

ESSENT-SHARON HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$0	\$193,394	\$193,394	0%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$6,272,473	\$6,149,131	(\$123,342)	-2%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$137,029	\$0	(\$137,029)	-100%
7	Inventories of Supplies	\$1,159,614	\$1,321,574	\$161,960	14%
8	Prepaid Expenses	\$952,893	\$635,358	(\$317,535)	-33%
9	Other Current Assets	\$1,484,938	\$0	(\$1,484,938)	-100%
	<b>Total Current Assets</b>	<b>\$10,006,947</b>	<b>\$8,299,457</b>	<b>(\$1,707,490)</b>	<b>-17%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$707,178	\$4,438,562	\$3,731,384	528%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$64,190,748	\$15,566,790	(\$48,623,958)	-76%
2	Less: Accumulated Depreciation	\$31,083,584	\$0	(\$31,083,584)	-100%
	<b>Property, Plant and Equipment, Net</b>	<b>\$33,107,164</b>	<b>\$15,566,790</b>	<b>(\$17,540,374)</b>	<b>-53%</b>
3	Construction in Progress	\$0	\$108,959	\$108,959	0%
	<b>Total Net Fixed Assets</b>	<b>\$33,107,164</b>	<b>\$15,675,749</b>	<b>(\$17,431,415)</b>	<b>-53%</b>
	<b>Total Assets</b>	<b>\$43,821,289</b>	<b>\$28,413,768</b>	<b>(\$15,407,521)</b>	<b>-35%</b>
II.	<b>LIABILITIES AND NET ASSETS</b>				
A.	<b>Current Liabilities:</b>				
1	Accounts Payable and Accrued Expenses	\$1,693,632	\$1,371,389	(\$322,243)	-19%
2	Salaries, Wages and Payroll Taxes	\$2,929,986	\$3,615,081	\$685,095	23%

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3	Due To Third Party Payers	\$0	\$96,881	\$96,881	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$165,055	\$174,279	\$9,224	6%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	<b>Total Current Liabilities</b>	<b>\$4,788,673</b>	<b>\$5,257,630</b>	<b>\$468,957</b>	<b>10%</b>
<b>B.</b>	<b><u>Long Term Debt:</u></b>				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$4,264,339	\$0	(\$4,264,339)	-100%
	<b>Total Long Term Debt</b>	<b>\$4,264,339</b>	<b>\$0</b>	<b>(\$4,264,339)</b>	<b>-100%</b>
3	Accrued Pension Liability	\$1,450,000	\$1,304,000	(\$146,000)	-10%
4	Other Long Term Liabilities	\$508,824	\$338,837	(\$169,987)	-33%
	<b>Total Long Term Liabilities</b>	<b>\$6,223,163</b>	<b>\$1,642,837</b>	<b>(\$4,580,326)</b>	<b>-74%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C.</b>	<b><u>Net Assets:</u></b>				
1	Unrestricted Net Assets or Equity	\$32,809,453	\$21,513,301	(\$11,296,152)	-34%
2	Temporarily Restricted Net Assets	\$0	\$0	\$0	0%
3	Permanently Restricted Net Assets	\$0	\$0	\$0	0%
	<b>Total Net Assets</b>	<b>\$32,809,453</b>	<b>\$21,513,301</b>	<b>(\$11,296,152)</b>	<b>-34%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$43,821,289</b>	<b>\$28,413,768</b>	<b>(\$15,407,521)</b>	<b>-35%</b>

ESSENT-SHARON HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$145,172,345	\$143,606,025	(\$1,566,320)	-1%
2	Less: Allowances	\$91,176,876	\$90,594,383	(\$582,493)	-1%
3	Less: Charity Care	\$892,961	\$741,722	(\$151,239)	-17%
4	Less: Other Deductions	\$745,895	\$853,781	\$107,886	14%
	<b>Total Net Patient Revenue</b>	<b>\$52,356,613</b>	<b>\$51,416,139</b>	<b>(\$940,474)</b>	<b>-2%</b>
5	Provision for Bad Debts	\$2,270,700	\$1,930,565	(\$340,135)	-15%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$50,085,913</b>	<b>\$49,485,574</b>	<b>(\$600,339)</b>	<b>-1%</b>
6	Other Operating Revenue	\$1,092,483	\$851,556	(\$240,927)	-22%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$51,178,396</b>	<b>\$50,337,130</b>	<b>(\$841,266)</b>	<b>-2%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$17,023,741	\$17,318,636	\$294,895	2%
2	Fringe Benefits	\$4,272,914	\$4,138,300	(\$134,614)	-3%
3	Physicians Fees	\$1,992,369	\$1,806,481	(\$185,888)	-9%
4	Supplies and Drugs	\$5,992,935	\$5,438,800	(\$554,135)	-9%
5	Depreciation and Amortization	\$2,563,946	\$2,548,585	(\$15,361)	-1%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$11,263	\$18,377	\$7,114	63%
8	Malpractice Insurance Cost	\$1,435,298	\$1,288,699	(\$146,599)	-10%
9	Other Operating Expenses	\$14,943,582	\$17,518,824	\$2,575,242	17%
	<b>Total Operating Expenses</b>	<b>\$48,236,048</b>	<b>\$50,076,702</b>	<b>\$1,840,654</b>	<b>4%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$2,942,348</b>	<b>\$260,428</b>	<b>(\$2,681,920)</b>	<b>-91%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	<b>Total Non-Operating Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$2,942,348</b>	<b>\$260,428</b>	<b>(\$2,681,920)</b>	<b>-91%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

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<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2014</u>	<u>FY 2015</u>	<u>AMOUNT</u>	<u>%</u>
		<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	All Other Adjustments	\$0	(\$18,460,790)	(\$18,460,790)	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>(\$18,460,790)</b>	<b>(\$18,460,790)</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$2,942,348</b>	<b>(\$18,200,362)</b>	<b>(\$21,142,710)</b>	<b>-719%</b>
	Principal Payments	\$1	\$1	\$0	0%

**ESSENT-SHARON HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$34,624,064	\$32,871,393	(\$1,752,671)	-5%
2	MEDICARE MANAGED CARE	\$3,605,276	\$3,558,785	(\$46,491)	-1%
3	MEDICAID	\$3,849,691	\$3,561,353	(\$288,338)	-7%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$38,140	\$68,340	\$30,200	79%
6	COMMERCIAL INSURANCE	\$367,063	\$731,155	\$364,092	99%
7	NON-GOVERNMENT MANAGED CARE	\$10,307,123	\$8,106,070	(\$2,201,053)	-21%
8	WORKER'S COMPENSATION	\$1,299,339	\$668,509	(\$630,830)	-49%
9	SELF- PAY/UNINSURED	\$456,951	\$365,024	(\$91,927)	-20%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$3,308,200	\$3,593,563	\$285,363	9%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$57,855,847</b>	<b>\$53,524,192</b>	<b>(\$4,331,655)</b>	<b>-7%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$32,641,177	\$31,887,829	(\$753,348)	-2%
2	MEDICARE MANAGED CARE	\$2,653,310	\$3,052,407	\$399,097	15%
3	MEDICAID	\$6,879,873	\$8,023,925	\$1,144,052	17%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$185,972	\$177,520	(\$8,452)	-5%
6	COMMERCIAL INSURANCE	\$2,374,109	\$3,649,258	\$1,275,149	54%
7	NON-GOVERNMENT MANAGED CARE	\$33,038,284	\$33,641,212	\$602,928	2%
8	WORKER'S COMPENSATION	\$2,000,937	\$1,879,527	(\$121,410)	-6%
9	SELF- PAY/UNINSURED	\$2,398,137	\$2,051,499	(\$346,638)	-14%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$5,144,701	\$5,718,656	\$573,955	11%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$87,316,500</b>	<b>\$90,081,833</b>	<b>\$2,765,333</b>	<b>3%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$67,265,241	\$64,759,222	(\$2,506,019)	-4%
2	MEDICARE MANAGED CARE	\$6,258,586	\$6,611,192	\$352,606	6%
3	MEDICAID	\$10,729,564	\$11,585,278	\$855,714	8%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$224,112	\$245,860	\$21,748	10%
6	COMMERCIAL INSURANCE	\$2,741,172	\$4,380,413	\$1,639,241	60%
7	NON-GOVERNMENT MANAGED CARE	\$43,345,407	\$41,747,282	(\$1,598,125)	-4%
8	WORKER'S COMPENSATION	\$3,300,276	\$2,548,036	(\$752,240)	-23%
9	SELF- PAY/UNINSURED	\$2,855,088	\$2,416,523	(\$438,565)	-15%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$8,452,901	\$9,312,219	\$859,318	10%
	<b>TOTAL GROSS REVENUE</b>	<b>\$145,172,347</b>	<b>\$143,606,025</b>	<b>(\$1,566,322)</b>	<b>-1%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$14,792,988	\$14,051,318	(\$741,670)	-5%
2	MEDICARE MANAGED CARE	\$1,352,239	\$1,276,830	(\$75,409)	-6%
3	MEDICAID	\$993,888	\$1,001,592	\$7,704	1%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$24,273	\$50,049	\$25,776	106%
6	COMMERCIAL INSURANCE	\$180,272	\$331,751	\$151,479	84%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$4,530,816	\$3,975,393	(\$555,423)	-12%
8	WORKER'S COMPENSATION	\$338,738	\$374,998	\$36,260	11%
9	SELF- PAY/UNINSURED	\$36,844	\$5,900	(\$30,944)	-84%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,236,898	\$1,337,350	\$100,452	8%
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$23,486,956</b>	<b>\$22,405,181</b>	<b>(\$1,081,775)</b>	<b>-5%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$6,935,791	\$6,484,359	(\$451,432)	-7%
2	MEDICARE MANAGED CARE	\$565,080	\$605,470	\$40,390	7%
3	MEDICAID	\$1,453,468	\$1,560,189	\$106,721	7%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$40,711	\$35,754	(\$4,957)	-12%
6	COMMERCIAL INSURANCE	\$1,164,851	\$1,631,459	\$466,608	40%
7	NON-GOVERNMENT MANAGED CARE	\$14,349,814	\$14,836,140	\$486,326	3%
8	WORKER'S COMPENSATION	\$471,862	\$550,489	\$78,627	17%
9	SELF- PAY/UNINSURED	\$242,542	\$224,891	(\$17,651)	-7%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$621,811	\$731,317	\$109,506	18%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$25,845,930</b>	<b>\$26,660,068</b>	<b>\$814,138</b>	<b>3%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$21,728,779	\$20,535,677	(\$1,193,102)	-5%
2	MEDICARE MANAGED CARE	\$1,917,319	\$1,882,300	(\$35,019)	-2%
3	MEDICAID	\$2,447,356	\$2,561,781	\$114,425	5%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$64,984	\$85,803	\$20,819	32%
6	COMMERCIAL INSURANCE	\$1,345,123	\$1,963,210	\$618,087	46%
7	NON-GOVERNMENT MANAGED CARE	\$18,880,630	\$18,811,533	(\$69,097)	0%
8	WORKER'S COMPENSATION	\$810,600	\$925,487	\$114,887	14%
9	SELF- PAY/UNINSURED	\$279,386	\$230,791	(\$48,595)	-17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,858,709	\$2,068,667	\$209,958	11%
	<b>TOTAL NET REVENUE</b>	<b>\$49,332,886</b>	<b>\$49,065,249</b>	<b>(\$267,637)</b>	<b>-1%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	1,328	1,279	(49)	-4%
2	MEDICARE MANAGED CARE	133	131	(2)	-2%
3	MEDICAID	235	219	(16)	-7%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	5	11	6	120%
6	COMMERCIAL INSURANCE	25	49	24	96%
7	NON-GOVERNMENT MANAGED CARE	620	538	(82)	-13%
8	WORKER'S COMPENSATION	18	15	(3)	-17%
9	SELF- PAY/UNINSURED	40	45	5	13%
10	SAGA	0	0	0	0%
11	OTHER	212	179	(33)	-16%
	<b>TOTAL DISCHARGES</b>	<b>2,616</b>	<b>2,466</b>	<b>(150)</b>	<b>-6%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	7,389	6,858	(531)	-7%
2	MEDICARE MANAGED CARE	836	829	(7)	-1%
3	MEDICAID	711	795	84	12%

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	10	22	12	120%
6	COMMERCIAL INSURANCE	67	134	67	100%
7	NON-GOVERNMENT MANAGED CARE	1,894	1,562	(332)	-18%
8	WORKER'S COMPENSATION	56	48	(8)	-14%
9	SELF- PAY/UNINSURED	93	124	31	33%
10	SAGA	0	0	0	0%
11	OTHER	634	657	23	4%
	<b>TOTAL PATIENT DAYS</b>	<b>11,690</b>	<b>11,029</b>	<b>(661)</b>	<b>-6%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	37,260	34,601	(2,659)	-7%
2	MEDICARE MANAGED CARE	2,530	2,823	293	12%
3	MEDICAID	5,081	7,078	1,997	39%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	138	190	52	38%
6	COMMERCIAL INSURANCE	4,272	5,589	1,317	31%
7	NON-GOVERNMENT MANAGED CARE	33,553	31,731	(1,822)	-5%
8	WORKER'S COMPENSATION	1,054	1,042	(12)	-1%
9	SELF- PAY/UNINSURED	3,028	2,545	(483)	-16%
10	SAGA	0	0	0	0%
11	OTHER	5,986	4,993	(993)	-17%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>92,902</b>	<b>90,592</b>	<b>(2,310)</b>	<b>-2%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$4,768,766	\$5,973,726	\$1,204,960	25%
2	MEDICARE MANAGED CARE	\$503,896	\$565,533	\$61,637	12%
3	MEDICAID	\$1,872,963	\$2,793,875	\$920,912	49%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$65,367	\$81,681	\$16,314	25%
6	COMMERCIAL INSURANCE	\$1,085,750	\$689,682	(\$396,068)	-36%
7	NON-GOVERNMENT MANAGED CARE	\$7,541,920	\$8,467,476	\$925,556	12%
8	WORKER'S COMPENSATION	\$423,865	\$480,953	\$57,088	13%
9	SELF- PAY/UNINSURED	\$1,627,749	\$1,487,307	(\$140,442)	-9%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$2,743,950	\$3,024,514	\$280,564	10%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$20,634,226</b>	<b>\$23,564,747</b>	<b>\$2,930,521</b>	<b>14%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$919,121	\$1,058,961	\$139,840	15%
2	MEDICARE MANAGED CARE	\$91,431	\$96,169	\$4,738	5%
3	MEDICAID	\$376,328	\$395,189	\$18,861	5%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$11,154	\$10,586	(\$568)	-5%
6	COMMERCIAL INSURANCE	\$196,792	\$131,924	(\$64,868)	-33%
7	NON-GOVERNMENT MANAGED CARE	\$2,030,428	\$2,024,026	(\$6,402)	0%
8	WORKER'S COMPENSATION	\$10,955	\$21,047	\$10,092	92%
9	SELF- PAY/UNINSURED	\$29,087	\$48,704	\$19,617	67%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$232,039	\$337,187	\$105,148	45%

**ESSENT-SHARON HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$3,897,335</b>	<b>\$4,123,793</b>	<b>\$226,458</b>	<b>6%</b>
<b>C.</b>	<b><u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u></b>				
1	MEDICARE TRADITIONAL	3,045	3,182	137	4%
2	MEDICARE MANAGED CARE	272	267	(5)	-2%
3	MEDICAID	1,240	1,671	431	35%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	58	64	6	10%
6	COMMERCIAL INSURANCE	583	466	(117)	-20%
7	NON-GOVERNMENT MANAGED CARE	5,912	5,563	(349)	-6%
8	WORKER'S COMPENSATION	423	505	82	19%
9	SELF- PAY/UNINSURED	1,337	1,050	(287)	-21%
10	SAGA	0	0	0	0%
11	OTHER	1,955	2,051	96	5%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>14,825</b>	<b>14,819</b>	<b>(6)</b>	<b>0%</b>



<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014 ACTUAL</b>	<b>FY 2015 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>I. OPERATING EXPENSE BY CATEGORY</b>					
<b>A. Salaries &amp; Wages:</b>					
1	Nursing Salaries	\$7,183,819	\$7,190,589	\$6,770	0%
2	Physician Salaries	\$0	\$0	\$0	0%
3	Non-Nursing, Non-Physician Salaries	\$9,839,922	\$10,128,047	\$288,125	3%
	<b>Total Salaries &amp; Wages</b>	<b>\$17,023,741</b>	<b>\$17,318,636</b>	<b>\$294,895</b>	<b>2%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$1,803,117	\$1,799,542	(\$3,575)	0%
2	Physician Fringe Benefits	\$0	\$0	\$0	0%
3	Non-Nursing, Non-Physician Fringe Benefits	\$2,469,797	\$2,338,758	(\$131,039)	-5%
	<b>Total Fringe Benefits</b>	<b>\$4,272,914</b>	<b>\$4,138,300</b>	<b>(\$134,614)</b>	<b>-3%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$151,423	\$583,774	\$432,351	286%
2	Physician Fees	\$1,992,369	\$1,806,481	(\$185,888)	-9%
3	Non-Nursing, Non-Physician Fees	\$0	\$199,487	\$199,487	0%
	<b>Total Contractual Labor Fees</b>	<b>\$2,143,792</b>	<b>\$2,589,742</b>	<b>\$445,950</b>	<b>21%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$4,524,521	\$4,008,775	(\$515,746)	-11%
2	Pharmaceutical Costs	\$1,468,414	\$1,430,025	(\$38,389)	-3%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$5,992,935</b>	<b>\$5,438,800</b>	<b>(\$554,135)</b>	<b>-9%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$1,481,838	\$1,478,895	(\$2,943)	0%
2	Depreciation-Equipment	\$1,082,108	\$1,069,690	(\$12,418)	-1%
3	Amortization	\$0	\$0	\$0	0%
	<b>Total Depreciation and Amortization</b>	<b>\$2,563,946</b>	<b>\$2,548,585</b>	<b>(\$15,361)</b>	<b>-1%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$0	\$0	\$0	0%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$11,263	\$18,377	\$7,114	63%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$1,435,298	\$1,288,699	(\$146,599)	-10%
<b>I. Utilities:</b>					
1	Water	\$82,465	\$70,608	(\$11,857)	-14%
2	Natural Gas	\$26,200	\$13,546	(\$12,654)	-48%
3	Oil	\$741,545	\$602,902	(\$138,643)	-19%
4	Electricity	\$692,322	\$659,490	(\$32,832)	-5%
5	Telephone	\$110,540	\$134,957	\$24,417	22%
6	Other Utilities	\$124,996	\$55,952	(\$69,044)	-55%
	<b>Total Utilities</b>	<b>\$1,778,068</b>	<b>\$1,537,455</b>	<b>(\$240,613)</b>	<b>-14%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$37,900	\$52,154	\$14,254	38%
2	Legal Fees	\$75,332	\$198,908	\$123,576	164%
3	Consulting Fees	\$279,790	\$234,940	(\$44,850)	-16%

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014 ACTUAL</b>	<b>FY 2015 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
4	Dues and Membership	\$0	\$0	\$0	0%
5	Equipment Leases	\$243,205	\$145,784	(\$97,421)	-40%
6	Building Leases	\$91,983	\$100,994	\$9,011	10%
7	Repairs and Maintenance	\$1,563,671	\$1,720,781	\$157,110	10%
8	Insurance	\$79,959	\$96,422	\$16,463	21%
9	Travel	\$41,086	\$34,930	(\$6,156)	-15%
10	Conferences	\$0	\$0	\$0	0%
11	Property Tax	\$299,242	\$314,659	\$15,417	5%
12	General Supplies	\$264,350	\$239,718	(\$24,632)	-9%
13	Licenses and Subscriptions	\$59,229	\$47,353	(\$11,876)	-20%
14	Postage and Shipping	\$63,808	\$68,401	\$4,593	7%
15	Advertising	\$593,314	\$533,347	(\$59,967)	-10%
16	Corporate parent/system fees	\$0	\$1,697,387	\$1,697,387	0%
17	Computer Software	\$210,935	\$193,903	(\$17,032)	-8%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$309,414	\$293,045	(\$16,369)	-5%
20	Lab Fees / Red Cross charges	\$25,699	\$0	(\$25,699)	-100%
21	Billing & Collection / Bank Fees	\$360,648	\$395,597	\$34,949	10%
22	Recruiting / Employee Education & Recognition	\$50,329	\$39,875	(\$10,454)	-21%
23	Laundry / Linen	\$214,374	\$188,790	(\$25,584)	-12%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$53,224	\$65,402	\$12,178	23%
26	Purchased Services - Medical	\$3,916,437	\$3,763,415	(\$153,022)	-4%
27	Purchased Services - Non Medical	\$1,572,228	\$1,262,760	(\$309,468)	-20%
28	Other Business Expenses	\$3,191,515	\$2,218,471	(\$973,044)	-30%
	<b>Total Business Expenses</b>	<b>\$13,597,672</b>	<b>\$13,907,036</b>	<b>\$309,364</b>	<b>2%</b>
<b>K.</b>	<b>Other Operating Expense:</b>				
1	Miscellaneous Other Operating Expenses	(\$583,581)	\$1,291,072	\$1,874,653	-321%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$48,236,048</b>	<b>\$50,076,702</b>	<b>\$1,840,654</b>	<b>4%</b>
<b>*A.-K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150</b>					
<b>II. OPERATING EXPENSE BY DEPARTMENT</b>					
<b>A.</b>	<b>General Services:</b>				
1	General Administration	\$10,267,245	\$10,626,673	\$359,428	4%
2	General Accounting	\$0	\$0	\$0	0%
3	Patient Billing & Collection	\$0	\$0	\$0	0%
4	Admitting / Registration Office	\$0	\$0	\$0	0%
5	Data Processing	\$0	\$0	\$0	0%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$0	\$0	\$0	0%
8	Public Relations	\$812,509	\$736,980	(\$75,529)	-9%
9	Purchasing	\$0	\$0	\$0	0%
10	Dietary and Cafeteria	\$957,010	\$1,135,859	\$178,849	19%
11	Housekeeping	\$546,335	\$604,776	\$58,441	11%
12	Laundry & Linen	\$215,932	\$188,825	(\$27,107)	-13%
13	Operation of Plant	\$2,689,131	\$2,453,210	(\$235,921)	-9%
14	Security	\$0	\$0	\$0	0%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$0	\$0	\$0	0%

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014 ACTUAL</b>	<b>FY 2015 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
17	Pharmacy Department	\$2,384,486	\$2,350,887	(\$33,599)	-1%
18	Other General Services	\$9,304,014	\$10,027,132	\$723,118	8%
	<b>Total General Services</b>	<b>\$27,176,662</b>	<b>\$28,124,342</b>	<b>\$947,680</b>	<b>3%</b>
	<b>B. Professional Services:</b>				
1	Medical Care Administration	\$527,421	\$345,276	(\$182,145)	-35%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$742,774	\$507,146	(\$235,628)	-32%
4	Medical Records	\$0	\$0	\$0	0%
5	Social Service	\$504,404	\$454,349	(\$50,055)	-10%
6	Other Professional Services	\$0	\$0	\$0	0%
	<b>Total Professional Services</b>	<b>\$1,774,599</b>	<b>\$1,306,771</b>	<b>(\$467,828)</b>	<b>-26%</b>
	<b>C. Special Services:</b>				
1	Operating Room	\$1,756,675	\$2,474,520	\$717,845	41%
2	Recovery Room	\$215,389	\$273,596	\$58,207	27%
3	Anesthesiology	\$18,343	\$15,518	(\$2,825)	-15%
4	Delivery Room	\$518,049	\$612,588	\$94,539	18%
5	Diagnostic Radiology	\$1,513,724	\$1,311,515	(\$202,209)	-13%
6	Diagnostic Ultrasound	\$0	\$0	\$0	0%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$228,600	\$222,324	(\$6,276)	-3%
9	CT Scan	\$363,476	\$538,768	\$175,292	48%
10	Laboratory	\$2,597,597	\$2,753,065	\$155,468	6%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$262,505	\$309,913	\$47,408	18%
14	Electroencephalography	\$114,194	\$108,293	(\$5,901)	-5%
15	Occupational Therapy	\$96,545	\$97,642	\$1,097	1%
16	Speech Pathology	\$68,990	\$84,662	\$15,672	23%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$411,337	\$429,112	\$17,775	4%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$1,713,590	\$2,226,119	\$512,529	30%
25	MRI	\$273,015	\$215,187	(\$57,828)	-21%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$57,522	\$103,026	\$45,504	79%
32	Occupational Therapy / Physical Therapy	\$609,862	\$579,225	(\$30,637)	-5%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,563,998	\$2,169,958	(\$394,040)	-15%
	<b>Total Special Services</b>	<b>\$13,383,411</b>	<b>\$14,525,031</b>	<b>\$1,141,620</b>	<b>9%</b>
	<b>D. Routine Services:</b>				
1	Medical & Surgical Units	\$2,396,291	\$2,288,535	(\$107,756)	-4%
2	Intensive Care Unit	\$1,015,570	\$1,368,624	\$353,054	35%
3	Coronary Care Unit	\$0	\$0	\$0	0%

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014 ACTUAL</b>	<b>FY 2015 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
4	Psychiatric Unit	\$2,147,695	\$2,135,253	(\$12,442)	-1%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
7	Newborn Nursery Unit	\$341,820	\$328,146	(\$13,674)	-4%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
	<b>Total Routine Services</b>	<b>\$5,901,376</b>	<b>\$6,120,558</b>	<b>\$219,182</b>	<b>4%</b>
<b>E.</b>	<b>Other Departments:</b>				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	<b>Total Operating Expenses - All Departments*</b>	<b>\$48,236,048</b>	<b>\$50,076,702</b>	<b>\$1,840,654</b>	<b>4%</b>
<b>*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>					

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$53,746,903	\$50,085,913	\$49,485,574
2	Other Operating Revenue	429,185	1,092,483	851,556
3	Total Operating Revenue	\$54,176,088	\$51,178,396	\$50,337,130
4	Total Operating Expenses	49,401,485	48,236,048	50,076,702
5	Income/(Loss) From Operations	\$4,774,603	\$2,942,348	\$260,428
6	Total Non-Operating Revenue	0	0	(18,460,790)
7	Excess/(Deficiency) of Revenue Over Expenses	\$4,774,603	\$2,942,348	(\$18,200,362)
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	8.81%	5.75%	0.82%
2	Hospital Non Operating Margin	0.00%	0.00%	-57.91%
3	Hospital Total Margin	8.81%	5.75%	-57.10%
4	Income/(Loss) From Operations	\$4,774,603	\$2,942,348	\$260,428
5	Total Operating Revenue	\$54,176,088	\$51,178,396	\$50,337,130
6	Total Non-Operating Revenue	\$0	\$0	(\$18,460,790)
7	Total Revenue	\$54,176,088	\$51,178,396	\$31,876,340
8	Excess/(Deficiency) of Revenue Over Expenses	\$4,774,603	\$2,942,348	(\$18,200,362)
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$30,054,582	\$32,809,453	\$21,513,301
2	Hospital Total Net Assets	\$30,054,582	\$32,809,453	\$21,513,301
3	Hospital Change in Total Net Assets	\$5,175,931	\$2,754,871	(\$11,296,152)
4	Hospital Change in Total Net Assets %	120.8%	9.2%	-34.4%
<b>D. <u>Cost Data Summary</u></b>				
1	<b><u>Ratio of Cost to Charges</u></b>	<b>0.33</b>	<b>0.33</b>	<b>0.35</b>
2	Total Operating Expenses	\$49,401,485	\$48,236,048	\$50,076,702
3	Total Gross Revenue	\$147,441,042	\$145,172,347	\$143,606,025
4	Total Other Operating Revenue	\$429,185	\$1,092,483	\$851,556

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>5</b>	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.31</b>	<b>1.29</b>	<b>1.29</b>
6	Total Non-Government Payments	\$23,155,548	\$21,315,739	\$21,931,021
7	Total Uninsured Payments	\$651,124	\$279,386	\$230,791
8	Total Non-Government Charges	\$55,244,177	\$52,241,943	\$51,092,254
9	Total Uninsured Charges	\$3,802,432	\$2,855,088	\$2,416,523
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>1.00</b>	<b>0.98</b>	<b>0.91</b>
11	Total Medicare Payments	\$25,498,542	\$23,646,098	\$22,417,977
12	Total Medicare Charges	\$76,021,100	\$73,523,827	\$71,370,414
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.74</b>	<b>0.69</b>	<b>0.64</b>
14	Total Medicaid Payments	\$2,090,929	\$2,447,356	\$2,561,781
15	Total Medicaid Charges	\$8,443,579	\$10,729,564	\$11,585,278
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$1,080,914</b>	<b>\$1,043,330</b>	<b>\$926,357</b>
17	Charity Care	\$941,923	\$892,961	\$741,722
18	Bad Debts	\$2,293,507	\$2,270,701	\$1,930,565
19	Total Uncompensated Care	\$3,235,430	\$3,163,662	\$2,672,287
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>2.2%</b>	<b>2.2%</b>	<b>1.8%</b>
21	Total Operating Expenses	\$49,401,485	\$48,236,048	\$50,076,702
<b>E.</b>	<b><u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>2</b>	<b>2</b>	<b>2</b>
2	Total Current Assets	\$11,159,582	\$10,006,947	\$8,299,457
3	Total Current Liabilities	\$5,400,972	\$4,788,673	\$5,257,630
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>0</b>	<b>0</b>	<b>1</b>
5	Cash and Cash Equivalents	\$0	\$0	\$193,394
6	Short Term Investments	0	0	0

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
7	Total Cash and Short Term Investments	\$0	\$0	\$193,394
8	Total Operating Expenses	\$49,401,485	\$48,236,048	\$50,076,702
9	Depreciation Expense	\$3,004,141	\$2,563,946	\$2,548,585
10	Operating Expenses less Depreciation Expense	\$46,397,344	\$45,672,102	\$47,528,117
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>46</b>	<b>47</b>	<b>45</b>
12	Net Patient Accounts Receivable	\$7,018,848	\$6,272,473	\$6,149,131
13	Due From Third Party Payers	\$0	\$137,029	\$0
14	Due To Third Party Payers	\$291,175	\$0	\$96,881
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$6,727,673	\$6,409,502	\$6,052,250
16	Total Net Patient Revenue	\$53,746,903	\$50,085,913	\$49,485,574
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>42</b>	<b>38</b>	<b>40</b>
18	Total Current Liabilities	\$5,400,972	\$4,788,673	\$5,257,630
19	Total Operating Expenses	\$49,401,485	\$48,236,048	\$50,076,702
20	Depreciation Expense	\$3,004,141	\$2,563,946	\$2,548,585
21	Total Operating Expenses less Depreciation Expense	\$46,397,344	\$45,672,102	\$47,528,117
<b>F.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>65.2</b>	<b>74.9</b>	<b>75.7</b>
2	Total Net Assets	\$30,054,582	\$32,809,453	\$21,513,301
3	Total Assets	\$46,104,495	\$43,821,289	\$28,413,768
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>54.7</b>	<b>60.8</b>	<b>(297.7)</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$4,774,603	\$2,942,348	(\$18,200,362)
6	Depreciation Expense	\$3,004,141	\$2,563,946	\$2,548,585
7	Excess of Revenues Over Expenses and Depreciation Expense	\$7,778,744	\$5,506,294	(\$15,651,777)
8	Total Current Liabilities	\$5,400,972	\$4,788,673	\$5,257,630
9	Total Long Term Debt	\$8,826,637	\$4,264,339	\$0
10	Total Current Liabilities and Total Long Term Debt	\$14,227,609	\$9,053,012	\$5,257,630

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>22.7</b>	<b>11.5</b>	<b>-</b>
12	Total Long Term Debt	\$8,826,637	\$4,264,339	\$0
13	Total Net Assets	\$30,054,582	\$32,809,453	\$21,513,301
14	Total Long Term Debt and Total Net Assets	\$38,881,219	\$37,073,792	\$21,513,301
<b>15</b>	<b><u>Debt Service Coverage Ratio</u></b>	<b>7,778,744.0</b>	<b>489.8</b>	<b>(850.7)</b>
16	Excess Revenues over Expenses	4,774,603	\$2,942,348	(\$18,200,362)
17	Interest Expense	-	\$11,263	\$18,377
18	Depreciation and Amortization Expense	3,004,141	\$2,563,946	\$2,548,585
19	Principal Payments	1	\$1	\$1
<b>G.</b>	<b><u>Other Financial Ratios</u></b>			
<b>20</b>	<b><u>Average Age of Plant</u></b>	<b>9.5</b>	<b>12.1</b>	<b>-</b>
21	Accumulated Depreciation	28,550,693	31,083,584	-
22	Depreciation and Amortization Expense	3,004,141	2,563,946	2,548,585
<b>H.</b>	<b><u>Utilization Measures Summary</u></b>			
1	Patient Days	12,338	11,690	11,029
2	Discharges	2,878	2,616	2,466
3	ALOS	4.3	4.5	4.5
4	Staffed Beds	49	49	49
5	Available Beds	-	94	94
6	Licensed Beds	94	94	94
7	Occupancy of Staffed Beds	69.0%	65.4%	61.7%
8	Occupancy of Available Beds	36.0%	34.1%	32.1%
9	Full Time Equivalent Employees	247.4	259.6	253.9
<b>I.</b>	<b><u>Hospital Gross Revenue Payer Mix Percentage</u></b>			
1	Non-Government Gross Revenue Payer Mix Percentage	34.9%	34.0%	33.9%
2	Medicare Gross Revenue Payer Mix Percentage	51.6%	50.6%	49.7%



<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
3	Medicaid Gross Revenue Payer Mix Percentage	5.7%	7.4%	8.1%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	5.1%	5.8%	6.5%
5	Uninsured Gross Revenue Payer Mix Percentage	2.6%	2.0%	1.7%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.2%	0.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$51,441,745	\$49,386,855	\$48,675,731
9	Medicare Gross Revenue (Charges)	\$76,021,100	\$73,523,827	\$71,370,414
10	Medicaid Gross Revenue (Charges)	\$8,443,579	\$10,729,564	\$11,585,278
11	Other Medical Assistance Gross Revenue (Charges)	\$7,456,667	\$8,452,901	\$9,312,219
12	Uninsured Gross Revenue (Charges)	\$3,802,432	\$2,855,088	\$2,416,523
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$275,519	\$224,112	\$245,860
14	Total Gross Revenue (Charges)	\$147,441,042	\$145,172,347	\$143,606,025
<b>J.</b>	<b>Hospital Net Revenue Payer Mix Percentage</b>			
1	Non-Government Net Revenue Payer Mix Percentage	42.8%	42.6%	44.2%
2	Medicare Net Revenue Payer Mix Percentage	48.5%	47.9%	45.7%
3	Medicaid Net Revenue Payer Mix Percentage	4.0%	5.0%	5.2%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	3.3%	3.8%	4.2%
5	Uninsured Net Revenue Payer Mix Percentage	1.2%	0.6%	0.5%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.1%	0.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$22,504,424	\$21,036,353	\$21,700,230
9	Medicare Net Revenue (Payments)	\$25,498,542	\$23,646,098	\$22,417,977
10	Medicaid Net Revenue (Payments)	\$2,090,929	\$2,447,356	\$2,561,781
11	Other Medical Assistance Net Revenue (Payments)	\$1,762,147	\$1,858,709	\$2,068,667
12	Uninsured Net Revenue (Payments)	\$651,124	\$279,386	\$230,791
13	CHAMPUS / TRICARE Net Revenue Payments)	\$119,495	\$64,984	\$85,803
14	Total Net Revenue (Payments)	\$52,626,661	\$49,332,886	\$49,065,249
<b>K.</b>	<b>Discharges</b>			
1	Non-Government (Including Self Pay / Uninsured)	830	703	647
2	Medicare	1,614	1,461	1,410
3	Medical Assistance	425	447	398
4	Medicaid	217	235	219
5	Other Medical Assistance	208	212	179
6	CHAMPUS / TRICARE	9	5	11

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
7	Uninsured (Included In Non-Government)	93	40	45
8	Total	2,878	2,616	2,466
<b>L. Case Mix Index</b>				
1	Non-Government (Including Self Pay / Uninsured)	1.00670	0.92370	0.87690
2	Medicare	1.18240	1.19620	1.17200
3	Medical Assistance	0.93546	0.90741	0.96739
4	Medicaid	0.91050	0.93440	0.93510
5	Other Medical Assistance	0.96150	0.87750	1.00690
6	CHAMPUS / TRICARE	1.02190	0.68860	0.87500
7	Uninsured (Included In Non-Government)	0.89090	0.75600	0.73840
8	Total Case Mix Index	1.09476	1.07266	1.06023
<b>M. Emergency Department Visits</b>				
1	Emergency Room - Treated and Admitted	1,878	1,593	1,561
2	Emergency Room - Treated and Discharged	15,746	14,825	14,819
3	Total Emergency Room Visits	17,624	16,418	16,380

**ESSENT-SHARON HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$229,456	\$441,092	\$211,636	92%
2	Inpatient Payments	\$47,525	\$123,016	\$75,491	159%
3	Outpatient Charges	\$160,422	\$161,657	\$1,235	1%
4	Outpatient Payments	\$37,827	\$38,066	\$239	1%
5	Discharges	9	9	0	0%
6	Patient Days	62	71	9	15%
7	Outpatient Visits (Excludes ED Visits)	179	141	(38)	-21%
8	Emergency Department Outpatient Visits	2	4	2	100%
9	Emergency Department Inpatient Admissions	0	6	6	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$389,878</b>	<b>\$602,749</b>	<b>\$212,871</b>	<b>55%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$85,352</b>	<b>\$161,082</b>	<b>\$75,730</b>	<b>89%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$665,303	\$370,850	(\$294,453)	-44%
2	Inpatient Payments	\$259,022	\$161,457	(\$97,565)	-38%
3	Outpatient Charges	\$581,173	\$768,822	\$187,649	32%
4	Outpatient Payments	\$114,567	\$157,172	\$42,605	37%
5	Discharges	22	17	(5)	-23%
6	Patient Days	159	95	(64)	-40%
7	Outpatient Visits (Excludes ED Visits)	624	652	28	4%
8	Emergency Department Outpatient Visits	9	37	28	311%
9	Emergency Department Inpatient Admissions	0	9	9	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,246,476</b>	<b>\$1,139,672</b>	<b>(\$106,804)</b>	<b>-9%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$373,589</b>	<b>\$318,629</b>	<b>(\$54,960)</b>	<b>-15%</b>
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**ESSENT-SHARON HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$401,496	\$354,536	(\$46,960)	-12%
2	Inpatient Payments	\$163,229	\$186,362	\$23,133	14%
3	Outpatient Charges	\$238,234	\$331,265	\$93,031	39%
4	Outpatient Payments	\$43,924	\$62,458	\$18,534	42%
5	Discharges	17	15	(2)	-12%
6	Patient Days	102	75	(27)	-26%
7	Outpatient Visits (Excludes ED Visits)	210	243	33	16%
8	Emergency Department Outpatient Visits	5	50	45	900%
9	Emergency Department Inpatient Admissions	0	13	13	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$639,730</b>	<b>\$685,801</b>	<b>\$46,071</b>	<b>7%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$207,153</b>	<b>\$248,820</b>	<b>\$41,667</b>	<b>20%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$9,819	\$656	(\$9,163)	-93%
4	Outpatient Payments	\$3,429	\$0	(\$3,429)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	14	1	(13)	-93%
8	Emergency Department Outpatient Visits	1	1	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$9,819</b>	<b>\$656</b>	<b>(\$9,163)</b>	<b>-93%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$3,429</b>	<b>\$0</b>	<b>(\$3,429)</b>	<b>-100%</b>
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$136,160	\$101,566	(\$34,594)	-25%
2	Inpatient Payments	\$64,317	\$21,762	(\$42,555)	-66%
3	Outpatient Charges	\$88,294	\$15,246	(\$73,048)	-83%
4	Outpatient Payments	\$14,895	\$2,581	(\$12,314)	-83%
5	Discharges	7	3	(4)	-57%
6	Patient Days	38	28	(10)	-26%
7	Outpatient Visits (Excludes ED Visits)	67	4	(63)	-94%
8	Emergency Department Outpatient Visits	4	5	1	25%
9	Emergency Department Inpatient Admissions	0	1	1	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$224,454</b>	<b>\$116,812</b>	<b>(\$107,642)</b>	<b>-48%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$79,212</b>	<b>\$24,343</b>	<b>(\$54,869)</b>	<b>-69%</b>
<b>I. AETNA</b>					

**ESSENT-SHARON HOSPITAL  
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FISCAL YEAR 2015  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Charges	\$752,568	\$697,664	(\$54,904)	-7%
2	Inpatient Payments	\$296,703	\$220,297	(\$76,406)	-26%
3	Outpatient Charges	\$670,740	\$529,736	(\$141,004)	-21%
4	Outpatient Payments	\$135,305	\$105,695	(\$29,610)	-22%
5	Discharges	25	24	(1)	-4%
6	Patient Days	130	139	9	7%
7	Outpatient Visits (Excludes ED Visits)	589	556	(33)	-6%
8	Emergency Department Outpatient Visits	8	39	31	388%
9	Emergency Department Inpatient Admissions	0	16	16	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,423,308</b>	<b>\$1,227,400</b>	<b>(\$195,908)</b>	<b>-14%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$432,008</b>	<b>\$325,992</b>	<b>(\$106,016)</b>	<b>-25%</b>
<b>J.</b>	<b>HUMANA</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$472	\$2,288	\$1,816	385%
4	Outpatient Payments	\$121	\$397	\$276	228%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	1	0	(1)	-100%
8	Emergency Department Outpatient Visits	0	1	1	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$472</b>	<b>\$2,288</b>	<b>\$1,816</b>	<b>385%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$121</b>	<b>\$397</b>	<b>\$276</b>	<b>228%</b>
<b>K.</b>	<b>SECURE HORIZONS</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>L.</b>	<b>UNICARE LIFE &amp; HEALTH INSURANCE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>M.</b>	<b>UNIVERSAL AMERICAN</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N.</b>	<b>EVERCARE</b>				
1	Inpatient Charges	\$1,420,293	\$1,593,077	\$172,784	12%
2	Inpatient Payments	\$521,443	\$563,936	\$42,493	8%
3	Outpatient Charges	\$904,156	\$1,242,737	\$338,581	37%
4	Outpatient Payments	\$215,012	\$239,101	\$24,089	11%
5	Discharges	53	63	10	19%
6	Patient Days	345	421	76	22%
7	Outpatient Visits (Excludes ED Visits)	574	959	385	67%
8	Emergency Department Outpatient Visits	243	130	(113)	-47%
9	Emergency Department Inpatient Admissions	0	39	39	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$2,324,449</b>	<b>\$2,835,814</b>	<b>\$511,365</b>	<b>22%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$736,455</b>	<b>\$803,037</b>	<b>\$66,582</b>	<b>9%</b>
<b>II.</b>	<b>TOTAL MEDICARE MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$3,605,276</b>	<b>\$3,558,785</b>	<b>(\$46,491)</b>	<b>-1%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$1,352,239</b>	<b>\$1,276,830</b>	<b>(\$75,409)</b>	<b>-6%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$2,653,310</b>	<b>\$3,052,407</b>	<b>\$399,097</b>	<b>15%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$565,080</b>	<b>\$605,470</b>	<b>\$40,390</b>	<b>7%</b>
	<b>TOTAL DISCHARGES</b>	<b>133</b>	<b>131</b>	<b>(2)</b>	<b>-2%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>836</b>	<b>829</b>	<b>(7)</b>	<b>-1%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>2,258</b>	<b>2,556</b>	<b>298</b>	<b>13%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>272</b>	<b>267</b>	<b>(5)</b>	<b>-2%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>0</b>	<b>84</b>	<b>84</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$6,258,586</b>	<b>\$6,611,192</b>	<b>\$352,606</b>	<b>6%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,917,319</b>	<b>\$1,882,300</b>	<b>(\$35,019)</b>	<b>-2%</b>

**ESSENT-SHARON HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2014 ACTUAL	(4) FY 2015 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**ESSENT-SHARON HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2014 ACTUAL	(4) FY 2015 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>E.</b>	<b>WELLCARE OF CONNECTICUT</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F.</b>	<b>FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>G.</b>	<b>UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H.</b>	<b>AETNA</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>



**ESSENT-SHARON HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>II.</b>	<b>TOTAL MEDICAID MANAGED CARE</b>				
	TOTAL INPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL DISCHARGES	0	0	0	0%
	TOTAL PATIENT DAYS	0	0	0	0%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	0	0	0	0%
	TOTAL 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>SHARON HOSPITAL HOLDING CO, INC.</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014 ACTUAL</b>	<b>FY 2015 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$10,465	\$317,130	\$306,665	2930%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$6,904,941	\$6,658,799	(\$246,142)	-4%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$137,029	\$0	(\$137,029)	-100%
7	Inventories of Supplies	\$1,192,492	\$1,342,069	\$149,577	13%
8	Prepaid Expenses	\$813,147	\$695,358	(\$117,789)	-14%
9	Other Current Assets	\$1,656,812	\$0	(\$1,656,812)	-100%
	<b>Total Current Assets</b>	<b>\$10,714,886</b>	<b>\$9,013,356</b>	<b>(\$1,701,530)</b>	<b>-16%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$706,549	\$4,659,987	\$3,953,438	560%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$64,190,748	\$15,586,215	(\$48,604,533)	-76%
2	Less: Accumulated Depreciation	\$31,083,584	\$0	(\$31,083,584)	(\$1)
	<b>Property, Plant and Equipment, Net</b>	<b>\$33,107,164</b>	<b>\$15,586,215</b>	<b>(\$17,520,949)</b>	<b>-53%</b>
3	Construction in Progress	\$0	\$108,959	\$108,959	0%
	<b>Total Net Fixed Assets</b>	<b>\$33,107,164</b>	<b>\$15,695,174</b>	<b>(\$17,411,990)</b>	<b>-53%</b>
	<b>Total Assets</b>	<b>\$44,528,599</b>	<b>\$29,368,517</b>	<b>(\$15,160,082)</b>	<b>-34%</b>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					

<b>SHARON HOSPITAL HOLDING CO, INC.</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014 ACTUAL</b>	<b>FY 2015 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
1	Accounts Payable and Accrued Expenses	\$1,941,959	\$1,598,775	(\$343,184)	-18%
2	Salaries, Wages and Payroll Taxes	\$3,439,322	\$4,342,444	\$903,122	26%
3	Due To Third Party Payers	\$0	\$96,881	\$96,881	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$165,055	\$174,279	\$9,224	6%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	<b>Total Current Liabilities</b>	<b>\$5,546,336</b>	<b>\$6,212,379</b>	<b>\$666,043</b>	<b>12%</b>
<b>B.</b>	<b><u>Long Term Debt:</u></b>				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$20,704,808	\$0	(\$20,704,808)	-100%
	<b>Total Long Term Debt</b>	<b>\$20,704,808</b>	<b>\$0</b>	<b>(\$20,704,808)</b>	<b>-100%</b>
3	Accrued Pension Liability	\$1,450,000	\$1,304,000	(\$146,000)	-10%
4	Other Long Term Liabilities	\$508,824	\$338,837	(\$169,987)	-33%
	<b>Total Long Term Liabilities</b>	<b>\$22,663,632</b>	<b>\$1,642,837</b>	<b>(\$21,020,795)</b>	<b>-93%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$250,000	\$0	(\$250,000)	-100%
<b>C.</b>	<b><u>Net Assets:</u></b>				
1	Unrestricted Net Assets or Equity	\$16,068,631	\$21,513,301	\$5,444,670	34%
2	Temporarily Restricted Net Assets	\$0	\$0	\$0	0%
3	Permanently Restricted Net Assets	\$0	\$0	\$0	0%
	<b>Total Net Assets</b>	<b>\$16,068,631</b>	<b>\$21,513,301</b>	<b>\$5,444,670</b>	<b>34%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$44,528,599</b>	<b>\$29,368,517</b>	<b>(\$15,160,082)</b>	<b>-34%</b>

## SHARON HOSPITAL HOLDING CO, INC.

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2015

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$159,429,171	\$156,550,609	(\$2,878,562)	-2%
2	Less: Allowances	\$99,028,534	\$97,769,852	(\$1,258,682)	-1%
3	Less: Charity Care	\$892,961	\$741,722	(\$151,239)	-17%
4	Less: Other Deductions	\$745,840	\$853,781	\$107,941	14%
	<b>Total Net Patient Revenue</b>	<b>\$58,761,836</b>	<b>\$57,185,254</b>	<b>(\$1,576,582)</b>	<b>-3%</b>
5	Provision for Bad Debts	\$2,651,594	\$2,233,479	(\$418,115)	-16%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$56,110,242</b>	<b>\$54,951,775</b>	<b>(\$1,158,467)</b>	<b>-2%</b>
6	Other Operating Revenue	\$1,205,475	\$934,163	(\$271,312)	-23%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$57,315,717</b>	<b>\$55,885,938</b>	<b>(\$1,429,779)</b>	<b>-2%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$22,975,001	\$21,709,858	(\$1,265,143)	-6%
2	Fringe Benefits	\$4,537,331	\$4,384,844	(\$152,487)	-3%
3	Physicians Fees	\$2,741,068	\$2,535,715	(\$205,353)	-7%
4	Supplies and Drugs	\$6,326,695	\$5,682,283	(\$644,412)	-10%
5	Depreciation and Amortization	\$2,576,361	\$2,548,585	(\$27,776)	-1%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$11,263	\$18,277	\$7,014	62%
8	Malpractice Insurance Cost	\$1,435,297	\$1,292,016	(\$143,281)	-10%
9	Other Operating Expenses	\$18,123,045	\$20,583,516	\$2,460,471	14%
	<b>Total Operating Expenses</b>	<b>\$58,726,061</b>	<b>\$58,755,094</b>	<b>\$29,033</b>	<b>0%</b>
	<b>Income/(Loss) From Operations</b>	<b>(\$1,410,344)</b>	<b>(\$2,869,156)</b>	<b>(\$1,458,812)</b>	<b>103%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	<b>Total Non-Operating Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>(\$1,410,344)</b>	<b>(\$2,869,156)</b>	<b>(\$1,458,812)</b>	<b>103%</b>
	<b>Other Adjustments:</b>				

## SHARON HOSPITAL HOLDING CO, INC.

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2015

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	(\$15,331,206)	(\$15,331,206)	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>(\$15,331,206)</b>	<b>(\$15,331,206)</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>(\$1,410,344)</b>	<b>(\$18,200,362)</b>	<b>(\$16,790,018)</b>	<b>1190%</b>

<b>SHARON HOSPITAL HOLDING CO, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$60,248,744	\$56,110,242	\$54,951,775
2	Other Operating Revenue	429,185	1,205,475	934,163
3	Total Operating Revenue	\$60,677,929	\$57,315,717	\$55,885,938
4	Total Operating Expenses	59,153,702	58,726,061	58,755,094
5	Income/(Loss) From Operations	\$1,524,227	(\$1,410,344)	(\$2,869,156)
6	Total Non-Operating Revenue	0	0	(15,331,206)
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,524,227	(\$1,410,344)	(\$18,200,362)
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	2.51%	-2.46%	-7.07%
2	Parent Corporation Non-Operating Margin	0.00%	0.00%	-37.80%
3	Parent Corporation Total Margin	2.51%	-2.46%	-44.88%
4	Income/(Loss) From Operations	\$1,524,227	(\$1,410,344)	(\$2,869,156)
5	Total Operating Revenue	\$60,677,929	\$57,315,717	\$55,885,938
6	Total Non-Operating Revenue	\$0	\$0	(\$15,331,206)
7	Total Revenue	\$60,677,929	\$57,315,717	\$40,554,732
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,524,227	(\$1,410,344)	(\$18,200,362)
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$17,604,993	\$16,068,631	\$21,513,301
2	Parent Corporation Total Net Assets	\$17,604,993	\$16,068,631	\$21,513,301
3	Parent Corporation Change in Total Net Assets	\$1,612,174	(\$1,536,362)	\$5,444,670
4	Parent Corporation Change in Total Net Assets %	110.1%	-8.7%	33.9%
<b>D. Liquidity Measures Summary</b>				
1	<b>Current Ratio</b>	<b>1.95</b>	<b>1.93</b>	<b>1.45</b>
2	Total Current Assets	\$12,350,418	\$10,714,886	\$9,013,356
3	Total Current Liabilities	\$6,349,407	\$5,546,336	\$6,212,379
4	<b>Days Cash on Hand</b>	<b>1</b>	<b>0</b>	<b>2</b>

<b>SHARON HOSPITAL HOLDING CO, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>
5	Cash and Cash Equivalents	\$117,062	\$10,465	\$317,130
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$117,062	\$10,465	\$317,130
8	Total Operating Expenses	\$59,153,702	\$58,726,061	\$58,755,094
9	Depreciation Expense	\$2,992,573	\$2,576,361	\$2,548,585
10	Operating Expenses less Depreciation Expense	\$56,161,129	\$56,149,700	\$56,206,509
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>46</b>	<b>46</b>	<b>44</b>
12	Net Patient Accounts Receivable	\$ 7,934,530	\$ 6,904,941	\$ 6,658,799
13	Due From Third Party Payers	\$0	\$137,029	\$0
14	Due To Third Party Payers	\$345,766	\$0	\$96,881
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 7,588,764	\$ 7,041,970	\$ 6,561,918
16	Total Net Patient Revenue	\$60,248,744	\$56,110,242	\$54,951,775
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>41</b>	<b>36</b>	<b>40</b>
18	Total Current Liabilities	\$6,349,407	\$5,546,336	\$6,212,379
19	Total Operating Expenses	\$59,153,702	\$58,726,061	\$58,755,094
20	Depreciation Expense	\$2,992,573	\$2,576,361	\$2,548,585
20	Total Operating Expenses less Depreciation Expense	\$56,161,129	\$56,149,700	\$56,206,509
<b>E.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>37.0</b>	<b>36.1</b>	<b>73.3</b>
2	Total Net Assets	\$17,604,993	\$16,068,631	\$21,513,301
3	Total Assets	\$47,626,924	\$44,528,599	\$29,368,517
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>16.2</b>	<b>4.4</b>	<b>(251.9)</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,524,227	(\$1,410,344)	(\$18,200,362)
6	Depreciation Expense	\$2,992,573	\$2,576,361	\$2,548,585
7	Excess of Revenues Over Expenses and Depreciation Expense	\$4,516,800	\$1,166,017	(\$15,651,777)
8	Total Current Liabilities	\$6,349,407	\$5,546,336	\$6,212,379
9	Total Long Term Debt	\$21,600,220	\$20,704,808	\$0

<b>SHARON HOSPITAL HOLDING CO, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
10	Total Current Liabilities and Total Long Term Debt	\$27,949,627	\$26,251,144	\$6,212,379
11	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>55.1</b>	<b>56.3</b>	<b>-</b>
12	Total Long Term Debt	\$21,600,220	\$20,704,808	\$0
13	Total Net Assets	\$17,604,993	\$16,068,631	\$21,513,301
14	Total Long Term Debt and Total Net Assets	\$39,205,213	\$36,773,439	\$21,513,301



ESSENT-SHARON HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2015								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
LINE	DESCRIPTION	PATIENT DAYS	DISCHARGES OR CU/CCU # PATIENT	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS
1	Adult Medical/Surgical	5,314	1,619	1,057	22	47	66.2%	31.0%
2	ICU/CCU (Excludes Neonatal ICU)	793	320	0	7	11	31.0%	19.8%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	3,646	317	305	12	12	83.2%	83.2%
	<b>TOTAL PSYCHIATRIC</b>	<b>3,646</b>	<b>317</b>	<b>305</b>	<b>12</b>	<b>12</b>	<b>83.2%</b>	<b>83.2%</b>
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	681	270	265	4	8	46.6%	23.3%
7	Newborn	595	260	259	4	16	40.8%	10.2%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>10,434</b>	<b>2,206</b>	<b>1,627</b>	<b>45</b>	<b>78</b>	<b>63.5%</b>	<b>36.6%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>11,029</b>	<b>2,466</b>	<b>1,886</b>	<b>49</b>	<b>94</b>	<b>61.7%</b>	<b>32.1%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>11,029</b>	<b>2,466</b>	<b>1,886</b>	<b>49</b>	<b>94</b>	<b>61.7%</b>	<b>32.1%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>11,690</b>	<b>2,616</b>	<b>2,041</b>	<b>49</b>	<b>94</b>	<b>65.4%</b>	<b>34.1%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-661</b>	<b>-150</b>	<b>-155</b>	<b>0</b>	<b>0</b>	<b>-3.7%</b>	<b>-1.9%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-6%</b>	<b>-6%</b>	<b>-8%</b>	<b>0%</b>	<b>0%</b>	<b>-6%</b>	<b>-6%</b>
	Total Licensed Beds and Bassinets	94						
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>								
<b>Note: Total discharges do not include ICU/CCU patients.</b>								

ESSENT-SHARON HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	361	349	-12	-3%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,487	1,458	-29	-2%
3	Emergency Department Scans	3,161	3,867	706	22%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>5,009</b>	<b>5,674</b>	<b>665</b>	<b>13%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	175	188	13	7%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,668	1,615	-53	-3%
3	Emergency Department Scans	92	97	5	5%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>1,935</b>	<b>1,900</b>	<b>-35</b>	<b>-2%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Linear Accelerator Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Cardiac Catheterization Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>

ESSENT-SHARON HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	409	322	-87	-21%
2	Outpatient Surgical Procedures	1,297	1,271	-26	-2%
	<b>Total Surgical Procedures</b>	<b>1,706</b>	<b>1,593</b>	<b>-113</b>	<b>-7%</b>
<b>J. Endoscopy Procedures</b>					
1	Inpatient Endoscopy Procedures	96	86	-10	-10%
2	Outpatient Endoscopy Procedures	860	776	-84	-10%
	<b>Total Endoscopy Procedures</b>	<b>956</b>	<b>862</b>	<b>-94</b>	<b>-10%</b>
<b>K. Hospital Emergency Room Visits</b>					
1	Emergency Room Visits: Treated and Admitted	1,593	1,561	-32	-2%
2	Emergency Room Visits: Treated and Discharged	14,825	14,819	-6	0%
	<b>Total Emergency Room Visits</b>	<b>16,418</b>	<b>16,380</b>	<b>-38</b>	<b>0%</b>
<b>L. Hospital Clinic Visits</b>					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	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	468	383	-85	-18%
13	Specialty Clinic Visits - Other Speciality Clinics	1,669	1,652	-17	-1%
	<b>Total Hospital Clinic Visits</b>	<b>2,137</b>	<b>2,035</b>	<b>-102</b>	<b>-5%</b>
<b>M. Other Hospital Outpatient Visits</b>					
1	Rehabilitation (PT/OT/ST)	8,931	9,161	230	3%
2	Cardiac Rehabilitation	4,457	4,325	-132	-3%
3	Chemotherapy	468	1,131	663	142%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	47,995	47,531	-464	-1%
	<b>Total Other Hospital Outpatient Visits</b>	<b>61,851</b>	<b>62,148</b>	<b>297</b>	<b>0%</b>
<b>N. Hospital Full Time Equivalent Employees</b>					
1	Total Nursing FTEs	102.6	95.0	-7.6	-7%
2	Total Physician FTEs	0.0	0.0	0.0	0%
3	Total Non-Nursing and Non-Physician FTEs	157.0	158.9	1.9	1%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>259.6</b>	<b>253.9</b>	<b>-5.7</b>	<b>-2%</b>

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2014</u>	<u>ACTUAL FY 2015</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>A. Outpatient Surgical Procedures</b>					
1	Sharon Hospital	1,297	1,271	-26	-2%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>1,297</b>	<b>1,271</b>	<b>-26</b>	<b>-2%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	Sharon Hospital	860	776	-84	-10%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>860</b>	<b>776</b>	<b>-84</b>	<b>-10%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	Sharon Hospital	14,825	14,819	-6	0%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>14,825</b>	<b>14,819</b>	<b>-6</b>	<b>0%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

ESSENT-SHARON HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$38,229,340	\$36,430,178	(\$1,799,162)	-5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$16,145,227	\$15,328,148	(\$817,079)	-5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	42.23%	42.08%	-0.16%	0%
4	DISCHARGES	1,461	1,410	(51)	-3%
5	CASE MIX INDEX (CMI)	1.19620	1.17200	(0.02420)	-2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,747.64820	1,652.52000	(95.12820)	-5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,238.26	\$9,275.62	\$37.36	0%
8	PATIENT DAYS	8,225	7,687	(538)	-7%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,962.95	\$1,994.04	\$31.09	2%
10	AVERAGE LENGTH OF STAY	5.6	5.5	(0.2)	-3%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$35,294,487	\$34,940,236	(\$354,251)	-1%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,500,871	\$7,089,829	(\$411,042)	-5%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.25%	20.29%	-0.96%	-5%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	92.32%	95.91%	3.59%	4%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,348.83954	1,352.33302	3.49348	0%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,560.98	\$5,242.66	(\$318.32)	-6%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$73,523,827	\$71,370,414	(\$2,153,413)	-3%
18	TOTAL ACCRUED PAYMENTS	\$23,646,098	\$22,417,977	(\$1,228,121)	-5%
19	TOTAL ALLOWANCES	\$49,877,729	\$48,952,437	(\$925,292)	-2%
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b>NON-GOVERNMENT INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$12,430,476	\$9,870,758	(\$2,559,718)	-21%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,086,670	\$4,688,042	(\$398,628)	-8%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	40.92%	47.49%	6.57%	16%
4	DISCHARGES	703	647	(56)	-8%
5	CASE MIX INDEX (CMI)	0.92370	0.87690	(0.04680)	-5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	649.36110	567.35430	(82.00680)	-13%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,833.35	\$8,262.99	\$429.64	5%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	\$1,404.91	\$1,012.63	(\$392.28)	-28%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$912,296	\$574,521	(\$337,775)	-37%
10	PATIENT DAYS	2,110	1,868	(242)	-11%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,410.74	\$2,509.66	\$98.91	4%
12	AVERAGE LENGTH OF STAY	3.0	2.9	(0.1)	-4%
<b>NON-GOVERNMENT OUTPATIENT</b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$39,811,467	\$41,221,496	\$1,410,029	4%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$16,229,069	\$17,242,979	\$1,013,910	6%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	40.76%	41.83%	1.07%	3%

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
16	OUTPATIENT CHARGES / INPATIENT CHARGES	320.27%	417.61%	97.34%	30%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,251.51968	2,701.95135	450.43167	20%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,208.05	\$6,381.68	(\$826.37)	-11%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$1,647.07)	(\$1,139.01)	\$508.06	-31%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$3,708,411)	(\$3,077,553)	\$630,858	-17%
<b><u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u></b>					
21	TOTAL ACCRUED CHARGES	\$52,241,943	\$51,092,254	(\$1,149,689)	-2%
22	TOTAL ACCRUED PAYMENTS	\$21,315,739	\$21,931,021	\$615,282	3%
23	TOTAL ALLOWANCES	\$30,926,204	\$29,161,233	(\$1,764,971)	-6%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,796,115)	(\$2,503,032)	\$293,083	-10%
<b><u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u></b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$52,241,943	\$51,092,254	(\$1,149,689)	-2%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$25,479,835	\$25,835,394	\$355,559	1%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$26,762,108	\$25,256,860	(\$1,505,248)	-6%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	51.23%	49.43%	-1.79%	
<b><u>C. UNINSURED</u></b>					
<b><u>UNINSURED INPATIENT</u></b>					
1	INPATIENT ACCRUED CHARGES	\$456,951	\$365,024	(\$91,927)	-20%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$36,844	\$5,900	(\$30,944)	-84%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	8.06%	1.62%	-6.45%	-80%
4	DISCHARGES	40	45	5	13%
5	CASE MIX INDEX (CMI)	0.75600	0.73840	(0.01760)	-2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	30.24000	33.22800	2.98800	10%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,218.39	\$177.56	(\$1,040.83)	-85%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$6,614.96	\$8,085.43	\$1,470.47	22%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$8,019.87	\$9,098.06	\$1,078.19	13%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$242,521	\$302,310	\$59,789	25%
11	PATIENT DAYS	93	124	31	33%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$396.17	\$47.58	(\$348.59)	-88%
13	AVERAGE LENGTH OF STAY	2.3	2.8	0.4	19%
<b><u>UNINSURED OUTPATIENT</u></b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,398,137	\$2,051,499	(\$346,638)	-14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$242,542	\$224,891	(\$17,651)	-7%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	10.11%	10.96%	0.85%	8%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	524.81%	562.02%	37.20%	7%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	209.92509	252.90790	42.98281	20%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,155.37	\$889.22	(\$266.15)	-23%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$6,052.68	\$5,492.46	(\$560.22)	-9%
21	MEDICARE - UNINSURED OP PMT / OPED	\$4,405.61	\$4,353.44	(\$52.16)	-1%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$924,847	\$1,101,020	\$176,173	19%
<b><u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u></b>					
23	TOTAL ACCRUED CHARGES	\$2,855,088	\$2,416,523	(\$438,565)	-15%

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<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
24	TOTAL ACCRUED PAYMENTS	\$279,386	\$230,791	(\$48,595)	-17%
25	TOTAL ALLOWANCES	\$2,575,702	\$2,185,732	(\$389,970)	-15%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,167,368	\$1,403,331	\$235,962	20%
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$3,849,691	\$3,561,353	(\$288,338)	-7%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$993,888	\$1,001,592	\$7,704	1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.82%	28.12%	2.31%	9%
4	DISCHARGES	235	219	(16)	-7%
5	CASE MIX INDEX (CMI)	0.93440	0.93510	0.00070	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	219.58400	204.78690	(14.79710)	-7%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,526.23	\$4,890.90	\$364.67	8%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,307.11	\$3,372.09	\$64.98	2%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$4,712.03	\$4,384.72	(\$327.31)	-7%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,034,686	\$897,934	(\$136,752)	-13%
11	PATIENT DAYS	711	795	84	12%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,397.87	\$1,259.86	(\$138.01)	-10%
13	AVERAGE LENGTH OF STAY	3.0	3.6	0.6	20%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$6,879,873	\$8,023,925	\$1,144,052	17%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,453,468	\$1,560,189	\$106,721	7%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.13%	19.44%	-1.68%	-8%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	178.71%	225.31%	46.59%	26%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	419.97401	493.41910	73.44509	17%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,460.85	\$3,162.00	(\$298.86)	-9%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$3,747.20	\$3,219.68	(\$527.52)	-14%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,100.13	\$2,080.67	(\$19.46)	-1%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$881,999	\$1,026,642	\$144,643	16%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$10,729,564	\$11,585,278	\$855,714	8%
24	TOTAL ACCRUED PAYMENTS	\$2,447,356	\$2,561,781	\$114,425	5%
25	TOTAL ALLOWANCES	\$8,282,208	\$9,023,497	\$741,289	9%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,916,685	\$1,924,576	\$7,890	0%
<b>E. OTHER MEDICAL ASSISTANCE (O.M.A.)</b>					
<b>OTHER MEDICAL ASSISTANCE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$3,308,200	\$3,593,563	\$285,363	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,236,898	\$1,337,350	\$100,452	8%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	37.39%	37.22%	-0.17%	0%
4	DISCHARGES	212	179	(33)	-16%
5	CASE MIX INDEX (CMI)	0.87750	1.00690	0.12940	15%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	186.03000	180.23510	(5.79490)	-3%

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<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,648.92	\$7,420.03	\$771.11	12%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$1,184.43	\$842.96	(\$341.47)	-29%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$2,589.34	\$1,855.59	(\$733.75)	-28%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$481,695	\$334,442	(\$147,253)	-31%
11	PATIENT DAYS	634	657	23	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,950.94	\$2,035.54	\$84.60	4%
13	AVERAGE LENGTH OF STAY	3.0	3.7	0.7	23%
<b><u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u></b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$5,144,701	\$5,718,656	\$573,955	11%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$621,811	\$731,317	\$109,506	18%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	12.09%	12.79%	0.70%	6%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	155.51%	159.14%	3.62%	2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	329.68884	284.85362	(44.83522)	-14%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,886.05	\$2,567.34	\$681.29	36%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$5,322.00	\$3,814.33	(\$1,507.66)	-28%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$3,674.93	\$2,675.32	(\$999.61)	-27%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,211,582	\$762,075	(\$449,507)	-37%
<b><u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>					
23	TOTAL ACCRUED CHARGES	\$8,452,901	\$9,312,219	\$859,318	10%
24	TOTAL ACCRUED PAYMENTS	\$1,858,709	\$2,068,667	\$209,958	11%
25	TOTAL ALLOWANCES	\$6,594,192	\$7,243,552	\$649,360	10%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$1,693,278	\$1,096,517	(\$596,760)	-35%
<b>F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>					
<b><u>TOTAL MEDICAL ASSISTANCE INPATIENT</u></b>					
1	INPATIENT ACCRUED CHARGES	\$7,157,891	\$7,154,916	(\$2,975)	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$2,230,786	\$2,338,942	\$108,156	5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	31.17%	32.69%	1.52%	5%
4	DISCHARGES	447	398	(49)	-11%
5	CASE MIX INDEX (CMI)	0.90741	0.96739	0.05998	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	405.61400	385.02200	(20.59200)	-5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,499.78	\$6,074.83	\$575.05	10%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,333.57	\$2,188.16	(\$145.41)	-6%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,738.48	\$3,200.79	(\$537.69)	-14%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,516,381	\$1,232,376	(\$284,005)	-19%
11	PATIENT DAYS	1,345	1,452	107	8%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,658.58	\$1,610.84	(\$47.74)	-3%
13	AVERAGE LENGTH OF STAY	3.0	3.6	0.6	21%
<b><u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u></b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$12,024,574	\$13,742,581	\$1,718,007	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,075,279	\$2,291,506	\$216,227	10%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.26%	16.67%	-0.58%	-3%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	167.99%	192.07%	24.08%	14%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	749.66284	778.27271	28.60987	4%



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<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,768.28	\$2,944.35	\$176.07	6%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,439.77	\$3,437.33	(\$1,002.44)	-23%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,792.70	\$2,298.32	(\$494.38)	-18%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,093,582	\$1,788,717	(\$304,865)	-15%
<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$19,182,465	\$20,897,497	\$1,715,032	9%
24	TOTAL ACCRUED PAYMENTS	\$4,306,065	\$4,630,448	\$324,383	8%
25	TOTAL ALLOWANCES	\$14,876,400	\$16,267,049	\$1,390,649	9%
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$38,140	\$68,340	\$30,200	79%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$24,273	\$50,049	\$25,776	106%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	63.64%	73.24%	9.59%	15%
4	DISCHARGES	5	11	6	120%
5	CASE MIX INDEX (CMI)	0.68860	0.87500	0.18640	27%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3.44300	9.62500	6.18200	180%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,049.96	\$5,199.90	(\$1,850.06)	-26%
8	PATIENT DAYS	10	22	12	120%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,427.30	\$2,274.95	(\$152.35)	-6%
10	AVERAGE LENGTH OF STAY	2.0	2.0	-	0%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$185,972	\$177,520	(\$8,452)	-5%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$40,711	\$35,754	(\$4,957)	-12%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$224,112	\$245,860	\$21,748	10%
14	TOTAL ACCRUED PAYMENTS	\$64,984	\$85,803	\$20,819	32%
15	TOTAL ALLOWANCES	\$159,128	\$160,057	\$929	1%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$1,092,483	\$851,556	(\$240,927)	-22%
2	TOTAL OPERATING EXPENSES	\$48,236,048	\$50,076,702	\$1,840,654	4%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
<b>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</b>					
4	CHARITY CARE (CHARGES)	\$892,961	\$741,722	(\$151,239)	-17%
5	BAD DEBTS (CHARGES)	\$2,270,701	\$1,930,565	(\$340,136)	-15%
6	UNCOMPENSATED CARE (CHARGES)	\$3,163,662	\$2,672,287	(\$491,375)	-16%
7	COST OF UNCOMPENSATED CARE	\$1,075,085	\$923,794	(\$151,290)	-14%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$19,182,465	\$20,897,497	\$1,715,032	9%
9	TOTAL ACCRUED PAYMENTS	\$4,306,065	\$4,630,448	\$324,383	8%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$6,518,641	\$7,224,145	\$705,504	11%

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LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,212,576	\$2,593,697	\$381,121	17%
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$57,855,847	\$53,524,192	(\$4,331,655)	-7%
2	TOTAL INPATIENT PAYMENTS	\$23,486,956	\$22,405,181	(\$1,081,775)	-5%
3	TOTAL INPATIENT PAYMENTS / CHARGES	40.60%	41.86%	1.26%	3%
4	TOTAL DISCHARGES	2,616	2,466	(150)	-6%
5	TOTAL CASE MIX INDEX	1.07266	1.06023	(0.01243)	-1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	2,806.06630	2,614.52130	(191.54500)	-7%
7	TOTAL OUTPATIENT CHARGES	\$87,316,500	\$90,081,833	\$2,765,333	3%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	150.92%	168.30%	17.38%	12%
9	TOTAL OUTPATIENT PAYMENTS	\$25,845,930	\$26,660,068	\$814,138	3%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.60%	29.60%	0.00%	0%
11	TOTAL CHARGES	\$145,172,347	\$143,606,025	(\$1,566,322)	-1%
12	TOTAL PAYMENTS	\$49,332,886	\$49,065,249	(\$267,637)	-1%
13	TOTAL PAYMENTS / TOTAL CHARGES	33.98%	34.17%	0.18%	1%
14	PATIENT DAYS	11,690	11,029	(661)	-6%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$45,425,371	\$43,653,434	(\$1,771,937)	-4%
2	INPATIENT PAYMENTS	\$18,400,286	\$17,717,139	(\$683,147)	-4%
3	GOVT. INPATIENT PAYMENTS / CHARGES	40.51%	40.59%	0.08%	0%
4	DISCHARGES	1,913	1,819	(94)	-5%
5	CASE MIX INDEX	1.12739	1.12544	(0.00196)	0%
6	CASE MIX ADJUSTED DISCHARGES	2,156.70520	2,047.16700	(109.53820)	-5%
7	OUTPATIENT CHARGES	\$47,505,033	\$48,860,337	\$1,355,304	3%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	104.58%	111.93%	7.35%	7%
9	OUTPATIENT PAYMENTS	\$9,616,861	\$9,417,089	(\$199,772)	-2%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.24%	19.27%	-0.97%	-5%
11	TOTAL CHARGES	\$92,930,404	\$92,513,771	(\$416,633)	0%
12	TOTAL PAYMENTS	\$28,017,147	\$27,134,228	(\$882,919)	-3%
13	TOTAL PAYMENTS / CHARGES	30.15%	29.33%	-0.82%	-3%
14	PATIENT DAYS	9,580	9,161	(419)	-4%
15	TOTAL GOVERNMENT DEDUCTIONS	\$64,913,257	\$65,379,543	\$466,286	1%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	5.6	5.5	(0.2)	-3%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.0	2.9	(0.1)	-4%
3	UNINSURED	2.3	2.8	0.4	19%
4	MEDICAID	3.0	3.6	0.6	20%
5	OTHER MEDICAL ASSISTANCE	3.0	3.7	0.7	23%
6	CHAMPUS / TRICARE	2.0	2.0	-	0%
7	TOTAL AVERAGE LENGTH OF STAY	4.5	4.5	0.0	0%
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$145,172,347	\$143,606,025	(\$1,566,322)	-1%
2	TOTAL GOVERNMENT DEDUCTIONS	\$64,913,257	\$65,379,543	\$466,286	1%

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<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
3	UNCOMPENSATED CARE	\$3,163,662	\$2,672,287	(\$491,375)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$26,762,108	\$25,256,860	(\$1,505,248)	-6%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,000,434	\$653,554	(\$346,880)	-35%
6	TOTAL ADJUSTMENTS	\$95,839,461	\$93,962,244	(\$1,877,217)	-2%
7	TOTAL ACCRUED PAYMENTS	\$49,332,886	\$49,643,781	\$310,895	1%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$49,332,886	\$49,643,781	\$310,895	1%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3398228865	0.3456942771	0.0058713906	2%
11	COST OF UNCOMPENSATED CARE	\$1,075,085	\$923,794	(\$151,290)	-14%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,212,576	\$2,593,697	\$381,121	17%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$3,287,660	\$3,517,491	\$229,831	7%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$881,999	\$1,026,642	\$144,643	16%
2	OTHER MEDICAL ASSISTANCE	\$1,693,278	\$1,096,517	(\$596,760)	-35%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,167,368	\$1,403,331	\$235,962	20%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,742,646	\$3,526,490	(\$216,155)	-6%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,748,963	\$1,159,710	(\$589,253)	-33.69%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$753,030	\$420,328	(\$332,702)	-44.18%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$50,085,912	\$49,485,574	(\$600,338)	-1.20%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$145,172,348	\$143,606,025	(\$1,566,323)	-1.08%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$3,163,662	\$2,672,287	(\$491,375)	-15.53%

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BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,430,476	\$9,870,758	(\$2,559,718)
2	MEDICARE	\$38,229,340	36,430,178	(\$1,799,162)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,157,891	7,154,916	(\$2,975)
4	MEDICAID	\$3,849,691	3,561,353	(\$288,338)
5	OTHER MEDICAL ASSISTANCE	\$3,308,200	3,593,563	\$285,363
6	CHAMPUS / TRICARE	\$38,140	68,340	\$30,200
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$456,951	365,024	(\$91,927)
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$45,425,371</b>	<b>\$43,653,434</b>	<b>(\$1,771,937)</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$57,855,847</b>	<b>\$53,524,192</b>	<b>(\$4,331,655)</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$39,811,467	\$41,221,496	\$1,410,029
2	MEDICARE	\$35,294,487	34,940,236	(\$354,251)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$12,024,574	13,742,581	\$1,718,007
4	MEDICAID	\$6,879,873	8,023,925	\$1,144,052
5	OTHER MEDICAL ASSISTANCE	\$5,144,701	5,718,656	\$573,955
6	CHAMPUS / TRICARE	\$185,972	177,520	(\$8,452)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,398,137	2,051,499	(\$346,638)
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$47,505,033</b>	<b>\$48,860,337</b>	<b>\$1,355,304</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$87,316,500</b>	<b>\$90,081,833</b>	<b>\$2,765,333</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$52,241,943	\$51,092,254	(\$1,149,689)
2	TOTAL MEDICARE	\$73,523,827	\$71,370,414	(\$2,153,413)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$19,182,465	\$20,897,497	\$1,715,032
4	TOTAL MEDICAID	\$10,729,564	\$11,585,278	\$855,714
5	TOTAL OTHER MEDICAL ASSISTANCE	\$8,452,901	\$9,312,219	\$859,318
6	TOTAL CHAMPUS / TRICARE	\$224,112	\$245,860	\$21,748
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,855,088	\$2,416,523	(\$438,565)
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$92,930,404</b>	<b>\$92,513,771</b>	<b>(\$416,633)</b>
	<b>TOTAL CHARGES</b>	<b>\$145,172,347</b>	<b>\$143,606,025</b>	<b>(\$1,566,322)</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$5,086,627	\$4,688,042	(\$398,628)
2	MEDICARE	\$16,145,227	15,328,148	(\$817,079)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,230,786	2,338,942	\$108,156
4	MEDICAID	\$993,888	1,001,592	\$7,704
5	OTHER MEDICAL ASSISTANCE	\$1,236,898	1,337,350	\$100,452
6	CHAMPUS / TRICARE	\$24,273	50,049	\$25,776
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$36,844	5,900	(\$30,944)
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$18,400,286</b>	<b>\$17,717,139</b>	<b>(\$683,147)</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$23,486,956</b>	<b>\$22,405,181</b>	<b>(\$1,081,775)</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$16,229,069	\$17,242,979	\$1,013,910
2	MEDICARE	\$7,500,871	7,089,829	(\$411,042)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,075,279	2,291,506	\$216,227
4	MEDICAID	\$1,453,468	1,560,189	\$106,721
5	OTHER MEDICAL ASSISTANCE	\$621,811	731,317	\$109,506
6	CHAMPUS / TRICARE	\$40,711	35,754	(\$4,957)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$242,542	224,891	(\$17,651)
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$9,616,861</b>	<b>\$9,417,089</b>	<b>(\$199,772)</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$25,845,930</b>	<b>\$26,660,068</b>	<b>\$814,138</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$21,315,739	\$21,931,021	\$615,282
2	TOTAL MEDICARE	\$23,646,098	\$22,417,977	(\$1,228,121)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,306,065	\$4,630,448	\$324,383
4	TOTAL MEDICAID	\$2,447,356	\$2,561,781	\$114,425
5	TOTAL OTHER MEDICAL ASSISTANCE	\$1,858,709	\$2,068,667	\$209,958
6	TOTAL CHAMPUS / TRICARE	\$64,984	\$85,803	\$20,819
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$279,386	\$230,791	(\$48,595)
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$28,017,147</b>	<b>\$27,134,228</b>	<b>(\$882,919)</b>
	<b>TOTAL PAYMENTS</b>	<b>\$49,332,886</b>	<b>\$49,065,249</b>	<b>(\$267,637)</b>
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				

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LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8.56%	6.87%	-1.69%
2	MEDICARE	26.33%	25.37%	-0.97%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.93%	4.98%	0.05%
4	MEDICAID	2.65%	2.48%	-0.17%
5	OTHER MEDICAL ASSISTANCE	2.28%	2.50%	0.22%
6	CHAMPUS / TRICARE	0.03%	0.05%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.31%	0.25%	-0.06%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>31.29%</b>	<b>30.40%</b>	<b>-0.89%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>39.85%</b>	<b>37.27%</b>	<b>-2.58%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	27.42%	28.70%	1.28%
2	MEDICARE	24.31%	24.33%	0.02%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.28%	9.57%	1.29%
4	MEDICAID	4.74%	5.59%	0.85%
5	OTHER MEDICAL ASSISTANCE	3.54%	3.98%	0.44%
6	CHAMPUS / TRICARE	0.13%	0.12%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.65%	1.43%	-0.22%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>32.72%</b>	<b>34.02%</b>	<b>1.30%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>60.15%</b>	<b>62.73%</b>	<b>2.58%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10.31%	9.55%	-0.76%
2	MEDICARE	32.73%	31.24%	-1.49%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.52%	4.77%	0.25%
4	MEDICAID	2.01%	2.04%	0.03%
5	OTHER MEDICAL ASSISTANCE	2.51%	2.73%	0.22%
6	CHAMPUS / TRICARE	0.05%	0.10%	0.05%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.07%	0.01%	-0.06%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>37.30%</b>	<b>36.11%</b>	<b>-1.19%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>47.61%</b>	<b>45.66%</b>	<b>-1.95%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	32.90%	35.14%	2.25%
2	MEDICARE	15.20%	14.45%	-0.75%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.21%	4.67%	0.46%
4	MEDICAID	2.95%	3.18%	0.23%
5	OTHER MEDICAL ASSISTANCE	1.26%	1.49%	0.23%
6	CHAMPUS / TRICARE	0.08%	0.07%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.49%	0.46%	-0.03%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>19.49%</b>	<b>19.19%</b>	<b>-0.30%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>52.39%</b>	<b>54.34%</b>	<b>1.95%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	703	647	(56)
2	MEDICARE	1,461	1,410	(51)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	447	398	(49)
4	MEDICAID	235	219	(16)
5	OTHER MEDICAL ASSISTANCE	212	179	(33)
6	CHAMPUS / TRICARE	5	11	6
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	40	45	5
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>1,913</b>	<b>1,819</b>	<b>(94)</b>
	<b>TOTAL DISCHARGES</b>	<b>2,616</b>	<b>2,466</b>	<b>(150)</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,110	1,868	(242)
2	MEDICARE	8,225	7,687	(538)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,345	1,452	107
4	MEDICAID	711	795	84

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(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
5	OTHER MEDICAL ASSISTANCE	634	657	23
6	CHAMPUS / TRICARE	10	22	12
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	93	124	31
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>9,580</b>	<b>9,161</b>	<b>(419)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>11,690</b>	<b>11,029</b>	<b>(661)</b>
<b>C.</b>	<b>AVERAGE LENGTH OF STAY (ALOS)</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.0	2.9	(0.1)
2	MEDICARE	5.6	5.5	(0.2)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.0	3.6	0.6
4	MEDICAID	3.0	3.6	0.6
5	OTHER MEDICAL ASSISTANCE	3.0	3.7	0.7
6	CHAMPUS / TRICARE	2.0	2.0	-
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.3	2.8	0.4
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>5.0</b>	<b>5.0</b>	<b>0.0</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.5</b>	<b>4.5</b>	<b>0.0</b>
<b>D.</b>	<b>CASE MIX INDEX</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.92370	0.87690	(0.04680)
2	MEDICARE	1.19620	1.17200	(0.02420)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.90741	0.96739	0.05998
4	MEDICAID	0.93440	0.93510	0.00070
5	OTHER MEDICAL ASSISTANCE	0.87750	1.00690	0.12940
6	CHAMPUS / TRICARE	0.68860	0.87500	0.18640
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.75600	0.73840	(0.01760)
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.12739</b>	<b>1.12544</b>	<b>(0.00196)</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.07266</b>	<b>1.06023</b>	<b>(0.01243)</b>
<b>E.</b>	<b>OTHER REQUIRED DATA</b>			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$52,241,943	\$51,092,254	(\$1,149,689)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$25,479,835	\$25,835,394	\$355,559
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$26,762,108	\$25,256,860	(\$1,505,248)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	51.23%	49.43%	-1.79%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,748,963	\$1,159,710	(\$589,253)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,000,434	\$653,554	(\$346,880)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$892,961	\$741,722	(\$151,239)
9	BAD DEBTS	\$2,270,701	\$1,930,565	(\$340,136)
10	TOTAL UNCOMPENSATED CARE	\$3,163,662	\$2,672,287	(\$491,375)
11	TOTAL OTHER OPERATING REVENUE	\$1,092,483	\$851,556	(\$240,927)
12	TOTAL OPERATING EXPENSES	\$48,236,048	\$50,076,702	\$1,840,654
<b>IV.</b>	<b>DSH UPPER PAYMENT LIMIT CALCULATIONS</b>			
<b>A.</b>	<b>CASE MIX ADJUSTED DISCHARGES</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	649.36110	567.35430	(82.00680)
2	MEDICARE	1,747.64820	1,652.52000	(95.12820)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	405.61400	385.02200	(20.59200)
4	MEDICAID	219.58400	204.78690	(14.79710)
5	OTHER MEDICAL ASSISTANCE	186.03000	180.23510	(5.79490)
6	CHAMPUS / TRICARE	3.44300	9.62500	6.18200
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	30.24000	33.22800	2.98800
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>2,156.70520</b>	<b>2,047.16700</b>	<b>(109.53820)</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>2,806.06630</b>	<b>2,614.52130</b>	<b>(191.54500)</b>
<b>B.</b>	<b>OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,251.51968	2,701.95135	450.43167
2	MEDICARE	1,348.83954	1,352.33302	3.49348
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	749.66284	778.27271	28.60987
4	MEDICAID	419.97401	493.41910	73.44509
5	OTHER MEDICAL ASSISTANCE	329.68884	284.85362	-44.83522
6	CHAMPUS / TRICARE	24.38018	28.57360	4.19342

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(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	209.92509	252.90790	42.98281
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>2,122.88257</b>	<b>2,159.17934</b>	<b>36.29677</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>4,374.40224</b>	<b>4,861.13069</b>	<b>486.72845</b>
<b>C.</b>	<b>INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,833.35	\$8,262.99	\$429.64
2	MEDICARE	\$9,238.26	\$9,275.62	\$37.36
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,499.78	\$6,074.83	\$575.05
4	MEDICAID	\$4,526.23	\$4,890.90	\$364.67
5	OTHER MEDICAL ASSISTANCE	\$6,648.92	\$7,420.03	\$771.11
6	CHAMPUS / TRICARE	\$7,049.96	\$5,199.90	(\$1,850.06)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,218.39	\$177.56	(\$1,040.83)
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$8,531.66</b>	<b>\$8,654.47</b>	<b>\$122.80</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$8,370.06</b>	<b>\$8,569.52</b>	<b>\$199.45</b>
<b>D.</b>	<b>OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,208.05	\$6,381.68	(\$826.37)
2	MEDICARE	\$5,560.98	\$5,242.66	(\$318.32)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,768.28	\$2,944.35	\$176.07
4	MEDICAID	\$3,460.85	\$3,162.00	(\$298.86)
5	OTHER MEDICAL ASSISTANCE	\$1,886.05	\$2,567.34	\$681.29
6	CHAMPUS / TRICARE	\$1,669.84	\$1,251.29	(\$418.55)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,155.37	\$889.22	(\$266.15)
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$4,530.10</b>	<b>\$4,361.42</b>	<b>(\$168.68)</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$5,908.45</b>	<b>\$5,484.33</b>	<b>(\$424.11)</b>
<b>V.</b>	<b>CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>			
1	MEDICAID	\$881,999	\$1,026,642	\$144,643
2	OTHER MEDICAL ASSISTANCE	\$1,693,278	\$1,096,517	(\$596,760)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,167,368	\$1,403,331	\$235,962
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$3,742,646</b>	<b>\$3,526,490</b>	<b>(\$216,155)</b>
<b>VI.</b>	<b>CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>			
1	TOTAL CHARGES	\$145,172,347	\$143,606,025	(\$1,566,322)
2	TOTAL GOVERNMENT DEDUCTIONS	\$64,913,257	\$65,379,543	\$466,286
3	UNCOMPENSATED CARE	\$3,163,662	\$2,672,287	(\$491,375)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$26,762,108	\$25,256,860	(\$1,505,248)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,000,434	\$653,554	(\$346,880)
6	TOTAL ADJUSTMENTS	\$95,839,461	\$93,962,244	(\$1,877,217)
7	TOTAL ACCRUED PAYMENTS	\$49,332,886	\$49,643,781	\$310,895
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$49,332,886	\$49,643,781	\$310,895
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3398228865	0.3456942771	0.0058713906
11	COST OF UNCOMPENSATED CARE	\$1,075,085	\$923,794	(\$151,290)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$2,212,576	\$2,593,697	\$381,121
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$3,287,660	\$3,517,491	\$229,831
<b>VII.</b>	<b>RATIOS</b>			
<b>A.</b>	<b>RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	40.92%	47.49%	6.57%
2	MEDICARE	42.23%	42.08%	-0.16%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	31.17%	32.69%	1.52%
4	MEDICAID	25.82%	28.12%	2.31%
5	OTHER MEDICAL ASSISTANCE	37.39%	37.22%	-0.17%
6	CHAMPUS / TRICARE	63.64%	73.24%	9.59%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	8.06%	1.62%	-6.45%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>40.51%</b>	<b>40.59%</b>	<b>0.08%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>40.60%</b>	<b>41.86%</b>	<b>1.26%</b>
<b>B.</b>	<b>RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	40.76%	41.83%	1.07%

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>
	2 MEDICARE	21.25%	20.29%	-0.96%
	3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17.26%	16.67%	-0.58%
	4 MEDICAID	21.13%	19.44%	-1.68%
	5 OTHER MEDICAL ASSISTANCE	12.09%	12.79%	0.70%
	6 CHAMPUS / TRICARE	21.89%	20.14%	-1.75%
	7 UNINSURED (INCLUDED IN NON-GOVERNMENT)	10.11%	10.96%	0.85%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>			
		<b>20.24%</b>	<b>19.27%</b>	<b>-0.97%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>29.60%</b>	<b>29.60%</b>	<b>0.00%</b>
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
	1 TOTAL ACCRUED PAYMENTS	\$49,332,886	\$49,065,249	(\$267,637)
	2 PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$49,332,886</b>	<b>\$49,065,249</b>	<b>(\$267,637)</b>
	3 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$753,030	\$420,328	(\$332,702)
	<b>4 CALCULATED NET REVENUE</b>	<b>\$53,105,146</b>	<b>\$49,485,577</b>	<b>(\$3,619,569)</b>
	5 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$50,085,912	\$49,485,574	(\$600,338)
	<b>6 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$3,019,234</b>	<b>\$3</b>	<b>(\$3,019,231)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
	1 OHCA DEFINED GROSS REVENUE	\$145,172,347	\$143,606,025	(\$1,566,322)
	2 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>3 CALCULATED GROSS REVENUE</b>	<b>\$145,172,347</b>	<b>\$143,606,025</b>	<b>(\$1,566,322)</b>
	4 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$145,172,348	\$143,606,025	(\$1,566,323)
	<b>5 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$1)</b>	<b>\$0</b>	<b>\$1</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
	1 OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,163,662	\$2,672,287	(\$491,375)
	2 PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	<b>3 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$3,163,662</b>	<b>\$2,672,287</b>	<b>(\$491,375)</b>
	4 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$3,163,662	\$2,672,287	(\$491,375)
	<b>5 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>



<b>ESSENT-SHARON HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2015</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2015</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,870,758
2	MEDICARE	36,430,178
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7,154,916
4	MEDICAID	3,561,353
5	OTHER MEDICAL ASSISTANCE	3,593,563
6	CHAMPUS / TRICARE	68,340
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	365,024
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$43,653,434</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$53,524,192</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$41,221,496
2	MEDICARE	34,940,236
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13,742,581
4	MEDICAID	8,023,925
5	OTHER MEDICAL ASSISTANCE	5,718,656
6	CHAMPUS / TRICARE	177,520
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,051,499
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$48,860,337</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$90,081,833</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$51,092,254
2	TOTAL GOVERNMENT ACCRUED CHARGES	92,513,771
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$143,606,025</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$4,688,042
2	MEDICARE	15,328,148
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,338,942
4	MEDICAID	1,001,592
5	OTHER MEDICAL ASSISTANCE	1,337,350
6	CHAMPUS / TRICARE	50,049
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,900
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$17,717,139</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$22,405,181</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$17,242,979
2	MEDICARE	7,089,829
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,291,506
4	MEDICAID	1,560,189
5	OTHER MEDICAL ASSISTANCE	731,317
6	CHAMPUS / TRICARE	35,754
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	224,891
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$9,417,089</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$26,660,068</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$21,931,021
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	27,134,228
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$49,065,249</b>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	647
2	MEDICARE	1,410
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	398
4	MEDICAID	219
5	OTHER MEDICAL ASSISTANCE	179
6	CHAMPUS / TRICARE	11

<b>ESSENT-SHARON HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2015</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2015</b>
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	45
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>1,819</b>
	<b>TOTAL DISCHARGES</b>	<b>2,466</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.87690
2	MEDICARE	1.17200
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.96739
4	MEDICAID	0.93510
5	OTHER MEDICAL ASSISTANCE	1.00690
6	CHAMPUS / TRICARE	0.87500
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.73840
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.12544</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.06023</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$51,092,254
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$25,835,394
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$25,256,860
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.43%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,159,710
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$653,554
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$741,722
9	BAD DEBTS	\$1,930,565
10	TOTAL UNCOMPENSATED CARE	\$2,672,287
11	TOTAL OTHER OPERATING REVENUE	\$851,556
12	TOTAL OPERATING EXPENSES	\$50,076,702
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$49,065,249
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$49,065,249</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$420,328
	<b>CALCULATED NET REVENUE</b>	<b>\$49,485,577</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$49,485,574
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$3</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$143,606,025
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$143,606,025</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$143,606,025
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$2,672,287
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$2,672,287</b>

<b>ESSENT-SHARON HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2015</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2015</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$2,672,287
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 650 - HOSPITAL UNCOMPENSATED CARE</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. <u>Hospital Charity Care (from HRS Report 500)</u></b>					
1	Number of Applicants	132	130	(2)	-2%
2	Number of Approved Applicants	132	126	(6)	-5%
3	<b>Total Charges (A)</b>	<b>\$892,961</b>	<b>\$741,722</b>	<b>(\$151,239)</b>	<b>-17%</b>
4	<b>Average Charges</b>	<b>\$6,765</b>	<b>\$5,887</b>	<b>(\$878)</b>	<b>-13%</b>
5	Ratio of Cost to Charges (RCC)	0.334087	0.329786	(0.004301)	-1%
6	<b>Total Cost</b>	<b>\$298,327</b>	<b>\$244,610</b>	<b>(\$53,717)</b>	<b>-18%</b>
7	<b>Average Cost</b>	<b>\$2,260</b>	<b>\$1,941</b>	<b>(\$319)</b>	<b>-14%</b>
8	Charity Care - Inpatient Charges	\$387,683	\$263,589	(\$124,094)	-32%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	264,618	214,674	(49,944)	-19%
10	Charity Care - Emergency Department Charges	240,660	263,459	22,799	9%
11	<b>Total Charges (A)</b>	<b>\$892,961</b>	<b>\$741,722</b>	<b>(\$151,239)</b>	<b>-17%</b>
12	Charity Care - Number of Patient Days	176	260	84	48%
13	Charity Care - Number of Discharges	49	63	14	29%
14	Charity Care - Number of Outpatient ED Visits	306	408	102	33%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	315	277	(38)	-12%
<b>B. <u>Hospital Bad Debts (from HRS Report 500)</u></b>					
1	Bad Debts - Inpatient Services	\$179,470	\$128,821	(\$50,649)	-28%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	663,740	672,903	9,163	1%
3	Bad Debts - Emergency Department	1,427,491	1,128,841	(298,650)	-21%
4	<b>Total Bad Debts (A)</b>	<b>\$2,270,701</b>	<b>\$1,930,565</b>	<b>(\$340,136)</b>	<b>-15%</b>
<b>C. <u>Hospital Uncompensated Care (from HRS Report 500)</u></b>					
1	Charity Care (A)	\$892,961	\$741,722	(\$151,239)	-17%
2	Bad Debts (A)	2,270,701	1,930,565	(340,136)	-15%
3	<b>Total Uncompensated Care (A)</b>	<b>\$3,163,662</b>	<b>\$2,672,287</b>	<b>(\$491,375)</b>	<b>-16%</b>
4	Uncompensated Care - Inpatient Services	\$567,153	\$392,410	(\$174,743)	-31%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	928,358	887,577	(40,781)	-4%
6	Uncompensated Care - Emergency Department	1,668,151	1,392,300	(275,851)	-17%
7	<b>Total Uncompensated Care (A)</b>	<b>\$3,163,662</b>	<b>\$2,672,287</b>	<b>(\$491,375)</b>	<b>-16%</b>

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

ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015		
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL</u> <u>NON-GOVERNMENT</u>	<u>ACTUAL TOTAL</u> <u>NON-GOVERNMENT</u>	<u>AMOUNT</u> <u>DIFFERENCE</u>	<u>%</u> <u>DIFFERENCE</u>
	<b><u>COMMERCIAL - ALL PAYERS</u></b>				
1	Total Gross Revenue	\$52,241,943	\$51,092,254	(\$1,149,689)	-2%
2	Total Contractual Allowances	\$26,762,108	\$25,256,860	(\$1,505,248)	-6%
	<b>Total Accrued Payments (A)</b>	<b>\$25,479,835</b>	<b>\$25,835,394</b>	<b>\$355,559</b>	<b>1%</b>
	<b>Total Discount Percentage</b>	<b>51.23%</b>	<b>49.43%</b>	<b>-1.79%</b>	<b>-4%</b>
<b>(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.</b>					

ESSENT-SHARON HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	ACTUAL FY 2015
<b>A.</b>	<b><u>Gross and Net Revenue</u></b>			
1	Inpatient Gross Revenue	\$61,394,562	\$57,855,847	\$53,524,192
2	Outpatient Gross Revenue	\$86,046,480	\$87,316,500	\$90,081,833
3	Total Gross Patient Revenue	\$147,441,042	\$145,172,347	\$143,606,025
4	Net Patient Revenue	\$53,746,903	\$50,085,913	\$49,485,574
<b>B.</b>	<b><u>Total Operating Expenses</u></b>			
1	Total Operating Expense	\$49,401,485	\$48,236,048	\$50,076,702
<b>C.</b>	<b><u>Utilization Statistics</u></b>			
1	Patient Days	12,338	11,690	11,029
2	Discharges	2,878	2,616	2,466
3	Average Length of Stay	4.3	4.5	4.5
4	Equivalent (Adjusted) Patient Days (EPD)	29,630	29,333	29,591
0	Equivalent (Adjusted) Discharges (ED)	6,912	6,564	6,616
<b>D.</b>	<b><u>Case Mix Statistics</u></b>			
1	Case Mix Index	1.09476	1.07266	1.06023
2	Case Mix Adjusted Patient Days (CMAPD)	13,507	12,539	11,693
3	Case Mix Adjusted Discharges (CMAD)	3,151	2,806	2,615
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	32,438	31,464	31,373
5	Case Mix Adjusted Equivalent Discharges (CMAED)	7,567	7,041	7,015
<b>E.</b>	<b><u>Gross Revenue Per Statistic</u></b>			
1	Total Gross Revenue per Patient Day	\$11,950	\$12,419	\$13,021
2	Total Gross Revenue per Discharge	\$51,230	\$55,494	\$58,234
3	Total Gross Revenue per EPD	\$4,976	\$4,949	\$4,853
4	Total Gross Revenue per ED	\$21,332	\$22,116	\$21,705
5	Total Gross Revenue per CMAEPD	\$4,545	\$4,614	\$4,577
6	Total Gross Revenue per CMAED	\$19,486	\$20,618	\$20,472
7	Inpatient Gross Revenue per EPD	\$2,072	\$1,972	\$1,809
8	Inpatient Gross Revenue per ED	\$8,883	\$8,814	\$8,090

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(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2013</u>	<u>ACTUAL FY 2014</u>	<u>ACTUAL FY 2015</u>
<b>F.</b>	<b><u>Net Revenue Per Statistic</u></b>			
1	Net Patient Revenue per Patient Day	\$4,356	\$4,285	\$4,487
2	Net Patient Revenue per Discharge	\$18,675	\$19,146	\$20,067
3	Net Patient Revenue per EPD	\$1,814	\$1,708	\$1,672
4	Net Patient Revenue per ED	\$7,776	\$7,630	\$7,479
5	Net Patient Revenue per CMAEPD	\$1,657	\$1,592	\$1,577
6	Net Patient Revenue per CMAED	\$7,103	\$7,113	\$7,054
<b>G.</b>	<b><u>Operating Expense Per Statistic</u></b>			
1	Total Operating Expense per Patient Day	\$4,004	\$4,126	\$4,540
2	Total Operating Expense per Discharge	\$17,165	\$18,439	\$20,307
3	Total Operating Expense per EPD	\$1,667	\$1,644	\$1,692
4	Total Operating Expense per ED	\$7,148	\$7,348	\$7,569
5	Total Operating Expense per CMAEPD	\$1,523	\$1,533	\$1,596
6	Total Operating Expense per CMAED	\$6,529	\$6,851	\$7,139
<b>H.</b>	<b><u>Nursing Salary and Fringe Benefits Expense</u></b>			
1	Nursing Salary Expense	\$6,922,138	\$7,183,819	\$7,190,589
2	Nursing Fringe Benefits Expense	\$1,697,890	\$1,803,117	\$1,799,542
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$8,620,028</b>	<b>\$8,986,936</b>	<b>\$8,990,131</b>
<b>I.</b>	<b><u>Physician Salary and Fringe Expense</u></b>			
1	Physician Salary Expense	\$0	\$0	\$0
2	Physician Fringe Benefits Expense	\$0	\$0	\$0
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>J.</b>	<b><u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u></b>			
1	Non-Nursing, Non-Physician Salary Expense	\$10,327,838	\$9,839,922	\$10,128,047
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$2,533,292	\$2,469,797	\$2,338,758
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$12,861,130</b>	<b>\$12,309,719</b>	<b>\$12,466,805</b>

ESSENT-SHARON HOSPITAL				
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REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	ACTUAL FY 2015
<b>K.</b>	<b>Total Salary and Fringe Benefits Expense</b>			
1	Total Salary Expense	\$17,249,976	\$17,023,741	\$17,318,636
2	Total Fringe Benefits Expense	\$4,231,182	\$4,272,914	\$4,138,300
<b>3</b>	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$21,481,158</b>	<b>\$21,296,655</b>	<b>\$21,456,936</b>
<b>L.</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>			
1	Total Nursing FTEs	95.5	102.6	95.0
2	Total Physician FTEs	0.0	0.0	0.0
3	Total Non-Nursing, Non-Physician FTEs	151.9	157.0	158.9
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>247.4</b>	<b>259.6</b>	<b>253.9</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$72,483	\$70,018	\$75,690
2	Nursing Fringe Benefits Expense per FTE	\$17,779	\$17,574	\$18,943
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$90,262</b>	<b>\$87,592</b>	<b>\$94,633</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$0	\$0	\$0
2	Physician Fringe Benefits Expense per FTE	\$0	\$0	\$0
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>O.</b>	<b>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$67,991	\$62,675	\$63,738
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$16,677	\$15,731	\$14,718
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$84,668</b>	<b>\$78,406</b>	<b>\$78,457</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$69,725	\$65,577	\$68,210
2	Total Fringe Benefits Expense per FTE	\$17,103	\$16,460	\$16,299
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$86,828</b>	<b>\$82,036</b>	<b>\$84,509</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			



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<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,741	\$1,822	\$1,946
2	Total Salary and Fringe Benefits Expense per Discharge	\$7,464	\$8,141	\$8,701
3	Total Salary and Fringe Benefits Expense per EPD	\$725	\$726	\$725
4	Total Salary and Fringe Benefits Expense per ED	\$3,108	\$3,244	\$3,243
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$662	\$677	\$684
6	Total Salary and Fringe Benefits Expense per CMAED	\$2,839	\$3,025	\$3,059