		IS ACTUAL FILING						
		/EAR 2015						
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION							
(1) <u>LINE</u>	(2) DESCRIPTION	(3) FY 2014 ACTUAL	(4) FY 2015 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE			
1.	ASSETS	7101071	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	DITTERENT	<u>DIII I LIKLINGL</u>			
Α.	Current Assets:							
1	Cash and Cash Equivalents	\$13,617,245	\$15,285,938	\$1,668,693	12%			
2	Short Term Investments	\$96,550	\$0	(\$96,550)	-100%			
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$17,715,144	\$16,471,779	(\$1,243,365)	-7%			
4	Current Assets Whose Use is Limited for Current Liabilities	\$394,825	\$347,671	(\$47,154)	-12%			
5	Due From Affiliates	\$0	\$0	\$0	0%			
6	Due From Third Party Payers	\$581,194	\$0	(\$581,194)	-100%			
7	Inventories of Supplies	\$1,413,639	\$1,388,084	(\$25,555)	-2%			
8	Prepaid Expenses	\$947,594	\$1,008,601	\$61,007	6%			
9	Other Current Assets	\$2,785,093	\$2,818,801	\$33,708	1%			
	Total Current Assets	\$37,551,284	\$37,320,874	(\$230,410)	-1%			
В.	Noncurrent Assets Whose Use is Limited:							
1	Held by Trustee	\$0	\$0	\$0	0%			
2	Board Designated for Capital Acquisition	\$6,835,761	\$6,705,918	(\$129,843)	-2%			
3	Funds Held in Escrow	\$0	\$0	\$0	0%			
4	Other Noncurrent Assets Whose Use is Limited	\$12,530,053	\$10,868,212	(\$1,661,841)	-13%			
	Total Noncurrent Assets Whose Use is Limited:	\$19,365,814	\$17,574,130	(\$1,791,684)	-9%			
5	Interest in Net Assets of Foundation	\$6,665,478	\$6,033,606	(\$631,872)	-9%			
6	Long Term Investments	\$6,665,386	\$6,496,418	(\$168,968)	-3%			
7	Other Noncurrent Assets	\$5,018,587	\$4,357,098	(\$661,489)	-13%			
C.	Net Fixed Assets:							
1	Property, Plant and Equipment	\$155,451,420	\$164,441,956	\$8,990,536	6%			
2	Less: Accumulated Depreciation	\$118,322,799	\$124,849,240	\$6,526,441	6%			
	Property, Plant and Equipment, Net	\$37,128,621	\$39,592,716	\$2,464,095	7%			
3	Construction in Progress	\$1,942,559	\$616,812	(\$1,325,747)	-68%			
	Total Net Fixed Assets	\$39,071,180	\$40,209,528	\$1,138,348	3%			
	Total Assets	\$114,337,729	\$111,991,654	(\$2,346,075)	-2%			
		Ψ.11,001,123	ψ111,001,00 4	(42,570,070)	-∠ /0			

	TWFI VF	MONTHS ACTUAL FILING							
	FISCAL YEAR 2015								
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION									
(1)	(2)	(3)	(4)	(5)	(6)				
LINE	<u>DESCRIPTION</u>	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>				
II.	LIABILITIES AND NET ASSETS								
A.	Current Liabilities:								
1	Accounts Payable and Accrued Expenses	\$12,409,451	\$11,966,693	(\$442,758)	-4%				
2	Salaries, Wages and Payroll Taxes	\$11,289,636	\$6,634,907	(\$4,654,729)	-41%				
3	Due To Third Party Payers	\$0	\$1,130,211	\$1,130,211	0%				
4	Due To Affiliates	\$0	\$0	\$0	0%				
5	Current Portion of Long Term Debt	\$676,115	\$702,335	\$26,220	4%				
6	Current Portion of Notes Payable	\$8,648	\$109,090	\$100,442	1161%				
7	Other Current Liabilities	\$2,900,000	\$2,490,414	(\$409,586)	-14%				
	Total Current Liabilities	\$27,283,850	\$23,033,650	(\$4,250,200)	-16%				
В.	Long Term Debt:								
1	Bonds Payable (Net of Current Portion)	\$25,303,397	\$24,560,239	(\$743,158)	-3%				
2	Notes Payable (Net of Current Portion)	\$273,261	\$464,171	\$190,910	70%				
	Total Long Term Debt	\$25,576,658	\$25,024,410	(\$552,248)	-2%				
3	Accrued Pension Liability	\$23,468,844	\$32,795,767	\$9,326,923	40%				
4	Other Long Term Liabilities	\$9,581,422	\$9,230,355	(\$351,067)	-4%				
	Total Long Term Liabilities	\$58,626,924	\$67,050,532	\$8,423,608	14%				
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%				
C.	Net Assets:								
1	Unrestricted Net Assets or Equity	\$17,633,376	\$11,995,043	(\$5,638,333)	-32%				
2	Temporarily Restricted Net Assets	\$3,708,091	\$3,122,057	(\$586,034)	-16%				
3	Permanently Restricted Net Assets	\$7,085,488	\$6,790,372	(\$295,116)	-4%				
	Total Net Assets	\$28,426,955	\$21,907,472	(\$6,519,483)	-23%				
	Total Liabilities and Net Assets	\$114,337,729	\$111,991,654	(\$2,346,075)	-2%				

	TMENT	STOL HOSPITAL	LINO						
		ONTHS ACTUAL FI	LING						
	FISCAL YEAR 2015 REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION								
(1)			(4)		(6)				
(1)	(2)	(3) FY 2014	FY 2015	(5) AMOUNT	%				
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
A.	Operating Revenue:								
1	Total Gross Patient Revenue	\$453,092,171	\$444,108,678	(\$8,983,493)	-2%				
2	Less: Allowances	\$306,577,343	\$304,476,363	(\$2,100,980)	-1%				
3	Less: Charity Care	\$4,530,623	\$4,092,111	(\$438,512)	-10%				
4	Less: Other Deductions	\$0	\$0	\$0	0%				
	Total Net Patient Revenue	\$141,984,205	\$135,540,204	(\$6,444,001)	-5%				
5	Provision for Bad Debts	\$4,007,799	\$2,212,274	(\$1,795,525)	-45%				
	Net Patient Service Revenue less provision for bad debts	\$137,976,406	\$133,327,930	(\$4,648,476)	-3%				
6	Other Operating Revenue	\$4,301,391	\$3,838,007	(\$463,384)	-11%				
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%				
	Total Operating Revenue	\$142,277,797	\$137,165,937	(\$5,111,860)	-4%				
	Total Operating Nevertae	ψ1 4 2,277,707	Ψ107,100,007	(ψο, 111,000)	-470				
В.	Operating Expenses:								
1	Salaries and Wages	\$57,879,543	\$56,987,129	(\$892,414)	-2%				
2	Fringe Benefits	\$15,778,522	\$14,238,377	(\$1,540,145)	-10%				
3	Physicians Fees	\$11,947,454	\$12,846,687	\$899,233	8%				
4	Supplies and Drugs	\$20,600,063	\$19,823,610	(\$776,453)	-4%				
5	Depreciation and Amortization	\$6,614,415	\$7,176,664	\$562,249	9%				
6	Bad Debts	\$0	\$0	\$0	0%				
7	Interest Expense	\$1,412,468	\$1,267,462	(\$145,006)	-10%				
8	Malpractice Insurance Cost	\$498,257	\$317,020	(\$181,237)	-36%				
9	Other Operating Expenses	\$26,498,227	\$23,976,324	(\$2,521,903)	-10%				
	Total Operating Expenses	\$141,228,949	\$136,633,273	(\$4,595,676)	-3%				
	Income/(Loss) From Operations	\$1,048,848	\$532,664	(\$516,184)	-49%				
C.	Non-Operating Revenue:								
1	Income from Investments	\$364,945	\$826,403	\$461,458	126%				
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%				
3	Other Non-Operating Gains/(Losses)	\$898,917	(\$31,237)	(\$930,154)	-103%				
	Total Non-Operating Revenue	\$1,263,862	\$795,166	(\$468,696)	-37%				
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$2,312,710	\$1,327,830	(\$984,880)	-43%				
	Other Adjustments:	.							
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%				
	All Other Adjustments	\$0	\$0	\$0	0%				
	Total Other Adjustments	\$0	\$0	\$0	0%				
	Excess/(Deficiency) of Revenue Over Expenses	\$2,312,710	\$1,327,830	(\$984,880)	-43%				
	Principal Payments	\$1,269,852	\$1,295,843	\$25,991	2%				

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	GROSS REVENUE BY PAYER				
A.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$69,639,216	\$64,894,057	(\$4,745,159)	-7%
2	MEDICARE MANAGED CARE	\$22,588,183	\$24,136,586	\$1,548,403	7%
3	MEDICAID	\$30,033,754	\$32,931,847	\$2,898,093	10%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$432,011	\$201,255	(\$230,756)	-53%
6	COMMERCIAL INSURANCE	\$23,861,805	\$21,108,501	(\$2,753,304)	-12%
7	NON-GOVERNMENT MANAGED CARE	\$15,696,334	\$12,090,305	(\$3,606,029)	-23%
9	WORKER'S COMPENSATION	\$1,092,897	\$119,396	(\$973,501)	-89%
10	SELF- PAY/UNINSURED	\$1,460,013	\$1,368,087	(\$91,926)	-6% 0%
11	SAGA OTHER	\$0 \$0	\$0 \$0	\$0 \$0	0%
- 1 1	TOTAL INPATIENT GROSS REVENUE	\$164,804,213	\$156,850,034	(\$7,954,179)	-5%
В.	OUTPATIENT GROSS REVENUE	\$164,804,213	\$150,050,034	(\$1,954,179)	-5/0
1	MEDICARE TRADITIONAL	\$84,244,305	\$80,749,976	(\$3,494,329)	-4%
2	MEDICARE MANAGED CARE	\$30,911,582	\$35,781,189	\$4,869,607	16%
3	MEDICAID	\$59,919,782	\$65.028.189	\$5.108.407	9%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,106,845	\$1,153,587	\$46.742	4%
6	COMMERCIAL INSURANCE	\$66,500,876	\$65,924,034	(\$576.842)	-1%
7	NON-GOVERNMENT MANAGED CARE	\$36,241,066	\$30,081,385	(\$6,159,681)	-17%
8	WORKER'S COMPENSATION	\$3,512,051	\$3,407,917	(\$104,134)	-3%
9	SELF- PAY/UNINSURED	\$5,851,418	\$5,132,339	(\$719,079)	-12%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$288,287,925	\$287,258,616	(\$1,029,309)	0%
С.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$153,883,521	\$145,644,033	(\$8,239,488)	-5%
2	MEDICARE MANAGED CARE	\$53,499,765	\$59,917,775	\$6,418,010	12%
3		\$89,953,536	\$97,960,036	\$8,006,500	9%
4	_	\$0	\$0	\$0	0%
5		\$1,538,856	\$1,354,842	(\$184,014)	-12%
6	COMMERCIAL INSURANCE	\$90,362,681	\$87,032,535	(\$3,330,146)	-4%
7	NON-GOVERNMENT MANAGED CARE	\$51,937,400	\$42,171,690	(\$9,765,710)	-19%
8	WORKER'S COMPENSATION	\$4,604,948	\$3,527,313	(\$1,077,635)	-23%
9		\$7,311,431	\$6,500,426	(\$811,005)	-11%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$453,092,138	\$444,108,650	(\$8,983,488)	-2%
II.	NET REVENUE BY PAYER				
A.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$23,462,705	\$20,327,221	(\$3,135,484)	-13%
2	MEDICARE MANAGED CARE	\$7,580,651	\$7,794,289	\$213,638	3%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
3	MEDICAID	\$6,607,478	\$7,687,592	\$1,080,114	16%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$160,387	\$29,548	(\$130,839)	-82%
6	COMMERCIAL INSURANCE	\$10,589,616	\$11,352,585	\$762,969	7%
7	NON-GOVERNMENT MANAGED CARE	\$9,188,117	\$6,491,072	(\$2,697,045)	-29%
8	WORKER'S COMPENSATION	\$1,092,896	\$119,396	(\$973,500)	-89%
9	SELF- PAY/UNINSURED	\$0	\$0	\$0	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$58,681,850	\$53,801,703	(\$4,880,147)	-8%
В.	OUTPATIENT NET REVENUE	0.15.500.500	0.17.000.170	20.000 =10	450/
1	MEDICARE TRADITIONAL	\$15,509,760	\$17,836,476	\$2,326,716	15%
3	MEDICARE MANAGED CARE	\$5,389,617 \$13,400,657	\$6,136,606	\$746,989	14%
4	MEDICAID MEDICAID MANAGED CARE	\$13,100,657 \$0	\$13,782,560 \$0	\$681,903 \$0	5% 0%
5	CHAMPUS/TRICARE	\$123,430	\$283,322	\$159,892	130%
6	COMMERCIAL INSURANCE	\$24,292,496	\$24,728,195	\$435,699	2%
7	NON-GOVERNMENT MANAGED CARE	\$15,291,130	\$12,947,000	(\$2,344,130)	-15%
8	WORKER'S COMPENSATION	\$3,512,051	\$3,407,917	(\$104,134)	-3%
9	SELF- PAY/UNINSURED	\$67,919	\$108,324	\$40,405	59%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$77,287,060	\$79,230,400	\$1,943,340	3%
		, , , , , , , , , , , , , , , , , , , ,	, ,, ,, ,,	, , , , , , , , , , , , , , , , , , , ,	
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$38,972,465	\$38,163,697	(\$808,768)	-2%
2	MEDICARE MANAGED CARE	\$12,970,268	\$13,930,895	\$960,627	7%
3	MEDICAID	\$19,708,135	\$21,470,152	\$1,762,017	9%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$283,817	\$312,870	\$29,053	10%
6	COMMERCIAL INSURANCE	\$34,882,112	\$36,080,780	\$1,198,668	3%
7	NON-GOVERNMENT MANAGED CARE	\$24,479,247	\$19,438,072	(\$5,041,175)	-21%
8	WORKER'S COMPENSATION	\$4,604,947	\$3,527,313	(\$1,077,634)	-23%
9	SELF- PAY/UNINSURED	\$67,919	\$108,324	\$40,405	59%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$135,968,910	\$133,032,103	(\$2,936,807)	-2%
	-	,,,,	, ,	(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
III.	STATISTICS BY PAYER				
Α.	DISCHARGES				
1	MEDICARE TRADITIONAL	2,588	2,497	(91)	-4%
2	MEDICARE MANAGED CARE	822	883	61	7%
3	MEDICAID	1,797	1,840	43	2%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	26	18	(8)	-31%
6	COMMERCIAL INSURANCE	1,204	1,107	(97)	-8%
7	NON-GOVERNMENT MANAGED CARE	788	617	(171)	-22%
8	WORKER'S COMPENSATION	11	7	(4)	-36%

(1)	(2)	(3)	(4)	(5)	(6)
(-,	(-)	FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
LINE	DESCRIPTION	AOTOAL	AOTOAL	BILLEKEROE	DITTERCHOL
9	SELF- PAY/UNINSURED	113	102	(11)	-10%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	7,349	7,071	(278)	-4%
B.	PATIENT DAYS	·	·	` .	
1	MEDICARE TRADITIONAL	12,291	11,052	(1,239)	-10%
2	MEDICARE MANAGED CARE	3,954	3,817	(137)	-3%
3	MEDICAID	6,529	7,135	606	9%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	70	50	(20)	-29%
6	COMMERCIAL INSURANCE	3,956	3,588	(368)	-9%
7	NON-GOVERNMENT MANAGED CARE	2,595	2,059	(536)	-21%
8	WORKER'S COMPENSATION	60	19	(41)	-68%
9	SELF- PAY/UNINSURED	375	360	(15)	-4%
10 11	SAGA OTHER	0	0	0	0% 0%
- 1 1	TOTAL PATIENT DAYS	29,830	28,080	(1,750)	-6%
C.	OUTPATIENT VISITS	29,030	20,000	(1,730)	-0 /0
1	MEDICARE TRADITIONAL	61,401	60,871	(530)	-1%
2	MEDICARE MANAGED CARE	17,528	18,742	1,214	7%
3	MEDICAID	43,672	49,020	5,348	12%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	807	870	63	8%
6	COMMERCIAL INSURANCE	48,469	49,695	1,226	3%
7	NON-GOVERNMENT MANAGED CARE	26,414	22,676	(3,738)	-14%
8	WORKER'S COMPENSATION	2,560	2,569	9	0%
9	SELF- PAY/UNINSURED	4,265	3,869	(396)	-9%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	205,116	208,312	3,196	2%
	EMERGENCY REPAREMENT OUTRATIENT BY BAYER				
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER	1	1	1	
-	EMERGENCY DEPARTMENT OUTPATIENT GROSS				
A.	REVENUE				
1	MEDICARE TRADITIONAL	\$6.924.942	\$7.211.710	\$286,768	4%
2	MEDICARE MANAGED CARE	\$2,668,542	\$2,915,456	\$246,914	9%
3	MEDICAID	\$17,150,586	\$17,798,416	\$647,830	4%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$113,290	\$155,740	\$42,450	37%
6	COMMERCIAL INSURANCE	\$7,272,443	\$7,580,686	\$308,243	4%
7	NON-GOVERNMENT MANAGED CARE	\$4,511,032	\$3,963,213	(\$547,819)	-12%
8	WORKER'S COMPENSATION	\$542,096	\$578,158	\$36,062	7%
9	SELF- PAY/UNINSURED	\$2,761,735	\$2,078,499	(\$683,236)	-25%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	GROSS REVENUE	\$41,944,666	\$42,281,878	\$337,212	1%
	EMERGENCY DEPARTMENT OUTPATIENT NET				
В.	<u>REVENUE</u>				
1	MEDICARE TRADITIONAL	\$1,394,104	\$1,592,960	\$198,856	14%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
2	MEDICARE MANAGED CARE	\$465,276	\$500,011	\$34,735	7%
3	MEDICAID	\$3,749,746	\$3,772,329	\$22,583	1%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$12,634	\$38,250	\$25,616	203%
6	COMMERCIAL INSURANCE	\$2,656,593	\$2,843,526	\$186,933	7%
7	NON-GOVERNMENT MANAGED CARE	\$1,903,332	\$1,705,763	(\$197,569)	-10%
8	WORKER'S COMPENSATION	\$542,096	\$578,158	\$36,062	7%
9	SELF- PAY/UNINSURED	\$32,056	\$43,869	\$11,813	37%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$10,755,837	\$11,074,866	\$319,029	3%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	4,724	4,892	168	4%
2	MEDICARE MANAGED CARE	1,780	2,017	237	13%
3	MEDICAID	14,935	16,023	1,088	7%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	105	129	24	23%
6	COMMERCIAL INSURANCE	5,642	5,797	155	3%
7	NON-GOVERNMENT MANAGED CARE	3,544	3,191	(353)	-10%
8	WORKER'S COMPENSATION	460	533	73	16%
9	SELF- PAY/UNINSURED	2,299	1,728	(571)	-25%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	33,489	34,310	821	2%

FISCAL YEAR 2015 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
INE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
Α.	Salaries & Wages:	200,000,744	#00 000 005	0044.404	404
1	Nursing Salaries	\$22,096,741	\$22,908,235	\$811,494	4%
3	Physician Salaries Non-Nursing, Non-Physician Salaries	\$380,804 \$35,401,998	\$499,496 \$33,579,398	\$118,692 (\$1,822,600)	31%
<u>ა</u>	Total Salaries & Wages	\$55,401,996 \$57,879,543	\$56,987,129	(\$1,822,600) (\$892,414)	-5% -2%
B .	Fringe Benefits:	¢6 000 705	#F 702 600	(#200 40E)	-5%
2	Nursing Fringe Benefits Physician Fringe Benefits	\$6,023,785 \$103,811	\$5,723,680 \$124,800	(\$300,105) \$20,989	20%
3	Non-Nursing, Non-Physician Fringe Benefits	\$9,650,926	\$8,389,897	(\$1,261,029)	-13%
<u> </u>	Total Fringe Benefits	\$15,778,522	\$14,238,377	(\$1,540,145)	-10%
	Total Finige Benefits	\$10,770,022	ψ14,200,077	(ψ1,040,140)	-107
C.	Contractual Labor Fees:	2007.101	2445.050	(4070.070)	
1	Nursing Fees	\$385,431	\$115,372	(\$270,059)	-70%
2	Physician Fees	\$11,947,454	\$12,846,687	\$899,233	8%
3	Non-Nursing, Non-Physician Fees Total Contractual Labor Fees	\$1,221,983 \$13,554,868	\$1,102,480 \$14,064,539	(\$119,503) \$509.671	-10% 4%
	Total Contractual Labor Fees	\$13,334,000	\$14,004,559	φ303,07 i	47
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies	\$11,721,788	\$10,706,507	(\$1,015,281)	-9%
2	Pharmaceutical Costs	\$8,878,275	\$9,117,103	\$238,828	3%
	Total Medical Supplies and Pharmaceutical Cost	\$20,600,063	\$19,823,610	(\$776,453)	-4%
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$2,290,218	\$2,523,109	\$232,891	10%
2	Depreciation-Equipment	\$4,269,603	\$4,598,961	\$329,358	8%
3	Amortization	\$54,594	\$54,594	\$0	0%
	Total Depreciation and Amortization	\$6,614,415	\$7,176,664	\$562,249	9%
F.	Bad Debts:				
1	Bad Debts	\$0	\$0	\$0	0%
G.	Interest Expense:				
1	Interest Expense	\$1,412,468	\$1,267,462	(\$145,006)	-10%
H	Malpractice Insurance Cost:	£400.057	#247.000	(\$404.027)	200
1	Malpractice Insurance Cost	\$498,257	\$317,020	(\$181,237)	-36%
I.	Utilities:				
1	Water	\$71,068	\$64,227	(\$6,841)	-10%
2	Natural Gas	\$647,617	\$593,563	(\$54,054)	-8%
3	Oil	\$136,287	\$59,000	(\$77,287)	-57%
4	Electricity	\$1,273,785	\$1,160,507	(\$113,278)	-9%
5	Telephone	\$425,197	\$318,159	(\$107,038)	-25%
6	Other Utilities Total Utilities	\$40,471 \$2,594,425	\$34,704 \$2,230,160	(\$5,767) (\$364,265)	-14% -14 %
	Total Othities	\$2,594,425	\$2,230,160	(\$364,263)	-147
J.	Business Expenses:				
1	Accounting Fees	\$146,633	\$181,022	\$34,389	23%
2	Legal Fees	\$552,463	\$448,349	(\$104,114)	-19%
3	Consulting Fees	\$1,622,237	\$1,437,529	(\$184,708)	-119
4	Dues and Membership	\$265,684	\$263,013	(\$2,671)	-19
5	Equipment Leases	\$1,253,928	\$1,101,650	(\$152,278)	-129
6	Building Leases	\$865,631	\$651,336 \$316,766	(\$214,295)	-25%
7 8	Repairs and Maintenance Insurance	\$250,883 \$1,264,305	\$216,766 \$1,144,389	(\$34,117) (\$119,916)	-14% -9%
9	Travel	\$1,264,305	\$1,144,369	\$9,293	-9°/
9	Conferences	\$2,735	\$120	(\$2,615)	-96%

FISCAL YEAR 2015

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
INE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
11	Property Tax	¢110.005	\$178,925	¢60 040	63
11 12	General Supplies	\$110,085 \$442,717	\$566,649	\$68,840 \$123,932	28
13	Licenses and Subscriptions	\$11,927	\$33,816	\$21,889	184
14	Postage and Shipping	\$143,072	\$138,258	(\$4,814)	-3
15	Advertising	\$1,675,469	\$1,066,810	(\$608,659)	-36
16	Corporate parent/system fees	\$0	\$0	\$0	0
17	Computer Software	\$2,270,156	\$2,153,086	(\$117,070)	-5
18	Computer hardware & small equipment	\$0	\$0	\$0	0
19	Dietary / Food Services	\$838,052	\$846,894	\$8,842	1
20	Lab Fees / Red Cross charges	\$1,589,588	\$1,308,264	(\$281,324)	-18
21	Billing & Collection / Bank Fees	\$1,721,554	\$1,528,024	(\$193,530)	-11
22	Recruiting / Employee Education & Recognition	\$164,167	\$153,922	(\$10,245)	-6
23	Laundry / Linen	\$83,266	\$66,072	(\$17,194)	-21
24	Professional / Physician Fees	\$0	\$0	\$0	C
25	Waste disposal	\$180,185	\$196,015	\$15,830	g
26	Purchased Services - Medical	\$667,212	\$511,355	(\$155,857)	-23
27	Purchased Services - Non Medical	\$290,698	\$291,080	\$382	(
28	Other Business Expenses	\$5,649,099	\$5,801,033	\$151,934	3
	Total Business Expenses	\$22,296,388	\$20,528,312	(\$1,768,076)	-8
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	C
	Total Operating Expenses - All Expense Categories*	\$141,228,949	\$136,633,273	(\$4,595,676)	-3
II	*AK.The total operating expenses amount above mus	t agree with the to	tal operating expe	nises amount on R	ероп 130
II.	*AK.The total operating expenses amount above mus OPERATING EXPENSE BY DEPARTMENT	t agree with the to	tal operating expe	inses amount on R	eport 130
	OPERATING EXPENSE BY DEPARTMENT	t agree with the to	al operating expe	nses amount on R	eport 130
II. A.	OPERATING EXPENSE BY DEPARTMENT General Services:				
A. 1	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration	\$3,599,915	\$2,958,293	(\$641,622)	-18
A.	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting	\$3,599,915 \$1,436,389	\$2,958,293 \$1,589,542	(\$641,622) \$153,153	-18 1°
A. 1 2	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection	\$3,599,915 \$1,436,389 \$2,444,600	\$2,958,293 \$1,589,542 \$2,181,069	(\$641,622)	-18 11 -11
A . 1 2 3	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing	\$3,599,915 \$1,436,389	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024	(\$641,622) \$153,153 (\$263,531)	-18 11 -11
A. 1 2 3 4	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695	(\$641,622) \$153,153 (\$263,531) \$21,194	-18 11 -11 3
A. 1 2 3 4 5 6 7	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807)	-18 11 -11 3 -10 (
A. 1 2 3 4 5 6 7 8	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915)	-18 11 -11 3 -10 ((-11
A. 1 2 3 4 5 6 7 8 9	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957)	-18 11 -11 3 -10 (-11 -8
A. 1 2 3 4 5 6 7 8 9 10	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551)	-18 11 -11 3 -10 (-11 -8 -7
A. 1 2 3 4 5 6 7 8 9 10 11	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278	-18 11 -11 -3 -10 ((-17 -5 ((
A. 1 2 3 4 5 6 7 8 9 10 11 12	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253)	-18 11 -11 -3 -10 (-11 -8 -7 (6
A. 1 2 3 4 5 6 7 8 9 10 11 12 13	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517)	-18 11 -11 3 -10 0 -11 -8 -7 0 6
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766)	-18 11 -11 3 -10 (-11 -8 -7 (6 -3 -10
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649	-18 11 -11 3 -10 0 -11 -8 -7 0 6 -3 -10
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649 (\$31,173)	-18 11 -11 -12 -10 -10 -11 -8 -7 -7 -10 -10 -10 -10 -10 -10 -10 -10 -10 -10
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649 (\$31,173) \$149,009	-18 11 -11 -12 -10 -10 -11 -8 -7 -7 -10 -10 -11 -8 -7 -7 -7 -10 -10 -10 -10 -10 -10 -10 -10 -10 -10
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649 (\$31,173) \$149,009 (\$90,948)	-18 11 -11 -12 -10 -10 -11 -8 -7 -7 -10 -10 -11 -8 -7 -7 -7 -10 -10 -10 -10 -10 -10 -10 -10 -10 -10
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649 (\$31,173) \$149,009	-18 11 -11 -10 -10 -10 -11 -8 -7 -7 -10 -10 -10 -10 -10 -10 -10 -10 -10 -10
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649 (\$31,173) \$149,009 (\$90,948)	-18 11 -11 -12 -10 -10 -11 -8 -7 -7 -10 -10 -11 -8 -7 -7 -7 -10 -10 -10 -10 -10 -10 -10 -10 -10 -10
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649 (\$31,173) \$149,009 (\$90,948)	-18 11 -11 -12 -10 -10 -11 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services:	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400 \$38,138,533	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452 \$36,745,294	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$35,17) (\$17,766) \$27,649 (\$31,173) \$149,009 (\$90,948) (\$1,393,239)	-18 11 -11 -11 (-11 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1 -1
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 B. 1	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services: Medical Care Administration	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400 \$38,138,533	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452 \$36,745,294	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649 (\$31,173) \$149,009 (\$90,948) (\$1,393,239)	-18 11 -11 -10 (-11 -8 -7 (-10 -10 -10 -10 -10 -10 -10 -10 -10 -10
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 B. 1	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services: Medical Care Administration Residency Program	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400 \$38,138,533	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452 \$36,745,294	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$31,173) \$149,009 (\$90,948) (\$1,393,239) (\$182,857) \$0 (\$379,729) \$1,816	-18 11 -11 -3 -10 (-11 -8 -7 (-3 -10 -10 -5 -10 -5 -10 -6 -7 -7 (-6 -7 -7 (-7 -7 (-7 (-7 (
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 B. 1 2 3	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration Medical Records Social Service	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400 \$38,138,533 \$2,621,161 \$0 \$1,778,959	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452 \$36,745,294	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$3,517) (\$17,766) \$27,649 (\$31,173) \$149,009 (\$90,948) (\$1,393,239) (\$182,857) \$0 (\$379,729)	-18 -11 -11 -3 -10 -10 -11 -5 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7 -7
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 B. 1 2 3 4	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration Medical Records Social Service Other Professional Services	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400 \$38,138,533 \$2,621,161 \$0 \$1,778,959 \$1,470,841 \$1,391,039 \$235,050	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452 \$36,745,294 \$2,438,304 \$0 \$1,399,230 \$1,472,657 \$1,263,664 \$224,713	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$31,173) \$149,009 (\$90,948) (\$1,393,239) (\$182,857) \$0 (\$379,729) \$1,816	-18 -18 -11 -11 -3 -10 -6 -3 -10 -5 -1 -6 -4 -7 -7 -7 -7 -7 -7 -7 -9 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4 -4
A. 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 B. 1 2 3 4 5	OPERATING EXPENSE BY DEPARTMENT General Services: General Administration General Accounting Patient Billing & Collection Admitting / Registration Office Data Processing Communications Personnel Public Relations Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration Medical Records Social Service	\$3,599,915 \$1,436,389 \$2,444,600 \$817,501 \$4,779,923 \$238,084 \$976,858 \$1,536,113 \$738,753 \$1,701,924 \$1,635,050 \$569,171 \$36,091 \$389,184 \$4,642,069 \$596,740 \$10,396,768 \$1,603,400 \$38,138,533 \$2,621,161 \$0 \$1,778,959 \$1,470,841 \$1,391,039	\$2,958,293 \$1,589,542 \$2,181,069 \$838,695 \$4,292,024 \$238,501 \$872,051 \$1,412,198 \$683,796 \$1,700,373 \$1,726,328 \$554,918 \$32,574 \$371,418 \$4,669,718 \$565,567 \$10,545,777 \$1,512,452 \$36,745,294 \$2,438,304 \$0 \$1,399,230 \$1,472,657 \$1,263,664	(\$641,622) \$153,153 (\$263,531) \$21,194 (\$487,899) \$417 (\$104,807) (\$123,915) (\$54,957) (\$1,551) \$91,278 (\$14,253) (\$31,173) \$149,009 (\$90,948) (\$1,393,239) (\$182,857) \$0 (\$379,729) \$1,816 (\$127,375)	-18 11 -11 -11 -11 -11 -1 -1 -1 -1 -1 -1 -1

FISCAL YEAR 2015 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
	Operation Decre	#0.057.400	£7,000,045	(ft4 404 40 7)	120/
<u>1</u> 2	Operating Room Recovery Room	\$9,057,132 \$0	\$7,862,945 \$0	(\$1,194,187) \$0	<u>-13%</u> 0%
3	Anesthesiology	\$393,299	\$504,501	\$111,202	28%
4	Delivery Room	\$393,299	\$04,301	\$111,202	0%
5	Diagnostic Radiology	\$2,424,154	\$2,324,075	(\$100,079)	-4%
6	Diagnostic Ultrasound	\$549,492	\$508,248	(\$41,244)	-8%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$498,125	\$543,912	\$45,787	9%
9	CT Scan	\$810,846	\$898,579	\$87,733	11%
10	Laboratory	\$7,324,158	\$6,593,532	(\$730,626)	-10%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$733,069	\$936,875	\$203,806	28%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$32,417	\$46,046	\$13,629	42%
15	Occupational Therapy	\$241,655	\$317,098	\$75,443	31%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$962,725	\$906,365	(\$56,360)	-6%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$209,918	\$197,355	(\$12,563)	-6%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$4,875,480	\$5,041,099	\$165,619	3%
25	MRI	\$471,443	\$406,932	(\$64,511)	-14%
26	PET Scan	\$239,467	\$216,006	(\$23,461)	-10%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,018,988	\$1,062,370	\$43,382	4%
29	Sleep Center	\$225,766	\$348,922	\$123,156	55%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,841,460	\$1,785,139	(\$56,321)	-3%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$3,791,075	\$3,776,570	(\$14,505)	0%
	Total Special Services	\$35,700,669	\$34,276,569	(\$1,424,100)	-4%
D.	Routine Services:				
1	Medical & Surgical Units	\$8,185,276	\$7,714,244	(\$471,032)	-6%
2	Intensive Care Unit	\$2,995,462	\$2,889,117	(\$106,345)	-4%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,406,453	\$2,392,478	(\$13,975)	-1%
5	Pediatric Unit	\$6,725	\$0	(\$6,725)	-100%
6	Maternity Unit	\$2,845,608	\$2,612,530	(\$233,078)	-8%
7	Newborn Nursery Unit	\$22,694	\$14,188	(\$8,506)	-37%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$934,671	\$1,011,122	\$76,451	8%
11	Home Care	\$3,516,019	\$4,274,898	\$758,879	22%
	Outpatient Clinics	\$5,697,265	\$4,936,368	(\$760,897)	-13%
	Outpatient Clinics				6%
12		\$271,519	\$287,126	\$15,007	
	Other Routine Services Total Routine Services	\$271,519 \$26,881,692	\$287,126 \$26,132,071	\$15,607 (\$749,621)	
12 13	Other Routine Services Total Routine Services				
12 13 E .	Other Routine Services Total Routine Services Other Departments:	\$26,881,692	\$26,132,071	(\$749,621)	-3%
12 13	Other Routine Services Total Routine Services				-1%
12 13 E .	Other Routine Services Total Routine Services Other Departments:	\$26,881,692	\$26,132,071	(\$749,621)	-3%
12 13 E .	Other Routine Services Total Routine Services Other Departments: Miscellaneous Other Departments Total Operating Expenses - All Departments*	\$26,881,692 \$33,011,005 \$141,228,949	\$26,132,071 \$32,680,771 \$136,633,273	(\$749,621) (\$330,234) (\$4,595,676)	-3% -1% -3%
12 13 E.	Other Routine Services Total Routine Services Other Departments: Miscellaneous Other Departments	\$26,881,692 \$33,011,005 \$141,228,949	\$26,132,071 \$32,680,771 \$136,633,273	(\$749,621) (\$330,234) (\$4,595,676)	-3% -1% -3%

	BR	ISTOL HOSPITAL					
	TWELVE N	ONTHS ACTUAL FILING					
	FISCAL YEAR 2015						
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)			
(-)	\-/	ACTUAL	ACTUAL	ACTUAL			
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015			
A.	Statement of Operations Summary						
1	Total Net Patient Revenue	\$126,808,091	\$137,976,406	\$133,327,930			
2	Other Operating Revenue	4,242,269	4,301,391	3,838,007			
3	Total Operating Revenue	\$131,050,360	\$142,277,797	\$137,165,937			
4	Total Operating Expenses	129,703,674	141,228,949	136,633,273			
5	Income/(Loss) From Operations	\$1,346,686	\$1,048,848	\$532,664			
6	Total Non-Operating Revenue	844,070	1,263,862	795,166			
7	Excess/(Deficiency) of Revenue Over Expenses	\$2,190,756	\$2,312,710	\$1,327,830			
В.	Profitability Summary						
1	Hospital Operating Margin	1.02%	0.73%	0.39%			
2	Hospital Non Operating Margin	0.64%	0.88%	0.58%			
3	Hospital Total Margin	1.66%	1.61%	0.96%			
4	Income/(Loss) From Operations	\$1,346,686	\$1,048,848	\$532,664			
5	Total Operating Revenue	\$131,050,360	\$142,277,797	\$137,165,937			
6	Total Non-Operating Revenue	\$844,070	\$1,263,862	\$795,166			
7	Total Revenue	\$131,894,430	\$143,541,659	\$137,961,103			
8	Excess/(Deficiency) of Revenue Over Expenses	\$2,190,756	\$2,312,710	\$1,327,830			
C.	Net Assets Summary						
1	Hospital Unrestricted Net Assets	\$15,896,282	\$17,633,376	\$11,995,043			
2	Hospital Total Net Assets	\$26,472,271	\$28,426,955	\$21,907,472			
3	Hospital Change in Total Net Assets	\$15,840,936	\$1,954,684	(\$6,519,483)			
4	Hospital Change in Total Net Assets %	249.0%	7.4%	-22.9%			

	В	RISTOL HOSPITAL						
	TWELVE MONTHS ACTUAL FILING							
	FISCAL YEAR 2015							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	<u>DESCRIPTION</u>	FY 2013	FY 2014	FY 2015				
D.	Cost Data Summary							
1	Ratio of Cost to Charges	0.30	0.31	0.31				
2	Total Operating Expenses	\$129,703,674	\$141,228,949	\$136,633,273				
3	Total Gross Revenue	\$427,704,615	\$453,092,138	\$444,108,650				
4	Total Other Operating Revenue	\$4,242,269	\$4,301,391	\$3,838,007				
5	Private Payment to Cost Ratio	1.42	1.41	1.46				
6	Total Non-Government Payments	\$60,083,826	\$64,034,225	\$59,154,489				
7	Total Uninsured Payments	\$85,575	\$67,919	\$108,324				
8	Total Non-Government Charges	\$149,192,190	\$154,216,460	\$139,231,964				
9	Total Uninsured Charges	\$8,691,798	\$7,311,431	\$6,500,426				
10	Medicare Payment to Cost Ratio	0.81	0.81	0.83				
11	Total Medicare Payments	\$47,894,414	\$51,942,733	\$52,094,592				
12	Total Medicare Charges	\$195,759,432	\$207,383,286	\$205,561,808				
13	Medicaid Payment to Cost Ratio	0.73	0.71	0.72				
14	Total Medicaid Payments	\$18,000,260	\$19,708,135	\$21,470,152				
15	Total Medicaid Charges	\$81,866,543	\$89,953,536	\$97,960,036				
16	Uncompensated Care Cost	\$3,067,593	\$2,636,400	\$1,922,972				
17	Charity Care	\$5,306,456	\$4,530,623	\$4,092,111				
18	Bad Debts	\$4,909,425	\$4,007,799	\$2,212,274				
19	Total Uncompensated Care	\$10,215,881	\$8,538,422	\$6,304,385				
20	Uncompensated Care % of Total Expenses	2.4%	1.9%	1.4%				

	BRISTOL HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2013	FY 2014	FY 2015				
21	Total Operating Expenses	\$129,703,674	\$141,228,949	\$136,633,273				
E.	<u>Liquidity Measures Summary</u>							
1	Current Ratio	1	1	2				
2	Total Current Assets	\$38,926,532	\$37,551,284	\$37,320,874				
3	Total Current Liabilities	\$26,895,793	\$27,283,850	\$23,033,650				
4	Days Cash on Hand	38	37	43				
5	Cash and Cash Equivalents	\$12,810,191	\$13,617,245	\$15,285,938				
6	Short Term Investments	96,526	96,550	0				
7	Total Cash and Short Term Investments	\$12,906,717	\$13,713,795	\$15,285,938				
8	Total Operating Expenses	\$129,703,674	\$141,228,949	\$136,633,273				
9	Depreciation Expense	\$6,363,743	\$6,614,415	\$7,176,664				
10	Operating Expenses less Depreciation Expense	\$123,339,931	\$134,614,534	\$129,456,609				
11	Days Revenue in Patient Accounts Receivable	57	48	42				
12	Net Patient Accounts Receivable	\$16,887,452	\$17,715,144	\$16,471,779				
13	Due From Third Party Payers	\$2,757,898	\$581,194	\$0				
14	Due To Third Party Payers	\$0	\$0	\$1,130,21				
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$19,645,350	\$18,296,338	\$15,341,568				
16	Total Net Patient Revenue	\$126,808,091	\$137,976,406	\$133,327,930				
17	Average Payment Period	80	74	65				
18	Total Current Liabilities	\$26,895,793	\$27,283,850	\$23,033,650				
19	Total Operating Expenses	\$129,703,674	\$141,228,949	\$136,633,273				
20	Depreciation Expense	\$6,363,743	\$6,614,415	\$7,176,664				

	BRISTOL HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2013	FY 2014	FY 2015				
21	Total Operating Expenses less Depreciation Expense	\$123,339,931	\$134,614,534	\$129,456,609				
F.	Solvency Measures Summary							
1	Equity Financing Ratio	23.2	24.9	19.6				
2	Total Net Assets	\$26,472,271	\$28,426,955	\$21,907,472				
3	Total Assets	\$113,932,754	\$114,337,729	\$111,991,654				
4	Cash Flow to Total Debt Ratio	16.1	16.9	17.7				
5	Excess/(Deficiency) of Revenues Over Expenses	\$2,190,756	\$2,312,710	\$1,327,830				
6	Depreciation Expense	\$6,363,743	\$6,614,415	\$7,176,664				
7	Excess of Revenues Over Expenses and Depreciation Expense	\$8,554,499	\$8,927,125	\$8,504,494				
8	Total Current Liabilities	\$26,895,793	\$27,283,850	\$23,033,650				
9	Total Long Term Debt	\$26,298,523	\$25,576,658	\$25,024,410				
10	Total Current Liabilities and Total Long Term Debt	\$53,194,316	\$52,860,508	\$48,058,060				
11	Long Term Debt to Capitalization Ratio	49.8	47.4	53.3				
12	Total Long Term Debt	\$26,298,523	\$25,576,658	\$25,024,410				
13	Total Net Assets	\$26,472,271	\$28,426,955	\$21,907,472				
14	Total Long Term Debt and Total Net Assets	\$52,770,794	\$54,003,613	\$46,931,882				
15	Debt Service Coverage Ratio	4.5	3.9	3.8				
16	Excess Revenues over Expenses	2,190,756	\$2,312,710	\$1,327,830				
17	Interest Expense	1,421,576	\$1,412,468	\$1,267,462				
18	Depreciation and Amortization Expense	6,363,743	\$6,614,415	\$7,176,664				
19	Principal Payments	776,377	\$1,269,852	\$1,295,843				
G.	Other Financial Ratios							

	BRISTOL HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)								
	. ,	·	ACTUAL	ACTUAL	ACTUAL			
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015				
20	Average Age of Plant	17.6	17.9	17.4				
21	Accumulated Depreciation	111,762,978	118,322,799	124,849,240				
22	Depreciation and Amortization Expense	6,363,743	6,614,415	7,176,664				
	Depreciation and Amortization Expense	0,000,140	0,014,410	7,170,004				
Н.	Utilization Measures Summary							
1	Patient Days	29,710	29,830	28,080				
2	Discharges	7,448	7,349	7,071				
3	ALOS	4.0	4.1	4.0				
4	Staffed Beds	115	115	128				
		115						
5	Available Beds		154	154				
6	Licensed Beds	154	154	154				
7	Occupancy of Staffed Beds	70.8%	71.1%	60.1%				
8	Occupancy of Available Beds	52.9%	53.1%	50.0%				
9	Full Time Equivalent Employees	855.0	895.9	843.9				
I.	Hospital Gross Revenue Payer Mix Percentage							
11	Non-Government Gross Revenue Payer Mix Percentage	32.8%	32.4%	29.9%				
2	Medicare Gross Revenue Payer Mix Percentage	45.8%	45.8%	46.3%				
3	Medicaid Gross Revenue Payer Mix Percentage	19.1%	19.9%	22.1%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%				
5	Uninsured Gross Revenue Payer Mix Percentage	2.0%	1.6%	1.5%				
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.3%	0.3%				
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Gross Revenue (Charges)	\$140,500,392	\$146,905,029	\$132,731,538				
9	Medicare Gross Revenue (Charges)	\$195,759,432	\$207,383,286	\$205,561,808				
10	Medicaid Gross Revenue (Charges)	\$81,866,543	\$89,953,536	\$97,960,036				
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0				
12	Uninsured Gross Revenue (Charges)	\$8,691,798	\$7,311,431	\$6,500,426				
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$886,450	\$1,538,856	\$1,354,842				
14	Total Gross Revenue (Charges)	\$427,704,615	\$453,092,138	\$444,108,650				
J.	Hospital Net Revenue Payer Mix Percentage							
1	Non-Government Net Revenue Payer Mix Percentage	47.5%	47.0%	44.4%				
2	Medicare Net Revenue Payer Mix Percentage	37.9%	38.2%	39.2%				
3	Medicaid Net Revenue Payer Mix Percentage	14.3%	14.5%	16.1%				
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%				
5	Uninsured Net Revenue Payer Mix Percentage	0.1%	0.0%	0.1%				
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.2%	0.2%				
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Net Revenue (Payments)	\$59,998,251	\$63,966,306	\$59,046,165				
9	Medicare Net Revenue (Payments)	\$47,894,414	\$51,942,733	\$52,094,592				
10	Medicaid Net Revenue (Payments)	\$18,000,260	\$19,708,135	\$21,470,152				

	BRISTOL HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(4)	(0)	(0)	(4)	(F)				
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2013	FY 2014	FY 2015				
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0				
12	Uninsured Net Revenue (Payments)	\$85,575	\$67,919	\$108,324				
13	CHAMPUS / TRICARE Net Revenue Payments)	\$276,512	\$283,817	\$312,870				
14	Total Net Revenue (Payments)	\$126,255,012	\$135,968,910	\$133,032,103				
K.	<u>Discharges</u>							
1	Non-Government (Including Self Pay / Uninsured)	2,202	2,116	1,833				
2	Medicare	3,584	3,410	3,380				
3	Medical Assistance	1,646	1,797	1,840				
4	Medicaid	1,646	1,797	1,840				
5	Other Medical Assistance	-	-	-				
6	CHAMPUS / TRICARE	16	26	18				
7	Uninsured (Included In Non-Government)	132	113	102				
8	Total	7,448	7,349	7,071				
L.	Case Mix Index							
1	Non-Government (Including Self Pay / Uninsured)	1.02400	1.04630	0.99300				
2	Medicare	1.25110	1.30640	1.27410				
3	Medical Assistance	0.94910	0.94320	0.93630				
4	Medicaid	0.94910	0.94320	0.93630				
5	Other Medical Assistance	0.00000	0.00000	0.00000				
6	CHAMPUS / TRICARE	0.74550	1.00670	0.62180				
7	Uninsured (Included In Non-Government)	1.08870	1.17600	1.12520				
8	Total Case Mix Index	1.11613	1.14164	1.11167				
M.	Emergency Department Visits							
1	Emergency Room - Treated and Admitted	5,771	5,323	5,331				
2	Emergency Room - Treated and Discharged	32,582	33,489	34,310				
3	Total Emergency Room Visits	38,353	38,812	39,641				

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	MEDICARE MANAGER CARE				
I.	MEDICARE MANAGED CARE	1			
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$686,307	\$444,066	(\$242,241)	-35%
2	Inpatient Payments	\$240,373	\$164,341	(\$76,032)	-32%
3	Outpatient Charges	\$1,112,793	\$1,006,586	(\$106,207)	-10%
4	Outpatient Payments	\$186,131	\$189,734	\$3,603	2%
5	Discharges	25	23	(2)	-8%
6	Patient Days	153	85	(68)	-44%
7	Outpatient Visits (Excludes ED Visits)	442	526	84	19%
8	Emergency Department Outpatient Visits	70	105	35	50%
9	Emergency Department Inpatient Admissions	20	22	2	10%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,799,100	\$1,450,652	(\$348,448)	-19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$426,504	\$354,075	(\$72,429)	-17%
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 9	Emergency Department Outpatient Visits	0	0	0	0% 0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ 0	\$ 0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL INFATIENT & COTFATIENT FATMENTS	φ0	Ψ0	ΨU	0 /6
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$6,775,078	\$7,385,919	\$610,841	9%
2	Inpatient Payments	\$2,311,719	\$2,497,887	\$186,168	8%
3	Outpatient Charges	\$8,361,373	\$10,280,198	\$1,918,825	23%
4	Outpatient Payments	\$1,505,277	\$1,761,193	\$255,916	17%
5	Discharges	237	265	28	12%
6	Patient Days	1,143	1,141	(2)	0%
7	Outpatient Visits (Excludes ED Visits)	4,555	4,904	349	8%
8	Emergency Department Outpatient Visits	429	508	79	18%
9	Emergency Department Inpatient Admissions	201	231	30	15%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$15,136,451	\$17,666,117	\$2,529,666	17%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,816,996	\$4,259,080	\$442,084	12%

(1)	(2)	(3)	(4)	(5)	(6)
` '	, ,	FY 2014	FY 2015	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	-				
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$102,265	\$53,085	(\$49,180)	-48%
2	Inpatient Payments	\$33,772	\$18,700	(\$15,072)	-45%
3	Outpatient Charges	\$113,160	\$65,765	(\$47,395)	-42%
4	Outpatient Payments	\$21,243	\$10,496	(\$10,747)	-51%
5	Discharges	4	4	0	0%
	Patient Days	11	7	(4)	-36%
7	Outpatient Visits (Excludes ED Visits)	33	17	(16)	-48%
8	Emergency Department Outpatient Visits	25	15	(10)	-40%
	Emergency Department Inpatient Admissions	3	4	1	33%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$215,425	\$118,850	(\$96,575)	-45%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$55,015	\$29,196	(\$25,819)	-47%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVANTA		**	*^	201
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%
	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%
	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2014	FY 2015	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$10,244,161	\$9,738,506	(\$505,655)	-5%
2	Inpatient Payments	\$3,409,262	\$3,050,525	(\$358,737)	-11%
3	Outpatient Charges	\$13,513,464	\$14,219,417	\$705,953	5%
4	Outpatient Payments	\$2,227,767	\$2,427,704	\$199,937	9%
5	Discharges	376	355	(21)	-6%
6	Patient Days	1,786	1,511	(275)	-15%
7	Outpatient Visits (Excludes ED Visits)	6,867	6,543	(324)	-5%
8	Emergency Department Outpatient Visits	644	722	78	12%
9	Emergency Department Inpatient Admissions	340	325	(15)	-4%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$23,757,625	\$23,957,923	\$200,298	1%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,637,029	\$5,478,229	(\$158,800)	-3%
H.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$796,371	\$1,303,931	\$507,560	64%
2	Inpatient Payments	\$241,336	\$375,749	\$134,413	56%
3	Outpatient Charges	\$1,513,921	\$2,387,152	\$873,231	58%
4	Outpatient Payments	\$262,434	\$418,353	\$155,919	59%
5	Discharges	33	46	13	39%
6	Patient Days	169	219	50	30%
7	Outpatient Visits (Excludes ED Visits)	817	926	109	13%
8	Emergency Department Outpatient Visits	190	231	41	22%
9	Emergency Department Inpatient Admissions	30	39	9	30%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,310,292	\$3,691,083	\$1,380,791	60%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$503,770	\$794,102	\$290,332	58%
I.	AETNA				
1	Inpatient Charges	\$3,736,257	\$4,754,727	\$1,018,470	27%
2	Inpatient Payments	\$1,272,459	\$1,565,149	\$292,690	23%
3	Outpatient Charges	\$6,193,829	\$7,639,697	\$1,445,868	23%
4	Outpatient Payments	\$1,169,334	\$1,299,426	\$130,092	11%
5	Discharges	140	175	35	25%
6	Patient Days	640	768	128	20%
7	Outpatient Visits (Excludes ED Visits)	2,692	3,213	521	19%
8	Emergency Department Outpatient Visits	413	416	3	1%
9	Emergency Department Inpatient Admissions	113	156	43	38%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$9,930,086	\$12,394,424	\$2,464,338	25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,441,793	\$2,864,575	\$422,782	17%

(1)	(2)	(3)	(4)	(5)	(6)
	\	FY 2014	FY 2015	AMOÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J.	HUMANA				
1	Inpatient Charges	\$45,560	\$187,317	\$141,757	311%
2	Inpatient Payments	\$13,323	\$31,428	\$18,105	136%
3	Outpatient Charges	\$23,510	\$23,289	(\$221)	-1%
4	Outpatient Payments	\$4,495	\$4,529	\$34	1%
5	Discharges	2	6	4	200%
6	Patient Days	10	43	33	330%
7	Outpatient Visits (Excludes ED Visits)	23	43	20	87%
8	Emergency Department Outpatient Visits	3	6	3	100%
9	Emergency Department Inpatient Admissions	2	5	3	150%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$69,070	\$210,606	\$141,536	205%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$17,818	\$35,957	\$18,139	102%
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%
	LINIOADE LIEE O LIEAL THENOUDANGE				
L.	UNICARE LIFE & HEALTH INSURANCE	20	40	**	20/
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%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
М.	UNIVERSAL AMERICAN				
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%
	EVEDOADE				
N.	EVERCARE	0000 404	#000 00F	000.054	000/
1	Inpatient Charges	\$202,184	\$269,035	\$66,851	33%
2	Inpatient Payments	\$58,407	\$90,510	\$32,103	55%
3	Outpatient Charges	\$79,532	\$159,085	\$79,553	100%
4	Outpatient Payments	\$12,936	\$25,171	\$12,235	95%
5	Discharges	5	9	4	80%
6	Patient Days	42	43	1	2%
7	Outpatient Visits (Excludes ED Visits)	319	553	234	73%
8	Emergency Department Outpatient Visits	6	14	8	133%
9	Emergency Department Inpatient Admissions	5	9	4	80%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$281,716	\$428,120	\$146,404	52%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$71,343	\$115,681	\$44,338	62%
II.	TOTAL MEDICARE MANAGED CARE	,			
	TOTAL INPATIENT CHARGES	\$22,588,183	\$24,136,586	\$1,548,403	7%
	TOTAL INPATIENT CHARGES TOTAL INPATIENT PAYMENTS	\$7,580,651	\$7,794,289	\$213,638	3%
	TOTAL INPATIENT PATMENTS TOTAL OUTPATIENT CHARGES	\$30,911,582	\$35,781,189	\$4,869,607	16%
	TOTAL OUTPATIENT CHARGES	\$5,389,617	\$6,136,606	\$746,989	14%
	TOTAL DISCHARGES	822	883	\$740,969 61	7%
	TOTAL DISCHARGES	3.954	3.817	(137)	-3%
	TOTAL PATIENT DATS	3,954	3,017	(137)	-3 70
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	15,748	16,725	977	6%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	1,780	2,017	237	13%
	TOTAL EMERGENCY DEPARTMENT INPATIENT				
	ADMISSIONS	714	791	77	11%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$53,499,765	\$59,917,775	\$6,418,010	12%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$12,970,268	\$13,930,895	\$960,627	7%

(1)	(2)	(3)	(4)	(5)	(6)
··/	(-)	FY 2014	FY 2015	AMOUNT	(0)
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
			_		
I.	MEDICAID MANAGED CARE				
	-				
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
A.	CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	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	\$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.	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%

(1)	(2)	(3)	(4)	(5)	(6)
	\	FY 2014	FY 2015	AMOUNT	ν-7
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
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%
	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%
	FIRST CHOICE OF CONNECTICUT, PREFERRED				
F.	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%

	FY 2014 ACTUAL	FY 2015	AMOUNT	
	ACTUAL			İ
	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	***	40		370
UNITED HEALTHCARE				
Inpatient Charges	\$0	\$0	\$0	0%
				0%
	1 -	7 -	1 -	0%
				0%
				0%
	-	-		0%
Outpatient Visits (Excludes ED Visits)		-		0%
				0%
	-	-		0%
		•	1 :	0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
AFTMA				
	CO	CO	<u>ф</u> О	00/
			* -	0%
				0% 0%
				0%
		* -	1 -	0%
				0%
				0%
				0%
		-		0%
				0%
		•		0%
	ΨΨ	Ψ•	40	070
TOTAL MEDICAID MANAGED CARE				
TOTAL INDATIFNIT CHARGES	***		•	00/
		•		0% 0%
		•	1 :	
	1 -	, .	1 :	0%
	1 -	, .	1 :	0%
				0% 0%
	U	U	U	U%
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	ام	_	^	0%
	<u> </u>	U	U	0%
	ام	_	^	0%
				0%
	1 -	• • •		0%
	Inpatient Charges Inpatient Payments Dutpatient Payments Dutpatient Payments Dutpatient Payments Discharges Patient Days Dutpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits Emergency Department Inpatient Admissions FOTAL INPATIENT & OUTPATIENT CHARGES FOTAL INPATIENT & OUTPATIENT PAYMENTS AETNA Inpatient Charges Inpatient Payments Dutpatient Payments Dutpatient Payments Discharges Patient Days Dutpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits Emergency Department Outpatient Visits Emergency Department Inpatient Admissions FOTAL INPATIENT & OUTPATIENT CHARGES FOTAL INPATIENT & OUTPATIENT CHARGES	Impatient Charges	Impatient Charges \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	Impatient Charges \$0

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC. **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015** REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION (1) (2) (3) (4) FY 2015 AMOUNT FY 2014 LINE DESCRIPTION ACTUAL ACTUAL DIFFERENCE DIFFERENCE I. **ASSETS Current Assets:** A. Cash and Cash Equivalents \$18,575,899 \$20,508,378 \$1,932,479 10% 2 Short Term Investments (\$96,550) -100% \$96,550 \$0 Accounts Receivable (Less: Allowance for 3 Doubtful Accounts) \$20.598.344 \$19.746.504 (\$851,840)-4% Current Assets Whose Use is Limited for Current Liabilities \$586.306 \$601.120 \$14.814 3% Due From Affiliates \$0 0% 5 \$0 \$0 Due From Third Party Payers \$581,194 (\$581,194)-100% 6 \$0 7 -2% Inventories of Supplies \$1,444,885 \$1,419,330 (\$25,555)8 Prepaid Expenses \$1,034,720 \$1,308,744 26% \$274,024 9 Other Current Assets \$3,894,775 \$3,282,946 (\$611,829)-16% 0% **Total Current Assets** \$46,812,673 \$46,867,022 \$54,349 Noncurrent Assets Whose Use is Limited: B. \$0 \$0 0% 1 Held by Trustee \$0 2 Board Designated for Capital Acquisition \$7,865,256 \$7,618,664 (\$246,592)-3% Funds Held in Escrow \$0 0% 3 \$0 \$0 Other Noncurrent Assets Whose Use is Limited \$16,165,720 \$14,443,787 (\$1,721,933)-11% **Total Noncurrent Assets Whose Use is** Limited: \$24,030,976 \$22,062,451 (\$1,968,525)-8% Interest in Net Assets of Foundation \$2,545,686 -28% 5 \$1,834,813 (\$710,873) 6 Long Term Investments -3% \$6,665,386 \$6,496,418 (\$168,968)-10% 7 Other Noncurrent Assets \$2,160,773 \$1,934,263 (\$226,510)C. **Net Fixed Assets:** Property, Plant and Equipment \$170,802,291 \$180,313,829 6% 1 \$9,511,538 \$0 2 Less: Accumulated Depreciation \$129.836.351 \$137,121,924 \$7,285,573 Property, Plant and Equipment, Net \$40,965,940 \$43,191,905 \$2,225,965 5% Construction in Progress \$1,976,393 \$635,138 (\$1,341,255)-68% **Total Net Fixed Assets** \$42,942,333 \$43,827,043 \$884,710 2% **Total Assets** \$125,157,827 \$123,022,010 (\$2,135,817) -2%

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC. **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015** REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION (1) (2) (3) (4) FY 2014 FY 2015 AMOUNT LINE DESCRIPTION ACTUAL ACTUAL DIFFERENCE DIFFERENCE LIABILITIES AND NET ASSETS II. A. **Current Liabilities:** Accounts Payable and Accrued Expenses \$13,769,295 \$13,044,663 (\$724,632)-5% 2 Salaries, Wages and Payroll Taxes \$13.804.788 \$10,002,062 (\$3,802,726)-28% \$0 Due To Third Party Payers 0% 3 \$1,130,211 \$1,130,211 \$0 0% 4 Due To Affiliates \$0 \$0 \$1,230,670 \$60,000 5% 5 Current Portion of Long Term Debt \$1,290,670 6 Current Portion of Notes Payable \$8,648 \$109,090 \$100,442 1161% 7 Other Current Liabilities \$3,287,933 -22% \$2,550,293 (\$737,640)**Total Current Liabilities** -12% \$32,101,334 \$28,126,989 (\$3,974,345)В. Long Term Debt: 1 Bonds Payable (Net of Current Portion) \$28,552,105 \$27,223,996 (\$1,328,109)-5% Notes Payable (Net of Current Portion) \$273,261 \$464,171 \$190,910 70% **Total Long Term Debt** \$28.825.366 \$27,688,167 (\$1,137,199) -4% 3 Accrued Pension Liability \$23.468.844 \$32,795,767 \$9.326.923 40% Other Long Term Liabilities \$11,330,848 \$11,515,267 2% \$184,419 **Total Long Term Liabilities** \$63,625,058 \$71,999,201 \$8,374,143 13% Interest in Net Assets of Affiliates or Joint 0% 5 \$0 \$0 \$0 Ventures C Net Assets: Unrestricted Net Assets or Equity \$18,611,817 \$12,974,320 (\$5,637,497)-30% 1 2 -16% Temporarily Restricted Net Assets \$3,734,131 \$3,131,129 (\$603,002)Permanently Restricted Net Assets \$7,085,487 \$6,790,371 (\$295,116) -4% **Total Net Assets** \$29,431,435 \$22,895,820 (\$6,535,615)-22% **Total Liabilities and Net Assets** \$125,157,827 \$123,022,010 -2% (\$2,135,817)

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC. TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2015

REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INF	ORMATION

(4)	REPORT 350 - PARENT CORPORATION CON				
(1)	(2)	(3) FY 2014	(4) FY 2015	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A.	Operating Revenue:				
1	Total Gross Patient Revenue	\$506,994,274	\$506,080,946	(\$913,328)	0%
2	Less: Allowances	\$329,361,820	\$332,363,425	\$3,001,605	1%
3	Less: Charity Care	\$4,530,623	\$4,092,111	(\$438,512)	-10%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$173,101,831	\$169,625,410	(\$3,476,421)	-2%
5	Provision for Bad Debts	\$4,869,425	\$3,515,959	(\$1,353,466)	-28%
	Net Patient Service Revenue less provision for bad debts	\$168,232,406	\$166,109,451	(\$2.422.0EE)	-1%
6				(\$2,122,955) (\$4,549,375)	
6	Other Operating Revenue	\$7,836,353	\$6,317,978	(\$1,518,375)	-19%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$176,068,759	\$172,427,429	(\$3,641,330)	-2%
В.	Operating Expenses:				
1	Salaries and Wages	\$82,949,305	\$82,861,130	(\$88,175)	0%
2	Fringe Benefits	\$18,390,449	\$17,998,233	(\$392,216)	-2%
3	Physicians Fees	\$2,015,725	\$2,257,250	\$241,525	12%
4	Supplies and Drugs	\$28,545,856	\$27,638,010	(\$907,846)	-3%
5	Depreciation and Amortization	\$7,411,959	\$7,959,616	\$547,657	7%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$1,651,982	\$1,506,976	(\$145,006)	-9%
8	Malpractice Insurance Cost	\$2,106,314	\$1,839,763	(\$266,551)	-13%
9	Other Operating Expenses	\$32,314,788	\$30,279,110	(\$2,035,678)	-6%
	Total Operating Expenses	\$175,386,378	\$172,340,088	(\$3,046,290)	-2%
	Income//I cos) From Operations	¢000 204	£07.244	(\$505.040)	070/
	Income/(Loss) From Operations	\$682,381	\$87,341	(\$595,040)	-87%
C.	Non-Operating Revenue:				
1	Income from Investments	\$403,907	\$839,289	\$435,382	108%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$1,074,662	\$157,754	(\$916,908)	-85%
	Total Non-Operating Revenue	\$1,478,569	\$997,043	(\$481,526)	-33%
	Excess/(Deficiency) of Revenue Over Expenses				
	(Before Other Adjustments)	\$2,160,950	\$1,084,384	(\$1,076,566)	-50%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$2,160,950	\$1,084,384	(\$1,076,566)	-50%

	BRISTOL HOSPITAL & HEAL	TH CARE GROUP, INC.							
	TWELVE MONTHS A	ACTUAL FILING							
	FISCAL YEA	AR 2015							
	REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
(· /	(-)	ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015					
Α.	Parent Corporation Statement of Operations Summary								
1	Net Patient Revenue	\$155,469,099	\$168,232,406	\$166,109,451					
2	Other Operating Revenue	6,651,756	7,836,353	6,317,978					
3	Total Operating Revenue	\$162,120,855	\$176,068,759	\$172,427,429					
4	Total Operating Expenses	161,783,218	175,386,378	172,340,088					
5	Income/(Loss) From Operations	\$337,637	\$682,381	\$87,341					
6	Total Non-Operating Revenue	857,803 1,478,569		997,043					
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,195,440	\$2,160,950	\$1,084,384					
В.	Parent Corporation Profitability Summary								
1	Parent Corporation Operating Margin	0.21%	0.38%	0.05%					
2	Parent Corporation Non-Operating Margin	0.53%	0.83%	0.57%					
3	Parent Corporation Total Margin	0.73%	1.22%	0.63%					
4	Income/(Loss) From Operations	\$337,637	\$682,381	\$87,341					
5	Total Operating Revenue	\$162,120,855	\$176,068,759	\$172,427,429					
6	Total Non-Operating Revenue	\$857,803	\$1,478,569	\$997,043					
7	Total Revenue	\$162,978,658	\$177,547,328	\$173,424,472					
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,195,440	\$2,160,950	\$1,084,384					
C.	Parent Corporation Net Assets Summary								
1	Parent Corporation Unrestricted Net Assets	\$18,001,943	\$18,611,817	\$12,974,320					
2	Parent Corporation Total Net Assets	\$28,607,725	\$29,431,435	\$22,895,820					
3	Parent Corporation Change in Total Net Assets	\$17,201,898	\$823,710	(\$6,535,615)					
4	Parent Corporation Change in Total Net Assets %	250.8%	2.9%	-22.2%					

	BRISTOL HOSPITAL & HEA	LTH CARE GROUP, INC).					
	TWELVE MONTHS	ACTUAL FILING						
	FISCAL YE	AR 2015						
	REPORT 385 - PARENT CORPORATION CON	ISOLIDATED FINANCIA	L DATA ANALYSIS					
	(2) (3) (4)							
(1)	(2) (3) (4)							
	DECORIDATION	ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015				
D.	Liquidity Measures Summary							
1	Current Ratio	1.48	1.46	1.67				
2	Total Current Assets	\$45,488,801	\$46,812,673	\$46,867,022				
3	Total Current Liabilities	\$30,739,960	\$32,101,334	\$28,126,989				
4	Days Cash on Hand	39	41	46				
5	Cash and Cash Equivalents	\$16,318,029	\$18,575,899	\$20,508,378				
6	Short Term Investments	\$96,526	\$96,550	\$0				
7	Total Cash and Short Term Investments	\$16,414,555	\$18,672,449	\$20,508,378				
8	Total Operating Expenses	\$161,783,218	\$175,386,378	\$172,340,088				
9	Depreciation Expense	\$7,216,365	\$7,411,959	\$7,959,616				
10	Operating Expenses less Depreciation Expense	\$154,566,853	\$167,974,419	\$164,380,472				
11	Days Revenue in Patient Accounts Receivable	55	46	41				
12	Net Patient Accounts Receivable	\$ 20,536,329	\$ 20,598,344	\$ 19,746,504				
13	Due From Third Party Payers	\$2,757,898	\$581,194	\$0				
14	Due To Third Party Payers	\$0	\$0	\$1,130,211				
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 23,294,227	\$ 21,179,538	\$ 18,616,293				
16	Total Net Patient Revenue	\$155,469,099	\$168,232,406	\$166,109,451				
17	Average Payment Period	73	70	62				
18	Total Current Liabilities	\$30,739,960	\$32,101,334	\$28,126,989				
19	Total Operating Expenses	\$161,783,218	\$175,386,378	\$172,340,088				
20	Depreciation Expense	\$7,216,365	\$7,411,959	\$7,959,616				
20	Total Operating Expenses less Depreciation Expense	\$154,566,853	\$167,974,419	\$164,380,472				
	1	1						

	BRISTOL HOSPITAL & HEAL	TH CARE GROUD INC							
		•							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015								
	REPORT 385 - PARENT CORPORATION CONS		DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)					
		ACTUAL ACTUAL		ACTUAL					
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015					
E.	Solvency Measures Summary								
1	Equity Financing Ratio	22.8	23.5	18.6					
2	Total Net Assets	\$28,607,725	\$29,431,435	\$22,895,820					
3	Total Assets	\$125,634,402	\$125,157,827	\$123,022,010					
4	Cash Flow to Total Debt Ratio	13.8	15.7	16.2					
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,195,440	\$2,160,950	\$1,084,384					
6	Depreciation Expense	\$7,216,365	\$7,411,959	\$7,959,616					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$8,411,805	\$9,572,909	\$9,044,000					
8	Total Current Liabilities	\$30,739,960	\$32,101,334	\$28,126,989					
9	Total Long Term Debt	\$30,098,402	\$28,825,366	\$27,688,167					
10	Total Current Liabilities and Total Long Term Debt	\$60,838,362	\$60,926,700	\$55,815,156					
11	Long Term Debt to Capitalization Ratio	51.3	49.5	54.7					
12	Total Long Term Debt	\$30,098,402	\$28,825,366	\$27,688,167					
13	Total Net Assets	\$28,607,725	\$29,431,435	\$22,895,820					
14	Total Long Term Debt and Total Net Assets	\$58,706,127	\$58,256,801	\$50,583,987					

				DI	RISTOL HOSPITA			
					MONTHS ACTUA			
					ISCAL YEAR 201			
			DEDORT 40		PATIENT BED UTI		DADTMENT	
			KLFOKT 40	0 - HOSFITAL INF	ATILINI BLD OTI	LIZATION BI DE	FAITIVILIT	
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
(')	(2)	(0)	(ou)	(05)	(4)	(0)	OCCUPANCY	OCCUPANCY
		PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	CU/CCU # PATIENT	ADMISSIONS	BEDS (A)	BEDS	BEDS (A)	BEDS
LINE	<u>DESCRIPTION</u>	DATS	CU/CCU # PATIENT		BEDS (A)	BED3	BEDS (A)	BEDS
1	Adult Medical/Surgical	17,887	5,089	5,064	74	86	66.2%	57.0%
-	7 tate Woaldan Gargioan	17,007	0,000	0,001	, ,		00.270	01.070
2	ICU/CCU (Excludes Neonatal ICU)	2.748	264	0	14	14	53.8%	53.8%
	(=	_,	= ,	-				
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
	Psychiatric: Ages 18+	4,598	908	911	14	16	90.0%	78.7%
	TOTAL PSYCHIATRIC	4,598	908	911	14	16	90.0%	78.7%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	1,488	514	515	15	15	27.2%	27.2%
7	Newborn	1,351	558	564	8	20	46.3%	18.5%
							2.20/	
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
_	Pediatric	8	2	2	3	3	0.7%	0.7%
9	Pediatric	8	2	2	3	ა	0.7%	0.7%
10	Other	0	0	0	0	0	0.0%	0.0%
10	Other	0		O O	- U	U	0.070	0.070
	TOTAL EXCLUDING NEWBORN	26,729	6,513	6,492	120	134	61.0%	54.6%
			5,5.5	0,102	0		0.1.070	0,0
	TOTAL INPATIENT BED UTILIZATION	28,080	7,071	7,056	128	154	60.1%	50.0%
			1,011	.,	0		00.170	00.070
	TOTAL INPATIENT REPORTED YEAR	28,080	7,071	7,056	128	154	60.1%	50.0%
	TOTAL INPATIENT PRIOR YEAR	29,830		7,348	115	154	71.1%	53.1%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-1,750		-292	13	0	-11.0%	-3.1%
		,		-	-	-		
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-6%	-4%	-4%	11%	0%	-15%	-6%
	,		1,70	1,0	3170	0 70	1070	
	Total Licensed Beds and Bassinets	154						
(A) T	his number may not exceed the number of availa	ble beds for eac	h department or in	otal.				
Note	Total discharges do not include ICU/CCU patien	ts.						

		BRISTOL HOSPITAL			
		MONTHS ACTUAL I	FILING		
		FISCAL YEAR 2015			
	REPORT 450 - HOSPITAL INPATIENT AN	ID OUTPATIENT OTH	IER SERVICES UTIL	IZATION AND FTES	i
(1)	(2)	(3)	(4)	(5)	(6)
(')	(2)	(3)	(4)	(3)	(0)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE
	CT Scans (A)				
11	Inpatient Scans	3,239	3,244	5	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	2 027	4 222	385	100/
	Emergency Department Scans	3,937 4,829	4,322 5,112	283	10% 6%
4	Other Non-Hospital Providers' Scans (A)	7,023	0,112	0	0%
	Total CT Scans	12,005	12,678	673	6%
		12,000	,	0.0	•
В.	MRI Scans (A)				
	Inpatient Scans	358	374	16	4%
	Outpatient Scans (Excluding Emergency Department				
	Scans)	2,658	2,337	-321	-12%
	Emergency Department Scans	89	105	16	189
4	Other Non-Hospital Providers' Scans (A) Total MRI Scans	0	0	0	0%
	TOTAL WIRL SCALIS	3,105	2,816	-289	-9%
C.	PET Scans (A)				
	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department	0	0	0	0 //
2	Scans)	211	213	2	1%
	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	211	213	2	1%
	PET/CT Scans (A)				200
1	Inpatient Scans (Fyelving Emergency Penertment	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
	Emergency Department Scans	0	0	0	0%
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
	(A) If the Hospital is not the primary provider of thes			cal year	
	volume of each of these types of scans from the	primary provider of	the scans.	T	
E.	<u>Linear Accelerator Procedures</u>		•		000
1 2	Inpatient Procedures Outpatient Procedures	0	0	0	0% 0%
	Total Linear Accelerator Procedures	0	0	0	0%
	Total Ellion 7,0001010101 1100000100			•	• • • • • • • • • • • • • • • • • • • •
F.	Cardiac Catheterization Procedures				
	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
	Cardiac Angioplasty Procedures				
	Primary Procedures	0	0	0	0%
2	Elective Procedures Total Cardiac Angioplasty Procedures	0	0 0	0	0% 0%
	Total Gardiae Angropiasty Frocedures	0	U	U	07
Н.	Electrophysiology Studies				
	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
l.	Surgical Procedures				
1	Inpatient Surgical Procedures	1,272	1,280	8	1%
2	Outpatient Surgical Procedures	3,385	3,088		-9%
	Total Surgical Procedures	4,657	4,368	-289	-6%
J.	Endoscopy Procedures				
J.	Endoscopy Frocedures	I			

		BRISTOL HOSPITAL			
		MONTHS ACTUAL FIL	ING		
		FISCAL YEAR 2015			
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTHE	R SERVICES UTILIZ	ZATION AND FTES	
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
<u>LINE</u>	DESCRIPTION	FY 2014	FY 2015	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	In a first Forder company December 2	440	200	20	F0/
1	Inpatient Endoscopy Procedures	412	392	-20	-5%
2	Outpatient Endoscopy Procedures	1,732	1,844	112	6%
	Total Endoscopy Procedures	2,144	2,236	92	4%
K.	Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	5.323	5.331	8	0%
2	Emergency Room Visits: Treated and Discharged	33,489	34,310	821	2%
	Total Emergency Room Visits	38,812	39,641	829	2%
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	28,802	26,649	-2,153	-7%
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	0	0	0%
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%
9	Specialty Clinic Visits	0	0	0	0%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%
13	Specialty Clinic Visits - Other Speciality Clinics	0	0	0	0%
	Total Hospital Clinic Visits	28,802	26,649	-2,153	-7%
М.	Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	88,038	82,934	-5,104	-6%
2	Cardiac Rehabilitation	3,584	3,893	309	9%
3	Chemotherapy	10,441	9,299	-1,142	-11%
4	Gastroenterology	1,239	1,295	56	5%
5	Other Outpatient Visits	3,816	4,039	223	6%
	Total Other Hospital Outpatient Visits	107,118	101,460	-5,658	-5%
N.	Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	235.5	205.4	-30.1	-13%
2	Total Physician FTEs	1.2	1.7	0.5	42%
3	Total Non-Nursing and Non-Physician FTEs	659.2	636.8	-22.4	-3%
	Total Hospital Full Time Equivalent Employees	895.9	843.9	-52.0	-6%

	BRISTOL	HOSPITAL							
	TWELVE MONTH	S ACTUAL FILIN	IG						
	FISCAL Y	/EAR 2015							
RE	REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION								
(1)	(2)	(3)	(4)	(5)	(6)				
				****	0,				
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE				
Α.	Outpatient Surgical Procedures								
1	Bristol Hospital Campus	3,385	3,088	-297	-9%				
	Total Outpatient Surgical Procedures(A)	3,385	3,088	-297	-9%				
В.	Outpatient Endoscopy Procedures								
1	Bristol Hospital Campus	1,732	1,844	112	6%				
	Total Outpatient Endoscopy Procedures(B)	1,732	1,844	112	6%				
C.	Outpatient Hospital Emergency Room Visits								
1	Bristol Hospital Campus	33,489	34.310	821	2%				
	Total Outpatient Hospital Emergency Room Visits(C)	33,489	34,310	821	2%				
	(A) Must agree with Total Outpatient Surgical Procedur	es on Report 450	1						
	()	ii ii ii opoit 40t							
	(B) Must agree with Total Outpatient Endoscopy Proce	dures on Report	450.						
		<u> </u>							
-	(C) Must agree with Emergency Room Visits Treated an	d Discharged or	n Report 450.						

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT DIFFERENCE** LINE DESCRIPTION FY 2014 FY 2015 **DIFFERENCE** DATA BY MAJOR PAYER CATEGORY A. **MEDICARE** MEDICARE INPATIENT -3% INPATIENT ACCRUED CHARGES \$92,227,399 \$89,030,643 (\$3,196,756) INPATIENT ACCRUED PAYMENTS (IP PMT) \$31,043,356 \$28,121,510 (\$2,921,846)-9% -6% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 33.66% 31.59% -2.07% 4 -1% 3,410 3,380 (30) 5 CASE MIX INDEX (CMI) 1.30640 1.27410 (0.03230)-2% CASE MIX ADJUSTED DISCHARGES (CMAD) 4,454.82400 4,306.45800 (148.36600)-3% 6 7 INPATIENT ACCRUED PAYMENT / CMAD \$6,968.48 \$6,530.08 (\$438.40)-6% 8 -8% PATIENT DAYS 14.869 16.245 (1,376)9 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1,910.95 \$1,891.28 (\$19.66) -1% 10 AVERAGE LENGTH OF STAY 4.8 4.4 (0.4)-8% MEDICARE OUTPATIENT 11 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$115,155,887 \$116,531,165 \$1,375,278 1% 15% 12 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$20,899,377 \$23,973,082 \$3,073,705 13 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 18.15% 20.57% 2.42% 13% OUTPATIENT CHARGES / INPATIENT CHARGES 124.86% 130.89% 6.03% 5% 14 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 4,257.75397 4,424.04238 166.28840 4% 16 OUTPATIENT ACCRUED PAYMENTS / OPED \$4,908.55 \$5,418.82 \$510.27 10% MEDICARE TOTALS (INPATIENT + OUTPATIENT) 17 TOTAL ACCRUED CHARGES -1% \$205,561,808 (\$1,821,478) \$207.383.286 TOTAL ACCRUED PAYMENTS 0% 18 \$51.942.733 \$52.094.592 \$151,859 TOTAL ALLOWANCES \$155,440,553 -1% 19 \$153,467,216 (\$1,973,337)

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT** LINE DESCRIPTION FY 2014 FY 2015 DIFFERENCE **DIFFERENCE** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) **NON-GOVERNMENT INPATIENT** INPATIENT ACCRUED CHARGES -18% \$42,111,049 \$34,686,289 (\$7,424,760)INPATIENT ACCRUED PAYMENTS (IP PMT) \$20,870,629 -14% 2 \$17,963,053 (\$2,907,576)3 INPATIENT PAYMENTS / INPATIENT CHARGES 49 56% 51 79% 2.23% 4% 1,833 (283) -13% 0.99300 5 CASE MIX INDEX (CMI) 1.04630 (0.05330)-5% CASE MIX ADJUSTED DISCHARGES (CMAD) 2,213.97080 1,820.16900 (393.80180)-18% INPATIENT ACCRUED PAYMENT / CMAD 5% \$9,426.79 \$9,868.89 \$442.11 36% MEDICARE - NON-GOVERNMENT IP PMT / CMAD (\$2,458.31)(\$3,338.81)(\$880.51) 9 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT (\$5,442,616) (\$6,077,206) (\$634,590)12% 10 -14% PATIENT DAYS 6.986 6.026 (960) INPATIENT ACCRUED PAYMENT / PATIENT DAY \$2.987.49 \$2.980.92 (\$6.57) 0% 11 12 AVERAGE LENGTH OF STAY 3.3 3.3 (0.0)0% NON-GOVERNMENT OUTPATIENT -7% 13 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$112,105,411 \$104,545,675 (\$7,559,736)14 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$43,163,596 \$41,191,436 (\$1,972,160)-5% 15 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 38.50% 39.40% 0.90% 2% 301.40% 16 OUTPATIENT CHARGES / INPATIENT CHARGES 13% 266.21% 35.19% OUTPATIENT EQUIVALENT DISCHARGES (OPED) 5,633.08337 5,524.72541 (108.35796)-2% 17 18 OUTPATIENT ACCRUED PAYMENTS / OPED \$7,662.52 \$7,455.83 (\$206.68)-3% 19 MEDICARE- NON-GOVERNMENT OP PMT / OPED (\$2,753.97)(\$2,037.02)\$716.96 -26% 20 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT (\$15,513,353) (\$11,253,953) \$4,259,400 -27% NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT) -10% 21 TOTAL ACCRUED CHARGES \$154,216,460 \$139,231,964 (\$14,984,496)TOTAL ACCRUED PAYMENTS 22 \$64,034,225 \$59,154,489 (\$4,879,736)-8% 23 TOTAL ALLOWANCES \$90,182,235 \$80,077,475 (\$10,104,760) -11% 24 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT (\$20,955,969) (\$17,331,159) \$3,624,810 -17% NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA ACCRUED CHARGES ASSOCIATED WITH NGCA \$142,326,436 \$129,119,183 (\$13,207,253) -9% 25 ACCRUED PAYMENTS ASSOCIATED WITH NGCA \$65,741,313 -5% 26 \$68 862 450 (\$3,121,137)(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$63,377,870 -14% \$73,463,986 (\$10.086.116) 27 49.08% 28 TOTAL ACTUAL DISCOUNT PERCENTAGE 51.62% -2.53%

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT DIFFERENCE** LINE DESCRIPTION FY 2014 FY 2015 DIFFERENCE C. UNINSURED UNINSURED INPATIENT INPATIENT ACCRUED CHARGES \$1,460,013 \$1,368,087 -6% (\$91,926)2 INPATIENT ACCRUED PAYMENTS (IP PMT) 0% \$0 \$0 \$0 INPATIENT PAYMENTS / INPATIENT CHARGES 0.00% 0.00% 0.00% 0% 3 4 102 (11) -10% 1.17600 1.12520 (0.05080)CASE MIX INDEX (CMI) -4% CASE MIX ADJUSTED DISCHARGES (CMAD) 132.88800 114.77040 (18.11760)-14% INPATIENT ACCRUED PAYMENT / CMAD 0% 7 \$0.00 \$0.00 \$0.00 NON-GOVERNMENT - UNINSURED IP PMT / CMAD \$9,426.79 \$9,868.89 \$442.11 5% MEDICARE - UNINSURED IP PMT / CMAD \$6,968.48 \$6,530.08 (\$438.40) -6% 9 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$926,027 \$749,460 (\$176,568) -19% PATIENT DAYS -4% 11 375 360 (15)12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$0.00 \$0.00 \$0.00 0% AVERAGE LENGTH OF STAY 13 3.3 3.5 02 6% UNINSURED OUTPATIENT 14 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$5,851,418 \$5,132,339 (\$719,079)-12% 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$67,919 \$108,324 \$40,405 59% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 0.95% 82% 1.16% 2.11% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 400.78% 375.15% -25.63% -6% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 452.87969 382.65006 (70.22963)-16% 89% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$149.97 \$283.09 \$133.12 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$7,172.75 -5% \$7,512.55 (\$339.80)MEDICARE - UNINSURED OP PMT / OPED \$5,135.73 8% 21 \$4,758,57 \$377.16 -9% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$2,155,061 \$1,965,187 (\$189,874) **UNINSURED TOTALS (INPATIENT AND OUTPATIENT)** -11% 23 TOTAL ACCRUED CHARGES \$7,311,431 \$6,500,426 (\$811,005)24 TOTAL ACCRUED PAYMENTS \$67,919 \$108,324 \$40,405 59% 25 TOTAL ALLOWANCES \$7,243,512 \$6,392,102 (\$851,410) -12% 26 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT \$3,081,089 \$2,714,647 (\$366,442)-12%

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT DIFFERENCE** LINE DESCRIPTION FY 2014 FY 2015 DIFFERENCE D. STATE OF CONNECTICUT MEDICAID MEDICAID INPATIENT INPATIENT ACCRUED CHARGES 10% \$30,033,754 \$32,931,847 \$2,898,093 INPATIENT ACCRUED PAYMENTS (IP PMT) \$1,080,114 16% 2 \$6,607,478 \$7,687,592 3 INPATIENT PAYMENTS / INPATIENT CHARGES 22 00% 23 34% 1.34% 6% 1,797 1,840 2% 0.93630 (0.00690)5 CASE MIX INDEX (CMI) 0.94320 -1% CASE MIX ADJUSTED DISCHARGES (CMAD) 1,694.93040 1,722.79200 27.86160 2% INPATIENT ACCRUED PAYMENT / CMAD \$563.91 14% \$3,898.38 \$4,462.29 NON-GOVERNMENT - MEDICAID IP PMT / CMAD \$5,406.61 (\$121.80) -2% \$5,528.41 9 MEDICARE - MEDICAID IP PMT / CMAD \$3,070.10 \$2,067.79 (\$1,002.31)-33% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$5,203,612 \$3,562,375 (\$1,641,237) -32% 11 PATIENT DAYS 9% 6,529 606 7.135 12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1,012.02 \$1,077.45 \$65.43 6% AVERAGE LENGTH OF STAY 13 3.6 3.9 0.2 7% MEDICAID OUTPATIENT 14 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$59,919,782 \$65,028,189 \$5,108,407 9% 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$13,100,657 \$13,782,560 \$681,903 5% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES -0.67% -3% 21.86% 21.19% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 199.51% 197.46% -2.05% -1% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 3,585.16116 3,633.31786 48.15670 1% 4% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$3,654.13 \$3,793.38 \$139.25 20 NON-GOVERNMENT - MEDICAID OP PMT / OPED -9% \$4,008.38 \$3,662.45 (\$345.93)MEDICARE - MEDICAID OP PMT / OPED 30% \$1,625.44 21 \$1,254,41 \$371.03 \$1,408,462 31% OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$4,497,268 \$5,905,729 22 **MEDICAID TOTALS (INPATIENT + OUTPATIENT)** TOTAL ACCRUED CHARGES 9% 23 \$89,953,536 \$97,960,036 \$8,006,500 24 TOTAL ACCRUED PAYMENTS \$19,708,135 \$21,470,152 \$1,762,017 9% 25 TOTAL ALLOWANCES \$70,245,401 \$76,489,884 \$6,244,483 9% 26 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT \$9,700,880 \$9,468,105 (\$232,775)-2%

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT DIFFERENCE** LINE DESCRIPTION FY 2014 FY 2015 DIFFERENCE E. OTHER MEDICAL ASSISTANCE (O.M.A.) OTHER MEDICAL ASSISTANCE INPATIENT INPATIENT ACCRUED CHARGES \$0 0% \$0 \$0 INPATIENT ACCRUED PAYMENTS (IP PMT) 0% \$0 \$0 \$0 INPATIENT PAYMENTS / INPATIENT CHARGES 0.00% 0.00% 0.00% 0% 0% 0.00000 0.00000 0.00000 0% 5 CASE MIX INDEX (CMI) CASE MIX ADJUSTED DISCHARGES (CMAD) 0.00000 0.00000 0.00000 0% INPATIENT ACCRUED PAYMENT / CMAD \$0.00 \$0.00 0% \$0.00 NON-GOVERNMENT - O.M.A IP PMT / CMAD \$9,426.79 \$9,868.89 \$442.11 5% 9 MEDICARE - O.M.A. IP PMT / CMAD \$6,968.48 \$6,530.08 (\$438.40)-6% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$0 \$0 0% \$0 11 PATIENT DAYS ٥ n 0% 12 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$0.00 \$0.00 \$0.00 0% AVERAGE LENGTH OF STAY 13 0% OTHER MEDICAL ASSISTANCE OUTPATIENT 14 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$0 \$0 \$0 0% 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$0 \$0 \$0 0% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 0.00% 0.00% 0.00% 0% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 0.00% 0.00% 0.00% 0% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 0.00000 0.00000 0.00000 0% 0% 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$0.00 \$0.00 \$0.00 NON-GOVERNMENT - O.M.A OP PMT / CMAD \$7,662.52 \$7,455.83 (\$206.68) -3% 20 \$4,908.55 \$5,418.82 10% MEDICARE - O.M.A. OP PMT / CMAD \$510.27 21 0% 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$0 \$0 \$0 OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT) \$0 0% 23 TOTAL ACCRUED CHARGES \$0 \$0 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%

	BRISTOL HOS	SPITAI			
	TWELVE MONTHS AC				
	FISCAL YEAR				
	REPORT FORM 500 - CALCULATION C		AYMENT LIM	IT	
	AND BASELINE UNDERPAYMENT DA				
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICA	AL ASSISTANCE	1		
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$30,033,754	\$32,931,847	\$2,898,093	10%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,607,478	\$7,687,592	\$1,080,114	16%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.00%	23.34%	1.34%	6%
4	DISCHARGES	1,797	1,840	43	2%
5	CASE MIX INDEX (CMI)	0.94320	0.93630	(0.00690)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,694.93040	1,722.79200	27.86160	2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,898.38	\$4,462.29	\$563.91	14%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,528.41	\$5,406.61	(\$121.80)	-2%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,070.10	\$2,067.79	(\$1,002.31)	-33%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,203,612	\$3,562,375	(\$1,641,237)	-32%
11	PATIENT DAYS	6,529	7,135	606	9%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,012.02	\$1,077.45	\$65.43	6%
13	AVERAGE LENGTH OF STAY	3.6	3.9	0.2	7%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$59,919,782	\$65,028,189	\$5,108,407	9%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$13,100,657	\$13,782,560	\$681,903	5%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.86%	21.19%	-0.67%	-3%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	199.51%	197.46%	-2.05%	-1%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,585.16116	3,633.31786	48.15670	1%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,654.13	\$3,793.38	\$139.25	4%
	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,008.38	\$3,662.45	(\$345.93)	-9%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$1,254.41	\$1,625.44	\$371.03	30%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,497,268	\$5,905,729	\$1,408,462	31%
		<u> </u>			
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIE				
23	TOTAL ACCRUED CHARGES	\$89,953,536	\$97,960,036	\$8,006,500	9%
24	TOTAL ACCRUED PAYMENTS	\$19,708,135	\$21,470,152	\$1,762,017	9%
25	TOTAL ALLOWANCES	\$70,245,401	\$76,489,884	\$6,244,483	9%

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT DIFFERENCE** LINE DESCRIPTION FY 2014 FY 2015 DIFFERENCE G. CHAMPUS / TRICARE **CHAMPUS / TRICARE INPATIENT** INPATIENT ACCRUED CHARGES -53% \$432,011 \$201,255 (\$230,756)INPATIENT ACCRUED PAYMENTS (IP PMT) 2 \$160,387 \$29.548 (\$130,839)-82% 14.68% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 37.13% -22.44% -60% -31% 1.00670 0.62180 -38% 5 CASE MIX INDEX (CMI) (0.38490)CASE MIX ADJUSTED DISCHARGES (CMAD) 26.17420 11.19240 (14.98180)-57% INPATIENT ACCRUED PAYMENT / CMAD \$2,640.01 (\$3,487.67) -57% \$6,127.68 -29% 8 70 (20) INPATIENT ACCRUED PAYMENT / PATIENT DAY 9 \$2,291.24 \$590.96 (\$1,700.28)-74% 10 AVERAGE LENGTH OF STAY 2.7 2.8 0.1 3% CHAMPUS / TRICARE OUTPATIENT 11 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$1,106,845 \$1,153,587 \$46,742 4% OUTPATIENT ACCRUED PAYMENTS (OP PMT) 130% 12 \$123,430 \$283.322 \$159,892 CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT) TOTAL ACCRUED CHARGES \$1,538,856 \$1,354,842 (\$184,014) -12% TOTAL ACCRUED PAYMENTS \$29,053 10% 14 \$283,817 \$312,870 TOTAL ALLOWANCES \$1,255,039 \$1,041,972 (\$213,067) -17% 15 H. OTHER DATA OTHER OPERATING REVENUE \$4,301,391 \$3,838,007 (\$463,384) -11% TOTAL OPERATING EXPENSES \$136,633,273 -3% \$141,228,949 (\$4,595,676)UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) 0% \$0 \$0 \$0 COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) CHARITY CARE (CHARGES) \$4,530,623 \$4,092,111 (\$438,512) -10% -45% 5 BAD DEBTS (CHARGES) \$4,007,799 \$2,212,274 (\$1,795,525)6 UNCOMPENSATED CARE (CHARGES) \$6,304,385 (\$2,234,037)-26% \$8.538.422 7 COST OF UNCOMPENSATED CARE \$2,602,199 \$1,921,892 (\$680,307)-26% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) TOTAL ACCRUED CHARGES \$97.960.036 \$8,006,500 9% 8 \$89,953,536 9 TOTAL ACCRUED PAYMENTS \$19,708,135 \$21,470,152 \$1,762,017 9% 9% 10 COST OF TOTAL MEDICAL ASSISTANCE \$27,414,550 \$29.863.125 \$2,448,575

11

MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT

\$7,706,415

\$8,392,973

9%

\$686,558

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT** LINE DESCRIPTION FY 2014 FY 2015 DIFFERENCE **DIFFERENCE** AGGREGATE DATA II. **TOTALS - ALL PAYERS** A. TOTAL INPATIENT CHARGES -5% \$164,804,213 \$156,850,034 (\$7,954,179)TOTAL INPATIENT PAYMENTS -8% 2 \$58,681,850 \$53,801,703 (\$4,880,147)34.30% TOTAL INPATIENT PAYMENTS / CHARGES 35 61% -1.31% -4% 3 TOTAL DISCHARGES 7,071 (278) -4% 7,349 -3% 5 TOTAL CASE MIX INDEX 1.14164 1.11167 (0.02997)TOTAL CASE MIX ADJUSTED DISCHARGES 8,389.89940 7,860.61140 (529.28800)-6% TOTAL OUTPATIENT CHARGES \$288,287,925 \$287,258,616 (\$1,029,309) 0% OUTPATIENT CHARGES / INPATIENT CHARGES 5% 174.93% 183.14% 8.21% 9 TOTAL OUTPATIENT PAYMENTS \$77,287,060 \$79,230,400 \$1,943,340 3% 10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 26.81% 27.58% 0.77% 3% 11 TOTAL CHARGES \$453,092,138 \$444,108,650 (\$8,983,488)-2% 12 TOTAL PAYMENTS \$135,968,910 \$133,032,103 (\$2,936,807)-2% TOTAL PAYMENTS / TOTAL CHARGES 13 30.01% 29.95% -0.05% 0% 28,080 -6% 14 PATIENT DAYS 29.830 (1,750)**TOTALS - ALL GOVERNMENT PAYERS** B. INPATIENT CHARGES \$122,693,164 \$122,163,745 (\$529,419)0% INPATIENT PAYMENTS \$37,811,221 \$35,838,650 (\$1,972,571)-5% 2 GOVT. INPATIENT PAYMENTS / CHARGES 30.82% 29.34% -1.48% -5% 3 4 DISCHARGES 5,233 5,238 0% 5 5 CASE MIX INDEX 1.18019 1.15320 (0.02699)-2% CASE MIX ADJUSTED DISCHARGES 6,175.92860 6,040.44240 (135.48620) -2% 6 \$176,182,514 4% 7 **OUTPATIENT CHARGES** \$182,712,941 \$6,530,427 4% **OUTPATIENT CHARGES / INPATIENT CHARGES** 5.97% 8 143 60% 149.56% \$38,038,964 \$3,915,500 11% 9 **OUTPATIENT PAYMENTS** \$34,123,464 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 7% 10 19.37% 20.82% 1.45% 2% 11 TOTAL CHARGES \$298,875,678 \$304,876,686 \$6,001,008 TOTAL PAYMENTS \$71,934,685 \$73,877,614 \$1,942,929 3% 12 13 TOTAL PAYMENTS / CHARGES 24.07% 24.23% 0.16% 1% 14 22,844 22.054 (790)-3% 15 TOTAL GOVERNMENT DEDUCTIONS \$226,940,993 \$230,999,072 \$4,058,079 2% **AVERAGE LENGTH OF STAY** C. MEDICARE -8% 1 4.8 4.4 (0.4)NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 0% 2 3.3 3.3 (0.0)3.5 6% UNINSURED 3.3 0.2 3 7% 4 MEDICAID 3.6 3.9 0.2 5 OTHER MEDICAL ASSISTANCE 0% 6 CHAMPUS / TRICARE 2.7 2.8 0.1 3%

4.1

4.0

(0.1)

-2%

7

TOTAL AVERAGE LENGTH OF STAY

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT** LINE DESCRIPTION FY 2014 FY 2015 DIFFERENCE **DIFFERENCE** DATA USED IN BASELINE UNDERPAYMENT CALCULATION III. \$453,092,138 \$444,108,650 -2% TOTAL CHARGES (\$8.983.488) 2 TOTAL GOVERNMENT DEDUCTIONS \$230,999,072 2% \$226.940.993 \$4.058.079 UNCOMPENSATED CARE 3 \$8,538,422 \$6,304,385 (\$2,234,037)-14% TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$73,463,986 \$63,377,870 (\$10,086,116)EMPLOYEE SELF INSURANCE ALLOWANCE \$6,062,816 \$8,040,766 \$1,977,950 33% TOTAL ADJUSTMENTS 6 \$315,006,217 \$308,722,093 (\$6,284,124)-2% \$138,085,921 -2% TOTAL ACCRUED PAYMENTS \$135,386,557 (\$2,699,364)0% 8 UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input) \$0 \$0 \$138,085,921 \$135,386,557 (\$2,699,364) -2% 9 NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS 10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3047634453 0.3048500789 0.0000866337 0% COST OF UNCOMPENSATED CARE \$2,602,199 \$1,921,892 -26% (\$680.307) 11 MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT \$7,706,415 \$8.392.973 \$686.558 9% 12 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 0% 13 \$0 TOTAL COST OF UNCOMPENSATED CARE AND 14 \$10.308.613 \$10.314.865 MEDICAL ASSISTANCE UNDERPAYMENT \$6,252 0% IV. **CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)** \$1,408,462 **MEDICAID** \$5,905,729 31% \$4,497,268 OTHER MEDICAL ASSISTANCE 0% \$0 \$0 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$3,081,089 \$2,714,647 (\$366,442)-12% 3 TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) 4 \$7,578,357 \$8,620,376 \$1,042,020 14% DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600 ٧. EMPLOYEE SELE INSURANCE GROSS REVENUE \$7,512,816 \$9,490,766 \$1,977,950 26.33% PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE \$2,007,461 \$295,799 (\$1,711,662) -85.27% 3 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS \$137,976,406 \$133,327,930 (\$4,648,476)-3.37% 4 PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE \$0 \$0 \$0 0.00% 5 GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS \$453,092,171 \$444,108,678 (\$8,983,493) -1.98% PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE \$0 \$0 \$0 0.00% UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS \$8,538,422 \$6,304,385 -26.16% (\$2,234,037)

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA (1) (2) (3) (4) (5) **ACTUAL** ACTUAL AMOUNT DESCRIPTION FY 2014 FY 2015 **DIFFERENCE** ACCRUED CHARGES AND PAYMENTS INPATIENT ACCRUED CHARGES A. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$42.111.049 \$34,686,289 (\$7,424,76 (\$3,196.7) MEDICARE \$92 227 399 89 030 643 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$2,898,093 \$30.033.754 32.931.847 4 MEDICAID \$30 033 754 32.931.847 \$2.898.093 OTHER MEDICAL ASSISTANCE \$0 0 \$0 \$432.011 201.255 CHAMPUS / TRICARE 6 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 \$1,460,013 1,368,087 (\$91,926 TOTAL INPATIENT GOVERNMENT CHARGES \$122.693.164 \$122,163,745 (\$529,419 TOTAL INPATIENT CHARGES \$164,804,213 \$156,850,034 (\$7,954,179 **OUTPATIENT ACCRUED CHARGES** В NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$112,105,411 \$104,545,675 \$1,375,278 116 531 165 MEDICARE \$115 155 887 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 \$59.919.782 \$5,108,407 65.028.189 4 MEDICAID \$59,919,782 65,028,189 \$5,108,407 OTHER MEDICAL ASSISTANCE 5 \$0 0 \$0 6 CHAMPUS / TRICARE \$1.106.845 1.153.587 \$46,742 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$5 851 418 5 132 339 TOTAL OUTPATIENT GOVERNMENT CHARGES \$182,712,941 \$176,182,514 \$6,530,427 **TOTAL OUTPATIENT CHARGES** \$288,287,925 \$287,258,616 (\$1,029,309 TOTAL ACCRUED CHARGES C. TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$154,216,460 \$139,231,964 (\$14,984,496 TOTAL MEDICARE \$207,383,286 \$205,561,808 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$89.953.536 \$97,960,036 \$8,006,500 TOTAL MEDICAID 4 \$89,953,536 \$97,960,036 \$8,006,500 TOTAL OTHER MEDICAL ASSISTANCE 5 \$0 \$0 \$0 \$1,538,856 \$1,354,842 TOTAL CHAMPUS / TRICARE 6 TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) \$7 311 431 \$6,500,426 TOTAL GOVERNMENT CHARGES \$298,875,678 \$304,876,686 \$6,001,008 **TOTAL CHARGES** \$453,092,138 \$444,108,650 (\$8,983,488) INPATIENT ACCRUED PAYMENTS D NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$20,870,629 \$17,963,053 (\$2,907,576 **MEDICARE** \$31.043.356 28,121,510 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$6,607,478 7.687.592 \$1.080.114 \$1,080,114 4 MEDICAID \$6.607.478 7,687,592 OTHER MEDICAL ASSISTANCE 5 \$0 0 \$0 CHAMPUS / TRICARE \$160.387 29.548 6 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 \$0 0 \$0 \$37,811,221 TOTAL INPATIENT GOVERNMENT PAYMENTS \$35.838.650 (\$1.972.571) TOTAL INPATIENT PAYMENTS \$58,681,850 \$53,801,703 (\$4,880,147) **OUTPATIENT ACCRUED PAYMENTS** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$43,163,596 \$41,191,436 (\$1,972,160 MEDICARE \$3,073,705 \$20.899.377 23.973.082 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 \$13,100,657 13.782.560 \$681.903 MEDICAID 4 \$13,100,657 13,782,560 \$681,903 OTHER MEDICAL ASSISTANCE 5 \$0 0 \$0 \$159,892 CHAMPUS / TRICARE \$123,430 283,322 6 JNINSURED (INCLUDED IN NON-GOVERNMENT) \$67.919 108.324 \$40,405 TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$3,915,500 \$34,123,464 \$38,038,964 TOTAL OUTPATIENT PAYMENTS \$77,287,060 \$79,230,400 **\$1,943,340** TOTAL ACCRUED PAYMENTS TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$64,034,225 \$59,154,489 TOTAL MEDICARE \$51,942,733 \$52,094,592 \$151,859 TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$19,708,135 \$21,470,152 \$1,762,017 TOTAL MEDICAID \$19,708,135 \$21,470,152 \$1,762,017 TOTAL OTHER MEDICAL ASSISTANCE \$0 TOTAL CHAMPUS / TRICARE \$283,817 \$312,870 \$29,053

\$67,919

\$71,934,685

\$135,968,910

\$108,324

\$73,877,614

\$133,032,103

\$40,405

\$1,942,929

(\$2,936,807

TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)

TOTAL GOVERNMENT PAYMENTS

TOTAL PAYMENTS

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015

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

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2014</u>	ACTUAL FY 2015	AMOUNT <u>DIFFERENCE</u>
II.	PAYER MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
Α.	INFATIENT FATER WILL BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9.29%	7.81%	-1.48%
2	MEDICARE	20.36%	20.05%	-0.31%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.63%	7.42%	0.79%
4	MEDICAID	6.63%	7.42%	0.79%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.10% 0.32%	0.05%	-0.05% -0.01%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	27.08%	0.31% 27.51%	-0.01% 0.43%
	TOTAL INPATIENT GOVERNMENT PATER MIX TOTAL INPATIENT PAYER MIX	36.37%	35.32%	-1.06%
	THE CONTROL OF THE PROPERTY OF	30.37 /0	JJ.JZ /0	1.0070
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	24.74%	23.54%	-1.20%
2	MEDICARE	25.42%	26.24%	0.82%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13.22%	14.64%	1.42%
4	MEDICAID	13.22%	14.64%	1.42%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.24%	0.26%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.29%	1.16%	-0.14%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	38.88%	41.14%	2.26%
	TOTAL OUTPATIENT PAYER MIX	63.63%	64.68%	1.06%
	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)	15.35%	13.50%	-1.85%
2	MEDICARE	22.83%	21.14%	-1.69%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.86%	5.78%	0.92%
4	MEDICAID	4.86%	5.78%	0.92%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.12%	0.02%	-0.10%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.00%	0.00%	0.00%
	TOTAL INPATIENT GOVERNMENT PAYER MIX TOTAL INPATIENT PAYER MIX	27.81% 43.16%	26.94% 40.44%	-0.87% -2.72%
	TOTAL INFATIENT FATER MIX	43.16 /8	40.44 /0	-2.12/0
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.75%	30.96%	-0.78%
2	MEDICARE	15.37%	18.02%	2.65%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.64%	10.36%	0.73%
4	MEDICAID	9.64%	10.36%	0.73%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.09%	0.21%	0.12%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYER MIX	0.05% 25.10%	0.08% 28.59%	0.03% 3.50%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX TOTAL OUTPATIENT PAYER MIX	56.84%	28.59% 59.56%	3.50% 2.72%
	TO THE OWN PRICE OF THE PRICE O	30.04 /8	03.30 /6	2.12/0
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
				_

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND **BASELINE UNDERPAYMENT DATA** (1) (2) (3) (4) (5) **ACTUAL** ACTUAL AMOUNT DESCRIPTION **DIFFERENCE** FY 2014 FY 2015 DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA III. DISCHARGES A. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 2.116 1.833 (283) **MEDICARE** 3,410 3,380 (30)MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 1 797 3 1 840 43 4 MEDICAID 1,797 1,840 43 OTHER MEDICAL ASSISTANCE 5 0 CHAMPUS / TRICARE 6 26 18 (8) UNINSURED (INCLUDED IN NON-GOVERNMENT) 113 102 (11)TOTAL GOVERNMENT DISCHARGES 5.233 5,238 5 TOTAL DISCHARGES 7,349 7,071 (278)PATIENT DAYS В NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 6.986 6.026 (960)MEDICARE 16.245 14.869 (1,376)MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 6,529 7,135 606 MEDICAID 6,529 7,135 606 OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE 70 50 (20) UNINSURED (INCLUDED IN NON-GOVERNMENT) 375 360 (15)TOTAL GOVERNMENT PATIENT DAYS 22,844 22,054 (790)TOTAL PATIENT DAYS 29,830 28,080 (1,750)AVERAGE LENGTH OF STAY (ALOS) C. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 3.3 3.3 (0.0)MEDICARE 48 44 (0.4)MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3.6 3.9 3 0.2 4 MEDICAID 36 39 0.2 OTHER MEDICAL ASSISTANCE 5 0.0 0.0 CHAMPUS / TRICARE 0.1 2.7 2.8 UNINSURED (INCLUDED IN NON-GOVERNMENT) 33 3.5 02 TOTAL GOVERNMENT AVERAGE LENGTH OF STAY 4.4 4.2 (0.2)TOTAL AVERAGE LENGTH OF STAY 4.1 4.0 (0.1)CASE MIX INDEX D. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1.04630 (0.05330) 0.99300 **MEDICARE** 1.30640 1.27410 (0.03230)MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 0.94320 0.93630 (0.00690)4 MEDICAID 0.94320 0.93630 (0.00690)OTHER MEDICAL ASSISTANCE 0.00000 0.00000 0.00000 6 CHAMPUS / TRICARE 1.00670 0.62180 (0.38490)UNINSURED (INCLUDED IN NON-GOVERNMENT) 1.17600 1.12520 (0.05080)TOTAL GOVERNMENT CASE MIX INDEX 1.18019 1.15320 (0.02699) **TOTAL CASE MIX INDEX** 1.14164 1.11167 (0.02997)OTHER REQUIRED DATA F TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$142.326.436 \$129,119,183 ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$68,862,450 \$65,741,313 (\$3,121,137 (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$73,463,986 \$63,377,870 51.62% 49.08% TOTAL ACTUAL DISCOUNT PERCENTAGE -2.53% \$1,977,950 \$7.512.816 \$9,490,766 EMPLOYEE SELF INSURANCE GROSS REVENUE \$1,977,950 EMPLOYEE SELF INSURANCE ALLOWANCE 6 \$6.062.816 \$8.040.766 UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-\$0 \$0 OHCA INPUT) \$0 CHARITY CARE \$4,530,623 \$4,092,111 (\$438,512 9 BAD DEBTS \$4,007,799 \$2.212.274

\$8,538,422

\$4 301 391

\$141,228,949

\$6,304,385

\$3.838.007

\$136,633,273

(\$2,234,037

TOTAL UNCOMPENSATED CARE

TOTAL OPERATING EXPENSES

TOTAL OTHER OPERATING REVENUE

10

11

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015** REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND **BASELINE UNDERPAYMENT DATA** (1) (2) (3) (4) (5) **ACTUAL** ACTUAL AMOUNT DESCRIPTION FY 2014 FY 2015 DIFFERENCE **DSH UPPER PAYMENT LIMIT CALCULATIONS** CASE MIX ADJUSTED DISCHARGES A. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 2,213.97080 1,820.16900 (393.80180) 4.306.45800 (148.36600) 4.454.82400 MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 1,694.93040 1,722.79200 27.86160 3 1,694.93040 27.86160 1.722.79200 4 MEDICAID 0.00000 5 OTHER MEDICAL ASSISTANCE 0.00000 0.00000 CHAMPUS / TRICARE 6 26.17420 11.19240 (14.98180) UNINSURED (INCLUDED IN NON-GOVERNMENT) 132 88800 114 77040 (18 11760) TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES 6.175.92860 6.040.44240 (135,48620) 8.389.89940 7.860.61140 TOTAL CASE MIX ADJUSTED DISCHARGES (529,28800) OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) В NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 5.633.08337 5.524.72541 -108.35796 MEDICARE 4 257 75397 4 424 04238 166 28840 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 3.585.16116 3.633.31786 48.15670 MEDICAID 3,585.16116 3.633.31786 48.15670 5 OTHER MEDICAL ASSISTANCE 0.00000 0.00000 0.00000 CHAMPUS / TRICARE 66.61398 103.17540 36.56143 6 UNINSURED (INCLUDED IN NON-GOVERNMENT) 452.87969 382.65006 -70.22963 7,909.52911 8,160.53564 251.00653 TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES 13.542.61247 13,685.26105 142.64858 TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE C. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$9,426.79 \$9,868.89 \$442.11 \$6,530.08 MEDICARE \$6,968,48 \$563.91 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$3,898,38 \$4,462.29 \$3,898,38 \$4,462.29 \$563.91 4 MEDICAID OTHER MEDICAL ASSISTANCE \$0.00 \$0.00 5 \$0.00 CHAMPUS / TRICARE \$6,127,68 \$2.640.01 6 \$0.00 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$0.00 \$0.00 \$6,122.35 \$5,933.12 TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE (\$189.24 (\$149.88 \$6,844.47 TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$6,994,34 OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE D. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$7,662,52 \$7,455,83 **MEDICARE** \$4.908.55 \$5.418.82 \$510.27 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$139.25 3 \$3.654.13 \$3,793,38 \$139.25 \$3,793.38 \$3.654.13 4 MEDICAID \$0.00 \$0.00 OTHER MEDICAL ASSISTANCE \$0.00 \$1,852.91 \$2,746.02 \$893.11 6 CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) \$149.97 \$283.09 \$133.12 TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE \$4.314.22 \$4.661.33 \$347.11

TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE

\$5,789.47

\$82.52

\$5,706.95

	BRISTOL HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2015	AENT LINAT AND		
	REPORT 550 - CALCULATION OF DSH UPPER PAYE			
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
(.,	(2)	` ,	(+)	(0)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
1	MEDICAID	\$4,497,268	\$5,905,729	\$1,408,462
	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	\$0	\$0
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$4,497,268	\$5,905,729	\$1,408,462
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOL	.OGY)		
	TOTAL GUADOFO	0.450,000,400	0444 400 050	(00,000,400)
2	TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS	\$453,092,138 \$226,940,993	\$444,108,650 \$230,999,072	(\$8,983,488) \$4,058,079
3	UNCOMPENSATED CARE	\$8,538,422	\$6,304,385	(\$2,234,037)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$73,463,986	\$63,377,870	(\$10,086,116)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,062,816	\$8,040,766	\$1,977,950
6	TOTAL ADJUSTMENTS	\$315,006,217	\$308,722,093	(\$6,284,124)
	TOTAL ACCRUED PAYMENTS	\$138,085,921	\$135,386,557	(\$2,699,364)
	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS RATIO OF NET REVENUE TO TOTAL CHARGES	\$138,085,921 0.3047634453	\$135,386,557 0.3048500789	(\$2,699,364) 0.0000866337
	COST OF UNCOMPENSATED CARE	\$2,602,199	\$1,921,892	(\$680,307)
	MEDICAL ASSISTANCE UNDERPAYMENT	\$7,706,415	\$8,392,973	\$686,558
	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$10,308,613	\$10,314,865	\$6,252
VII.	RATIOS			
A.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	49.56%	51.79%	2.23%
	MEDICARE	33.66%	31.59%	-2.07%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	22.00% 22.00%	23.34% 23.34%	1.34% 1.34%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	37.13%	14.68%	-22.44%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.00%	0.00%	0.00%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
		30.82%	29.34%	-1.48%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	35.61%	34.30%	-1.31%
В.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	38.50%	39.40%	0.90%
	MEDICARE	18.15%	20.57%	2.42%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	21.86%	21.19%	-0.67%
	MEDICAID	21.86%	21.19%	-0.67%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	11.15%	24.56%	13.41%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	1.16%	2.11%	0.95%
	TOTAL SOVERNMENT INVITO OF COTTAINENT PAINMENTS TO COTTAINENT CHARGES	40.070/	00.000/	4 4=0/
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	19.37% 26.81%	20.82% 27.58%	1.45% 0.77%
	TOTAL RATIO OF COTT ATTENT FATMENTO TO COTTATIENT CHARGES	20.01/6	£1.30 /0	J.11 /0

	BRISTOL HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2015			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
LINE	<u>DESCRIPTION</u>	ACTUAL <u>FY 2014</u>	ACTUAL FY 2015	AMOUNT <u>DIFFERENCE</u>
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	<u>IONS</u>		
	DECOMOUNTATION OF OUGA DEFINED MET DEVENUE TO MOODITAL AUDITOR OF OUGA			
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS			
1	TOTAL ACCRUED PAYMENTS	\$135,968,910	\$133,032,103	(\$2,936,807)
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA	,,,	,,,	\$0
	INPUT)	\$0	\$0	
	OHCA DEFINED NET REVENUE	\$135,968,910	\$133,032,103	(\$2,936,807)
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$2,007,461	\$295,799	(\$1,711,662)
4	CALCULATED NET REVENUE	\$143,434,170	\$133,327,902	(\$10,106,268)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$137,976,406	\$133,327,930	(\$4,648,476)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$5,457,764	(\$28)	(\$5,457,792)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMEN	TS		
	RESONALIZATION OF STICK DEFINED GROUD REVENUE TO HOST TIKE ACCITED THE STIKE STATEMEN	10		
1	OHCA DEFINED GROSS REVENUE	\$453,092,138	\$444,108,650	(\$8,983,488)
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$453,092,138	\$444,108,650	(\$8,983,488)
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$453,092,171	\$444,108,678	(\$8,983,493)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$33)	(\$28)	\$5
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	5		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$8.538.422	\$6.304.385	(\$2,234,037)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0,536,422 \$0	\$6,304,365 \$0	(\$2,234,037) \$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$8,538,422	\$6,304,385	(\$2,234,037)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$8,538,422	\$6,304,385	(\$2,234,037)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
	TANIANTOL INIOU DE ELOS HIMITON EQUAL TO \$300)	\$ 0	30	ΨU

	BRISTOL HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2015 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
	BASELINE UNDERFATMENT DATA. AGREED-UPON PROCEDURES	
(1)	(2)	(3)
(- /	(-)	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2015</u>
I.	ACCRUED CHARGES AND PAYMENTS	
A.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$34,686,289
2	MEDICARE (NO. 140.140.140.140.140.140.140.140.140.140.	89,030,643
3 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	32,931,847 32,931,847
5	OTHER MEDICAL ASSISTANCE	32,931,847
6	CHAMPUS / TRICARE	201,255
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,368,087
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$122,163,745 \$156,850,034
	TOTAL IN TAILED STANDED	ψ 100,030,034
В.	OUTPATIENT ACCRUED CHARGES	
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$104,545,675 116,531,165
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	65,028,189
4	MEDICAID	65,028,189
5	OTHER MEDICAL ASSISTANCE	0
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,153,587 5,132,339
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$182,712,941
	TOTAL OUTPATIENT CHARGES	\$287,258,616
C.	TOTAL ACCRUED CHARGES	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$139,231,964
2	TOTAL GOVERNMENT ACCRUED CHARGES	304,876,686
	TOTAL ACCRUED CHARGES	\$444,108,650
D.	INPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$17,963,053
3	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	28,121,510 7,687,592
4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7,687,592
5	OTHER MEDICAL ASSISTANCE	0
	CHAMPUS / TRICARE	29,548
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYMENTS	\$35,838,650
	TOTAL INPATIENT PAYMENTS	\$53,801,703
E.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$41,191,436
2	MEDICARE	23,973,082
3 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	13,782,560 13,782,560
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	283,322
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYMENTS	108,324
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$38,038,964 \$79,230,400
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$59,154,489
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	73,877,614
	TOTAL ACCRUED PAYMENTS	\$133,032,103

II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) SCRIPTION CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAL DISCHARGES MPUS / TRICARE INSURED (INCLUDED IN NON-GOVERNMENT) AL GOVERNMENT DISCHARGES FAL DISCHARGES FAL DISCHARGES FAL DISCHARGES FAL DISCHARGES FAL DISCHARGES FAL DISCHARGES	(3) ACTUAL FY 2015 1,83 3,38 1,84 1,84 1,84 1,0 5,23 7,07
II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	FISCAL YEAR 2015 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) SCRIPTION CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAID HER MEDICAL ASSISTANCE MAPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) FAL GOVERNMENT DISCHARGES	1,83 3,38 1,84 1,84 1 1 0 5,23
II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT 1 NON 2 MED 3 MED 6 CHAI 7 UNIN TOT TOT TOT C. OTHI 1 TOT 2 ACCI (PRIC	FISCAL YEAR 2015 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) SCRIPTION CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAID HER MEDICAL ASSISTANCE MAPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) FAL GOVERNMENT DISCHARGES	1,83 3,38 1,84 1,84 5,23
II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, TOT, TOT, TOT, TOT, TOT, TOT	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) SCRIPTION CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES U-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICALD HER MEDICAL ASSISTANCE MMPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	1,83 3,38 1,84 1,84 1 1 0 5,23
II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) SCRIPTION CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES U-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICALD HER MEDICAL ASSISTANCE MMPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	1,83 3,38 1,84 1,84 1 1 0 5,23
II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	(2) SCRIPTION CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICALD HER MEDICAL ASSISTANCE MMPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	1,83 3,38 1,84 1,84 1 1 0 5,23
II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAL MEDICAL ASSISTANCE MPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	1,83 3,38 1,84 1,84 1 1 0 5,23
II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAL MEDICAL ASSISTANCE MPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	1,83 3,38 1,84 1,84 1 1 0 5,23
II. ACC A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN 2 MED 3 MED 4 MED 6 CHAI 7 UNIN TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	CRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA CRUED DISCHARGES N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICALO HER MEDICAL ASSISTANCE MMPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	1,83 3,38 1,84 1,84 1 1 0 5,23
A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ 3 MED 3 MED 6 CHAI 7 UNIN 1 NON 2 MED 3 MED 6 CHAI 7 UNIN TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	CRUED DISCHARGES N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAID HER MEDICAL ASSISTANCE HMPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	3,38 1,84 1,84 1 1 10 5,23
A. ACC 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ 3 MED 3 MED 6 CHAI 7 UNIN 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	CRUED DISCHARGES N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAID HER MEDICAL ASSISTANCE HMPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	3,38 1,84 1,84 1 1 10 5,23
1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, TOT, TOT, TOT, TOT, TOT, TOT	N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAID HER MEDICAL ASSISTANCE MPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	3,38 1,84 1,84 1 1 10 5,23
2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, TOT, TOT, TOT, TOT, TOT, TOT	DICARE DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAID HER MEDICAL ASSISTANCE MPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	3,38 1,84 1,84 1 1 10 5,23
3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, B. CASI 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, C. OTHI 1 TOT, 2 ACCI (PRIC	DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) DICAID HER MEDICAL ASSISTANCE MPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	1,84 1,84 1 1 10 5,23
4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, B. CASI 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, C. OTHI 1 TOT, 2 ACCI (PRIC	DICAID HER MEDICAL ASSISTANCE MPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) TAL GOVERNMENT DISCHARGES	1,84 1 10 5,23
5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ TOT/ B. CASI 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	IER MEDICAL ASSISTANCE MPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) CAL GOVERNMENT DISCHARGES	1 10 5,23
6 CHAI 7 UNIN TOT, TOT, TOT, 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT, TOT, C. OTHI 1 TOT, 2 ACCI (PRIC	MPUS / TRICARE NSURED (INCLUDED IN NON-GOVERNMENT) AL GOVERNMENT DISCHARGES	1 10 5,23
7 UNIN TOT/ TOT/ B. CASI 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	NSURED (INCLUDED IN NON-GOVERNMENT) AL GOVERNMENT DISCHARGES	10 5,23
B. CASI 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	AL GOVERNMENT DISCHARGES	5,23
B. CASI 1 NON 2 MED 3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC		
1 NON 2 MED 3 MED 4 MED 5 OTH 6 CHAI 7 UNIN TOTA TOTA 2 ACCI (PRIC		
1 NON 2 MED 3 MED 4 MED 5 OTH 6 CHAI 7 UNIN TOT/ TOT/ C. OTH 1 TOT/ 2 ACCI (PRIC	SE MIX INDEX	
3 MED 4 MED 5 OTHI 6 CHAI 7 UNIN TOTA C. OTHI 1 TOTA 2 ACCI (PRIC	N-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.9930
4 MED 5 OTHI 6 CHAI 7 UNIN TOTA TOTA C. OTHI 1 TOTA 2 ACCI (PRIC	DICARE	1.2741
4 MED 5 OTHI 6 CHAI 7 UNIN TOTA TOTA C. OTHI 1 TOTA 2 ACCI (PRIC	DICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.9363
6 CHAI 7 UNIN TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	DICAID	0.9363
7 UNIN TOT/ TOT/ C. OTHI 1 TOT/ 2 ACCI (PRIC	IER MEDICAL ASSISTANCE	0.0000
C. OTHI 1 TOTA 2 ACCI (PRIC	MPUS / TRICARE	0.6218
C. OTHI 1 TOTA 2 ACCI (PRIC	NSURED (INCLUDED IN NON-GOVERNMENT)	1.1252
C. OTHI 1 TOTA 2 ACCI (PRIO	AL GOVERNMENT CASE MIX INDEX	1.1532
1 TOTA 2 ACCI (PRIC	AL CASE MIX INDEX	1.1116
2 ACCI (PRI	IER REQUIRED DATA	
(PRI	AL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$129,119,183
	RUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$65,741,313
	OR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	***
	AL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$63,377,870
4 TOT/	AL ACTUAL DISCOUNT PERCENTAGE	49.089
5 EMP	PLOYEE SELF INSURANCE GROSS REVENUE	\$9,490,766
6 EMP	PLOYEE SELF INSURANCE ALLOWANCE	\$8,040,766
7 UCF		\$0
	P DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$4,092,11
	ARITY CARE	\$2,212,274
10 TOTA	ARITY CARE DEBTS	\$6,304,385
	ARITY CARE	ψ0,304,300
12 TOTA	ARITY CARE DEBTS TAL UNCOMPENSATED CARE TAL OTHER OPERATING REVENUE	\$3,838,007 \$136,633,273

	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
,		ACTÚAL
<u>INE</u>	DESCRIPTION	<u>FY 2015</u>
III.	NET REVENUE. GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$133,032,1
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	
	OHCA DEFINED NET REVENUE	\$133,032,1
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$295,7
	CALCULATED NET REVENUE	\$133,327,9
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$133,327,9
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$444,108,6
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	
	CALCULATED GROSS REVENUE	\$444,108,6
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$444,108,6
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$:
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6.304.3
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	ΨΘ,ΘΘ 1,Θ
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,304,3
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$6,304,3
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015

REPORT 650 - HOSPITAL UNCOMPENSATED CARE

(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	<u>DIFFERENCE</u>
Α.	Hospital Charity Care (from HRS Report 500)				
1	Number of Applicants	4,645	3,760	(885)	-19%
2	Number of Approved Applicants	4,645	3,760	(885)	-19%
3	Total Charges (A)	\$4,530,623	\$4,092,111	(\$438,512)	-10%
4	Average Charges	\$975	\$1,088	\$113	12%
5	Ratio of Cost to Charges (RCC)	0.300277	0.308769	0.008492	3%
6	Total Cost	\$1,360,442	\$1,263,517	(\$96,925)	-7%
7	Average Cost	\$293	\$336	\$43	15%
8	Charity Care - Inpatient Charges	\$639,737	\$1,005,876	\$366,139	57%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	1,033,982	915,255	(118,727)	-11%
10	Charity Care - Emergency Department Charges	2,856,904	2,170,980	(685,924)	-24%
11	Total Charges (A)	\$4,530,623	\$4,092,111	(\$438,512)	-10%
12	Charity Care - Number of Patient Days	149	185	36	24%
13	Charity Care - Number of Discharges	48	50	2	4%
14	Charity Care - Number of Outpatient ED Visits	2,674	2,114	(560)	-21%
	Charity Care - Number of Outpatient Visits (Excludes ED				
15	Visits)	1,774	1,495	(279)	-16%
В.	Hospital Bad Debts (from HRS Report 500)				
1	Bad Debts - Inpatient Services	\$1,221,777	\$674,412	(\$547,365)	-45%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	2,644,346	1,459,658	(1,184,688)	-45%
3	Bad Debts - Emergency Department	141,676	78,204	(63,472)	-45%
4	Total Bad Debts (A)	\$4,007,799	\$2,212,274	(\$1,795,525)	-45%
C.	Hospital Uncompensated Care (from HRS Report 500)				
1	Charity Care (A)	\$4,530,623	\$4,092,111	(\$438,512)	-10%
2	Bad Debts (A)	4,007,799	2,212,274	(1,795,525)	-45%
3	Total Uncompensated Care (A)	\$8,538,422	\$6,304,385	(\$2,234,037)	-26%
4	Uncompensated Care - Inpatient Services	\$1,861,514	\$1,680,288	(\$181,226)	-10%
·	Uncompensated Care - Outpatient Services (Excludes ED	Ţ.,50.,511	÷ :,000, =00	(+ :0:,==0)	. 3 70
5	Unc. Care)	3,678,328	2,374,913	(1,303,415)	-35%
6	Uncompensated Care - Emergency Department	2,998,580	2,249,184	(749,396)	-25%
7	Total Uncompensated Care (A)	\$8,538,422	\$6,304,385	(\$2,234,037)	-26%
-	···	7-,000,122	Ţ 2,00 1,000	(+-,-0:,001)	2370
(4)	The amount must agree with the amount listed on Hespital B	Concreting System	Papart 500		

	REPORT 685 - HOSPITA	FISCAL YEAR 201 L NON-GOVERNMENT GROSS RE	•	ALLOWANCES,	
		CCRUED PAYMENTS AND DISCOL	·		
(1)	(2)	(3) FY 2014	(4) FY 2015	(5)	(6)
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
<u>LINE</u>	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	<u>DIFFERENCE</u>
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$142,326,436	\$129,119,183	(\$13,207,253)	-90
2	Total Contractual Allowances	\$73,463,986	\$63,377,870	(\$10,086,116)	-14°
	Total Accrued Payments (A)	\$68,862,450	\$65,741,313	(\$3,121,137)	-5°
	Total Discount Percentage	51.62%	49.08%	-2.53%	-5°

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (3) (4) (5) **ACTUAL ACTUAL ACTUAL** LINE DESCRIPTION FY 2013 FY 2014 FY 2015 **Gross and Net Revenue** Α. Inpatient Gross Revenue \$161,442,217 \$164,804,213 \$156,850,034 2 Outpatient Gross Revenue \$266,262,398 \$288,287,925 \$287,258,616 Total Gross Patient Revenue \$427,704,615 \$453,092,138 \$444,108,650 Net Patient Revenue \$126,808,091 \$137,976,406 \$133,327,930 В. **Total Operating Expenses** \$136,633,273 1 **Total Operating Expense** \$129,703,674 \$141,228,949 C. **Utilization Statistics** Patient Days 1 29,710 29,830 28,080 7.448 7.349 7.071 2 Discharges 3 Average Length of Stay 4.0 4.1 4.0 78,710 82,011 79,506 Equivalent (Adjusted) Patient Days (EPD) 0 Equivalent (Adjusted) Discharges (ED) 19,732 20,204 20,021 D. **Case Mix Statistics** 1.11613 1.14164 1.11167 1 Case Mix Index 34,055 2 Case Mix Adjusted Patient Days (CMAPD) 33,160 31,216 7,861 3 Case Mix Adjusted Discharges (CMAD) 8,313 8,390 Case Mix Adjusted Equivalent Patient Days (CMAEPD) 87,851 93,627 88,385 22,023 23,066 22,257 Case Mix Adjusted Equivalent Discharges (CMAED) 5 E. **Gross Revenue Per Statistic** \$15,816 Total Gross Revenue per Patient Day \$14,396 \$15,189 1 2 Total Gross Revenue per Discharge \$57,425 \$61,654 \$62,807 Total Gross Revenue per EPD \$5,434 \$5,525 \$5,586 3 \$21,676 \$22,425 \$22,182 4 Total Gross Revenue per ED Total Gross Revenue per CMAEPD 5 \$4,869 \$4,839 \$5,025 Total Gross Revenue per CMAED \$19,421 \$19,643 \$19,954 6 Inpatient Gross Revenue per EPD \$2,051 \$2,010 7 \$1,973 Inpatient Gross Revenue per ED \$8,157 \$7,834 8 \$8,182

	BRISTOL HOSPITAL			
	TWELVE MONTHS ACTUAL FIL	ING		
	FISCAL YEAR 2015			
	REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL	REVENUE AND EX	(PENSE	
(1)	(2)	(3)	(4) ACTUAL	(5)
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015
F.	Net Revenue Per Statistic			
1	Net Patient Revenue per Patient Day	\$4,268	\$4,625	\$4,748
2	Net Patient Revenue per Discharge	\$17,026	\$18,775	\$18,856
3	Net Patient Revenue per EPD	\$1,611	\$1,682	\$1,677
4	Net Patient Revenue per ED	\$6,427	\$6,829	\$6,659
5	Net Patient Revenue per CMAEPD	\$1,443	\$1,474	\$1,508
6	Net Patient Revenue per CMAED	\$5,758	\$5,982	\$5,990
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$4,366	\$4,734	\$4,866
2	Total Operating Expense per Discharge	\$17,415	\$19,217	\$19,323
3	Total Operating Expense per EPD	\$1,648	\$1,722	\$1,719
4	Total Operating Expense per ED	\$6,573	\$6,990	\$6,825
5	Total Operating Expense per CMAEPD	\$1,476	\$1,508	\$1,546
6	Total Operating Expense per CMAED	\$5,889	\$6,123	\$6,139
Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$21,078,367	\$22,096,741	\$22,908,235
2	Nursing Fringe Benefits Expense	\$5,707,940	\$6,023,785	\$5,723,680
3	Total Nursing Salary and Fringe Benefits Expense	\$26,786,307	\$28,120,526	\$28,631,915
l.	Physician Salary and Fringe Expense			
1	Physician Salary Expense	\$348,650	\$380,804	\$499,496
2	Physician Fringe Benefits Expense	\$94,413	\$103,811	\$124,800
3	Total Physician Salary and Fringe Benefits Expense	\$443,063	\$484,615	\$624,296
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense			
1	Non-Nursing, Non-Physician Salary Expense	\$33,298,451	\$35,401,998	\$33,579,398
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$9,017,091	\$9,650,926	\$8,389,897
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$42,315,542	\$45,052,924	\$41,969,295
K.	Total Salary and Fringe Benefits Expense	1-1		
1	Total Salary Expense	\$54,725,468	\$57,879,543	\$56,987,129
2	Total Fringe Benefits Expense	\$14,819,444	\$15,778,522	\$14,238,377
3	Total Salary and Fringe Benefits Expense	\$69,544,912	\$73,658,065	\$71,225,506

	TWELVE MONTHS ACTUAL FI	LING		
	FISCAL YEAR 2015			
	REPORT 700 - STATISTICAL ANALYSIS OF HOSPITA	L REVENUE AND E	XPENSE	
(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5)
LINE	<u>DESCRIPTION</u>	FY 2013	FY 2014	FY 2015
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	226.0	235.5	205.
2	Total Physician FTEs	1.6	1.2	1.
3	Total Non-Nursing, Non-Physician FTEs	627.4	659.2	636.8
4	Total Full Time Equivalent Employees (FTEs)	855.0	895.9	843.9
М.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$93,267	\$93,829	\$111,53
2	Nursing Fringe Benefits Expense per FTE	\$25,256	\$25,579	\$27,860
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$118,523	\$119,408	\$139,39
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$217,906	\$317,337	\$293,82
2	Physician Fringe Benefits Expense per FTE	\$59,008	\$86,509	\$73,412
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$276,914	\$403,846	\$367,23
0.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense p	oer FTE		
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$53,074	\$53,704	\$52,73
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$14,372	\$14,640	\$13,17
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$67,446	\$68,345	\$65,90
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$64,006	\$64,605	\$67,52
2	Total Fringe Benefits Expense per FTE	\$17,333	\$17,612	\$16,872
3	Total Salary and Fringe Benefits Expense per FTE	\$81,339	\$82,217	\$84,40
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,341	\$2,469	\$2,53
2	Total Salary and Fringe Benefits Expense per Discharge	\$9,337	\$10,023	\$10,07
3	Total Salary and Fringe Benefits Expense per EPD	\$884	\$898	\$89
4	Total Salary and Fringe Benefits Expense per ED	\$3,525	\$3,646	\$3,55
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$792	\$787	\$80
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,158	\$3,193	\$3,20