACCRUED PAYMENTS	\$1,185,069	\$3,103,407	\$1,918,338	162%
25	TOTAL ALLOWANCES	\$10,044,869	\$9,396,534	(\$648,335)	-6%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,455,357	\$1,686,921	(\$2,768,436)	-62%
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$33,140,670	\$36,142,007	\$3,001,337	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$11,030,318	\$12,657,458	\$1,627,140	15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	33.28%	35.02%	1.74%	5%
4	DISCHARGES	2,151	2,111	(40)	-2%
5	CASE MIX INDEX (CMI)	0.93073	0.98576	0.05503	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,002.00023	2,080.93936	78.93913	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,509.65	\$6,082.57	\$572.92	10%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,082.92	\$5,178.34	\$95.42	2%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,886.20	\$732.69	(\$1,153.51)	-61%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,776,181	\$1,524,686	(\$2,251,495)	-60%
11	PATIENT DAYS	8,172	8,183	11	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,349.77	\$1,546.80	\$197.03	15%
13	AVERAGE LENGTH OF STAY	3.8	3.9	0.1	2%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$57,542,396	\$64,876,057	\$7,333,661	13%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,520,565	\$15,757,381	\$1,236,816	9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.23%	24.29%	-0.95%	-4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	173.63%	179.50%	5.87%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,734.79757	3,789.31243	54.51486	1%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,887.91	\$4,158.37	\$270.46	7%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$7,815.88	\$8,640.00	\$824.12	11%
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,072.35	\$3,232.60	\$160.25	5%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,474,605	\$12,249,317	\$774,713	7%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$90,683,066	\$101,018,064	\$10,334,998	11%
24	TOTAL ACCRUED PAYMENTS	\$25,550,883	\$28,414,839	\$2,863,956	11%
25	TOTAL ALLOWANCES	\$65,132,183	\$72,603,225	\$7,471,042	11%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$15,250,786	\$13,774,003	(\$1,476,782)	-10%
<b>E. OTHER MEDICAL ASSISTANCE (O.M.A.)</b>					
<b>OTHER MEDICAL ASSISTANCE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%

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LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT	%
		FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$10,592.57	\$11,260.91	\$668.34	6%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$7,395.85	\$6,815.26	(\$580.59)	-8%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
<b>OTHER MEDICAL ASSISTANCE OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$11,703.80	\$12,798.38	\$1,094.58	9%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$6,960.26	\$7,390.97	\$430.71	6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
<b>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%
<b>F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>					
<b>TOTAL MEDICAL ASSISTANCE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$33,140,670	\$36,142,007	\$3,001,337	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$11,030,318	\$12,657,458	\$1,627,140	15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	33.28%	35.02%	1.74%	5%
4	DISCHARGES	2,151	2,111	(40)	-2%
5	CASE MIX INDEX (CMI)	0.93073	0.98576	0.05503	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,002.00023	2,080.93936	78.93913	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,509.65	\$6,082.57	\$572.92	10%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,082.92	\$5,178.34	\$95.42	2%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,886.20	\$732.69	(\$1,153.51)	-61%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,776,181	\$1,524,686	(\$2,251,495)	-60%
11	PATIENT DAYS	8,172	8,183	11	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,349.77	\$1,546.80	\$197.03	15%
13	AVERAGE LENGTH OF STAY	3.8	3.9	0.1	2%
<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$57,542,396	\$64,876,057	\$7,333,661	13%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,520,565	\$15,757,381	\$1,236,816	9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.23%	24.29%	-0.95%	-4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	173.63%	179.50%	5.87%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,734.79757	3,789.31243	54.51486	1%

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LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,887.91	\$4,158.37	\$270.46	7%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$7,815.88	\$8,640.00	\$824.12	11%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,072.35	\$3,232.60	\$160.25	5%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,474,605	\$12,249,317	\$774,713	7%
<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$90,683,066	\$101,018,064	\$10,334,998	11%
24	TOTAL ACCRUED PAYMENTS	\$25,550,883	\$28,414,839	\$2,863,956	11%
25	TOTAL ALLOWANCES	\$65,132,183	\$72,603,225	\$7,471,042	11%
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$353,256	\$291,509	(\$61,747)	-17%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$105,326	\$60,612	(\$44,714)	-42%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	29.82%	20.79%	-9.02%	-30%
4	DISCHARGES	27	24	(3)	-11%
5	CASE MIX INDEX (CMI)	0.70038	0.72830	0.02792	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	18.91026	17.47920	(1.43106)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,569.78	\$3,467.66	(\$2,102.12)	-38%
8	PATIENT DAYS	84	70	(14)	-17%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,253.88	\$865.89	(\$388.00)	-31%
10	AVERAGE LENGTH OF STAY	3.1	2.9	(0.2)	-6%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$685,597	\$894,335	\$208,738	30%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$204,418	\$185,955	(\$18,463)	-9%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$1,038,853	\$1,185,844	\$146,991	14%
14	TOTAL ACCRUED PAYMENTS	\$309,744	\$246,567	(\$63,177)	-20%
15	TOTAL ALLOWANCES	\$729,109	\$939,277	\$210,168	29%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$27,519,593	\$9,116,321	(\$18,403,272)	-67%
2	TOTAL OPERATING EXPENSES	\$221,306,295	\$210,520,148	(\$10,786,147)	-5%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
<b>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</b>					
4	CHARITY CARE (CHARGES)	\$4,233,596	\$7,131,143	\$2,897,547	68%
5	BAD DEBTS (CHARGES)	\$6,461,499	\$2,265,391	(\$4,196,108)	-65%
6	UNCOMPENSATED CARE (CHARGES)	\$10,695,095	\$9,396,534	(\$1,298,561)	-12%
7	COST OF UNCOMPENSATED CARE	\$4,843,775	\$4,148,556	(\$695,218)	-14%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$90,683,066	\$101,018,064	\$10,334,998	11%
9	TOTAL ACCRUED PAYMENTS	\$25,550,883	\$28,414,839	\$2,863,956	11%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$41,070,073	\$44,599,332	\$3,529,259	9%

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LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT	%
		FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$15,519,190	\$16,184,493	\$665,303	4%
<b>II.</b>	<b><u>AGGREGATE DATA</u></b>				
<b>A.</b>	<b><u>TOTALS - ALL PAYERS</u></b>				
1	TOTAL INPATIENT CHARGES	\$212,045,748	\$219,546,008	\$7,500,260	4%
2	TOTAL INPATIENT PAYMENTS	\$98,780,538	\$98,575,406	(\$205,132)	0%
3	TOTAL INPATIENT PAYMENTS / CHARGES	46.58%	44.90%	-1.68%	-4%
4	TOTAL DISCHARGES	10,330	9,847	(483)	-5%
5	TOTAL CASE MIX INDEX	1.20127	1.28650	0.08524	7%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	12,409,08029	12,668,20768	259,12739	2%
7	TOTAL OUTPATIENT CHARGES	\$267,599,887	\$285,501,650	\$17,901,763	7%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	126.20%	130.04%	3.84%	3%
9	TOTAL OUTPATIENT PAYMENTS	\$118,449,448	\$126,244,005	\$7,794,557	7%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	44.26%	44.22%	-0.05%	0%
11	TOTAL CHARGES	\$479,645,635	\$505,047,658	\$25,402,023	5%
12	TOTAL PAYMENTS	\$217,229,986	\$224,819,411	\$7,589,425	3%
13	TOTAL PAYMENTS / TOTAL CHARGES	45.29%	44.51%	-0.78%	-2%
14	PATIENT DAYS	42,530	41,898	(632)	-1%
<b>B.</b>	<b><u>TOTALS - ALL GOVERNMENT PAYERS</u></b>				
1	INPATIENT CHARGES	\$156,131,538	\$166,624,689	\$10,493,151	7%
2	INPATIENT PAYMENTS	\$62,942,438	\$63,565,352	\$622,914	1%
3	GOVT. INPATIENT PAYMENTS / CHARGES	40.31%	38.15%	-2.16%	-5%
4	DISCHARGES	7,232	7,043	(189)	-3%
5	CASE MIX INDEX	1.24803	1.35726	0.10923	9%
6	CASE MIX ADJUSTED DISCHARGES	9,025,75449	9,559,21660	533,46211	6%
7	OUTPATIENT CHARGES	\$146,843,637	\$162,650,092	\$15,806,455	11%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	94.05%	97.61%	3.56%	4%
9	OUTPATIENT PAYMENTS	\$40,143,344	\$42,936,718	\$2,793,374	7%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.34%	26.40%	-0.94%	-3%
11	TOTAL CHARGES	\$302,975,175	\$329,274,781	\$26,299,606	9%
12	TOTAL PAYMENTS	\$103,085,782	\$106,502,070	\$3,416,288	3%
13	TOTAL PAYMENTS / CHARGES	34.02%	32.34%	-1.68%	-5%
14	PATIENT DAYS	32,147	32,510	363	1%
15	TOTAL GOVERNMENT DEDUCTIONS	\$199,889,393	\$222,772,711	\$22,883,318	11%
<b>C.</b>	<b><u>AVERAGE LENGTH OF STAY</u></b>				
1	MEDICARE	4.7	4.9	0.2	5%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.4	3.3	(0.0)	0%
3	UNINSURED	3.6	3.6	0.0	0%
4	MEDICAID	3.8	3.9	0.1	2%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	3.1	2.9	(0.2)	-6%
7	TOTAL AVERAGE LENGTH OF STAY	4.1	4.3	0.1	3%
<b>III.</b>	<b><u>DATA USED IN BASELINE UNDERPAYMENT CALCULATION</u></b>				
1	TOTAL CHARGES	\$479,645,635	\$505,047,658	\$25,402,023	5%
2	TOTAL GOVERNMENT DEDUCTIONS	\$199,889,393	\$222,772,711	\$22,883,318	11%

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LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT	%
		FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
3	UNCOMPENSATED CARE	\$10,695,095	\$9,396,534	(\$1,298,561)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$51,831,160	\$47,985,709	(\$3,845,451)	-7%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$1,914,881	\$1,914,881	0%
6	TOTAL ADJUSTMENTS	\$262,415,648	\$282,069,835	\$19,654,187	7%
7	TOTAL ACCRUED PAYMENTS	\$217,229,987	\$222,977,823	\$5,747,836	3%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$217,229,987	\$222,977,823	\$5,747,836	3%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4528968287	0.4414985783	(0.0113982504)	-3%
11	COST OF UNCOMPENSATED CARE	\$4,843,775	\$4,148,556	(\$695,218)	-14%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$15,519,190	\$16,184,493	\$665,303	4%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$20,362,965	\$20,333,049	(\$29,916)	0%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$11,474,605	\$12,249,317	\$774,713	7%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,455,357	\$1,686,921	(\$2,768,436)	-62%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$15,929,962	\$13,936,238	(\$1,993,724)	-13%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$3,925,009	\$3,925,009	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$1,123,762	(\$5,231,619)	(\$6,355,381)	-565.55%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$218,353,748	\$217,746,204	(\$607,544)	-0.28%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$479,645,635	\$505,047,658	\$25,402,023	5.30%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$10,695,095	\$9,396,534	(\$1,298,561)	-12.14%

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(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$55,914,210	\$52,921,319	(\$2,992,891)
2	MEDICARE	\$122,637,612	130,191,173	\$7,553,561
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$33,140,670	36,142,007	\$3,001,337
4	MEDICAID	\$33,140,670	36,142,007	\$3,001,337
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$353,256	291,509	(\$61,747)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,563,947	4,451,612	\$887,665
<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>		<b>\$156,131,538</b>	<b>\$166,624,689</b>	<b>\$10,493,151</b>
<b>TOTAL INPATIENT CHARGES</b>		<b>\$212,045,748</b>	<b>\$219,546,008</b>	<b>\$7,500,260</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$120,756,250	\$122,851,558	\$2,095,308
2	MEDICARE	\$88,615,644	96,879,700	\$8,264,056
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$57,542,396	64,876,057	\$7,333,661
4	MEDICAID	\$57,542,396	64,876,057	\$7,333,661
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$685,597	894,335	\$208,738
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,665,991	8,048,329	\$382,338
<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>		<b>\$146,843,637</b>	<b>\$162,650,092</b>	<b>\$15,806,455</b>
<b>TOTAL OUTPATIENT CHARGES</b>		<b>\$267,599,887</b>	<b>\$285,501,650</b>	<b>\$17,901,763</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$176,670,460	\$175,772,877	(\$897,583)
2	TOTAL MEDICARE	\$211,253,256	\$227,070,873	\$15,817,617
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$90,683,066	\$101,018,064	\$10,334,998
4	TOTAL MEDICAID	\$90,683,066	\$101,018,064	\$10,334,998
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$1,038,853	\$1,185,844	\$146,991
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$11,229,938	\$12,499,941	\$1,270,003
<b>TOTAL GOVERNMENT CHARGES</b>		<b>\$302,975,175</b>	<b>\$329,274,781</b>	<b>\$26,299,606</b>
<b>TOTAL CHARGES</b>		<b>\$479,645,635</b>	<b>\$505,047,658</b>	<b>\$25,402,023</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,838,100	\$35,010,054	(\$828,046)
2	MEDICARE	\$51,806,794	50,847,282	(\$959,512)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,030,318	12,657,458	\$1,627,140
4	MEDICAID	\$11,030,318	12,657,458	\$1,627,140
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$105,326	60,612	(\$44,714)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$276,890	943,085	\$666,195
<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>		<b>\$62,942,438</b>	<b>\$63,565,352</b>	<b>\$622,914</b>
<b>TOTAL INPATIENT PAYMENTS</b>		<b>\$98,780,538</b>	<b>\$98,575,406</b>	<b>(\$205,132)</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$78,306,104	\$83,307,287	\$5,001,183
2	MEDICARE	\$25,418,361	26,993,382	\$1,575,021
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,520,565	15,757,381	\$1,236,816
4	MEDICAID	\$14,520,565	15,757,381	\$1,236,816
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$204,418	185,955	(\$18,463)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$908,179	2,160,322	\$1,252,143
<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>		<b>\$40,143,344</b>	<b>\$42,936,718</b>	<b>\$2,793,374</b>
<b>TOTAL OUTPATIENT PAYMENTS</b>		<b>\$118,449,448</b>	<b>\$126,244,005</b>	<b>\$7,794,557</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$114,144,204	\$118,317,341	\$4,173,137
2	TOTAL MEDICARE	\$77,225,155	\$77,840,664	\$615,509
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$25,550,883	\$28,414,839	\$2,863,956
4	TOTAL MEDICAID	\$25,550,883	\$28,414,839	\$2,863,956
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$309,744	\$246,567	(\$63,177)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,185,069	\$3,103,407	\$1,918,338
<b>TOTAL GOVERNMENT PAYMENTS</b>		<b>\$103,085,782</b>	<b>\$106,502,070</b>	<b>\$3,416,288</b>
<b>TOTAL PAYMENTS</b>		<b>\$217,229,986</b>	<b>\$224,819,411</b>	<b>\$7,589,425</b>

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(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	11.66%	10.48%	-1.18%
2	MEDICARE	25.57%	25.78%	0.21%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.91%	7.16%	0.25%
4	MEDICAID	6.91%	7.16%	0.25%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.07%	0.06%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.74%	0.88%	0.14%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>32.55%</b>	<b>32.99%</b>	<b>0.44%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>44.21%</b>	<b>43.47%</b>	<b>-0.74%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	25.18%	24.32%	-0.85%
2	MEDICARE	18.48%	19.18%	0.71%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12.00%	12.85%	0.85%
4	MEDICAID	12.00%	12.85%	0.85%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.14%	0.18%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.60%	1.59%	0.00%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>30.62%</b>	<b>32.20%</b>	<b>1.59%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>55.79%</b>	<b>56.53%</b>	<b>0.74%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16.50%	15.57%	-0.93%
2	MEDICARE	23.85%	22.62%	-1.23%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.08%	5.63%	0.55%
4	MEDICAID	5.08%	5.63%	0.55%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.05%	0.03%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.13%	0.42%	0.29%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>28.98%</b>	<b>28.27%</b>	<b>-0.70%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>45.47%</b>	<b>43.85%</b>	<b>-1.63%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	36.05%	37.06%	1.01%
2	MEDICARE	11.70%	12.01%	0.31%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.68%	7.01%	0.32%
4	MEDICAID	6.68%	7.01%	0.32%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.09%	0.08%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.42%	0.96%	0.54%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>18.48%</b>	<b>19.10%</b>	<b>0.62%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>54.53%</b>	<b>56.15%</b>	<b>1.63%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,098	2,804	(294)
2	MEDICARE	5,054	4,908	(146)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,151	2,111	(40)
4	MEDICAID	2,151	2,111	(40)
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	27	24	(3)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	254	242	(12)
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>7,232</b>	<b>7,043</b>	<b>(189)</b>
	<b>TOTAL DISCHARGES</b>	<b>10,330</b>	<b>9,847</b>	<b>(483)</b>

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(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,383	9,388	(995)
2	MEDICARE	23,891	24,257	366
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,172	8,183	11
4	MEDICAID	8,172	8,183	11
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	84	70	(14)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	925	882	(43)
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>32,147</b>	<b>32,510</b>	<b>363</b>
	<b>TOTAL PATIENT DAYS</b>	<b>42,530</b>	<b>41,898</b>	<b>(632)</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.4	3.3	(0.0)
2	MEDICARE	4.7	4.9	0.2
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.8	3.9	0.1
4	MEDICAID	3.8	3.9	0.1
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	3.1	2.9	(0.2)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.6	3.6	0.0
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>4.4</b>	<b>4.6</b>	<b>0.2</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.1</b>	<b>4.3</b>	<b>0.1</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.09210	1.10877	0.01667
2	MEDICARE	1.38600	1.52013	0.13413
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.93073	0.98576	0.05503
4	MEDICAID	0.93073	0.98576	0.05503
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.70038	0.72830	0.02792
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.97825	0.94379	(0.03446)
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.24803</b>	<b>1.35726</b>	<b>0.10923</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.20127</b>	<b>1.28650</b>	<b>0.08524</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$165,440,521	\$163,272,936	(\$2,167,585)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$113,609,361	\$115,287,227	\$1,677,866
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$51,831,160	\$47,985,709	(\$3,845,451)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	31.33%	29.39%	-1.94%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$3,925,009	\$3,925,009
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$1,914,881	\$1,914,881
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$4,233,596	\$7,131,143	\$2,897,547
9	BAD DEBTS	\$6,461,499	\$2,265,391	(\$4,196,108)
10	TOTAL UNCOMPENSATED CARE	\$10,695,095	\$9,396,534	(\$1,298,561)
11	TOTAL OTHER OPERATING REVENUE	\$27,519,593	\$9,116,321	(\$18,403,272)
12	TOTAL OPERATING EXPENSES	\$221,306,295	\$210,520,148	(\$10,786,147)
<b>IV. DSH UPPER PAYMENT LIMIT CALCULATIONS</b>				
<b>A. CASE MIX ADJUSTED DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,383,32580	3,108,99108	(274,33472)
2	MEDICARE	7,004,84400	7,460,79804	455,95404
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,002,00023	2,080,93936	78,93913
4	MEDICAID	2,002,00023	2,080,93936	78,93913
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	18,91026	17,47920	(1,43106)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	248,47550	228,39718	(20,07832)

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(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>9,025.75449</b>	<b>9,559.21660</b>	<b>533.46211</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>12,409.08029</b>	<b>12,668.20768</b>	<b>259.12739</b>
<b>B.</b>	<b>OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,690.65811	6,509.20603	-181.45208
2	MEDICARE	3,651.92584	3,652.21049	0.28464
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,734.79757	3,789.31243	54.51486
4	MEDICAID	3,734.79757	3,789.31243	54.51486
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	52.40143	73.63080	21.22937
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	546.34980	437.52592	-108.82388
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>7,439.12484</b>	<b>7,515.15371</b>	<b>76.02887</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>14,129.78295</b>	<b>14,024.35974</b>	<b>-105.42321</b>
<b>C.</b>	<b>INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,592.57	\$11,260.91	\$668.34
2	MEDICARE	\$7,395.85	\$6,815.26	(\$580.59)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,509.65	\$6,082.57	\$572.92
4	MEDICAID	\$5,509.65	\$6,082.57	\$572.92
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$5,569.78	\$3,467.66	(\$2,102.12)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,114.36	\$4,129.14	\$3,014.79
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$6,973.65</b>	<b>\$6,649.64</b>	<b>(\$324.01)</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,960.34</b>	<b>\$7,781.32</b>	<b>(\$179.02)</b>
<b>D.</b>	<b>OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,703.80	\$12,798.38	\$1,094.58
2	MEDICARE	\$6,960.26	\$7,390.97	\$430.71
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,887.91	\$4,158.37	\$270.46
4	MEDICAID	\$3,887.91	\$4,158.37	\$270.46
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$3,901.00	\$2,525.51	(\$1,375.49)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,662.27	\$4,937.59	\$3,275.32
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$5,396.25</b>	<b>\$5,713.35</b>	<b>\$317.11</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$8,382.96</b>	<b>\$9,001.77</b>	<b>\$618.80</b>
<b>V.</b>	<b>CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>			
1	MEDICAID	\$11,474,605	\$12,249,317	\$774,713
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,455,357	\$1,686,921	(\$2,768,436)
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$15,929,962</b>	<b>\$13,936,238</b>	<b>(\$1,993,724)</b>
<b>VI.</b>	<b>CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>			
1	TOTAL CHARGES	\$479,645,635	\$505,047,658	\$25,402,023
2	TOTAL GOVERNMENT DEDUCTIONS	\$199,889,393	\$222,772,711	\$22,883,318
3	UNCOMPENSATED CARE	\$10,695,095	\$9,396,534	(\$1,298,561)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$51,831,160	\$47,985,709	(\$3,845,451)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$1,914,881	\$1,914,881
6	TOTAL ADJUSTMENTS	\$262,415,648	\$282,069,835	\$19,654,187
7	TOTAL ACCRUED PAYMENTS	\$217,229,987	\$222,977,823	\$5,747,836
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$217,229,987	\$222,977,823	\$5,747,836
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4528968287	0.4414985783	(0.0113982504)
11	COST OF UNCOMPENSATED CARE	\$4,843,775	\$4,148,556	(\$695,218)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$15,519,190	\$16,184,493	\$665,303
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$20,362,965	\$20,333,049	(\$29,916)
<b>VII.</b>	<b>RATIOS</b>			

**MIDSTATE MEDICAL CENTER**  
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**REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND**  
**BASELINE UNDERPAYMENT DATA**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	64.09%	66.15%	2.06%
2	MEDICARE	42.24%	39.06%	-3.19%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	33.28%	35.02%	1.74%
4	MEDICAID	33.28%	35.02%	1.74%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	29.82%	20.79%	-9.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	7.77%	21.19%	13.42%
<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>		<b>40.31%</b>	<b>38.15%</b>	<b>-2.16%</b>
<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>		<b>46.58%</b>	<b>44.90%</b>	<b>-1.68%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	64.85%	67.81%	2.96%
2	MEDICARE	28.68%	27.86%	-0.82%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	25.23%	24.29%	-0.95%
4	MEDICAID	25.23%	24.29%	-0.95%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	29.82%	20.79%	-9.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	11.85%	26.84%	15.00%
<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>		<b>27.34%</b>	<b>26.40%</b>	<b>-0.94%</b>
<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>		<b>44.26%</b>	<b>44.22%</b>	<b>-0.05%</b>
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$217,229,986	\$224,819,411	\$7,589,425
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$217,229,986</b>	<b>\$224,819,411</b>	<b>\$7,589,425</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$1,123,762	(\$5,231,619)	(\$6,355,381)
4	<b>CALCULATED NET REVENUE</b>	<b>\$224,815,247</b>	<b>\$219,587,792</b>	<b>(\$5,227,455)</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$218,353,748	\$217,746,204	(\$607,544)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$6,461,499	\$1,841,588	(\$4,619,911)
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$479,645,635	\$505,047,658	\$25,402,023
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$479,645,635</b>	<b>\$505,047,658</b>	<b>\$25,402,023</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$479,645,635	\$505,047,658	\$25,402,023
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,695,095	\$9,396,534	(\$1,298,561)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$10,695,095</b>	<b>\$9,396,534</b>	<b>(\$1,298,561)</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,695,095	\$9,396,534	(\$1,298,561)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

<b>MIDSTATE MEDICAL CENTER</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2013</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		\$52,921,319
2 MEDICARE		130,191,173
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		36,142,007
4 MEDICAID		36,142,007
5 OTHER MEDICAL ASSISTANCE		0
6 CHAMPUS / TRICARE		291,509
7 UNINSURED (INCLUDED IN NON-GOVERNMENT)		4,451,612
<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>		<b>\$166,624,689</b>
<b>TOTAL INPATIENT CHARGES</b>		<b>\$219,546,008</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		\$122,851,558
2 MEDICARE		96,879,700
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		64,876,057
4 MEDICAID		64,876,057
5 OTHER MEDICAL ASSISTANCE		0
6 CHAMPUS / TRICARE		894,335
7 UNINSURED (INCLUDED IN NON-GOVERNMENT)		8,048,329
<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>		<b>\$162,650,092</b>
<b>TOTAL OUTPATIENT CHARGES</b>		<b>\$285,501,650</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1 TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)		\$175,772,877
2 TOTAL GOVERNMENT ACCRUED CHARGES		329,274,781
<b>TOTAL ACCRUED CHARGES</b>		<b>\$505,047,658</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		\$35,010,054
2 MEDICARE		50,847,282
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		12,657,458
4 MEDICAID		12,657,458
5 OTHER MEDICAL ASSISTANCE		0
6 CHAMPUS / TRICARE		60,612
7 UNINSURED (INCLUDED IN NON-GOVERNMENT)		943,085
<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>		<b>\$63,565,352</b>
<b>TOTAL INPATIENT PAYMENTS</b>		<b>\$98,575,406</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		\$83,307,287
2 MEDICARE		26,993,382
3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		15,757,381
4 MEDICAID		15,757,381
5 OTHER MEDICAL ASSISTANCE		0
6 CHAMPUS / TRICARE		185,955
7 UNINSURED (INCLUDED IN NON-GOVERNMENT)		2,160,322
<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>		<b>\$42,936,718</b>
<b>TOTAL OUTPATIENT PAYMENTS</b>		<b>\$126,244,005</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1 TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)		\$118,317,341
2 TOTAL GOVERNMENT ACCRUED PAYMENTS		106,502,070
<b>TOTAL ACCRUED PAYMENTS</b>		<b>\$224,819,411</b>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		

**MIDSTATE MEDICAL CENTER**  
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**REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND**  
**BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES**

(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2013</u>
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,804
2	MEDICARE	4,908
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,111
4	MEDICAID	2,111
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	24
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	242
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>7,043</b>
	<b>TOTAL DISCHARGES</b>	<b>9,847</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.10877
2	MEDICARE	1.52013
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.98576
4	MEDICAID	0.98576
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	0.72830
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.94379
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.35726</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.28650</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$163,272,936
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$115,287,227
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$47,985,709
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	29.39%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,925,009
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,914,881
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$7,131,143
9	BAD DEBTS	\$2,265,391
10	TOTAL UNCOMPENSATED CARE	\$9,396,534
11	TOTAL OTHER OPERATING REVENUE	\$9,116,321
12	TOTAL OPERATING EXPENSES	\$210,520,148
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$224,819,411
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$224,819,411</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$5,231,619)
	<b>CALCULATED NET REVENUE</b>	<b>\$219,587,792</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$217,746,204
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$1,841,588</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$505,047,658
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0

**MIDSTATE MEDICAL CENTER**  
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**REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND**  
**BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES**

(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2013</u>
	<b>CALCULATED GROSS REVENUE</b>	<b>\$505,047,658</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS <b>(FROM ANNUAL REPORTING)</b>	\$505,047,658
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
	<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$9,396,534
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$9,396,534</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS <b>(FROM ANNUAL REPORTING)</b>	\$9,396,534
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

**MIDSTATE MEDICAL CENTER**  
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**REPORT 650 - HOSPITAL UNCOMPENSATED CARE**

(1)	(2)	(3) ACTUAL <u>FY 2012</u>	(4) ACTUAL <u>FY 2013</u>	(5) AMOUNT <u>DIFFERENCE</u>	(6) % <u>DIFFERENCE</u>
<b>LINE</b>	<b>DESCRIPTION</b>				
<b>A. Hospital Charity Care (from HRS Report 500)</b>					
1	Number of Applicants	3,601	6,890	3,289	91%
2	Number of Approved Applicants	3,421	6,546	3,125	91%
3	<b>Total Charges (A)</b>	<b>\$4,233,596</b>	<b>\$7,131,143</b>	<b>\$2,897,547</b>	<b>68%</b>
4	<b>Average Charges</b>	<b>\$1,238</b>	<b>\$1,089</b>	<b>(\$148)</b>	<b>-12%</b>
5	Ratio of Cost to Charges (RCC)	0.465012	0.436359	(0.028653)	-6%
6	<b>Total Cost</b>	<b>\$1,968,673</b>	<b>\$3,111,738</b>	<b>\$1,143,065</b>	<b>58%</b>
7	<b>Average Cost</b>	<b>\$575</b>	<b>\$475</b>	<b>(\$100)</b>	<b>-17%</b>
8	Charity Care - Inpatient Charges	\$1,394,433	\$1,787,698	\$393,265	28%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	1,056,280	1,627,152	570,872	54%
10	Charity Care - Emergency Department Charges	1,782,883	3,716,293	1,933,410	108%
11	<b>Total Charges (A)</b>	<b>\$4,233,596</b>	<b>\$7,131,143</b>	<b>\$2,897,547</b>	<b>68%</b>
12	Charity Care - Number of Patient Days	576	760	184	32%
13	Charity Care - Number of Discharges	372	483	111	30%
14	Charity Care - Number of Outpatient ED Visits	3,596	6,870	3,274	91%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	1,233	2,072	839	68%
<b>B. Hospital Bad Debts (from HRS Report 500)</b>					
1	Bad Debts - Inpatient Services	\$1,892,624	\$1,720,829	(\$171,795)	-9%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,332,821	222,216	(1,110,605)	-83%
3	Bad Debts - Emergency Department	3,236,054	322,346	(2,913,708)	-90%
4	<b>Total Bad Debts (A)</b>	<b>\$6,461,499</b>	<b>\$2,265,391</b>	<b>(\$4,196,108)</b>	<b>-65%</b>
<b>C. Hospital Uncompensated Care (from HRS Report 500)</b>					
1	Charity Care (A)	\$4,233,596	\$7,131,143	\$2,897,547	68%
2	Bad Debts (A)	6,461,499	2,265,391	(4,196,108)	-65%
3	<b>Total Uncompensated Care (A)</b>	<b>\$10,695,095</b>	<b>\$9,396,534</b>	<b>(\$1,298,561)</b>	<b>-12%</b>
4	Uncompensated Care - Inpatient Services	\$3,287,057	\$3,508,527	\$221,470	7%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	2,389,101	1,849,368	(539,733)	-23%
6	Uncompensated Care - Emergency Department	5,018,937	4,038,639	(980,298)	-20%
7	<b>Total Uncompensated Care (A)</b>	<b>\$10,695,095</b>	<b>\$9,396,534</b>	<b>(\$1,298,561)</b>	<b>-12%</b>

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

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**REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES,  
 ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL TOTAL NON-GOVERNMENT	FY 2013 ACTUAL TOTAL NON-GOVERNMENT	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION				
<b><u>COMMERCIAL - ALL PAYERS</u></b>					
1	Total Gross Revenue	\$165,440,521	\$163,272,936	(\$2,167,585)	-1%
2	Total Contractual Allowances	\$51,831,160	\$47,985,709	(\$3,845,451)	-7%
	<b>Total Accrued Payments (A)</b>	<b>\$113,609,361</b>	<b>\$115,287,227</b>	<b>\$1,677,866</b>	<b>1%</b>
	<b>Total Discount Percentage</b>	<b>31.33%</b>	<b>29.39%</b>	<b>-1.94%</b>	<b>-6%</b>

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

<b>MIDSTATE MEDICAL CENTER</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
<b>A.</b>	<b><u>Gross and Net Revenue</u></b>			
1	Inpatient Gross Revenue	\$204,208,669	\$212,045,748	\$219,546,008
2	Outpatient Gross Revenue	\$219,207,273	\$267,599,887	\$285,501,650
3	Total Gross Patient Revenue	\$423,415,942	\$479,645,635	\$505,047,658
4	Net Patient Revenue	\$196,755,436	\$218,353,748	\$217,746,204
<b>B.</b>	<b><u>Total Operating Expenses</u></b>			
1	Total Operating Expense	\$203,675,287	\$221,306,295	\$210,520,148
<b>C.</b>	<b><u>Utilization Statistics</u></b>			
1	Patient Days	44,604	42,530	41,898
2	Discharges	10,235	10,330	9,847
3	Average Length of Stay	4.4	4.1	4.3
4	Equivalent (Adjusted) Patient Days (EPD)	92,484	96,202	96,383
0	Equivalent (Adjusted) Discharges (ED)	21,222	23,366	22,652
<b>D.</b>	<b><u>Case Mix Statistics</u></b>			
1	Case Mix Index	1.18110	1.20127	1.28650
2	Case Mix Adjusted Patient Days (CMAPD)	52,682	51,090	53,902
3	Case Mix Adjusted Discharges (CMAD)	12,089	12,409	12,668
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	109,233	115,565	123,997
5	Case Mix Adjusted Equivalent Discharges (CMAED)	25,065	28,069	29,142
<b>E.</b>	<b><u>Gross Revenue Per Statistic</u></b>			
1	Total Gross Revenue per Patient Day	\$9,493	\$11,278	\$12,054
2	Total Gross Revenue per Discharge	\$41,369	\$46,432	\$51,289
3	Total Gross Revenue per EPD	\$4,578	\$4,986	\$5,240
4	Total Gross Revenue per ED	\$19,952	\$20,527	\$22,296
5	Total Gross Revenue per CMAEPD	\$3,876	\$4,150	\$4,073
6	Total Gross Revenue per CMAED	\$16,893	\$17,088	\$17,330
7	Inpatient Gross Revenue per EPD	\$2,208	\$2,204	\$2,278
8	Inpatient Gross Revenue per ED	\$9,623	\$9,075	\$9,692

<b>MIDSTATE MEDICAL CENTER</b>				
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<b>FISCAL YEAR 2013</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
(1)	(2)	(3)	(4)	(5)
LINE	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>
<b>F.</b>	<b><u>Net Revenue Per Statistic</u></b>			
1	Net Patient Revenue per Patient Day	\$4,411	\$5,134	\$5,197
2	Net Patient Revenue per Discharge	\$19,224	\$21,138	\$22,113
3	Net Patient Revenue per EPD	\$2,127	\$2,270	\$2,259
4	Net Patient Revenue per ED	\$9,271	\$9,345	\$9,613
5	Net Patient Revenue per CMAEPD	\$1,801	\$1,889	\$1,756
6	Net Patient Revenue per CMAED	\$7,850	\$7,779	\$7,472
<b>G.</b>	<b><u>Operating Expense Per Statistic</u></b>			
1	Total Operating Expense per Patient Day	\$4,566	\$5,204	\$5,025
2	Total Operating Expense per Discharge	\$19,900	\$21,424	\$21,379
3	Total Operating Expense per EPD	\$2,202	\$2,300	\$2,184
4	Total Operating Expense per ED	\$9,597	\$9,471	\$9,294
5	Total Operating Expense per CMAEPD	\$1,865	\$1,915	\$1,698
6	Total Operating Expense per CMAED	\$8,126	\$7,884	\$7,224
<b>H.</b>	<b><u>Nursing Salary and Fringe Benefits Expense</u></b>			
1	Nursing Salary Expense	\$27,000,880	\$28,460,163	\$27,207,529
2	Nursing Fringe Benefits Expense	\$9,772,478	\$10,526,845	\$8,488,460
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$36,773,358</b>	<b>\$38,987,008</b>	<b>\$35,695,989</b>
<b>I.</b>	<b><u>Physician Salary and Fringe Expense</u></b>			
1	Physician Salary Expense	\$8,870,537	\$7,503,379	\$7,916,881
2	Physician Fringe Benefits Expense	\$3,169,452	\$2,025,011	\$1,632,894
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$12,039,989</b>	<b>\$9,528,390</b>	<b>\$9,549,775</b>
<b>J.</b>	<b><u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u></b>			
1	Non-Nursing, Non-Physician Salary Expense	\$37,342,205	\$39,975,318	\$40,133,370
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$13,470,174	\$15,536,997	\$12,528,463
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$50,812,379</b>	<b>\$55,512,315</b>	<b>\$52,661,833</b>

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<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
(1)	(2)	(3)	(4)	(5)
LINE	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>
<b>K.</b>	<b><u>Total Salary and Fringe Benefits Expense</u></b>			
1	Total Salary Expense	\$73,213,622	\$75,938,860	\$75,257,780
2	Total Fringe Benefits Expense	\$26,412,104	\$28,088,853	\$22,649,817
3	<b><u>Total Salary and Fringe Benefits Expense</u></b>	<b>\$99,625,726</b>	<b>\$104,027,713</b>	<b>\$97,907,597</b>
<b>L.</b>	<b><u>Total Full Time Equivalent Employees (FTEs)</u></b>			
1	Total Nursing FTEs	315.5	332.6	310.2
2	Total Physician FTEs	49.7	43.8	44.7
3	Total Non-Nursing, Non-Physician FTEs	653.4	678.2	673.2
4	<b><u>Total Full Time Equivalent Employees (FTEs)</u></b>	<b>1,018.6</b>	<b>1,054.6</b>	<b>1,028.1</b>
<b>M.</b>	<b><u>Nursing Salaries and Fringe Benefits Expense per FTE</u></b>			
1	Nursing Salary Expense per FTE	\$85,581	\$85,569	\$87,710
2	Nursing Fringe Benefits Expense per FTE	\$30,975	\$31,650	\$27,364
3	<b><u>Total Nursing Salary and Fringe Benefits Expense per FTE</u></b>	<b>\$116,556</b>	<b>\$117,219</b>	<b>\$115,074</b>
<b>N.</b>	<b><u>Physician Salary and Fringe Expense per FTE</u></b>			
1	Physician Salary Expense per FTE	\$178,482	\$171,310	\$177,111
2	Physician Fringe Benefits Expense per FTE	\$63,772	\$46,233	\$36,530
3	<b><u>Total Physician Salary and Fringe Benefits Expense per FTE</u></b>	<b>\$242,253</b>	<b>\$217,543</b>	<b>\$213,641</b>
<b>O.</b>	<b><u>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</u></b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$57,151	\$58,943	\$59,616
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$20,616	\$22,909	\$18,610
3	<b><u>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</u></b>	<b>\$77,766</b>	<b>\$81,852</b>	<b>\$78,226</b>
<b>P.</b>	<b><u>Total Salary and Fringe Benefits Expense per FTE</u></b>			
1	Total Salary Expense per FTE	\$71,877	\$72,007	\$73,201
2	Total Fringe Benefits Expense per FTE	\$25,930	\$26,635	\$22,031
3	<b><u>Total Salary and Fringe Benefits Expense per FTE</u></b>	<b>\$97,807</b>	<b>\$98,642</b>	<b>\$95,232</b>
<b>Q.</b>	<b><u>Total Salary and Fringe Ben. Expense per Statistic</u></b>			

**MIDSTATE MEDICAL CENTER**  
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**REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,234	\$2,446	\$2,337
2	Total Salary and Fringe Benefits Expense per Discharge	\$9,734	\$10,070	\$9,943
3	Total Salary and Fringe Benefits Expense per EPD	\$1,077	\$1,081	\$1,016
4	Total Salary and Fringe Benefits Expense per ED	\$4,695	\$4,452	\$4,322
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$912	\$900	\$790
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,975	\$3,706	\$3,360