

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$1,463,823	\$1,059,290	(\$404,533)	-28%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$10,959,585	\$10,269,970	(\$689,615)	-6%
4	Current Assets Whose Use is Limited for Current Liabilities	\$467,222	\$364,771	(\$102,451)	-22%
5	Due From Affiliates	\$781,899	\$58,029	(\$723,870)	-93%
6	Due From Third Party Payers	\$853,555	\$384,274	(\$469,281)	-55%
7	Inventories of Supplies	\$1,519,666	\$1,467,009	(\$52,657)	-3%
8	Prepaid Expenses	\$218,802	\$276,211	\$57,409	26%
9	Other Current Assets	\$0	\$0	\$0	0%
	Total Current Assets	\$16,264,552	\$13,879,554	(\$2,384,998)	-15%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$3,036,266	\$2,988,705	(\$47,561)	-2%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$20,261,427	\$14,693,132	(\$5,568,295)	-27%
	Total Noncurrent Assets Whose Use is Limited:	\$23,297,693	\$17,681,837	(\$5,615,856)	-24%
5	Interest in Net Assets of Foundation	\$3,254,582	\$3,616,191	\$361,609	11%
6	Long Term Investments	\$3,127,553	\$3,208,828	\$81,275	3%
7	Other Noncurrent Assets	\$3,451,619	\$10,502,780	\$7,051,161	204%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$93,531,022	\$85,669,395	(\$7,861,627)	-8%
2	Less: Accumulated Depreciation	\$63,146,530	\$58,070,717	(\$5,075,813)	-8%
	Property, Plant and Equipment, Net	\$30,384,492	\$27,598,678	(\$2,785,814)	-9%
3	Construction in Progress	\$88,282	\$55,986	(\$32,296)	-37%
	Total Net Fixed Assets	\$30,472,774	\$27,654,664	(\$2,818,110)	-9%
	Total Assets	\$79,868,773	\$76,543,854	(\$3,324,919)	-4%
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$5,236,427	\$5,405,085	\$168,658	3%
2	Salaries, Wages and Payroll Taxes	\$733,188	\$691,755	(\$41,433)	-6%

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3	Due To Third Party Payers	\$1,157,913	\$1,040,198	(\$117,715)	-10%
4	Due To Affiliates	\$3,297,172	\$398,089	(\$2,899,083)	-88%
5	Current Portion of Long Term Debt	\$607,750	\$613,500	\$5,750	1%
6	Current Portion of Notes Payable	\$663,921	\$256,581	(\$407,340)	-61%
7	Other Current Liabilities	\$1,879,469	\$2,156,152	\$276,683	15%
	Total Current Liabilities	\$13,575,840	\$10,561,360	(\$3,014,480)	-22%
B.	<u>Long Term Debt:</u>				
1	Bonds Payable (Net of Current Portion)	\$23,591,768	\$22,973,519	(\$618,249)	-3%
2	Notes Payable (Net of Current Portion)	\$802,316	\$545,735	(\$256,581)	-32%
	Total Long Term Debt	\$24,394,084	\$23,519,254	(\$874,830)	-4%
3	Accrued Pension Liability	\$17,147,802	\$8,855,195	(\$8,292,607)	-48%
4	Other Long Term Liabilities	\$3,436,036	\$2,555,582	(\$880,454)	-26%
	Total Long Term Liabilities	\$44,977,922	\$34,930,031	(\$10,047,891)	-22%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	<u>Net Assets:</u>				
1	Unrestricted Net Assets or Equity	\$17,066,097	\$26,773,989	\$9,707,892	57%
2	Temporarily Restricted Net Assets	\$615,748	\$561,463	(\$54,285)	-9%
3	Permanently Restricted Net Assets	\$3,633,166	\$3,717,011	\$83,845	2%
	Total Net Assets	\$21,315,011	\$31,052,463	\$9,737,452	46%
	Total Liabilities and Net Assets	\$79,868,773	\$76,543,854	(\$3,324,919)	-4%

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$188,069,269	\$222,664,629	\$34,595,360	18%
2	Less: Allowances	\$118,028,878	\$148,355,004	\$30,326,126	26%
3	Less: Charity Care	\$2,192,753	\$1,271,767	(\$920,986)	-42%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$67,847,638	\$73,037,858	\$5,190,220	8%
5	Provision for Bad Debts	\$0	\$4,127,214	\$4,127,214	0%
	Net Patient Service Revenue less provision for bad debts	\$67,847,638	\$68,910,644	\$1,063,006	2%
6	Other Operating Revenue	\$6,839,751	\$5,965,488	(\$874,263)	-13%
7	Net Assets Released from Restrictions	\$31,857	\$112,828	\$80,971	254%
	Total Operating Revenue	\$74,719,246	\$74,988,960	\$269,714	0%
B. Operating Expenses:					
1	Salaries and Wages	\$30,268,391	\$31,509,639	\$1,241,248	4%
2	Fringe Benefits	\$10,042,713	\$10,024,601	(\$18,112)	0%
3	Physicians Fees	\$2,796,725	\$2,942,670	\$145,945	5%
4	Supplies and Drugs	\$10,946,929	\$10,014,110	(\$932,819)	-9%
5	Depreciation and Amortization	\$3,811,952	\$3,565,031	(\$246,921)	-6%
6	Bad Debts	\$3,309,948	\$0	(\$3,309,948)	-100%
7	Interest Expense	\$719,107	\$682,298	(\$36,809)	-5%
8	Malpractice Insurance Cost	\$1,722,659	\$2,170,991	\$448,332	26%
9	Other Operating Expenses	\$10,420,530	\$10,760,758	\$340,228	3%
	Total Operating Expenses	\$74,038,954	\$71,670,098	(\$2,368,856)	-3%
	Income/(Loss) From Operations	\$680,292	\$3,318,862	\$2,638,570	388%
C. Non-Operating Revenue:					
1	Income from Investments	\$94	\$54	(\$40)	-43%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$180,055)	(\$660,290)	(\$480,235)	267%
	Total Non-Operating Revenue	(\$179,961)	(\$660,236)	(\$480,275)	267%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$500,331	\$2,658,626	\$2,158,295	431%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
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LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$500,331	\$2,658,626	\$2,158,295	431%
	Principal Payments	\$2,317,670	\$1,276,419	(\$1,041,251)	-45%

ROCKVILLE GENERAL HOSPITAL					
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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$36,905,378	\$43,412,552	\$6,507,174	18%
2	MEDICARE MANAGED CARE	\$9,834,862	\$11,126,787	\$1,291,925	13%
3	MEDICAID	\$6,519,440	\$8,608,391	\$2,088,951	32%
4	MEDICAID MANAGED CARE	\$470,503	\$0	(\$470,503)	-100%
5	CHAMPUS/TRICARE	\$58,007	\$147,747	\$89,740	155%
6	COMMERCIAL INSURANCE	\$924,925	\$1,267,171	\$342,246	37%
7	NON-GOVERNMENT MANAGED CARE	\$13,144,163	\$13,104,553	(\$39,610)	0%
8	WORKER'S COMPENSATION	\$924,667	\$536,518	(\$388,149)	-42%
9	SELF- PAY/UNINSURED	\$1,107,951	\$1,046,641	(\$61,310)	-6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$69,889,896	\$79,250,360	\$9,360,464	13%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$30,556,593	\$37,021,821	\$6,465,228	21%
2	MEDICARE MANAGED CARE	\$9,055,757	\$12,557,090	\$3,501,333	39%
3	MEDICAID	\$20,506,295	\$27,463,602	\$6,957,307	34%
4	MEDICAID MANAGED CARE	\$2,749,933	\$0	(\$2,749,933)	-100%
5	CHAMPUS/TRICARE	\$659,375	\$699,623	\$40,248	6%
6	COMMERCIAL INSURANCE	\$2,784,166	\$3,547,479	\$763,313	27%
7	NON-GOVERNMENT MANAGED CARE	\$45,584,609	\$55,338,432	\$9,753,823	21%
8	WORKER'S COMPENSATION	\$1,633,221	\$2,258,633	\$625,412	38%
9	SELF- PAY/UNINSURED	\$4,649,453	\$4,527,588	(\$121,865)	-3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$118,179,402	\$143,414,268	\$25,234,866	21%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$67,461,971	\$80,434,373	\$12,972,402	19%
2	MEDICARE MANAGED CARE	\$18,890,619	\$23,683,877	\$4,793,258	25%
3	MEDICAID	\$27,025,735	\$36,071,993	\$9,046,258	33%
4	MEDICAID MANAGED CARE	\$3,220,436	\$0	(\$3,220,436)	-100%
5	CHAMPUS/TRICARE	\$717,382	\$847,370	\$129,988	18%
6	COMMERCIAL INSURANCE	\$3,709,091	\$4,814,650	\$1,105,559	30%
7	NON-GOVERNMENT MANAGED CARE	\$58,728,772	\$68,442,985	\$9,714,213	17%
8	WORKER'S COMPENSATION	\$2,557,888	\$2,795,151	\$237,263	9%
9	SELF- PAY/UNINSURED	\$5,757,404	\$5,574,229	(\$183,175)	-3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$188,069,298	\$222,664,628	\$34,595,330	18%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$12,222,209	\$13,319,126	\$1,096,917	9%
2	MEDICARE MANAGED CARE	\$3,167,587	\$3,261,238	\$93,651	3%
3	MEDICAID	\$1,647,735	\$2,156,151	\$508,416	31%
4	MEDICAID MANAGED CARE	\$124,868	\$0	(\$124,868)	-100%
5	CHAMPUS/TRICARE	\$45,723	\$77,114	\$31,391	69%
6	COMMERCIAL INSURANCE	\$671,871	\$481,467	(\$190,404)	-28%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$6,859,254	\$6,096,608	(\$762,646)	-11%
8	WORKER'S COMPENSATION	\$428,083	\$234,620	(\$193,463)	-45%
9	SELF- PAY/UNINSURED	\$32,437	\$2,144	(\$30,293)	-93%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$25,199,767	\$25,628,468	\$428,701	2%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$7,627,908	\$7,693,707	\$65,799	1%
2	MEDICARE MANAGED CARE	\$1,968,614	\$2,703,344	\$734,730	37%
3	MEDICAID	\$3,712,403	\$5,234,566	\$1,522,163	41%
4	MEDICAID MANAGED CARE	\$436,875	\$0	(\$436,875)	-100%
5	CHAMPUS/TRICARE	\$387,769	\$176,483	(\$211,286)	-54%
6	COMMERCIAL INSURANCE	\$2,450,691	\$1,522,985	(\$927,706)	-38%
7	NON-GOVERNMENT MANAGED CARE	\$22,862,074	\$25,973,169	\$3,111,095	14%
8	WORKER'S COMPENSATION	\$469,398	\$928,036	\$458,638	98%
9	SELF- PAY/UNINSURED	\$224,697	\$175,163	(\$49,534)	-22%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$40,140,429	\$44,407,453	\$4,267,024	11%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$19,850,117	\$21,012,833	\$1,162,716	6%
2	MEDICARE MANAGED CARE	\$5,136,201	\$5,964,582	\$828,381	16%
3	MEDICAID	\$5,360,138	\$7,390,717	\$2,030,579	38%
4	MEDICAID MANAGED CARE	\$561,743	\$0	(\$561,743)	-100%
5	CHAMPUS/TRICARE	\$433,492	\$253,597	(\$179,895)	-41%
6	COMMERCIAL INSURANCE	\$3,122,562	\$2,004,452	(\$1,118,110)	-36%
7	NON-GOVERNMENT MANAGED CARE	\$29,721,328	\$32,069,777	\$2,348,449	8%
8	WORKER'S COMPENSATION	\$897,481	\$1,162,656	\$265,175	30%
9	SELF- PAY/UNINSURED	\$257,134	\$177,307	(\$79,827)	-31%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$65,340,196	\$70,035,921	\$4,695,725	7%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	1,309	1,341	32	2%
2	MEDICARE MANAGED CARE	346	366	20	6%
3	MEDICAID	248	292	44	18%
4	MEDICAID MANAGED CARE	18	0	(18)	-100%
5	CHAMPUS/TRICARE	4	7	3	75%
6	COMMERCIAL INSURANCE	63	54	(9)	-14%
7	NON-GOVERNMENT MANAGED CARE	449	439	(10)	-2%
8	WORKER'S COMPENSATION	24	20	(4)	-17%
9	SELF- PAY/UNINSURED	58	48	(10)	-17%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	2,519	2,567	48	2%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	7,534	7,172	(362)	-5%
2	MEDICARE MANAGED CARE	1,800	1,761	(39)	-2%
3	MEDICAID	1,258	1,422	164	13%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	104	0	(104)	-100%
5	CHAMPUS/TRICARE	9	18	9	100%
6	COMMERCIAL INSURANCE	249	195	(54)	-22%
7	NON-GOVERNMENT MANAGED CARE	1,720	1,481	(239)	-14%
8	WORKER'S COMPENSATION	84	29	(55)	-65%
9	SELF- PAY/UNINSURED	298	247	(51)	-17%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	13,056	12,325	(731)	-6%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	20,478	26,910	6,432	31%
2	MEDICARE MANAGED CARE	6,269	8,959	2,690	43%
3	MEDICAID	16,108	19,539	3,431	21%
4	MEDICAID MANAGED CARE	2,670	0	(2,670)	-100%
5	CHAMPUS/TRICARE	575	582	7	1%
6	COMMERCIAL INSURANCE	2,976	3,431	455	15%
7	NON-GOVERNMENT MANAGED CARE	49,424	55,840	6,416	13%
8	WORKER'S COMPENSATION	1,020	1,233	213	21%
9	SELF- PAY/UNINSURED	5,933	5,731	(202)	-3%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	105,453	122,225	16,772	16%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$11,337,449	\$12,742,981	\$1,405,532	12%
2	MEDICARE MANAGED CARE	\$2,990,011	\$3,898,497	\$908,486	30%
3	MEDICAID	\$14,860,935	\$19,010,123	\$4,149,188	28%
4	MEDICAID MANAGED CARE	\$1,912,272	\$0	(\$1,912,272)	-100%
5	CHAMPUS/TRICARE	\$362,869	\$416,447	\$53,578	15%
6	COMMERCIAL INSURANCE	\$1,412,276	\$1,600,973	\$188,697	13%
7	NON-GOVERNMENT MANAGED CARE	\$19,245,867	\$20,819,092	\$1,573,225	8%
8	WORKER'S COMPENSATION	\$781,386	\$951,185	\$169,799	22%
9	SELF- PAY/UNINSURED	\$3,766,057	\$4,731,134	\$965,077	26%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$56,533	\$96,354	\$39,821	70%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$56,725,655	\$64,266,786	\$7,541,131	13%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$2,187,906	\$2,197,390	\$9,484	0%
2	MEDICARE MANAGED CARE	\$601,503	\$695,616	\$94,113	16%
3	MEDICAID	\$2,371,685	\$2,700,858	\$329,173	14%
4	MEDICAID MANAGED CARE	\$458,746	\$0	(\$458,746)	-100%
5	CHAMPUS/TRICARE	\$76,395	\$89,990	\$13,595	18%
6	COMMERCIAL INSURANCE	\$859,248	\$775,350	(\$83,898)	-10%
7	NON-GOVERNMENT MANAGED CARE	\$10,817,360	\$11,530,590	\$713,230	7%
8	WORKER'S COMPENSATION	\$551,195	\$516,336	(\$34,859)	-6%
9	SELF- PAY/UNINSURED	\$92,693	\$104,228	\$11,535	12%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$6,667	\$11,764	\$5,097	76%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
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LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$18,023,398	\$18,622,122	\$598,724	3%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	3,829	3,379	(450)	-12%
2	MEDICARE MANAGED CARE	944	1,028	84	9%
3	MEDICAID	7,257	7,147	(110)	-2%
4	MEDICAID MANAGED CARE	1,133	0	(1,133)	-100%
5	CHAMPUS/TRICARE	187	170	(17)	-9%
6	COMMERCIAL INSURANCE	609	600	(9)	-1%
7	NON-GOVERNMENT MANAGED CARE	7,827	8,282	455	6%
8	WORKER'S COMPENSATION	433	416	(17)	-4%
9	SELF- PAY/UNINSURED	2,039	1,627	(412)	-20%
10	SAGA	0	0	0	0%
11	OTHER	20	22	2	10%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	24,278	22,671	(1,607)	-7%

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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
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$9,755,837	\$9,743,100	(\$12,737)	0%
2	Physician Salaries	\$3,035,027	\$3,972,965	\$937,938	31%
3	Non-Nursing, Non-Physician Salaries	\$17,477,527	\$17,793,574	\$316,047	2%
	Total Salaries & Wages	\$30,268,391	\$31,509,639	\$1,241,248	4%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$3,613,110	\$3,448,259	(\$164,851)	-5%
2	Physician Fringe Benefits	\$1,040,916	\$1,318,628	\$277,712	27%
3	Non-Nursing, Non-Physician Fringe Benefits	\$5,388,687	\$5,257,714	(\$130,973)	-2%
	Total Fringe Benefits	\$10,042,713	\$10,024,601	(\$18,112)	0%
C. Contractual Labor Fees:					
1	Nursing Fees	\$0	\$0	\$0	0%
2	Physician Fees	\$2,796,725	\$2,942,670	\$145,945	5%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	Total Contractual Labor Fees	\$2,796,725	\$2,942,670	\$145,945	5%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$9,479,311	\$8,663,885	(\$815,426)	-9%
2	Pharmaceutical Costs	\$1,467,618	\$1,350,225	(\$117,393)	-8%
	Total Medical Supplies and Pharmaceutical Cost	\$10,946,929	\$10,014,110	(\$932,819)	-9%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$2,144,688	\$1,880,073	(\$264,615)	-12%
2	Depreciation-Equipment	\$1,621,971	\$1,642,934	\$20,963	1%
3	Amortization	\$45,293	\$42,024	(\$3,269)	-7%
	Total Depreciation and Amortization	\$3,811,952	\$3,565,031	(\$246,921)	-6%
F. Bad Debts:					
1	Bad Debts	\$3,309,948	\$0	(\$3,309,948)	-100%
G. Interest Expense:					
1	Interest Expense	\$719,107	\$682,298	(\$36,809)	-5%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$1,722,659	\$2,170,991	\$448,332	26%
I. Utilities:					
1	Water	\$63,441	\$75,025	\$11,584	18%
2	Natural Gas	\$256,649	\$257,797	\$1,148	0%
3	Oil	\$29,255	\$48,664	\$19,409	66%
4	Electricity	\$613,819	\$576,648	(\$37,171)	-6%
5	Telephone	\$191,234	\$214,817	\$23,583	12%
6	Other Utilities	\$49,631	\$68,472	\$18,841	38%
	Total Utilities	\$1,204,029	\$1,241,423	\$37,394	3%
J. Business Expenses:					
1	Accounting Fees	\$77,907	\$123,511	\$45,604	59%
2	Legal Fees	\$343,139	\$263,826	(\$79,313)	-23%
3	Consulting Fees	\$360,580	\$753,068	\$392,488	109%

ROCKVILLE GENERAL HOSPITAL					
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 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	Dues and Membership	\$107,528	\$110,690	\$3,162	3%
5	Equipment Leases	\$177,929	\$91,740	(\$86,189)	-48%
6	Building Leases	\$648,753	\$862,410	\$213,657	33%
7	Repairs and Maintenance	\$313,128	\$381,690	\$68,562	22%
8	Insurance	\$262,877	\$282,744	\$19,867	8%
9	Travel	\$35,294	\$13,862	(\$21,432)	-61%
10	Conferences	\$5,850	\$7,682	\$1,832	31%
11	Property Tax	\$0	\$0	\$0	0%
12	General Supplies	\$354,079	\$364,326	\$10,247	3%
13	Licenses and Subscriptions	\$54,125	\$137,208	\$83,083	154%
14	Postage and Shipping	\$4,676	\$57,528	\$52,852	1130%
15	Advertising	\$386,116	\$373,754	(\$12,362)	-3%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$984,938	\$1,041,592	\$56,654	6%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$473,200	\$471,428	(\$1,772)	0%
20	Lab Fees / Red Cross charges	\$779,022	\$737,068	(\$41,954)	-5%
21	Billing & Collection / Bank Fees	\$261,101	\$59,548	(\$201,553)	-77%
22	Recruiting / Employee Education & Recognition	\$158,906	\$143,086	(\$15,820)	-10%
23	Laundry / Linen	\$333,436	\$335,135	\$1,699	1%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$81,688	\$78,062	(\$3,626)	-4%
26	Purchased Services - Medical	\$990,388	\$759,886	(\$230,502)	-23%
27	Purchased Services - Non Medical	\$1,082,565	\$1,156,936	\$74,371	7%
28	Other Business Expenses	\$895,364	\$870,258	(\$25,106)	-3%
	Total Business Expenses	\$9,172,589	\$9,477,038	\$304,449	3%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$43,912	\$42,297	(\$1,615)	-4%
	Total Operating Expenses - All Expense Categories*	\$74,038,954	\$71,670,098	(\$2,368,856)	-3%
*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	\$1,682,311	\$1,480,046	(\$202,265)	-12%
2	General Accounting	\$736,083	\$1,114,252	\$378,169	51%
3	Patient Billing & Collection	\$380,537	\$389,945	\$9,408	2%
4	Admitting / Registration Office	\$464,256	\$519,323	\$55,067	12%
5	Data Processing	\$1,856,488	\$2,026,852	\$170,364	9%
6	Communications	\$599,842	\$534,762	(\$65,080)	-11%
7	Personnel	\$8,118,389	\$8,315,989	\$197,600	2%
8	Public Relations	\$88,803	\$86,358	(\$2,445)	-3%
9	Purchasing	\$257,277	\$309,598	\$52,321	20%
10	Dietary and Cafeteria	\$1,090,190	\$1,106,360	\$16,170	1%
11	Housekeeping	\$855,721	\$863,079	\$7,358	1%
12	Laundry & Linen	\$347,424	\$347,159	(\$265)	0%
13	Operation of Plant	\$1,126,131	\$1,089,326	(\$36,805)	-3%
14	Security	\$343,691	\$350,104	\$6,413	2%
15	Repairs and Maintenance	\$878,203	\$968,761	\$90,558	10%
16	Central Sterile Supply	\$307,510	\$146,959	(\$160,551)	-52%

ROCKVILLE GENERAL HOSPITAL					
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 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
17	Pharmacy Department	\$1,950,144	\$1,854,992	(\$95,152)	-5%
18	Other General Services	\$13,774,775	\$10,426,202	(\$3,348,573)	-24%
	Total General Services	\$34,857,775	\$31,930,067	(\$2,927,708)	-8%
	B. Professional Services:				
1	Medical Care Administration	\$2,348,543	\$2,371,836	\$23,293	1%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$231,304	\$260,665	\$29,361	13%
4	Medical Records	\$838,907	\$793,078	(\$45,829)	-5%
5	Social Service	\$41,862	\$46,575	\$4,713	11%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$3,460,616	\$3,472,154	\$11,538	0%
	C. Special Services:				
1	Operating Room	\$8,708,603	\$7,683,512	(\$1,025,091)	-12%
2	Recovery Room	\$443,111	\$416,312	(\$26,799)	-6%
3	Anesthesiology	\$242,021	\$226,229	(\$15,792)	-7%
4	Delivery Room	\$351,676	\$321,853	(\$29,823)	-8%
5	Diagnostic Radiology	\$3,086,801	\$3,972,846	\$886,045	29%
6	Diagnostic Ultrasound	\$410,065	\$460,624	\$50,559	12%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$281,045	\$308,784	\$27,739	10%
9	CT Scan	\$331,161	\$318,338	(\$12,823)	-4%
10	Laboratory	\$3,190,948	\$3,066,541	(\$124,407)	-4%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$1,399,205	\$1,370,816	(\$28,389)	-2%
13	Electrocardiology	\$100,963	\$80,889	(\$20,074)	-20%
14	Electroencephalography	\$14,332	\$17,412	\$3,080	21%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$36,979	\$44,791	\$7,812	21%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$0	\$0	\$0	0%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$117,450	\$107,914	(\$9,536)	-8%
24	Emergency Room	\$5,369,695	\$6,397,785	\$1,028,090	19%
25	MRI	\$198,592	\$204,429	\$5,837	3%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$971,607	\$858,828	(\$112,779)	-12%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,551,119	\$994,571	(\$556,548)	-36%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$1,185,857	\$1,434,301	\$248,444	21%
	Total Special Services	\$27,991,230	\$28,286,775	\$295,545	1%
	D. Routine Services:				
1	Medical & Surgical Units	\$4,585,481	\$4,614,927	\$29,446	1%
2	Intensive Care Unit	\$2,161,921	\$2,288,381	\$126,460	6%
3	Coronary Care Unit	\$0	\$0	\$0	0%

ROCKVILLE GENERAL HOSPITAL					
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 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	Psychiatric Unit	\$0	\$0	\$0	0%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
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	\$577,825	\$564,606	(\$13,219)	-2%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$404,106	\$513,188	\$109,082	27%
	Total Routine Services	\$7,729,333	\$7,981,102	\$251,769	3%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses - All Departments*	\$74,038,954	\$71,670,098	(\$2,368,856)	-3%
*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.					

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$63,387,116	\$67,847,638	\$68,910,644
2	Other Operating Revenue	4,793,055	6,871,608	6,078,316
3	Total Operating Revenue	\$68,180,171	\$74,719,246	\$74,988,960
4	Total Operating Expenses	68,017,199	74,038,954	71,670,098
5	Income/(Loss) From Operations	\$162,972	\$680,292	\$3,318,862
6	Total Non-Operating Revenue	(855,256)	(179,961)	(660,236)
7	Excess/(Deficiency) of Revenue Over Expenses	(\$692,284)	\$500,331	\$2,658,626
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	0.24%	0.91%	4.47%
2	Hospital Non Operating Margin	-1.27%	-0.24%	-0.89%
3	Hospital Total Margin	-1.03%	0.67%	3.58%
4	Income/(Loss) From Operations	\$162,972	\$680,292	\$3,318,862
5	Total Operating Revenue	\$68,180,171	\$74,719,246	\$74,988,960
6	Total Non-Operating Revenue	(\$855,256)	(\$179,961)	(\$660,236)
7	Total Revenue	\$67,324,915	\$74,539,285	\$74,328,724
8	Excess/(Deficiency) of Revenue Over Expenses	(\$692,284)	\$500,331	\$2,658,626
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$24,688,727	\$17,066,097	\$26,773,989
2	Hospital Total Net Assets	\$29,017,364	\$21,315,011	\$31,052,463
3	Hospital Change in Total Net Assets	(\$9,647,267)	(\$7,702,353)	\$9,737,452
4	Hospital Change in Total Net Assets %	75.0%	-26.5%	45.7%
D. <u>Cost Data Summary</u>				
1	<u>Ratio of Cost to Charges</u>	0.44	0.38	0.31
2	Total Operating Expenses	\$68,017,199	\$74,038,954	\$71,670,098
3	Total Gross Revenue	\$148,072,622	\$188,069,298	\$222,664,628
4	Total Other Operating Revenue	\$4,793,055	\$6,871,608	\$6,078,316

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
5	<u>Private Payment to Cost Ratio</u>	1.31	1.37	1.48
6	Total Non-Government Payments	\$31,151,713	\$33,998,505	\$35,414,192
7	Total Uninsured Payments	\$188,102	\$257,134	\$177,307
8	Total Non-Government Charges	\$57,080,304	\$70,753,155	\$81,627,015
9	Total Uninsured Charges	\$3,932,814	\$5,757,404	\$5,574,229
10	<u>Medicare Payment to Cost Ratio</u>	0.76	0.76	0.83
11	Total Medicare Payments	\$22,836,214	\$24,986,318	\$26,977,415
12	Total Medicare Charges	\$67,375,698	\$86,352,590	\$104,118,250
13	<u>Medicaid Payment to Cost Ratio</u>	0.56	0.52	0.65
14	Total Medicaid Payments	\$5,725,063	\$5,921,881	\$7,390,717
15	Total Medicaid Charges	\$23,118,299	\$30,246,171	\$36,071,993
16	<u>Uncompensated Care Cost</u>	\$1,667,218	\$2,089,937	\$1,691,617
17	Charity Care	\$821,721	\$2,192,753	\$1,271,767
18	Bad Debts	\$2,925,278	\$3,309,948	\$4,127,214
19	Total Uncompensated Care	\$3,746,999	\$5,502,701	\$5,398,981
20	<u>Uncompensated Care % of Total Expenses</u>	2.5%	2.8%	2.4%
21	Total Operating Expenses	\$68,017,199	\$74,038,954	\$71,670,098
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1	1	1
2	Total Current Assets	\$19,531,911	\$16,264,552	\$13,879,554
3	Total Current Liabilities	\$13,439,157	\$13,575,840	\$10,561,360
4	<u>Days Cash on Hand</u>	27	8	6
5	Cash and Cash Equivalents	\$4,739,454	\$1,463,823	\$1,059,290
6	Short Term Investments	0	0	0

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
7	Total Cash and Short Term Investments	\$4,739,454	\$1,463,823	\$1,059,290
8	Total Operating Expenses	\$68,017,199	\$74,038,954	\$71,670,098
9	Depreciation Expense	\$3,672,297	\$3,811,952	\$3,565,031
10	Operating Expenses less Depreciation Expense	\$64,344,902	\$70,227,002	\$68,105,067
11	<u>Days Revenue in Patient Accounts Receivable</u>	55	57	51
12	Net Patient Accounts Receivable	\$10,246,785	\$10,959,585	\$10,269,970
13	Due From Third Party Payers	\$0	\$853,555	\$384,274
14	Due To Third Party Payers	\$684,512	\$1,157,913	\$1,040,198
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$9,562,273	\$10,655,227	\$9,614,046
16	Total Net Patient Revenue	\$63,387,116	\$67,847,638	\$68,910,644
17	<u>Average Payment Period</u>	76	71	57
18	Total Current Liabilities	\$13,439,157	\$13,575,840	\$10,561,360
19	Total Operating Expenses	\$68,017,199	\$74,038,954	\$71,670,098
20	Depreciation Expense	\$3,672,297	\$3,811,952	\$3,565,031
21	Total Operating Expenses less Depreciation Expense	\$64,344,902	\$70,227,002	\$68,105,067
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	35.2	26.7	40.6
2	Total Net Assets	\$29,017,364	\$21,315,011	\$31,052,463
3	Total Assets	\$82,393,533	\$79,868,773	\$76,543,854
4	<u>Cash Flow to Total Debt Ratio</u>	7.6	11.4	18.3
5	Excess/(Deficiency) of Revenues Over Expenses	(\$692,284)	\$500,331	\$2,658,626
6	Depreciation Expense	\$3,672,297	\$3,811,952	\$3,565,031
7	Excess of Revenues Over Expenses and Depreciation Expense	\$2,980,013	\$4,312,283	\$6,223,657
8	Total Current Liabilities	\$13,439,157	\$13,575,840	\$10,561,360
9	Total Long Term Debt	\$25,860,313	\$24,394,084	\$23,519,254
10	Total Current Liabilities and Total Long Term Debt	\$39,299,470	\$37,969,924	\$34,080,614

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
11	<u>Long Term Debt to Capitalization Ratio</u>	47.1	53.4	43.1
12	Total Long Term Debt	\$25,860,313	\$24,394,084	\$23,519,254
13	Total Net Assets	\$29,017,364	\$21,315,011	\$31,052,463
14	Total Long Term Debt and Total Net Assets	\$54,877,677	\$45,709,095	\$54,571,717
15	<u>Debt Service Coverage Ratio</u>	0.2	1.7	3.5
16	Excess Revenues over Expenses	(692,284)	\$500,331	\$2,658,626
17	Interest Expense	1,115,177	\$719,107	\$682,298
18	Depreciation and Amortization Expense	3,672,297	\$3,811,952	\$3,565,031
19	Principal Payments	16,920,114	\$2,317,670	\$1,276,419
G.	<u>Other Financial Ratios</u>			
20	<u>Average Age of Plant</u>	16.2	16.6	16.3
21	Accumulated Depreciation	59,437,084	63,146,530	58,070,717
22	Depreciation and Amortization Expense	3,672,297	3,811,952	3,565,031
H.	<u>Utilization Measures Summary</u>			
1	Patient Days	12,370	13,056	12,325
2	Discharges	2,515	2,519	2,567
3	ALOS	4.9	5.2	4.8
4	Staffed Beds	66	47	47
5	Available Beds	-	118	118
6	Licensed Beds	118	118	118
7	Occupancy of Staffed Beds	51.3%	76.1%	71.8%
8	Occupancy of Available Beds	28.7%	30.3%	28.6%
9	Full Time Equivalent Employees	405.1	376.6	378.3
I.	<u>Hospital Gross Revenue Payer Mix Percentage</u>			
1	Non-Government Gross Revenue Payer Mix Percentage	35.9%	34.6%	34.2%
2	Medicare Gross Revenue Payer Mix Percentage	45.5%	45.9%	46.8%

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
3	Medicaid Gross Revenue Payer Mix Percentage	15.6%	16.1%	16.2%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	2.7%	3.1%	2.5%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.4%	0.4%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$53,147,490	\$64,995,751	\$76,052,786
9	Medicare Gross Revenue (Charges)	\$67,375,698	\$86,352,590	\$104,118,250
10	Medicaid Gross Revenue (Charges)	\$23,118,299	\$30,246,171	\$36,071,993
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$3,932,814	\$5,757,404	\$5,574,229
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$498,321	\$717,382	\$847,370
14	Total Gross Revenue (Charges)	\$148,072,622	\$188,069,298	\$222,664,628
J.	Hospital Net Revenue Payer Mix Percentage			
1	Non-Government Net Revenue Payer Mix Percentage	51.6%	51.6%	50.3%
2	Medicare Net Revenue Payer Mix Percentage	38.0%	38.2%	38.5%
3	Medicaid Net Revenue Payer Mix Percentage	9.5%	9.1%	10.6%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.3%	0.4%	0.3%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.5%	0.7%	0.4%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$30,963,611	\$33,741,371	\$35,236,885
9	Medicare Net Revenue (Payments)	\$22,836,214	\$24,986,318	\$26,977,415
10	Medicaid Net Revenue (Payments)	\$5,725,063	\$5,921,881	\$7,390,717
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$188,102	\$257,134	\$177,307
13	CHAMPUS / TRICARE Net Revenue Payments)	\$316,230	\$433,492	\$253,597
14	Total Net Revenue (Payments)	\$60,029,220	\$65,340,196	\$70,035,921
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	663	594	561
2	Medicare	1,581	1,655	1,707
3	Medical Assistance	268	266	292
4	Medicaid	268	266	292
5	Other Medical Assistance	-	-	-
6	CHAMPUS / TRICARE	3	4	7

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
7	Uninsured (Included In Non-Government)	63	58	48
8	Total	2,515	2,519	2,567
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.34840	1.65392	1.67222
2	Medicare	1.46840	1.49234	1.56631
3	Medical Assistance	1.10300	1.18327	1.42516
4	Medicaid	1.10300	1.18327	1.42516
5	Other Medical Assistance	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.78387	1.29484	1.70347
7	Uninsured (Included In Non-Government)	1.20780	1.12859	1.18444
8	Total Case Mix Index	1.39701	1.49749	1.57377
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	2,066	2,144	2,465
2	Emergency Room - Treated and Discharged	24,397	24,278	22,671
3	Total Emergency Room Visits	26,463	26,422	25,136

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$530,244	\$312,176	(\$218,068)	-41%
2	Inpatient Payments	\$195,593	\$124,850	(\$70,743)	-36%
3	Outpatient Charges	\$344,286	\$521,517	\$177,231	51%
4	Outpatient Payments	\$108,561	\$171,175	\$62,614	58%
5	Discharges	17	12	(5)	-29%
6	Patient Days	83	58	(25)	-30%
7	Outpatient Visits (Excludes ED Visits)	239	379	140	59%
8	Emergency Department Outpatient Visits	33	57	24	73%
9	Emergency Department Inpatient Admissions	14	12	(2)	-14%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$874,530	\$833,693	(\$40,837)	-5%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$304,154	\$296,025	(\$8,129)	-3%
B.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$5,199,014	\$5,883,834	\$684,820	13%
2	Inpatient Payments	\$1,762,390	\$1,634,381	(\$128,009)	-7%
3	Outpatient Charges	\$5,364,128	\$6,509,991	\$1,145,863	21%
4	Outpatient Payments	\$1,157,650	\$1,375,607	\$217,957	19%
5	Discharges	193	196	3	2%
6	Patient Days	926	925	(1)	0%
7	Outpatient Visits (Excludes ED Visits)	3,272	4,358	1,086	33%
8	Emergency Department Outpatient Visits	446	433	(13)	-3%
9	Emergency Department Inpatient Admissions	149	171	22	15%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$10,563,142	\$12,393,825	\$1,830,683	17%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,920,040	\$3,009,988	\$89,948	3%
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$43,140	\$0	(\$43,140)	-100%
2	Inpatient Payments	\$13,752	\$0	(\$13,752)	-100%
3	Outpatient Charges	\$75,493	\$75,378	(\$115)	0%
4	Outpatient Payments	\$17,254	\$18,451	\$1,197	7%
5	Discharges	1	0	(1)	-100%
6	Patient Days	7	0	(7)	-100%
7	Outpatient Visits (Excludes ED Visits)	22	26	4	18%
8	Emergency Department Outpatient Visits	30	22	(8)	-27%
9	Emergency Department Inpatient Admissions	1	0	(1)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$118,633	\$75,378	(\$43,255)	-36%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$31,006	\$18,451	(\$12,555)	-40%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$2,440,655	\$3,157,578	\$716,923	29%
2	Inpatient Payments	\$760,964	\$1,020,337	\$259,373	34%
3	Outpatient Charges	\$1,914,946	\$3,280,891	\$1,365,945	71%
4	Outpatient Payments	\$408,278	\$622,616	\$214,338	52%
5	Discharges	82	98	16	20%
6	Patient Days	462	467	5	1%
7	Outpatient Visits (Excludes ED Visits)	1,056	1,835	779	74%
8	Emergency Department Outpatient Visits	231	290	59	26%
9	Emergency Department Inpatient Admissions	69	88	19	28%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,355,601	\$6,438,469	\$2,082,868	48%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,169,242	\$1,642,953	\$473,711	41%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$799,637	\$564,061	(\$235,576)	-29%
2	Inpatient Payments	\$230,391	\$162,084	(\$68,307)	-30%
3	Outpatient Charges	\$674,471	\$866,281	\$191,810	28%
4	Outpatient Payments	\$143,754	\$197,573	\$53,819	37%
5	Discharges	25	19	(6)	-24%
6	Patient Days	146	110	(36)	-25%
7	Outpatient Visits (Excludes ED Visits)	271	422	151	56%
8	Emergency Department Outpatient Visits	146	140	(6)	-4%
9	Emergency Department Inpatient Admissions	23	17	(6)	-26%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,474,108	\$1,430,342	(\$43,766)	-3%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$374,145	\$359,657	(\$14,488)	-4%
I. AETNA					

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Charges	\$810,554	\$1,209,138	\$398,584	49%
2	Inpatient Payments	\$201,379	\$319,586	\$118,207	59%
3	Outpatient Charges	\$642,823	\$1,226,226	\$583,403	91%
4	Outpatient Payments	\$127,823	\$307,089	\$179,266	140%
5	Discharges	27	41	14	52%
6	Patient Days	174	201	27	16%
7	Outpatient Visits (Excludes ED Visits)	449	851	402	90%
8	Emergency Department Outpatient Visits	56	83	27	48%
9	Emergency Department Inpatient Admissions	25	36	11	44%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,453,377	\$2,435,364	\$981,987	68%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$329,202	\$626,675	\$297,473	90%
J.	HUMANA				
1	Inpatient Charges	\$11,618	\$0	(\$11,618)	-100%
2	Inpatient Payments	\$3,118	\$0	(\$3,118)	-100%
3	Outpatient Charges	\$39,610	\$76,806	\$37,196	94%
4	Outpatient Payments	\$5,294	\$10,833	\$5,539	105%
5	Discharges	1	0	(1)	-100%
6	Patient Days	2	0	(2)	-100%
7	Outpatient Visits (Excludes ED Visits)	16	60	44	275%
8	Emergency Department Outpatient Visits	2	3	1	50%
9	Emergency Department Inpatient Admissions	1	0	(1)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$51,228	\$76,806	\$25,578	50%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,412	\$10,833	\$2,421	29%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L.	UNICARE LIFE & HEALTH INSURANCE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
M.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(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%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$9,834,862	\$11,126,787	\$1,291,925	13%
	TOTAL INPATIENT PAYMENTS	\$3,167,587	\$3,261,238	\$93,651	3%
	TOTAL OUTPATIENT CHARGES	\$9,055,757	\$12,557,090	\$3,501,333	39%
	TOTAL OUTPATIENT PAYMENTS	\$1,968,614	\$2,703,344	\$734,730	37%
	TOTAL DISCHARGES	346	366	20	6%
	TOTAL PATIENT DAYS	1,800	1,761	(39)	-2%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	5,325	7,931	2,606	49%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	944	1,028	84	9%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	282	324	42	15%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$18,890,619	\$23,683,877	\$4,793,258	25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,136,201	\$5,964,582	\$828,381	16%

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$171,899	\$0	(\$171,899)	-100%
2	Inpatient Payments	\$24,777	\$0	(\$24,777)	-100%
3	Outpatient Charges	\$1,432,928	\$0	(\$1,432,928)	-100%
4	Outpatient Payments	\$191,786	\$0	(\$191,786)	-100%
5	Discharges	8	0	(8)	-100%
6	Patient Days	23	0	(23)	-100%
7	Outpatient Visits (Excludes ED Visits)	754	0	(754)	-100%
8	Emergency Department Outpatient Visits	582	0	(582)	-100%
9	Emergency Department Inpatient Admissions	8	0	(8)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,604,827	\$0	(\$1,604,827)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$216,563	\$0	(\$216,563)	-100%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F.	FIRST CHOICE OF CONNECTICUT, PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$84,553	\$0	(\$84,553)	-100%
2	Inpatient Payments	\$26,553	\$0	(\$26,553)	-100%
3	Outpatient Charges	\$373,404	\$0	(\$373,404)	-100%
4	Outpatient Payments	\$73,404	\$0	(\$73,404)	-100%
5	Discharges	3	0	(3)	-100%
6	Patient Days	21	0	(21)	-100%
7	Outpatient Visits (Excludes ED Visits)	217	0	(217)	-100%
8	Emergency Department Outpatient Visits	182	0	(182)	-100%
9	Emergency Department Inpatient Admissions	3	0	(3)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$457,957	\$0	(\$457,957)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$99,957	\$0	(\$99,957)	-100%
H.	AETNA				
1	Inpatient Charges	\$214,051	\$0	(\$214,051)	-100%
2	Inpatient Payments	\$73,538	\$0	(\$73,538)	-100%
3	Outpatient Charges	\$943,601	\$0	(\$943,601)	-100%
4	Outpatient Payments	\$171,685	\$0	(\$171,685)	-100%
5	Discharges	7	0	(7)	-100%
6	Patient Days	60	0	(60)	-100%
7	Outpatient Visits (Excludes ED Visits)	566	0	(566)	-100%
8	Emergency Department Outpatient Visits	369	0	(369)	-100%
9	Emergency Department Inpatient Admissions	6	0	(6)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,157,652	\$0	(\$1,157,652)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$245,223	\$0	(\$245,223)	-100%

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. TOTAL MEDICAID MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$470,503	\$0	(\$470,503)	-100%
	TOTAL INPATIENT PAYMENTS	\$124,868	\$0	(\$124,868)	-100%
	TOTAL OUTPATIENT CHARGES	\$2,749,933	\$0	(\$2,749,933)	-100%
	TOTAL OUTPATIENT PAYMENTS	\$436,875	\$0	(\$436,875)	-100%
	TOTAL DISCHARGES	18	0	(18)	-100%
	TOTAL PATIENT DAYS	104	0	(104)	-100%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	1,537	0	(1,537)	-100%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	1,133	0	(1,133)	-100%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	17	0	(17)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,220,436	\$0	(\$3,220,436)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$561,743	\$0	(\$561,743)	-100%

EASTERN CT HEALTH NETWORK , INC					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$20,052,067	\$22,439,356	\$2,387,289	12%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$46,711,256	\$46,524,143	(\$187,113)	0%
4	Current Assets Whose Use is Limited for Current Liabilities	\$5,435,445	\$1,850,531	(\$3,584,914)	-66%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$4,402,920	\$3,463,096	(\$939,824)	-21%
7	Inventories of Supplies	\$4,253,600	\$5,065,716	\$812,116	19%
8	Prepaid Expenses	\$5,020,607	\$5,046,865	\$26,258	1%
9	Other Current Assets	\$0	\$0	\$0	0%
	Total Current Assets	\$85,875,895	\$84,389,707	(\$1,486,188)	-2%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$12,342,602	\$12,824,429	\$481,827	4%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$42,086,540	\$42,139,177	\$52,637	0%
	Total Noncurrent Assets Whose Use is Limited:	\$54,429,142	\$54,963,606	\$534,464	1%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$35,011,140	\$26,741,383	(\$8,269,757)	-24%
7	Other Noncurrent Assets	\$11,678,494	\$20,183,543	\$8,505,049	73%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$313,325,973	\$302,185,099	(\$11,140,874)	-4%
2	Less: Accumulated Depreciation	\$219,601,454	\$206,928,185	(\$12,673,269)	(\$0)
	Property, Plant and Equipment, Net	\$93,724,519	\$95,256,914	\$1,532,395	2%
3	Construction in Progress	\$2,570,935	\$931,583	(\$1,639,352)	-64%
	Total Net Fixed Assets	\$96,295,454	\$96,188,497	(\$106,957)	0%
	Total Assets	\$283,290,125	\$282,466,736	(\$823,389)	0%
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				

EASTERN CT HEALTH NETWORK , INC					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Accounts Payable and Accrued Expenses	\$25,121,249	\$29,240,555	\$4,119,306	16%
2	Salaries, Wages and Payroll Taxes	\$5,609,427	\$5,634,280	\$24,853	0%
3	Due To Third Party Payers	\$2,793,775	\$4,512,361	\$1,718,586	62%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$8,831,469	\$8,925,357	\$93,888	1%
6	Current Portion of Notes Payable	\$4,572,885	\$4,406,965	(\$165,920)	-4%
7	Other Current Liabilities	\$12,050,537	\$11,625,999	(\$424,538)	-4%
	Total Current Liabilities	\$58,979,342	\$64,345,517	\$5,366,175	9%
	B. Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$74,496,875	\$72,082,455	(\$2,414,420)	-3%
2	Notes Payable (Net of Current Portion)	\$13,044,874	\$12,333,551	(\$711,323)	-5%
	Total Long Term Debt	\$87,541,749	\$84,416,006	(\$3,125,743)	-4%
3	Accrued Pension Liability	\$74,618,608	\$38,111,463	(\$36,507,145)	-49%
4	Other Long Term Liabilities	\$10,549,165	\$9,744,601	(\$804,564)	-8%
	Total Long Term Liabilities	\$172,709,522	\$132,272,070	(\$40,437,452)	-23%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
	C. Net Assets:				
1	Unrestricted Net Assets or Equity	\$36,549,384	\$70,965,928	\$34,416,544	94%
2	Temporarily Restricted Net Assets	\$3,243,522	\$2,587,301	(\$656,221)	-20%
3	Permanently Restricted Net Assets	\$11,808,355	\$12,295,920	\$487,565	4%
	Total Net Assets	\$51,601,261	\$85,849,149	\$34,247,888	66%
	Total Liabilities and Net Assets	\$283,290,125	\$282,466,736	(\$823,389)	0%

EASTERN CT HEALTH NETWORK , INC					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$754,864,642	\$900,707,906	\$145,843,264	19%
2	Less: Allowances	\$470,675,259	\$585,405,098	\$114,729,839	24%
3	Less: Charity Care	\$7,146,386	\$5,180,649	(\$1,965,737)	-28%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$277,042,997	\$310,122,159	\$33,079,162	12%
5	Provision for Bad Debts	\$0	\$11,142,202	\$11,142,202	0%
	Net Patient Service Revenue less provision for bad debts	\$277,042,997	\$298,979,957	\$21,936,960	8%
6	Other Operating Revenue	\$28,201,071	\$27,116,509	(\$1,084,562)	-4%
7	Net Assets Released from Restrictions	\$638,113	\$1,871,227	\$1,233,114	193%
	Total Operating Revenue	\$305,882,181	\$327,967,693	\$22,085,512	7%
B. Operating Expenses:					
1	Salaries and Wages	\$139,915,729	\$163,729,402	\$23,813,673	17%
2	Fringe Benefits	\$40,155,469	\$47,592,094	\$7,436,625	19%
3	Physicians Fees	\$10,398,896	\$11,330,248	\$931,352	9%
4	Supplies and Drugs	\$36,089,404	\$36,699,785	\$610,381	2%
5	Depreciation and Amortization	\$11,811,633	\$12,290,822	\$479,189	4%
6	Bad Debts	\$11,285,210	\$0	(\$11,285,210)	-100%
7	Interest Expense	\$3,981,831	\$3,907,765	(\$74,066)	-2%
8	Malpractice Insurance Cost	\$6,669,181	\$8,373,093	\$1,703,912	26%
9	Other Operating Expenses	\$40,647,136	\$43,931,989	\$3,284,853	8%
	Total Operating Expenses	\$300,954,489	\$327,855,198	\$26,900,709	9%
	Income/(Loss) From Operations	\$4,927,692	\$112,495	(\$4,815,197)	-98%
C. Non-Operating Revenue:					
1	Income from Investments	\$1,190	\$2,784	\$1,594	134%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$1,201,726)	(\$2,141,373)	(\$939,647)	78%
	Total Non-Operating Revenue	(\$1,200,536)	(\$2,138,589)	(\$938,053)	78%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$3,727,156	(\$2,026,094)	(\$5,753,250)	-154%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

EASTERN CT HEALTH NETWORK , INC					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$3,727,156	(\$2,026,094)	(\$5,753,250)	-154%

EASTERN CT HEALTH NETWORK , INC				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
A. <u>Parent Corporation Statement of Operations Summary</u>				
1	Net Patient Revenue	\$261,348,876	\$277,042,997	\$298,979,957
2	Other Operating Revenue	19,641,309	28,839,184	28,987,736
3	Total Operating Revenue	\$280,990,185	\$305,882,181	\$327,967,693
4	Total Operating Expenses	280,947,508	300,954,489	327,855,198
5	Income/(Loss) From Operations	\$42,677	\$4,927,692	\$112,495
6	Total Non-Operating Revenue	(1,341,596)	(1,200,536)	(2,138,589)
7	Excess/(Deficiency) of Revenue Over Expenses	(\$1,298,919)	\$3,727,156	(\$2,026,094)
B. <u>Parent Corporation Profitability Summary</u>				
1	Parent Corporation Operating Margin	0.02%	1.62%	0.03%
2	Parent Corporation Non-Operating Margin	-0.48%	-0.39%	-0.66%
3	Parent Corporation Total Margin	-0.46%	1.22%	-0.62%
4	Income/(Loss) From Operations	\$42,677	\$4,927,692	\$112,495
5	Total Operating Revenue	\$280,990,185	\$305,882,181	\$327,967,693
6	Total Non-Operating Revenue	(\$1,341,596)	(\$1,200,536)	(\$2,138,589)
7	Total Revenue	\$279,648,589	\$304,681,645	\$325,829,104
8	Excess/(Deficiency) of Revenue Over Expenses	(\$1,298,919)	\$3,727,156	(\$2,026,094)
C. <u>Parent Corporation Net Assets Summary</u>				
1	Parent Corporation Unrestricted Net Assets	\$41,815,956	\$36,549,384	\$70,965,928
2	Parent Corporation Total Net Assets	\$55,161,657	\$51,601,261	\$85,849,149
3	Parent Corporation Change in Total Net Assets	(\$16,314,825)	(\$3,560,396)	\$34,247,888
4	Parent Corporation Change in Total Net Assets %	77.2%	-6.5%	66.4%
D. <u>Liquidity Measures Summary</u>				
1	Current Ratio	1.26	1.46	1.31
2	Total Current Assets	\$71,146,925	\$85,875,895	\$84,389,707
3	Total Current Liabilities	\$56,677,785	\$58,979,342	\$64,345,517

EASTERN CT HEALTH NETWORK , INC				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
4	<u>Days Cash on Hand</u>	28	25	26
5	Cash and Cash Equivalents	\$20,991,180	\$20,052,067	\$22,439,356
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$20,991,180	\$20,052,067	\$22,439,356
8	Total Operating Expenses	\$280,947,508	\$300,954,489	\$327,855,198
9	Depreciation Expense	\$11,898,918	\$11,811,633	\$12,290,822
10	Operating Expenses less Depreciation Expense	\$269,048,590	\$289,142,856	\$315,564,376
11	<u>Days Revenue in Patient Accounts Receivable</u>	53	64	56
12	Net Patient Accounts Receivable	\$ 39,643,428	\$ 46,711,256	\$ 46,524,143
13	Due From Third Party Payers	\$432,832	\$4,402,920	\$3,463,096
14	Due To Third Party Payers	\$2,104,534	\$2,793,775	\$4,512,361
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 37,971,726	\$ 48,320,401	\$ 45,474,878
16	Total Net Patient Revenue	\$261,348,876	\$277,042,997	\$298,979,957
17	<u>Average Payment Period</u>	77	74	74
18	Total Current Liabilities	\$56,677,785	\$58,979,342	\$64,345,517
19	Total Operating Expenses	\$280,947,508	\$300,954,489	\$327,855,198
20	Depreciation Expense	\$11,898,918	\$11,811,633	\$12,290,822
20	Total Operating Expenses less Depreciation Expense	\$269,048,590	\$289,142,856	\$315,564,376
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	21.0	18.2	30.4
2	Total Net Assets	\$55,161,657	\$51,601,261	\$85,849,149
3	Total Assets	\$262,289,689	\$283,290,125	\$282,466,736
4	<u>Cash Flow to Total Debt Ratio</u>	7.4	10.6	6.9
5	Excess/(Deficiency) of Revenues Over Expenses	(\$1,298,919)	\$3,727,156	(\$2,026,094)

EASTERN CT HEALTH NETWORK , INC				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
6	Depreciation Expense	\$11,898,918	\$11,811,633	\$12,290,822
7	Excess of Revenues Over Expenses and Depreciation Expense	\$10,599,999	\$15,538,789	\$10,264,728
8	Total Current Liabilities	\$56,677,785	\$58,979,342	\$64,345,517
9	Total Long Term Debt	\$86,635,165	\$87,541,749	\$84,416,006
10	Total Current Liabilities and Total Long Term Debt	\$143,312,950	\$146,521,091	\$148,761,523
11	<u>Long Term Debt to Capitalization Ratio</u>	61.1	62.9	49.6
12	Total Long Term Debt	\$86,635,165	\$87,541,749	\$84,416,006
13	Total Net Assets	\$55,161,657	\$51,601,261	\$85,849,149
14	Total Long Term Debt and Total Net Assets	\$141,796,822	\$139,143,010	\$170,265,155

ROCKVILLE GENERAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
		PATIENT DAYS	DISCHARGES OR CU/CCU # PATIENT	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS
LINE	DESCRIPTION							
1	Adult Medical/Surgical	9,897	2,567	2,468	38	81	71.4%	33.5%
2	ICU/CCU (Excludes Neonatal ICU)	2,428	232	0	9	9	73.9%	73.9%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	0	0	0	0	0	0.0%	0.0%
	TOTAL PSYCHIATRIC	0	0	0	0	0	0.0%	0.0%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	0	0	0	0	12	0.0%	0.0%
7	Newborn	0	0	0	0	16	0.0%	0.0%
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%
	TOTAL EXCLUDING NEWBORN	12,325	2,567	2,468	47	102	71.8%	33.1%
	TOTAL INPATIENT BED UTILIZATION	12,325	2,567	2,468	47	118	71.8%	28.6%
	TOTAL INPATIENT REPORTED YEAR	12,325	2,567	2,468	47	118	71.8%	28.6%
	TOTAL INPATIENT PRIOR YEAR	13,056	2,519	2,384	47	118	76.1%	30.3%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-731	48	84	0	0	-4.3%	-1.7%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-6%	2%	4%	0%	0%	-6%	-6%
	Total Licensed Beds and Bassinets	118						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	1,817	1,965	148	8%
2	Outpatient Scans (Excluding Emergency Department Scans)	4,447	4,746	299	7%
3	Emergency Department Scans	1,729	1,845	116	7%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	7,993	8,556	563	7%
B. MRI Scans (A)					
1	Inpatient Scans	234	291	57	24%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,496	1,460	-36	-2%
3	Emergency Department Scans	15	15	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	1,745	1,766	21	1%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Linear Accelerator Procedures	0	0	0	0%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
I. Surgical Procedures					
1	Inpatient Surgical Procedures	635	662	27	4%
2	Outpatient Surgical Procedures	1,653	1,566	-87	-5%
	Total Surgical Procedures	2,288	2,228	-60	-3%
J. Endoscopy Procedures					
1	Inpatient Endoscopy Procedures	182	187	5	3%
2	Outpatient Endoscopy Procedures	2,625	2,761	136	5%
	Total Endoscopy Procedures	2,807	2,948	141	5%
K. Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	2,144	2,465	321	15%
2	Emergency Room Visits: Treated and Discharged	24,278	22,671	-1,607	-7%
	Total Emergency Room Visits	26,422	25,136	-1,286	-5%
L. Hospital Clinic Visits					
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	6,175	6,175	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	1,716	0	-1,716	-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	1,526	1,526	0%
13	Specialty Clinic Visits - Other Speciality Clinics	0	0	0	0%
	Total Hospital Clinic Visits	1,716	7,701	5,985	349%
M. Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	36,009	41,165	5,156	14%
2	Cardiac Rehabilitation	8,071	7,807	-264	-3%
3	Chemotherapy	0	0	0	0%
4	Gastroenterology	2,625	2,761	136	5%
5	Other Outpatient Visits	31,309	38,378	7,069	23%
	Total Other Hospital Outpatient Visits	78,014	90,111	12,097	16%
N. Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	119.0	116.6	-2.4	-2%
2	Total Physician FTEs	6.3	5.2	-1.1	-17%
3	Total Non-Nursing and Non-Physician FTEs	251.3	256.5	5.2	2%
	Total Hospital Full Time Equivalent Employees	376.6	378.3	1.7	0%

ROCKVILLE GENERAL HOSPITAL					
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 FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	Hospital Operating Room	1,653	1,566	-87	-5%
	Total Outpatient Surgical Procedures(A)	1,653	1,566	-87	-5%
B. Outpatient Endoscopy Procedures					
1	Hospital Operating Room	2,625	2,761	136	5%
	Total Outpatient Endoscopy Procedures(B)	2,625	2,761	136	5%
C. Outpatient Hospital Emergency Room Visits					
1	Hospital Emergency Room	24,278	22,671	-1,607	-7%
	Total Outpatient Hospital Emergency Room Visits(C)	24,278	22,671	-1,607	-7%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

ROCKVILLE GENERAL HOSPITAL					
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 FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$46,740,240	\$54,539,339	\$7,799,099	17%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$15,389,796	\$16,580,364	\$1,190,568	8%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	32.93%	30.40%	-2.53%	-8%
4	DISCHARGES	1,655	1,707	52	3%
5	CASE MIX INDEX (CMI)	1.49234	1.56631	0.07397	5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,469.82270	2,673.69117	203.86847	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,231.13	\$6,201.30	(\$29.83)	0%
8	PATIENT DAYS	9,334	8,933	(401)	-4%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,648.79	\$1,856.08	\$207.29	13%
10	AVERAGE LENGTH OF STAY	5.6	5.2	(0.4)	-7%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$39,612,350	\$49,578,911	\$9,966,561	25%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,596,522	\$10,397,051	\$800,529	8%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.23%	20.97%	-3.26%	-13%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	84.75%	90.90%	6.15%	7%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,402.61238	1,551.74600	149.13362	11%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,841.89	\$6,700.23	(\$141.66)	-2%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$86,352,590	\$104,118,250	\$17,765,660	21%
18	TOTAL ACCRUED PAYMENTS	\$24,986,318	\$26,977,415	\$1,991,097	8%
19	TOTAL ALLOWANCES	\$61,366,272	\$77,140,835	\$15,774,563	26%
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$16,101,706	\$15,954,883	(\$146,823)	-1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$7,991,645	\$6,814,839	(\$1,176,806)	-15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	49.63%	42.71%	-6.92%	-14%
4	DISCHARGES	594	561	(33)	-6%
5	CASE MIX INDEX (CMI)	1.65392	1.67222	0.01830	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	982.42848	938.11542	(44.31306)	-5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,134.58	\$7,264.39	(\$870.19)	-11%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,903.45)	(\$1,063.09)	\$840.36	-44%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,870,002)	(\$997,303)	\$872,699	-47%
10	PATIENT DAYS	2,351	1,952	(399)	-17%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,399.25	\$3,491.21	\$91.95	3%
12	AVERAGE LENGTH OF STAY	4.0	3.5	(0.5)	-12%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$54,651,449	\$65,672,132	\$11,020,683	20%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$26,006,860	\$28,599,353	\$2,592,493	10%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	47.59%	43.55%	-4.04%	-8%

ROCKVILLE GENERAL HOSPITAL					
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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	339.41%	411.61%	72.20%	21%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,016.11933	2,309.14047	293.02114	15%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,899.46	\$12,385.28	(\$514.18)	-4%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$6,057.57)	(\$5,685.05)	\$372.52	-6%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$12,212,790)	(\$13,127,587)	(\$914,797)	7%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$70,753,155	\$81,627,015	\$10,873,860	15%
22	TOTAL ACCRUED PAYMENTS	\$33,998,505	\$35,414,192	\$1,415,687	4%
23	TOTAL ALLOWANCES	\$36,754,650	\$46,212,823	\$9,458,173	26%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$14,082,791)	(\$14,124,890)	(\$42,098)	0%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$70,753,155	\$81,627,015	\$10,873,860	15%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$33,998,505	\$35,414,192	\$1,415,687	4%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$36,754,650	\$46,212,823	\$9,458,173	26%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	51.95%	56.61%	4.67%	
C. UNINSURED					
UNINSURED INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$1,107,951	\$1,046,641	(\$61,310)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$32,437	\$2,144	(\$30,293)	-93%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	2.93%	0.20%	-2.72%	-93%
4	DISCHARGES	58	48	(10)	-17%
5	CASE MIX INDEX (CMI)	1.12859	1.18444	0.05585	5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	65.45822	56.85312	(8.60510)	-13%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$495.54	\$37.71	(\$457.83)	-92%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$7,639.04	\$7,226.68	(\$412.36)	-5%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$5,735.60	\$6,163.59	\$427.99	7%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$375,442	\$350,419	(\$25,023)	-7%
11	PATIENT DAYS	298	247	(51)	-17%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$108.85	\$8.68	(\$100.17)	-92%
13	AVERAGE LENGTH OF STAY	5.1	5.1	0.0	0%
UNINSURED OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$4,649,453	\$4,527,588	(\$121,865)	-3%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$224,697	\$175,163	(\$49,534)	-22%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	4.83%	3.87%	-0.96%	-20%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	419.64%	432.58%	12.94%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	243.39368	207.63970	(35.75398)	-15%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$923.18	\$843.59	(\$79.59)	-9%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$11,976.28	\$11,541.69	(\$434.59)	-4%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,918.71	\$5,856.64	(\$62.07)	-1%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,440,576	\$1,216,070	(\$224,506)	-16%
UNINSURED TOTALS (INPATIENT AND OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$5,757,404	\$5,574,229	(\$183,175)	-3%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
24	TOTAL ACCRUED PAYMENTS	\$257,134	\$177,307	(\$79,827)	-31%
25	TOTAL ALLOWANCES	\$5,500,270	\$5,396,922	(\$103,348)	-2%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,816,018	\$1,566,490	(\$249,529)	-14%
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$6,989,943	\$8,608,391	\$1,618,448	23%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,772,603	\$2,156,151	\$383,548	22%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.36%	25.05%	-0.31%	-1%
4	DISCHARGES	266	292	26	10%
5	CASE MIX INDEX (CMI)	1.18327	1.42516	0.24189	20%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	314.74982	416.14672	101.39690	32%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,631.78	\$5,181.23	(\$450.56)	-8%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,502.80	\$2,083.16	(\$419.63)	-17%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$599.35	\$1,020.07	\$420.72	70%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$188,645	\$424,500	\$235,855	125%
11	PATIENT DAYS	1,362	1,422	60	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,301.47	\$1,516.28	\$214.81	17%
13	AVERAGE LENGTH OF STAY	5.1	4.9	(0.3)	-5%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$23,256,228	\$27,463,602	\$4,207,374	18%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$4,149,278	\$5,234,566	\$1,085,288	26%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.84%	19.06%	1.22%	7%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	332.71%	319.03%	-13.68%	-4%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	885.00817	931.57615	46.56799	5%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,688.41	\$5,619.04	\$930.64	20%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$8,211.06	\$6,766.24	(\$1,444.82)	-18%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,153.49	\$1,081.18	(\$1,072.30)	-50%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,905,852	\$1,007,206	(\$898,646)	-47%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$30,246,171	\$36,071,993	\$5,825,822	19%
24	TOTAL ACCRUED PAYMENTS	\$5,921,881	\$7,390,717	\$1,468,836	25%
25	TOTAL ALLOWANCES	\$24,324,290	\$28,681,276	\$4,356,986	18%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,094,497	\$1,431,706	(\$662,791)	-32%
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%

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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
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$8,134.58	\$7,264.39	(\$870.19)	-11%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$6,231.13	\$6,201.30	(\$29.83)	0%
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%
<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>					
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	\$12,899.46	\$12,385.28	(\$514.18)	-4%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$6,841.89	\$6,700.23	(\$141.66)	-2%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>					
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
<u>TOTAL MEDICAL ASSISTANCE INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$6,989,943	\$8,608,391	\$1,618,448	23%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,772,603	\$2,156,151	\$383,548	22%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.36%	25.05%	-0.31%	-1%
4	DISCHARGES	266	292	26	10%
5	CASE MIX INDEX (CMI)	1.18327	1.42516	0.24189	20%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	314.74982	416.14672	101.39690	32%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,631.78	\$5,181.23	(\$450.56)	-8%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,502.80	\$2,083.16	(\$419.63)	-17%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$599.35	\$1,020.07	\$420.72	70%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$188,645	\$424,500	\$235,855	125%
11	PATIENT DAYS	1,362	1,422	60	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,301.47	\$1,516.28	\$214.81	17%
13	AVERAGE LENGTH OF STAY	5.1	4.9	(0.3)	-5%
<u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$23,256,228	\$27,463,602	\$4,207,374	18%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$4,149,278	\$5,234,566	\$1,085,288	26%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.84%	19.06%	1.22%	7%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	332.71%	319.03%	-13.68%	-4%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	885.00817	931.57615	46.56799	5%

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LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,688.41	\$5,619.04	\$930.64	20%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$8,211.06	\$6,766.24	(\$1,444.82)	-18%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,153.49	\$1,081.18	(\$1,072.30)	-50%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,905,852	\$1,007,206	(\$898,646)	-47%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$30,246,171	\$36,071,993	\$5,825,822	19%
24	TOTAL ACCRUED PAYMENTS	\$5,921,881	\$7,390,717	\$1,468,836	25%
25	TOTAL ALLOWANCES	\$24,324,290	\$28,681,276	\$4,356,986	18%
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$58,007	\$147,747	\$89,740	155%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$45,723	\$77,114	\$31,391	69%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	78.82%	52.19%	-26.63%	-34%
4	DISCHARGES	4	7	3	75%
5	CASE MIX INDEX (CMI)	1.29484	1.70347	0.40863	32%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5.17936	11.92429	6.74493	130%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,827.92	\$6,466.97	(\$2,360.96)	-27%
8	PATIENT DAYS	9	18	9	100%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$5,080.33	\$4,284.11	(\$796.22)	-16%
10	AVERAGE LENGTH OF STAY	2.3	2.6	0.3	14%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$659,375	\$699,623	\$40,248	6%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$387,769	\$176,483	(\$211,286)	-54%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$717,382	\$847,370	\$129,988	18%
14	TOTAL ACCRUED PAYMENTS	\$433,492	\$253,597	(\$179,895)	-41%
15	TOTAL ALLOWANCES	\$283,890	\$593,773	\$309,883	109%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$6,871,608	\$6,078,316	(\$793,292)	-12%
2	TOTAL OPERATING EXPENSES	\$74,038,954	\$71,670,098	(\$2,368,856)	-3%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$2,192,753	\$1,271,767	(\$920,986)	-42%
5	BAD DEBTS (CHARGES)	\$3,309,948	\$4,127,214	\$817,266	25%
6	UNCOMPENSATED CARE (CHARGES)	\$5,502,701	\$5,398,981	(\$103,720)	-2%
7	COST OF UNCOMPENSATED CARE	\$1,750,779	\$1,567,261	(\$183,518)	-10%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$30,246,171	\$36,071,993	\$5,825,822	19%
9	TOTAL ACCRUED PAYMENTS	\$5,921,881	\$7,390,717	\$1,468,836	25%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$9,623,342	\$10,471,278	\$847,936	9%

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LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$3,701,461	\$3,080,561	(\$620,900)	-17%
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$69,889,896	\$79,250,360	\$9,360,464	13%
2	TOTAL INPATIENT PAYMENTS	\$25,199,767	\$25,628,468	\$428,701	2%
3	TOTAL INPATIENT PAYMENTS / CHARGES	36.06%	32.34%	-3.72%	-10%
4	TOTAL DISCHARGES	2,519	2,567	48	2%
5	TOTAL CASE MIX INDEX	1.49749	1.57377	0.07628	5%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	3,772.18036	4,039.87760	267.69724	7%
7	TOTAL OUTPATIENT CHARGES	\$118,179,402	\$143,414,268	\$25,234,866	21%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	169.09%	180.96%	11.87%	7%
9	TOTAL OUTPATIENT PAYMENTS	\$40,140,429	\$44,407,453	\$4,267,024	11%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	33.97%	30.96%	-3.00%	-9%
11	TOTAL CHARGES	\$188,069,298	\$222,664,628	\$34,595,330	18%
12	TOTAL PAYMENTS	\$65,340,196	\$70,035,921	\$4,695,725	7%
13	TOTAL PAYMENTS / TOTAL CHARGES	34.74%	31.45%	-3.29%	-9%
14	PATIENT DAYS	13,056	12,325	(731)	-6%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$53,788,190	\$63,295,477	\$9,507,287	18%
2	INPATIENT PAYMENTS	\$17,208,122	\$18,813,629	\$1,605,507	9%
3	GOVT. INPATIENT PAYMENTS / CHARGES	31.99%	29.72%	-2.27%	-7%
4	DISCHARGES	1,925	2,006	81	4%
5	CASE MIX INDEX	1.44922	1.54624	0.09702	7%
6	CASE MIX ADJUSTED DISCHARGES	2,789.75188	3,101.76218	312.01030	11%
7	OUTPATIENT CHARGES	\$63,527,953	\$77,742,136	\$14,214,183	22%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	118.11%	122.82%	4.72%	4%
9	OUTPATIENT PAYMENTS	\$14,133,569	\$15,808,100	\$1,674,531	12%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	22.25%	20.33%	-1.91%	-9%
11	TOTAL CHARGES	\$117,316,143	\$141,037,613	\$23,721,470	20%
12	TOTAL PAYMENTS	\$31,341,691	\$34,621,729	\$3,280,038	10%
13	TOTAL PAYMENTS / CHARGES	26.72%	24.55%	-2.17%	-8%
14	PATIENT DAYS	10,705	10,373	(332)	-3%
15	TOTAL GOVERNMENT DEDUCTIONS	\$85,974,452	\$106,415,884	\$20,441,432	24%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	5.6	5.2	(0.4)	-7%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0	3.5	(0.5)	-12%
3	UNINSURED	5.1	5.1	0.0	0%
4	MEDICAID	5.1	4.9	(0.3)	-5%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	2.3	2.6	0.3	14%
7	TOTAL AVERAGE LENGTH OF STAY	5.2	4.8	(0.4)	-7%
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$188,069,298	\$222,664,628	\$34,595,330	18%
2	TOTAL GOVERNMENT DEDUCTIONS	\$85,974,452	\$106,415,884	\$20,441,432	24%

ROCKVILLE GENERAL HOSPITAL					
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 FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
3	UNCOMPENSATED CARE	\$5,502,701	\$5,398,981	(\$103,720)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$36,754,650	\$46,212,823	\$9,458,173	26%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$128,231,803	\$158,027,688	\$29,795,885	23%
7	TOTAL ACCRUED PAYMENTS	\$59,837,495	\$64,636,940	\$4,799,445	8%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$59,837,495	\$64,636,940	\$4,799,445	8%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3181672694	0.2902883165	(0.0278789529)	-9%
11	COST OF UNCOMPENSATED CARE	\$1,750,779	\$1,567,261	(\$183,518)	-10%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$3,701,461	\$3,080,561	(\$620,900)	-17%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$5,452,240	\$4,647,822	(\$804,418)	-15%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$1,905,852	\$1,007,206	(\$898,646)	-47%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,816,018	\$1,566,490	(\$249,529)	-14%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,721,870	\$2,573,696	(\$1,148,175)	-31%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$2,507,443	(\$1,125,279)	(\$3,632,722)	-144.88%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$67,847,638	\$68,910,644	\$1,063,006	1.57%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$188,069,273	\$222,664,629	\$34,595,356	18.40%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$5,502,701	\$5,398,981	(\$103,720)	-1.88%

**ROCKVILLE GENERAL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
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	FY AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$16,101,706	\$15,954,883	(\$146,823)
2	MEDICARE	\$46,740,240	54,539,339	\$7,799,099
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,989,943	8,608,391	\$1,618,448
4	MEDICAID	\$6,989,943	8,608,391	\$1,618,448
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$58,007	147,747	\$89,740
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,107,951	1,046,641	(\$61,310)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$53,788,190	\$63,295,477	\$9,507,287
	TOTAL INPATIENT CHARGES	\$69,889,896	\$79,250,360	\$9,360,464
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$54,651,449	\$65,672,132	\$11,020,683
2	MEDICARE	\$39,612,350	49,578,911	\$9,966,561
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$23,256,228	27,463,602	\$4,207,374
4	MEDICAID	\$23,256,228	27,463,602	\$4,207,374
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$659,375	699,623	\$40,248
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,649,453	4,527,588	(\$121,865)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$63,527,953	\$77,742,136	\$14,214,183
	TOTAL OUTPATIENT CHARGES	\$118,179,402	\$143,414,268	\$25,234,866
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$70,753,155	\$81,627,015	\$10,873,860
2	TOTAL MEDICARE	\$86,352,590	\$104,118,250	\$17,765,660
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$30,246,171	\$36,071,993	\$5,825,822
4	TOTAL MEDICAID	\$30,246,171	\$36,071,993	\$5,825,822
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$717,382	\$847,370	\$129,988
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,757,404	\$5,574,229	(\$183,175)
	TOTAL GOVERNMENT CHARGES	\$117,316,143	\$141,037,613	\$23,721,470
	TOTAL CHARGES	\$188,069,298	\$222,664,628	\$34,595,330
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,991,645	\$6,814,839	(\$1,176,806)
2	MEDICARE	\$15,389,796	16,580,364	\$1,190,568
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$1,772,603	2,156,151	\$383,548
4	MEDICAID	\$1,772,603	2,156,151	\$383,548
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$45,723	77,114	\$31,391
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$32,437	2,144	(\$30,293)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$17,208,122	\$18,813,629	\$1,605,507
	TOTAL INPATIENT PAYMENTS	\$25,199,767	\$25,628,468	\$428,701
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$26,006,860	\$28,599,353	\$2,592,493
2	MEDICARE	\$9,596,522	10,397,051	\$800,529
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,149,278	5,234,566	\$1,085,288
4	MEDICAID	\$4,149,278	5,234,566	\$1,085,288
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$387,769	176,483	(\$211,286)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$224,697	175,163	(\$49,534)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$14,133,569	\$15,808,100	\$1,674,531
	TOTAL OUTPATIENT PAYMENTS	\$40,140,429	\$44,407,453	\$4,267,024
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$33,998,505	\$35,414,192	\$1,415,687
2	TOTAL MEDICARE	\$24,986,318	\$26,977,415	\$1,991,097
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,921,881	\$7,390,717	\$1,468,836
4	TOTAL MEDICAID	\$5,921,881	\$7,390,717	\$1,468,836
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$433,492	\$253,597	(\$179,895)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$257,134	\$177,307	(\$79,827)
	TOTAL GOVERNMENT PAYMENTS	\$31,341,691	\$34,621,729	\$3,280,038
	TOTAL PAYMENTS	\$65,340,196	\$70,035,921	\$4,695,725

**ROCKVILLE GENERAL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
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
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8.56%	7.17%	-1.40%
2	MEDICARE	24.85%	24.49%	-0.36%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.72%	3.87%	0.15%
4	MEDICAID	3.72%	3.87%	0.15%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.03%	0.07%	0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.59%	0.47%	-0.12%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	28.60%	28.43%	-0.17%
	TOTAL INPATIENT PAYER MIX	37.16%	35.59%	-1.57%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	29.06%	29.49%	0.43%
2	MEDICARE	21.06%	22.27%	1.20%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12.37%	12.33%	-0.03%
4	MEDICAID	12.37%	12.33%	-0.03%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.35%	0.31%	-0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.47%	2.03%	-0.44%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	33.78%	34.91%	1.14%
	TOTAL OUTPATIENT PAYER MIX	62.84%	64.41%	1.57%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	12.23%	9.73%	-2.50%
2	MEDICARE	23.55%	23.67%	0.12%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.71%	3.08%	0.37%
4	MEDICAID	2.71%	3.08%	0.37%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.07%	0.11%	0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.05%	0.00%	-0.05%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	26.34%	26.86%	0.53%
	TOTAL INPATIENT PAYER MIX	38.57%	36.59%	-1.97%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	39.80%	40.84%	1.03%
2	MEDICARE	14.69%	14.85%	0.16%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.35%	7.47%	1.12%
4	MEDICAID	6.35%	7.47%	1.12%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.59%	0.25%	-0.34%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.34%	0.25%	-0.09%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	21.63%	22.57%	0.94%
	TOTAL OUTPATIENT PAYER MIX	61.43%	63.41%	1.97%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	594	561	(33)
2	MEDICARE	1,655	1,707	52
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	266	292	26
4	MEDICAID	266	292	26
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	4	7	3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	58	48	(10)
	TOTAL GOVERNMENT DISCHARGES	1,925	2,006	81
	TOTAL DISCHARGES	2,519	2,567	48

**ROCKVILLE GENERAL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL 2013 FY	AMOUNT DIFFERENCE
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,351	1,952	(399)
2	MEDICARE	9,334	8,933	(401)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,362	1,422	60
4	MEDICAID	1,362	1,422	60
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	9	18	9
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	298	247	(51)
	TOTAL GOVERNMENT PATIENT DAYS	10,705	10,373	(332)
	TOTAL PATIENT DAYS	13,056	12,325	(731)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0	3.5	(0.5)
2	MEDICARE	5.6	5.2	(0.4)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.1	4.9	(0.3)
4	MEDICAID	5.1	4.9	(0.3)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	2.3	2.6	0.3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5.1	5.1	0.0
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.6	5.2	(0.4)
	TOTAL AVERAGE LENGTH OF STAY	5.2	4.8	(0.4)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.65392	1.67222	0.01830
2	MEDICARE	1.49234	1.56631	0.07397
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.18327	1.42516	0.24189
4	MEDICAID	1.18327	1.42516	0.24189
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.29484	1.70347	0.40863
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.12859	1.18444	0.05585
	TOTAL GOVERNMENT CASE MIX INDEX	1.44922	1.54624	0.09702
	TOTAL CASE MIX INDEX	1.49749	1.57377	0.07628
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$70,753,155	\$81,627,015	\$10,873,860
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$33,998,505	\$35,414,192	\$1,415,687
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$36,754,650	\$46,212,823	\$9,458,173
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	51.95%	56.61%	4.67%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$2,192,753	\$1,271,767	(\$920,986)
9	BAD DEBTS	\$3,309,948	\$4,127,214	\$817,266
10	TOTAL UNCOMPENSATED CARE	\$5,502,701	\$5,398,981	(\$103,720)
11	TOTAL OTHER OPERATING REVENUE	\$6,871,608	\$6,078,316	(\$793,292)
12	TOTAL OPERATING EXPENSES	\$74,038,954	\$71,670,098	(\$2,368,856)
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	982.42848	938.11542	(44.31306)
2	MEDICARE	2,469.82270	2,673.69117	203.86847
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	314.74982	416.14672	101.39690
4	MEDICAID	314.74982	416.14672	101.39690
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	5.17936	11.92429	6.74493
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	65.45822	56.85312	(8.60510)

**ROCKVILLE GENERAL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
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
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	2,789.75188	3,101.76218	312.01030
	TOTAL CASE MIX ADJUSTED DISCHARGES	3,772.18036	4,039.87760	267.69724
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,016.11933	2,309.14047	293.02114
2	MEDICARE	1,402.61238	1,551.74600	149.13362
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	885.00817	931.57615	46.56799
4	MEDICAID	885.00817	931.57615	46.56799
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	45.46865	33.14694	-12.32171
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	243.39368	207.63970	-35.75398
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	2,333.08920	2,516.46909	183.37990
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	4,349.20853	4,825.60957	476.40104
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,134.58	\$7,264.39	(\$870.19)
2	MEDICARE	\$6,231.13	\$6,201.30	(\$29.83)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,631.78	\$5,181.23	(\$450.56)
4	MEDICAID	\$5,631.78	\$5,181.23	(\$450.56)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$8,827.92	\$6,466.97	(\$2,360.96)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$495.54	\$37.71	(\$457.83)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,168.33	\$6,065.46	(\$102.87)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,680.42	\$6,343.87	(\$336.55)
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,899.46	\$12,385.28	(\$514.18)
2	MEDICARE	\$6,841.89	\$6,700.23	(\$141.66)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,688.41	\$5,619.04	\$930.64
4	MEDICAID	\$4,688.41	\$5,619.04	\$930.64
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$8,528.27	\$5,324.26	(\$3,204.01)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$923.18	\$843.59	(\$79.59)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,057.88	\$6,281.86	\$223.98
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$9,229.36	\$9,202.45	(\$26.91)
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
1	MEDICAID	\$1,905,852	\$1,007,206	(\$898,646)
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,816,018	\$1,566,490	(\$249,529)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,721,870	\$2,573,696	(\$1,148,175)
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)			
1	TOTAL CHARGES	\$188,069,298	\$222,664,628	\$34,595,330
2	TOTAL GOVERNMENT DEDUCTIONS	\$85,974,452	\$106,415,884	\$20,441,432
3	UNCOMPENSATED CARE	\$5,502,701	\$5,398,981	(\$103,720)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$36,754,650	\$46,212,823	\$9,458,173
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
6	TOTAL ADJUSTMENTS	\$128,231,803	\$158,027,688	\$29,795,885
7	TOTAL ACCRUED PAYMENTS	\$59,837,495	\$64,636,940	\$4,799,445
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$59,837,495	\$64,636,940	\$4,799,445
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3181672694	0.2902883165	(0.0278789529)
11	COST OF UNCOMPENSATED CARE	\$1,750,779	\$1,567,261	(\$183,518)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$3,701,461	\$3,080,561	(\$620,900)
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$5,452,240	\$4,647,822	(\$804,418)
VII.	RATIOS			

**ROCKVILLE GENERAL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
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
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	49.63%	42.71%	-6.92%
2	MEDICARE	32.93%	30.40%	-2.53%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	25.36%	25.05%	-0.31%
4	MEDICAID	25.36%	25.05%	-0.31%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	78.82%	52.19%	-26.63%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.93%	0.20%	-2.72%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	31.99%	29.72%	-2.27%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	36.06%	32.34%	-3.72%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	47.59%	43.55%	-4.04%
2	MEDICARE	24.23%	20.97%	-3.26%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17.84%	19.06%	1.22%
4	MEDICAID	17.84%	19.06%	1.22%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	58.81%	25.23%	-33.58%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.83%	3.87%	-0.96%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	22.25%	20.33%	-1.91%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	33.97%	30.96%	-3.00%
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$65,340,196	\$70,035,921	\$4,695,725
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$65,340,196	\$70,035,921	\$4,695,725
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$2,507,443	(\$1,125,279)	(\$3,632,722)
4	CALCULATED NET REVENUE	\$71,157,587	\$68,910,642	(\$2,246,945)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$67,847,638	\$68,910,644	\$1,063,006
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$3,309,949	(\$2)	(\$3,309,951)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$188,069,298	\$222,664,628	\$34,595,330
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$188,069,298	\$222,664,628	\$34,595,330
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$188,069,273	\$222,664,629	\$34,595,356
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$25	(\$1)	(\$26)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$5,502,701	\$5,398,981	(\$103,720)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$5,502,701	\$5,398,981	(\$103,720)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$5,502,701	\$5,398,981	(\$103,720)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

**ROCKVILLE GENERAL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES**

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$15,954,883
2	MEDICARE	54,539,339
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,608,391
4	MEDICAID	8,608,391
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	147,747
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,046,641
	TOTAL INPATIENT GOVERNMENT CHARGES	\$63,295,477
	TOTAL INPATIENT CHARGES	\$79,250,360
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$65,672,132
2	MEDICARE	49,578,911
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27,463,602
4	MEDICAID	27,463,602
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	699,623
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4,527,588
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$77,742,136
	TOTAL OUTPATIENT CHARGES	\$143,414,268
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$81,627,015
2	TOTAL GOVERNMENT ACCRUED CHARGES	141,037,613
	TOTAL ACCRUED CHARGES	\$222,664,628
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$6,814,839
2	MEDICARE	16,580,364
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,156,151
4	MEDICAID	2,156,151
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	77,114
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,144
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$18,813,629
	TOTAL INPATIENT PAYMENTS	\$25,628,468
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$28,599,353
2	MEDICARE	10,397,051
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,234,566
4	MEDICAID	5,234,566
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	176,483
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	175,163
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$15,808,100
	TOTAL OUTPATIENT PAYMENTS	\$44,407,453
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$35,414,192
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	34,621,729
	TOTAL ACCRUED PAYMENTS	\$70,035,921
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		

ROCKVILLE GENERAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	561
2	MEDICARE	1,707
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	292
4	MEDICAID	292
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	7
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	48
	TOTAL GOVERNMENT DISCHARGES	2,006
	TOTAL DISCHARGES	2,567
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.67222
2	MEDICARE	1.56631
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.42516
4	MEDICAID	1.42516
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	1.70347
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.18444
	TOTAL GOVERNMENT CASE MIX INDEX	1.54624
	TOTAL CASE MIX INDEX	1.57377
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$81,627,015
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$35,414,192
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$46,212,823
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	56.61%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$1,271,767
9	BAD DEBTS	\$4,127,214
10	TOTAL UNCOMPENSATED CARE	\$5,398,981
11	TOTAL OTHER OPERATING REVENUE	\$6,078,316
12	TOTAL OPERATING EXPENSES	\$71,670,098
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$70,035,921
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$70,035,921
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$1,125,279)
	CALCULATED NET REVENUE	\$68,910,642
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$68,910,644
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$2)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$222,664,628
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0

ROCKVILLE GENERAL HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2013		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
	CALCULATED GROSS REVENUE	\$222,664,628
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$222,664,629
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$5,398,981
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$5,398,981
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$5,398,981
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

ROCKVILLE GENERAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. <u>Hospital Charity Care (from HRS Report 500)</u>					
1	Number of Applicants	1,117	1,303	186	17%
2	Number of Approved Applicants	1,026	1,145	119	12%
3	Total Charges (A)	\$2,192,753	\$1,271,767	(\$920,986)	-42%
4	Average Charges	\$2,137	\$1,111	(\$1,026)	-48%
5	Ratio of Cost to Charges (RCC)	0.444947	0.379802	(0.065145)	-15%
6	Total Cost	\$975,659	\$483,020	(\$492,639)	-50%
7	Average Cost	\$951	\$422	(\$529)	-56%
8	Charity Care - Inpatient Charges	\$369,081	\$273,433	(\$95,648)	-26%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	948,318	790,135	(158,183)	-17%
10	Charity Care - Emergency Department Charges	875,354	208,199	(667,155)	-76%
11	Total Charges (A)	\$2,192,753	\$1,271,767	(\$920,986)	-42%
12	Charity Care - Number of Patient Days	283	174	(109)	-39%
13	Charity Care - Number of Discharges	46	38	(8)	-17%
14	Charity Care - Number of Outpatient ED Visits	11,052	585	(10,467)	-95%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	211	388	177	84%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$748,390	\$838,596	\$90,206	12%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,332,020	2,602,788	1,270,768	95%
3	Bad Debts - Emergency Department	1,229,538	685,830	(543,708)	-44%
4	Total Bad Debts (A)	\$3,309,948	\$4,127,214	\$817,266	25%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$2,192,753	\$1,271,767	(\$920,986)	-42%
2	Bad Debts (A)	3,309,948	4,127,214	817,266	25%
3	Total Uncompensated Care (A)	\$5,502,701	\$5,398,981	(\$103,720)	-2%
4	Uncompensated Care - Inpatient Services	\$1,117,471	\$1,112,029	(\$5,442)	0%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	2,280,338	3,392,923	1,112,585	49%
6	Uncompensated Care - Emergency Department	2,104,892	894,029	(1,210,863)	-58%
7	Total Uncompensated Care (A)	\$5,502,701	\$5,398,981	(\$103,720)	-2%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

ROCKVILLE GENERAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3) FY 2012	(4) FY 2013	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<u>COMMERCIAL - ALL PAYERS</u>					
1	Total Gross Revenue	\$70,753,155	\$81,627,015	\$10,873,860	15%
2	Total Contractual Allowances	\$36,754,650	\$46,212,823	\$9,458,173	26%
	Total Accrued Payments (A)	\$33,998,505	\$35,414,192	\$1,415,687	4%
	Total Discount Percentage	51.95%	56.61%	4.67%	9%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
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
A.	<u>Gross and Net Revenue</u>			
1	Inpatient Gross Revenue	\$54,124,323	\$69,889,896	\$79,250,360
2	Outpatient Gross Revenue	\$93,948,299	\$118,179,402	\$143,414,268
3	Total Gross Patient Revenue	\$148,072,622	\$188,069,298	\$222,664,628
4	Net Patient Revenue	\$63,387,116	\$67,847,638	\$68,910,644
B.	<u>Total Operating Expenses</u>			
1	Total Operating Expense	\$68,017,199	\$74,038,954	\$71,670,098
C.	<u>Utilization Statistics</u>			
1	Patient Days	12,370	13,056	12,325
2	Discharges	2,515	2,519	2,567
3	Average Length of Stay	4.9	5.2	4.8
4	Equivalent (Adjusted) Patient Days (EPD)	33,842	35,133	34,629
0	Equivalent (Adjusted) Discharges (ED)	6,881	6,778	7,212
D.	<u>Case Mix Statistics</u>			
1	Case Mix Index	1.39701	1.49749	1.57377
2	Case Mix Adjusted Patient Days (CMAPD)	17,281	19,551	19,397
3	Case Mix Adjusted Discharges (CMAD)	3,513	3,772	4,040
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	47,277	52,611	54,498
5	Case Mix Adjusted Equivalent Discharges (CMAED)	9,612	10,151	11,351
E.	<u>Gross Revenue Per Statistic</u>			
1	Total Gross Revenue per Patient Day	\$11,970	\$14,405	\$18,066
2	Total Gross Revenue per Discharge	\$58,876	\$74,660	\$86,741
3	Total Gross Revenue per EPD	\$4,375	\$5,353	\$6,430
4	Total Gross Revenue per ED	\$21,521	\$27,745	\$30,873
5	Total Gross Revenue per CMAEPD	\$3,132	\$3,575	\$4,086
6	Total Gross Revenue per CMAED	\$15,405	\$18,528	\$19,617
7	Inpatient Gross Revenue per EPD	\$1,599	\$1,989	\$2,289
8	Inpatient Gross Revenue per ED	\$7,866	\$10,311	\$10,988

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
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
F.	<u>Net Revenue Per Statistic</u>			
1	Net Patient Revenue per Patient Day	\$5,124	\$5,197	\$5,591
2	Net Patient Revenue per Discharge	\$25,204	\$26,934	\$26,845
3	Net Patient Revenue per EPD	\$1,873	\$1,931	\$1,990
4	Net Patient Revenue per ED	\$9,213	\$10,009	\$9,555
5	Net Patient Revenue per CMAEPD	\$1,341	\$1,290	\$1,264
6	Net Patient Revenue per CMAED	\$6,594	\$6,684	\$6,071
G.	<u>Operating Expense Per Statistic</u>			
1	Total Operating Expense per Patient Day	\$5,499	\$5,671	\$5,815
2	Total Operating Expense per Discharge	\$27,045	\$29,392	\$27,920
3	Total Operating Expense per EPD	\$2,010	\$2,107	\$2,070
4	Total Operating Expense per ED	\$9,885	\$10,923	\$9,937
5	Total Operating Expense per CMAEPD	\$1,439	\$1,407	\$1,315
6	Total Operating Expense per CMAED	\$7,076	\$7,294	\$6,314
H.	<u>Nursing Salary and Fringe Benefits Expense</u>			
1	Nursing Salary Expense	\$9,289,670	\$9,755,837	\$9,743,100
2	Nursing Fringe Benefits Expense	\$3,086,106	\$3,613,110	\$3,448,259
3	Total Nursing Salary and Fringe Benefits Expense	\$12,375,776	\$13,368,947	\$13,191,359
I.	<u>Physician Salary and Fringe Expense</u>			
1	Physician Salary Expense	\$2,400,624	\$3,035,027	\$3,972,965
2	Physician Fringe Benefits Expense	\$751,111	\$1,040,916	\$1,318,628
3	Total Physician Salary and Fringe Benefits Expense	\$3,151,735	\$4,075,943	\$5,291,593
J.	<u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u>			
1	Non-Nursing, Non-Physician Salary Expense	\$17,845,484	\$17,477,527	\$17,793,574
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$5,001,423	\$5,388,687	\$5,257,714
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$22,846,907	\$22,866,214	\$23,051,288

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
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
K.	Total Salary and Fringe Benefits Expense			
1	Total Salary Expense	\$29,535,778	\$30,268,391	\$31,509,639
2	Total Fringe Benefits Expense	\$8,838,640	\$10,042,713	\$10,024,601
3	Total Salary and Fringe Benefits Expense	\$38,374,418	\$40,311,104	\$41,534,240
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	115.1	119.0	116.6
2	Total Physician FTEs	6.6	6.3	5.2
3	Total Non-Nursing, Non-Physician FTEs	283.4	251.3	256.5
4	Total Full Time Equivalent Employees (FTEs)	405.1	376.6	378.3
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$80,710	\$81,982	\$83,560
2	Nursing Fringe Benefits Expense per FTE	\$26,812	\$30,362	\$29,573
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$107,522	\$112,344	\$113,133
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$363,731	\$481,750	\$764,032
2	Physician Fringe Benefits Expense per FTE	\$113,805	\$165,225	\$253,582
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$477,536	\$646,975	\$1,017,614
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$62,969	\$69,548	\$69,371
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$17,648	\$21,443	\$20,498
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$80,617	\$90,992	\$89,869
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$72,910	\$80,373	\$83,293
2	Total Fringe Benefits Expense per FTE	\$21,818	\$26,667	\$26,499
3	Total Salary and Fringe Benefits Expense per FTE	\$94,728	\$107,040	\$109,792
Q.	Total Salary and Fringe Ben. Expense per Statistic			

ROCKVILLE GENERAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
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	\$3,102	\$3,088	\$3,370
2	Total Salary and Fringe Benefits Expense per Discharge	\$15,258	\$16,003	\$16,180
3	Total Salary and Fringe Benefits Expense per EPD	\$1,134	\$1,147	\$1,199
4	Total Salary and Fringe Benefits Expense per ED	\$5,577	\$5,947	\$5,759
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$812	\$766	\$762
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,992	\$3,971	\$3,659