

LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$301,175	\$6,917,676	\$6,616,501	2197%
2	Short Term Investments	\$130,950,161	\$128,450,331	(\$2,499,830)	-2%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$33,778,305	\$36,289,187	\$2,510,882	7%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$1,434,568	\$2,064,619	\$630,051	44%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$5,845,470	\$6,580,753	\$735,283	13%
8	Prepaid Expenses	\$2,256,097	\$2,689,506	\$433,409	19%
9	Other Current Assets	\$18,938,816	\$5,460,822	(\$13,477,994)	-71%
	<b>Total Current Assets</b>	<b>\$193,504,592</b>	<b>\$188,452,894</b>	<b>(\$5,051,698)</b>	<b>-3%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$985,034	\$925,227	(\$59,807)	-6%
2	Board Designated for Capital Acquisition	\$9,541,685	\$561,676	(\$8,980,009)	-94%
3	Funds Held in Escrow	\$2,247,255	\$0	(\$2,247,255)	-100%
4	Other Noncurrent Assets Whose Use is Limited	\$24,899,264	\$26,176,209	\$1,276,945	5%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$37,673,238</b>	<b>\$27,663,112</b>	<b>(\$10,010,126)</b>	<b>-27%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$1,776,176	\$18,852,471	\$17,076,295	961%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$361,545,084	\$424,781,064	\$63,235,980	17%
2	Less: Accumulated Depreciation	\$245,331,839	\$265,615,131	\$20,283,292	8%
	<b>Property, Plant and Equipment, Net</b>	<b>\$116,213,245</b>	<b>\$159,165,933</b>	<b>\$42,952,688</b>	<b>37%</b>
3	Construction in Progress	\$45,776,965	\$1,691,863	(\$44,085,102)	-96%
	<b>Total Net Fixed Assets</b>	<b>\$161,990,210</b>	<b>\$160,857,796</b>	<b>(\$1,132,414)</b>	<b>-1%</b>
	<b>Total Assets</b>	<b>\$394,944,216</b>	<b>\$395,826,273</b>	<b>\$882,057</b>	<b>0%</b>

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<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$34,966,367	\$36,760,174	\$1,793,807	5%
2	Salaries, Wages and Payroll Taxes	\$4,108,644	\$5,728,350	\$1,619,706	39%
3	Due To Third Party Payers	\$3,826,094	\$5,165,225	\$1,339,131	35%
4	Due To Affiliates	\$1,867,732	\$2,215,430	\$347,698	19%
5	Current Portion of Long Term Debt	\$4,487,234	\$5,342,305	\$855,071	19%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	<b>Total Current Liabilities</b>	<b>\$49,256,071</b>	<b>\$55,211,484</b>	<b>\$5,955,413</b>	<b>12%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$86,439,477	\$108,587,802	\$22,148,325	26%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	<b>Total Long Term Debt</b>	<b>\$86,439,477</b>	<b>\$108,587,802</b>	<b>\$22,148,325</b>	<b>26%</b>
3	Accrued Pension Liability	\$42,309,345	\$43,216,010	\$906,665	2%
4	Other Long Term Liabilities	\$17,774,823	\$20,601,530	\$2,826,707	16%
	<b>Total Long Term Liabilities</b>	<b>\$146,523,645</b>	<b>\$172,405,342</b>	<b>\$25,881,697</b>	<b>18%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$171,018,998	\$138,729,444	(\$32,289,554)	-19%
2	Temporarily Restricted Net Assets	\$22,198,248	\$23,432,028	\$1,233,780	6%
3	Permanently Restricted Net Assets	\$5,947,254	\$6,047,975	\$100,721	2%
	<b>Total Net Assets</b>	<b>\$199,164,500</b>	<b>\$168,209,447</b>	<b>(\$30,955,053)</b>	<b>-16%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$394,944,216</b>	<b>\$395,826,273</b>	<b>\$882,057</b>	<b>0%</b>

LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$709,327,930	\$788,136,574	\$78,808,644	11%
2	Less: Allowances	\$390,187,093	\$446,477,554	\$56,290,461	14%
3	Less: Charity Care	\$7,125,259	\$5,449,069	(\$1,676,190)	-24%
4	Less: Other Deductions	\$1,047,636	\$2,458,020	\$1,410,384	135%
	<b>Total Net Patient Revenue</b>	<b>\$310,967,942</b>	<b>\$333,751,931</b>	<b>\$22,783,989</b>	<b>7%</b>
5	Provision for Bad Debts	\$12,037,777	\$14,966,698	\$2,928,921	24%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$298,930,165</b>	<b>\$318,785,233</b>	<b>\$19,855,068</b>	<b>7%</b>
6	Other Operating Revenue	\$22,653,789	\$29,607,174	\$6,953,385	31%
7	Net Assets Released from Restrictions	\$508,277	\$671,797	\$163,520	32%
	<b>Total Operating Revenue</b>	<b>\$322,092,231</b>	<b>\$349,064,204</b>	<b>\$26,971,973</b>	<b>8%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$144,544,364	\$142,343,619	(\$2,200,745)	-2%
2	Fringe Benefits	\$43,319,912	\$50,942,369	\$7,622,457	18%
3	Physicians Fees	\$0	\$0	\$0	0%
4	Supplies and Drugs	\$37,892,742	\$52,151,445	\$14,258,703	38%
5	Depreciation and Amortization	\$20,641,159	\$22,635,125	\$1,993,966	10%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$2,705,025	\$3,542,721	\$837,696	31%
8	Malpractice Insurance Cost	\$4,757,599	\$4,538,822	(\$218,777)	-5%
9	Other Operating Expenses	\$58,158,434	\$72,371,379	\$14,212,945	24%
	<b>Total Operating Expenses</b>	<b>\$312,019,235</b>	<b>\$348,525,480</b>	<b>\$36,506,245</b>	<b>12%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$10,072,996</b>	<b>\$538,724</b>	<b>(\$9,534,272)</b>	<b>-95%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$6,163,570	\$8,788,601	\$2,625,031	43%
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>\$6,163,570</b>	<b>\$8,788,601</b>	<b>\$2,625,031</b>	<b>43%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$16,236,566</b>	<b>\$9,327,325</b>	<b>(\$6,909,241)</b>	<b>-43%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2014</b>					
<b>REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION</b>					
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>	<b>(6)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013 ACTUAL</b>	<b>FY 2014 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$16,236,566</b>	<b>\$9,327,325</b>	<b>(\$6,909,241)</b>	<b>-43%</b>
	Principal Payments	\$3,060,000	\$3,210,000	\$150,000	5%

**LAWRENCE AND MEMORIAL HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2014**  
**REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$140,349,910	\$142,964,177	\$2,614,267	2%
2	MEDICARE MANAGED CARE	\$20,626,661	\$22,848,389	\$2,221,728	11%
3	MEDICAID	\$49,696,839	\$53,016,167	\$3,319,328	7%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$11,605,898	\$11,029,201	(\$576,697)	-5%
6	COMMERCIAL INSURANCE	\$6,938,082	\$8,214,775	\$1,276,693	18%
7	NON-GOVERNMENT MANAGED CARE	\$59,866,068	\$60,930,139	\$1,064,071	2%
8	WORKER'S COMPENSATION	\$2,477,619	\$2,189,315	(\$288,304)	-12%
9	SELF- PAY/UNINSURED	\$1,115,273	\$1,312,711	\$197,438	18%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$371,552	\$1,736,683	\$1,365,131	367%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$293,047,902</b>	<b>\$304,241,557</b>	<b>\$11,193,655</b>	<b>4%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$110,781,461	\$143,948,555	\$33,167,094	30%
2	MEDICARE MANAGED CARE	\$21,803,873	\$29,103,412	\$7,299,539	33%
3	MEDICAID	\$71,559,253	\$81,713,156	\$10,153,903	14%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$23,612,888	\$22,637,292	(\$975,596)	-4%
6	COMMERCIAL INSURANCE	\$16,849,454	\$17,698,069	\$848,615	5%
7	NON-GOVERNMENT MANAGED CARE	\$150,946,150	\$168,710,858	\$17,764,708	12%
8	WORKER'S COMPENSATION	\$8,033,159	\$8,121,946	\$88,787	1%
9	SELF- PAY/UNINSURED	\$10,987,518	\$10,088,487	(\$899,031)	-8%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,706,206	\$1,873,241	\$167,035	10%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$416,279,962</b>	<b>\$483,895,016</b>	<b>\$67,615,054</b>	<b>16%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$251,131,371	\$286,912,732	\$35,781,361	14%
2	MEDICARE MANAGED CARE	\$42,430,534	\$51,951,801	\$9,521,267	22%
3	MEDICAID	\$121,256,092	\$134,729,323	\$13,473,231	11%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$35,218,786	\$33,666,493	(\$1,552,293)	-4%
6	COMMERCIAL INSURANCE	\$23,787,536	\$25,912,844	\$2,125,308	9%
7	NON-GOVERNMENT MANAGED CARE	\$210,812,218	\$229,640,997	\$18,828,779	9%
8	WORKER'S COMPENSATION	\$10,510,778	\$10,311,261	(\$199,517)	-2%
9	SELF- PAY/UNINSURED	\$12,102,791	\$11,401,198	(\$701,593)	-6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$2,077,758	\$3,609,924	\$1,532,166	74%
	<b>TOTAL GROSS REVENUE</b>	<b>\$709,327,864</b>	<b>\$788,136,573</b>	<b>\$78,808,709</b>	<b>11%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$63,119,668	\$65,139,841	\$2,020,173	3%
2	MEDICARE MANAGED CARE	\$8,256,110	\$9,247,649	\$991,539	12%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	MEDICAID	\$15,986,391	\$15,703,121	(\$283,270)	-2%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$4,936,371	\$5,008,631	\$72,260	1%
6	COMMERCIAL INSURANCE	\$3,159,062	\$3,134,633	(\$24,429)	-1%
7	NON-GOVERNMENT MANAGED CARE	\$46,945,508	\$45,965,805	(\$979,703)	-2%
8	WORKER'S COMPENSATION	\$1,716,897	\$1,916,948	\$200,051	12%
9	SELF- PAY/UNINSURED	\$0	\$0	\$0	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$118,145	\$554,981	\$436,836	370%
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$144,238,152</b>	<b>\$146,671,609</b>	<b>\$2,433,457</b>	<b>2%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$26,356,096	\$35,003,824	\$8,647,728	33%
2	MEDICARE MANAGED CARE	\$4,844,144	\$6,710,258	\$1,866,114	39%
3	MEDICAID	\$19,407,037	\$18,881,597	(\$525,440)	-3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$6,217,879	\$5,573,648	(\$644,231)	-10%
6	COMMERCIAL INSURANCE	\$7,888,023	\$5,423,978	(\$2,464,045)	-31%
7	NON-GOVERNMENT MANAGED CARE	\$88,839,661	\$101,029,807	\$12,190,146	14%
8	WORKER'S COMPENSATION	\$5,143,564	\$5,452,188	\$308,624	6%
9	SELF- PAY/UNINSURED	\$0	\$0	\$0	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$427,749	\$458,477	\$30,728	7%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$159,124,153</b>	<b>\$178,533,777</b>	<b>\$19,409,624</b>	<b>12%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$89,475,764	\$100,143,665	\$10,667,901	12%
2	MEDICARE MANAGED CARE	\$13,100,254	\$15,957,907	\$2,857,653	22%
3	MEDICAID	\$35,393,428	\$34,584,718	(\$808,710)	-2%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$11,154,250	\$10,582,279	(\$571,971)	-5%
6	COMMERCIAL INSURANCE	\$11,047,085	\$8,558,611	(\$2,488,474)	-23%
7	NON-GOVERNMENT MANAGED CARE	\$135,785,169	\$146,995,612	\$11,210,443	8%
8	WORKER'S COMPENSATION	\$6,860,461	\$7,369,136	\$508,675	7%
9	SELF- PAY/UNINSURED	\$0	\$0	\$0	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$545,894	\$1,013,458	\$467,564	86%
	<b>TOTAL NET REVENUE</b>	<b>\$303,362,305</b>	<b>\$325,205,386</b>	<b>\$21,843,081</b>	<b>7%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	5,814	5,522	(292)	-5%
2	MEDICARE MANAGED CARE	844	840	(4)	0%
3	MEDICAID	3,069	3,032	(37)	-1%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	943	855	(88)	-9%
6	COMMERCIAL INSURANCE	452	469	17	4%
7	NON-GOVERNMENT MANAGED CARE	3,345	3,167	(178)	-5%
8	WORKER'S COMPENSATION	88	70	(18)	-20%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
9	SELF- PAY/UNINSURED	67	89	22	33%
10	SAGA	0	0	0	0%
11	OTHER	27	106	79	293%
	<b>TOTAL DISCHARGES</b>	<b>14,649</b>	<b>14,150</b>	<b>(499)</b>	<b>-3%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	31,984	30,887	(1,097)	-3%
2	MEDICARE MANAGED CARE	4,245	4,216	(29)	-1%
3	MEDICAID	13,305	13,576	271	2%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	2,851	2,682	(169)	-6%
6	COMMERCIAL INSURANCE	1,856	2,009	153	8%
7	NON-GOVERNMENT MANAGED CARE	12,322	12,061	(261)	-2%
8	WORKER'S COMPENSATION	324	240	(84)	-26%
9	SELF- PAY/UNINSURED	191	259	68	36%
10	SAGA	0	0	0	0%
11	OTHER	75	402	327	436%
	<b>TOTAL PATIENT DAYS</b>	<b>67,153</b>	<b>66,332</b>	<b>(821)</b>	<b>-1%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	122,829	129,103	6,274	5%
2	MEDICARE MANAGED CARE	22,173	24,415	2,242	10%
3	MEDICAID	39,227	42,259	3,032	8%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	12,127	11,430	(697)	-6%
6	COMMERCIAL INSURANCE	69,458	65,832	(3,626)	-5%
7	NON-GOVERNMENT MANAGED CARE	74,170	73,734	(436)	-1%
8	WORKER'S COMPENSATION	4,592	4,338	(254)	-6%
9	SELF- PAY/UNINSURED	3,387	2,804	(583)	-17%
10	SAGA	0	0	0	0%
11	OTHER	1,292	1,013	(279)	-22%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>349,255</b>	<b>354,928</b>	<b>5,673</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	\$15,831,980	\$17,281,868	\$1,449,888	9%
2	MEDICARE MANAGED CARE	\$2,422,099	\$2,766,318	\$344,219	14%
3	MEDICAID	\$27,659,745	\$29,842,422	\$2,182,677	8%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$6,582,872	\$6,518,888	(\$63,984)	-1%
6	COMMERCIAL INSURANCE	\$5,739,723	\$3,526,549	(\$2,213,174)	-39%
7	NON-GOVERNMENT MANAGED CARE	\$21,640,387	\$23,545,359	\$1,904,972	9%
8	WORKER'S COMPENSATION	\$1,336,934	\$1,426,993	\$90,059	7%
9	SELF- PAY/UNINSURED	\$4,419,456	\$3,737,996	(\$681,460)	-15%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$772,247	\$881,641	\$109,394	14%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$86,405,443</b>	<b>\$89,528,034</b>	<b>\$3,122,591</b>	<b>4%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$3,346,026	\$3,794,546	\$448,520	13%

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2014  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
2	MEDICARE MANAGED CARE	\$542,134	\$640,299	\$98,165	18%
3	MEDICAID	\$6,599,233	\$6,816,525	\$217,292	3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,822,366	\$1,770,718	(\$51,648)	-3%
6	COMMERCIAL INSURANCE	\$3,156,707	\$2,307,070	(\$849,637)	-27%
7	NON-GOVERNMENT MANAGED CARE	\$12,549,040	\$13,246,729	\$697,689	6%
8	WORKER'S COMPENSATION	\$1,072,091	\$1,084,760	\$12,669	1%
9	SELF- PAY/UNINSURED	\$179,418	\$0	(\$179,418)	-100%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$169,538	\$181,477	\$11,939	7%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$29,436,553</b>	<b>\$29,842,124</b>	<b>\$405,571</b>	<b>1%</b>
<b>C.</b>	<b><u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u></b>				
1	MEDICARE TRADITIONAL	11,409	11,740	331	3%
2	MEDICARE MANAGED CARE	1,628	1,751	123	8%
3	MEDICAID	27,281	27,905	624	2%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	6,289	5,866	(423)	-7%
6	COMMERCIAL INSURANCE	4,856	4,319	(537)	-11%
7	NON-GOVERNMENT MANAGED CARE	19,225	18,117	(1,108)	-6%
8	WORKER'S COMPENSATION	1,486	1,669	183	12%
9	SELF- PAY/UNINSURED	4,731	3,682	(1,049)	-22%
10	SAGA	0	0	0	0%
11	OTHER	651	418	(233)	-36%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>77,556</b>	<b>75,467</b>	<b>(2,089)</b>	<b>-3%</b>



LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I.</b>	<b>OPERATING EXPENSE BY CATEGORY</b>				
<b>A.</b>	<b>Salaries &amp; Wages:</b>				
1	Nursing Salaries	\$43,409,289	\$40,921,636	(\$2,487,653)	-6%
2	Physician Salaries	\$376,629	\$367,754	(\$8,875)	-2%
3	Non-Nursing, Non-Physician Salaries	\$100,758,446	\$101,054,229	\$295,783	0%
	<b>Total Salaries &amp; Wages</b>	<b>\$144,544,364</b>	<b>\$142,343,619</b>	<b>(\$2,200,745)</b>	<b>-2%</b>
<b>B.</b>	<b>Fringe Benefits:</b>				
1	Nursing Fringe Benefits	\$13,009,754	\$14,645,164	\$1,635,410	13%
2	Physician Fringe Benefits	\$112,876	\$131,613	\$18,737	17%
3	Non-Nursing, Non-Physician Fringe Benefits	\$30,197,282	\$36,165,592	\$5,968,310	20%
	<b>Total Fringe Benefits</b>	<b>\$43,319,912</b>	<b>\$50,942,369</b>	<b>\$7,622,457</b>	<b>18%</b>
<b>C.</b>	<b>Contractual Labor Fees:</b>				
1	Nursing Fees	\$122,119	\$227,632	\$105,513	86%
2	Physician Fees	\$0	\$0	\$0	0%
3	Non-Nursing, Non-Physician Fees	\$864,227	\$952,405	\$88,178	10%
	<b>Total Contractual Labor Fees</b>	<b>\$986,346</b>	<b>\$1,180,037</b>	<b>\$193,691</b>	<b>20%</b>
<b>D.</b>	<b>Medical Supplies and Pharmaceutical Cost:</b>				
1	Medical Supplies	\$26,352,946	\$29,345,396	\$2,992,450	11%
2	Pharmaceutical Costs	\$11,539,796	\$22,806,049	\$11,266,253	98%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$37,892,742</b>	<b>\$52,151,445</b>	<b>\$14,258,703</b>	<b>38%</b>
<b>E.</b>	<b>Depreciation and Amortization:</b>				
1	Depreciation-Building	\$3,556,339	\$4,329,057	\$772,718	22%
2	Depreciation-Equipment	\$16,002,830	\$17,199,741	\$1,196,911	7%
3	Amortization	\$1,081,990	\$1,106,327	\$24,337	2%
	<b>Total Depreciation and Amortization</b>	<b>\$20,641,159</b>	<b>\$22,635,125</b>	<b>\$1,993,966</b>	<b>10%</b>
<b>F.</b>	<b>Bad Debts:</b>				
1	Bad Debts	\$0	\$0	\$0	0%
<b>G.</b>	<b>Interest Expense:</b>				
1	Interest Expense	\$2,705,025	\$3,542,721	\$837,696	31%
<b>H.</b>	<b>Malpractice Insurance Cost:</b>				
1	Malpractice Insurance Cost	\$4,757,599	\$4,538,822	(\$218,777)	-5%
<b>I.</b>	<b>Utilities:</b>				
1	Water	\$170,839	\$195,930	\$25,091	15%
2	Natural Gas	\$967,744	\$1,026,335	\$58,591	6%
3	Oil	\$78,383	\$55,080	(\$23,303)	-30%
4	Electricity	\$3,508,501	\$3,219,818	(\$288,683)	-8%
5	Telephone	\$483,193	\$465,295	(\$17,898)	-4%
6	Other Utilities	\$0	\$0	\$0	0%
	<b>Total Utilities</b>	<b>\$5,208,660</b>	<b>\$4,962,458</b>	<b>(\$246,202)</b>	<b>-5%</b>
<b>J.</b>	<b>Business Expenses:</b>				
1	Accounting Fees	\$513,434	\$746,696	\$233,262	45%
2	Legal Fees	\$1,395,694	\$1,972,751	\$577,057	41%
3	Consulting Fees	\$2,095,169	\$3,424,587	\$1,329,418	63%
4	Dues and Membership	\$493,020	\$397,895	(\$95,125)	-19%
5	Equipment Leases	\$1,975,134	\$2,068,236	\$93,102	5%
6	Building Leases	\$2,433,113	\$2,363,426	(\$69,687)	-3%
7	Repairs and Maintenance	\$9,551,351	\$10,335,192	\$783,841	8%
8	Insurance	\$1,025,151	\$1,021,372	(\$3,779)	0%
9	Travel	\$332,826	\$327,728	(\$5,098)	-2%
10	Conferences	\$100,748	\$4,847	(\$95,901)	-95%

LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
11	Property Tax	\$141,228	\$85,101	(\$56,127)	-40%
12	General Supplies	\$2,026,505	\$1,685,365	(\$341,140)	-17%
13	Licenses and Subscriptions	\$497,884	\$515,124	\$17,240	3%
14	Postage and Shipping	\$208,429	\$198,776	(\$9,653)	-5%
15	Advertising	\$1,261,127	\$1,228,879	(\$32,248)	-3%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$403,431	\$374,395	(\$29,036)	-7%
18	Computer hardware & small equipment	\$139,528	\$94,323	(\$45,205)	-32%
19	Dietary / Food Services	\$2,194,913	\$2,091,455	(\$103,458)	-5%
20	Lab Fees / Red Cross charges	\$1,205,185	\$1,143,749	(\$61,436)	-5%
21	Billing & Collection / Bank Fees	\$374,348	\$538,059	\$163,711	44%
22	Recruiting / Employee Education & Recognition	\$837,033	\$517,699	(\$319,334)	-38%
23	Laundry / Linen	\$24,729	\$47,630	\$22,901	93%
24	Professional / Physician Fees	\$7,207,364	\$5,868,901	(\$1,338,463)	-19%
25	Waste disposal	\$0	\$0	\$0	0%
26	Purchased Services - Medical	\$6,196,040	\$15,978,684	\$9,782,644	158%
27	Purchased Services - Non Medical	\$8,181,828	\$11,895,602	\$3,713,774	45%
28	Other Business Expenses	\$618,749	\$608,002	(\$10,747)	-2%
	<b>Total Business Expenses</b>	<b>\$51,433,961</b>	<b>\$65,534,474</b>	<b>\$14,100,513</b>	<b>27%</b>
<b>K.</b>	<b>Other Operating Expense:</b>				
1	Miscellaneous Other Operating Expenses	\$529,467	\$694,410	\$164,943	31%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$312,019,235</b>	<b>\$348,525,480</b>	<b>\$36,506,245</b>	<b>12%</b>
	*A.-K.The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
<b>II.</b>	<b>OPERATING EXPENSE BY DEPARTMENT</b>				
<b>A.</b>	<b>General Services:</b>				
1	General Administration	\$18,821,949	\$22,278,004	\$3,456,055	18%
2	General Accounting	\$1,759,385	\$2,357,845	\$598,460	34%
3	Patient Billing & Collection	\$4,338,367	\$5,513,327	\$1,174,960	27%
4	Admitting / Registration Office	\$5,482,095	\$6,679,269	\$1,197,174	22%
5	Data Processing	\$11,611,264	\$9,845,104	(\$1,766,160)	-15%
6	Communications	\$351,552	\$366,347	\$14,795	4%
7	Personnel	\$45,663,446	\$53,979,813	\$8,316,367	18%
8	Public Relations	\$672,571	\$755,967	\$83,396	12%
9	Purchasing	\$1,890,929	\$1,624,797	(\$266,132)	-14%
10	Dietary and Cafeteria	\$5,106,816	\$4,907,800	(\$199,016)	-4%
11	Housekeeping	\$4,084,170	\$4,184,889	\$100,719	2%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$4,347,617	\$3,803,595	(\$544,022)	-13%
14	Security	\$1,764,677	\$2,241,726	\$477,049	27%
15	Repairs and Maintenance	\$4,575,080	\$5,918,384	\$1,343,304	29%
16	Central Sterile Supply	\$1,883,217	\$1,883,816	\$599	0%
17	Pharmacy Department	\$15,030,587	\$26,537,072	\$11,506,485	77%
18	Other General Services	\$5,462,137	\$6,032,372	\$570,235	10%
	<b>Total General Services</b>	<b>\$132,845,859</b>	<b>\$158,910,127</b>	<b>\$26,064,268</b>	<b>20%</b>
<b>B.</b>	<b>Professional Services:</b>				
1	Medical Care Administration	\$569,776	\$475,124	(\$94,652)	-17%
2	Residency Program	\$116,472	\$116,472	\$0	0%
3	Nursing Services Administration	\$2,394,989	\$2,363,742	(\$31,247)	-1%
4	Medical Records	\$4,402,413	\$4,782,214	\$379,801	9%
5	Social Service	\$3,014,048	\$2,673,264	(\$340,784)	-11%
6	Other Professional Services	\$4,821,601	\$4,773,424	(\$48,177)	-1%
	<b>Total Professional Services</b>	<b>\$15,319,299</b>	<b>\$15,184,240</b>	<b>(\$135,059)</b>	<b>-1%</b>
<b>C.</b>	<b>Special Services:</b>				

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2014</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 2013 ACTUAL</b>	<b>FY 2014 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
1	Operating Room	\$19,679,748	\$22,619,858	\$2,940,110	15%
2	Recovery Room	\$1,076,475	\$1,276,538	\$200,063	19%
3	Anesthesiology	\$573,154	\$495,304	(\$77,850)	-14%
4	Delivery Room	\$123,781	\$110,558	(\$13,223)	-11%
5	Diagnostic Radiology	\$3,838,578	\$4,112,649	\$274,071	7%
6	Diagnostic Ultrasound	\$2,927,683	\$3,605,420	\$677,737	23%
7	Radiation Therapy	\$2,644,702	\$2,706,468	\$61,766	2%
8	Radioisotopes	\$1,493,046	\$1,799,336	\$306,290	21%
9	CT Scan	\$2,104,100	\$2,434,533	\$330,433	16%
10	Laboratory	\$16,404,421	\$15,937,194	(\$467,227)	-3%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$1,705,181	\$1,722,750	\$17,569	1%
13	Electrocardiology	\$1,187	\$661	(\$526)	-44%
14	Electroencephalography	\$268,304	\$266,106	(\$2,198)	-1%
15	Occupational Therapy	\$1,863,236	\$1,815,779	(\$47,457)	-3%
16	Speech Pathology	\$850,838	\$844,200	(\$6,638)	-1%
17	Audiology	\$712,487	\$718,986	\$6,499	1%
18	Respiratory Therapy	\$2,828,481	\$2,913,142	\$84,661	3%
19	Pulmonary Function	\$2	\$315	\$313	15650%
20	Intravenous Therapy	\$2,223,111	\$2,418,530	\$195,419	9%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,206,173	\$1,664,378	\$458,205	38%
23	Renal Dialysis	\$556,106	\$571,366	\$15,260	3%
24	Emergency Room	\$10,624,996	\$11,431,003	\$806,007	8%
25	MRI	\$1,690,261	\$1,854,886	\$164,625	10%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,303,768	\$1,001,909	(\$301,859)	-23%
29	Sleep Center	\$1,342,039	\$1,134,357	(\$207,682)	-15%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$4,795,111	\$5,171,847	\$376,736	8%
32	Occupational Therapy / Physical Therapy	\$4,276,898	\$4,019,022	(\$257,876)	-6%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$7,983,130	\$8,570,782	\$587,652	7%
	<b>Total Special Services</b>	<b>\$95,096,997</b>	<b>\$101,217,877</b>	<b>\$6,120,880</b>	<b>6%</b>
<b>D.</b>	<b>Routine Services:</b>				
1	Medical & Surgical Units	\$21,521,269	\$22,883,586	\$1,362,317	6%
2	Intensive Care Unit	\$3,027,115	\$3,256,042	\$228,927	8%
3	Coronary Care Unit	\$3,168,467	\$3,525,891	\$357,424	11%
4	Psychiatric Unit	\$2,814,601	\$2,777,800	(\$36,801)	-1%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$5,610,847	\$6,812,166	\$1,201,319	21%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$2,204,565	\$2,269,030	\$64,465	3%
9	Rehabilitation Unit	\$2,632,034	\$2,845,858	\$213,824	8%
10	Ambulatory Surgery	\$2,226,788	\$2,009,327	(\$217,461)	-10%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$1,535,307	\$1,194,912	(\$340,395)	-22%
	<b>Total Routine Services</b>	<b>\$44,740,993</b>	<b>\$47,574,612</b>	<b>\$2,833,619</b>	<b>6%</b>
<b>E.</b>	<b>Other Departments:</b>				
1	Miscellaneous Other Departments	\$24,016,087	\$25,638,624	\$1,622,537	7%
	<b>Total Operating Expenses - All Departments*</b>	<b>\$312,019,235</b>	<b>\$348,525,480</b>	<b>\$36,506,245</b>	<b>12%</b>
	<b>*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$323,643,197	\$298,930,165	\$318,785,233
2	Other Operating Revenue	15,883,284	23,162,066	30,278,971
3	Total Operating Revenue	\$339,526,481	\$322,092,231	\$349,064,204
4	Total Operating Expenses	318,194,716	312,019,235	348,525,480
5	Income/(Loss) From Operations	\$21,331,765	\$10,072,996	\$538,724
6	Total Non-Operating Revenue	4,584,564	6,163,570	8,788,601
7	Excess/(Deficiency) of Revenue Over Expenses	\$25,916,329	\$16,236,566	\$9,327,325
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	6.20%	3.07%	0.15%
2	Hospital Non Operating Margin	1.33%	1.88%	2.46%
3	Hospital Total Margin	7.53%	4.95%	2.61%
4	Income/(Loss) From Operations	\$21,331,765	\$10,072,996	\$538,724
5	Total Operating Revenue	\$339,526,481	\$322,092,231	\$349,064,204
6	Total Non-Operating Revenue	\$4,584,564	\$6,163,570	\$8,788,601
7	Total Revenue	\$344,111,045	\$328,255,801	\$357,852,805
8	Excess/(Deficiency) of Revenue Over Expenses	\$25,916,329	\$16,236,566	\$9,327,325
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$144,038,576	\$171,018,998	\$138,729,444
2	Hospital Total Net Assets	\$169,995,622	\$199,164,500	\$168,209,447
3	Hospital Change in Total Net Assets	\$4,214,948	\$29,168,878	(\$30,955,053)
4	Hospital Change in Total Net Assets %	102.5%	17.2%	-15.5%

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>
<b>D.</b>	<b><u>Cost Data Summary</u></b>			
<b>1</b>	<b><u>Ratio of Cost to Charges</u></b>	<b>0.45</b>	<b>0.43</b>	<b>0.43</b>
2	Total Operating Expenses	\$318,194,716	\$312,019,235	\$348,525,480
3	Total Gross Revenue	\$691,987,197	\$709,327,864	\$788,136,573
4	Total Other Operating Revenue	\$15,433,709	\$22,653,789	\$29,607,174
<b>5</b>	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.41</b>	<b>1.47</b>	<b>1.44</b>
6	Total Non-Government Payments	\$157,013,123	\$153,692,715	\$162,923,359
7	Total Uninsured Payments	\$0	\$0	\$0
8	Total Non-Government Charges	\$258,358,882	\$257,213,323	\$277,266,300
9	Total Uninsured Charges	\$11,113,975	\$12,102,791	\$11,401,198
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.85</b>	<b>0.82</b>	<b>0.80</b>
11	Total Medicare Payments	\$107,064,062	\$102,576,018	\$116,101,572
12	Total Medicare Charges	\$280,622,072	\$293,561,905	\$338,864,533
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.67</b>	<b>0.68</b>	<b>0.60</b>
14	Total Medicaid Payments	\$35,000,127	\$35,393,428	\$34,584,718
15	Total Medicaid Charges	\$115,521,054	\$121,256,092	\$134,729,323
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$6,638,637</b>	<b>\$6,701,686</b>	<b>\$7,521,803</b>
17	Charity Care	\$2,828,618	\$3,684,045	\$2,681,674
18	Bad Debts	\$11,930,618	\$12,037,777	\$14,966,698
19	Total Uncompensated Care	\$14,759,236	\$15,721,822	\$17,648,372
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>2.1%</b>	<b>2.1%</b>	<b>2.2%</b>

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2014</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
		<b><u>FY 2012</u></b>	<b><u>FY 2013</u></b>	<b><u>FY 2014</u></b>
21	Total Operating Expenses	\$318,194,716	\$312,019,235	\$348,525,480
<b>E. <u>Liquidity Measures Summary</u></b>				
<b>1</b>	<b><u>Current Ratio</u></b>	<b>4</b>	<b>4</b>	<b>3</b>
2	Total Current Assets	\$206,704,027	\$193,504,592	\$188,452,894
3	Total Current Liabilities	\$50,923,369	\$49,256,071	\$55,211,484
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>185</b>	<b>164</b>	<b>152</b>
5	Cash and Cash Equivalents	\$13,568,654	\$301,175	\$6,917,676
6	Short Term Investments	138,433,638	130,950,161	128,450,331
7	Total Cash and Short Term Investments	\$152,002,292	\$131,251,336	\$135,368,007
8	Total Operating Expenses	\$318,194,716	\$312,019,235	\$348,525,480
9	Depreciation Expense	\$18,825,589	\$20,641,159	\$22,635,125
10	Operating Expenses less Depreciation Expense	\$299,369,127	\$291,378,076	\$325,890,355
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>26</b>	<b>37</b>	<b>36</b>
12	Net Patient Accounts Receivable	\$28,719,548	\$33,778,305	\$36,289,187
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$5,409,556	\$3,826,094	\$5,165,225
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$23,309,992	\$29,952,211	\$31,123,962
16	Total Net Patient Revenue	\$323,643,197	\$298,930,165	\$318,785,233
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>62</b>	<b>62</b>	<b>62</b>
18	Total Current Liabilities	\$50,923,369	\$49,256,071	\$55,211,484
19	Total Operating Expenses	\$318,194,716	\$312,019,235	\$348,525,480
20	Depreciation Expense	\$18,825,589	\$20,641,159	\$22,635,125

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2014</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u> <u>FY 2012</u>	<u>ACTUAL</u> <u>FY 2013</u>	<u>ACTUAL</u> <u>FY 2014</u>
21	Total Operating Expenses less Depreciation Expense	\$299,369,127	\$291,378,076	\$325,890,355
<b>F. <u>Solvency Measures Summary</u></b>				
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>46.0</b>	<b>50.4</b>	<b>42.5</b>
2	Total Net Assets	\$169,995,622	\$199,164,500	\$168,209,447
3	Total Assets	\$369,610,416	\$394,944,216	\$395,826,273
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>34.3</b>	<b>27.2</b>	<b>19.5</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$25,916,329	\$16,236,566	\$9,327,325
6	Depreciation Expense	\$18,825,589	\$20,641,159	\$22,635,125
7	Excess of Revenues Over Expenses and Depreciation Expense	\$44,741,918	\$36,877,725	\$31,962,450
8	Total Current Liabilities	\$50,923,369	\$49,256,071	\$55,211,484
9	Total Long Term Debt	\$79,507,217	\$86,439,477	\$108,587,802
10	Total Current Liabilities and Total Long Term Debt	\$130,430,586	\$135,695,548	\$163,799,286
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>31.9</b>	<b>30.3</b>	<b>39.2</b>
12	Total Long Term Debt	\$79,507,217	\$86,439,477	\$108,587,802
13	Total Net Assets	\$169,995,622	\$199,164,500	\$168,209,447
14	Total Long Term Debt and Total Net Assets	\$249,502,839	\$285,603,977	\$276,797,249
<b>15</b>	<b><u>Debt Service Coverage Ratio</u></b>	<b>9.0</b>	<b>6.9</b>	<b>5.3</b>
16	Excess Revenues over Expenses	25,916,329	\$16,236,566	\$9,327,325
17	Interest Expense	2,315,992	\$2,705,025	\$3,542,721
18	Depreciation and Amortization Expense	18,825,589	\$20,641,159	\$22,635,125
19	Principal Payments	2,915,000	\$3,060,000	\$3,210,000
<b>G. <u>Other Financial Ratios</u></b>				

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2014</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 2012</b>	<b>FY 2013</b>	<b>FY 2014</b>
<b>20</b>	<b>Average Age of Plant</b>	<b>11.9</b>	<b>11.9</b>	<b>11.7</b>
21	Accumulated Depreciation	224,709,996	245,331,839	265,615,131
22	Depreciation and Amortization Expense	18,825,589	20,641,159	22,635,125
<b>H. Utilization Measures Summary</b>				
1	Patient Days	70,558	67,153	66,332
2	Discharges	14,932	14,649	14,150
3	ALOS	4.7	4.6	4.7
4	Staffed Beds	256	256	256
5	Available Beds	-	256	256
6	Licensed Beds	256	308	308
7	Occupancy of Staffed Beds	75.5%	71.9%	71.0%
8	Occupancy of Available Beds	75.5%	71.9%	71.0%
9	Full Time Equivalent Employees	1,954.8	1,921.0	1,849.1
<b>I. Hospital Gross Revenue Payer Mix Percentage</b>				
1	Non-Government Gross Revenue Payer Mix Percentage	35.7%	34.6%	33.7%
2	Medicare Gross Revenue Payer Mix Percentage	40.6%	41.4%	43.0%
3	Medicaid Gross Revenue Payer Mix Percentage	16.7%	17.1%	17.1%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.2%	0.3%	0.5%
5	Uninsured Gross Revenue Payer Mix Percentage	1.6%	1.7%	1.4%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	5.2%	5.0%	4.3%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$247,244,907	\$245,110,532	\$265,865,102
9	Medicare Gross Revenue (Charges)	\$280,622,072	\$293,561,905	\$338,864,533
10	Medicaid Gross Revenue (Charges)	\$115,521,054	\$121,256,092	\$134,729,323
11	Other Medical Assistance Gross Revenue (Charges)	\$1,520,912	\$2,077,758	\$3,609,924
12	Uninsured Gross Revenue (Charges)	\$11,113,975	\$12,102,791	\$11,401,198
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$35,964,277	\$35,218,786	\$33,666,493
14	Total Gross Revenue (Charges)	\$691,987,197	\$709,327,864	\$788,136,573
<b>J. Hospital Net Revenue Payer Mix Percentage</b>				
1	Non-Government Net Revenue Payer Mix Percentage	50.3%	50.7%	50.1%
2	Medicare Net Revenue Payer Mix Percentage	34.3%	33.8%	35.7%



<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2014</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 2012</b>	<b>FY 2013</b>	<b>FY 2014</b>
3	Medicaid Net Revenue Payer Mix Percentage	11.2%	11.7%	10.6%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.1%	0.2%	0.3%
5	Uninsured Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	4.0%	3.7%	3.3%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$157,013,123	\$153,692,715	\$162,923,359
9	Medicare Net Revenue (Payments)	\$107,064,062	\$102,576,018	\$116,101,572
10	Medicaid Net Revenue (Payments)	\$35,000,127	\$35,393,428	\$34,584,718
11	Other Medical Assistance Net Revenue (Payments)	\$411,640	\$545,894	\$1,023,458
12	Uninsured Net Revenue (Payments)	\$0	\$0	\$0
13	CHAMPUS / TRICARE Net Revenue Payments)	\$12,551,851	\$11,154,250	\$10,582,279
14	Total Net Revenue (Payments)	\$312,040,803	\$303,362,305	\$325,215,386
<b>K.</b>	<b>Discharges</b>			
1	Non-Government (Including Self Pay / Uninsured)	4,075	3,952	3,795
2	Medicare	6,829	6,658	6,362
3	Medical Assistance	3,059	3,096	3,138
4	Medicaid	3,028	3,069	3,032
5	Other Medical Assistance	31	27	106
6	CHAMPUS / TRICARE	969	943	855
7	Uninsured (Included In Non-Government)	69	67	89
8	Total	14,932	14,649	14,150
<b>L.</b>	<b>Case Mix Index</b>			
1	Non-Government (Including Self Pay / Uninsured)	1.14900	1.13990	1.15850
2	Medicare	1.40820	1.40940	1.44560
3	Medical Assistance	0.99612	0.97290	1.04852
4	Medicaid	0.99660	0.97390	1.05160
5	Other Medical Assistance	0.94950	0.85900	0.96050
6	CHAMPUS / TRICARE	0.89590	0.88970	0.99040
7	Uninsured (Included In Non-Government)	1.14870	1.02440	1.05920
8	Total Case Mix Index	1.21980	1.21099	1.25304
<b>M.</b>	<b>Emergency Department Visits</b>			
1	Emergency Room - Treated and Admitted	6,525	7,004	6,903
2	Emergency Room - Treated and Discharged	76,140	77,556	75,467
3	Total Emergency Room Visits	82,665	84,560	82,370

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2014  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$829,207	\$686,409	(\$142,798)	-17%
2	Inpatient Payments	\$333,242	\$238,761	(\$94,481)	-28%
3	Outpatient Charges	\$720,869	\$382,514	(\$338,355)	-47%
4	Outpatient Payments	\$184,904	\$91,458	(\$93,446)	-51%
5	Discharges	39	26	(13)	-33%
6	Patient Days	175	188	13	7%
7	Outpatient Visits (Excludes ED Visits)	564	249	(315)	-56%
8	Emergency Department Outpatient Visits	70	36	(34)	-49%
9	Emergency Department Inpatient Admissions	22	14	(8)	-36%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,550,076</b>	<b>\$1,068,923</b>	<b>(\$481,153)</b>	<b>-31%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$518,146</b>	<b>\$330,219</b>	<b>(\$187,927)</b>	<b>-36%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$5,951,620	\$8,397,001	\$2,445,381	41%
2	Inpatient Payments	\$2,537,658	\$3,602,114	\$1,064,456	42%
3	Outpatient Charges	\$5,928,739	\$10,651,532	\$4,722,793	80%
4	Outpatient Payments	\$1,310,153	\$2,397,049	\$1,086,896	83%
5	Discharges	255	297	42	16%
6	Patient Days	1,211	1,502	291	24%
7	Outpatient Visits (Excludes ED Visits)	6,412	8,274	1,862	29%
8	Emergency Department Outpatient Visits	384	536	152	40%
9	Emergency Department Inpatient Admissions	146	184	38	26%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$11,880,359</b>	<b>\$19,048,533</b>	<b>\$7,168,174</b>	<b>60%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$3,847,811</b>	<b>\$5,999,163</b>	<b>\$2,151,352</b>	<b>56%</b>

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2014  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$468,537	\$356,802	(\$111,735)	-24%
2	Inpatient Payments	\$128,597	\$134,613	\$6,016	5%
3	Outpatient Charges	\$183,889	\$238,215	\$54,326	30%
4	Outpatient Payments	\$31,670	\$35,001	\$3,331	11%
5	Discharges	13	20	7	54%
6	Patient Days	101	82	(19)	-19%
7	Outpatient Visits (Excludes ED Visits)	76	63	(13)	-17%
8	Emergency Department Outpatient Visits	59	71	12	20%
9	Emergency Department Inpatient Admissions	8	16	8	100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$652,426</b>	<b>\$595,017</b>	<b>(\$57,409)</b>	<b>-9%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$160,267</b>	<b>\$169,614</b>	<b>\$9,347</b>	<b>6%</b>

**LAWRENCE AND MEMORIAL HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2014**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$12,288,848	\$12,514,016	\$225,168	2%
2	Inpatient Payments	\$4,842,451	\$4,899,079	\$56,628	1%
3	Outpatient Charges	\$13,977,102	\$16,598,987	\$2,621,885	19%
4	Outpatient Payments	\$3,095,014	\$3,872,266	\$777,252	25%
5	Discharges	495	457	(38)	-8%
6	Patient Days	2,525	2,226	(299)	-12%
7	Outpatient Visits (Excludes ED Visits)	12,692	13,227	535	4%
8	Emergency Department Outpatient Visits	984	1,024	40	4%
9	Emergency Department Inpatient Admissions	310	271	(39)	-13%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$26,265,950</b>	<b>\$29,113,003</b>	<b>\$2,847,053</b>	<b>11%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$7,937,465</b>	<b>\$8,771,345</b>	<b>\$833,880</b>	<b>11%</b>
<b>H. 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>I. AETNA</b>					
1	Inpatient Charges	\$814,175	\$779,017	(\$35,158)	-4%
2	Inpatient Payments	\$313,350	\$319,308	\$5,958	2%
3	Outpatient Charges	\$674,936	\$1,105,429	\$430,493	64%
4	Outpatient Payments	\$159,696	\$292,206	\$132,510	83%
5	Discharges	30	33	3	10%
6	Patient Days	187	198	11	6%
7	Outpatient Visits (Excludes ED Visits)	612	734	122	20%
8	Emergency Department Outpatient Visits	76	67	(9)	-12%
9	Emergency Department Inpatient Admissions	23	24	1	4%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,489,111</b>	<b>\$1,884,446</b>	<b>\$395,335</b>	<b>27%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$473,046</b>	<b>\$611,514</b>	<b>\$138,468</b>	<b>29%</b>

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2014  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>J. HUMANA</b>					
1	Inpatient Charges	\$116,453	\$66,242	(\$50,211)	-43%
2	Inpatient Payments	\$36,224	\$26,812	(\$9,412)	-26%
3	Outpatient Charges	\$105,003	\$54,116	(\$50,887)	-48%
4	Outpatient Payments	\$16,961	\$11,160	(\$5,801)	-34%
5	Discharges	5	4	(1)	-20%
6	Patient Days	14	11	(3)	-21%
7	Outpatient Visits (Excludes ED Visits)	29	59	30	103%
8	Emergency Department Outpatient Visits	27	9	(18)	-67%
9	Emergency Department Inpatient Admissions	4	4	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$221,456</b>	<b>\$120,358</b>	<b>(\$101,098)</b>	<b>-46%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$53,185</b>	<b>\$37,972</b>	<b>(\$15,213)</b>	<b>-29%</b>
<b>K. SECURE HORIZONS</b>					
1	Inpatient Charges	\$157,821	\$48,902	(\$108,919)	-69%
2	Inpatient Payments	\$64,588	\$26,962	(\$37,626)	-58%
3	Outpatient Charges	\$213,335	\$72,619	(\$140,716)	-66%
4	Outpatient Payments	\$45,746	\$11,118	(\$34,628)	-76%
5	Discharges	7	3	(4)	-57%
6	Patient Days	32	9	(23)	-72%
7	Outpatient Visits (Excludes ED Visits)	160	58	(102)	-64%
8	Emergency Department Outpatient Visits	28	8	(20)	-71%
9	Emergency Department Inpatient Admissions	5	2	(3)	-60%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$371,156</b>	<b>\$121,521</b>	<b>(\$249,635)</b>	<b>-67%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$110,334</b>	<b>\$38,080</b>	<b>(\$72,254)</b>	<b>-65%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2014  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>M. UNIVERSAL AMERICAN</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>N. EVERCARE</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>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$20,626,661</b>	<b>\$22,848,389</b>	<b>\$2,221,728</b>	<b>11%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$8,256,110</b>	<b>\$9,247,649</b>	<b>\$991,539</b>	<b>12%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$21,803,873</b>	<b>\$29,103,412</b>	<b>\$7,299,539</b>	<b>33%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$4,844,144</b>	<b>\$6,710,258</b>	<b>\$1,866,114</b>	<b>39%</b>
	<b>TOTAL DISCHARGES</b>	<b>844</b>	<b>840</b>	<b>(4)</b>	<b>0%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>4,245</b>	<b>4,216</b>	<b>(29)</b>	<b>-1%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>20,545</b>	<b>22,664</b>	<b>2,119</b>	<b>10%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>1,628</b>	<b>1,751</b>	<b>123</b>	<b>8%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>518</b>	<b>515</b>	<b>(3)</b>	<b>-1%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$42,430,534</b>	<b>\$51,951,801</b>	<b>\$9,521,267</b>	<b>22%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$13,100,254</b>	<b>\$15,957,907</b>	<b>\$2,857,653</b>	<b>22%</b>

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2014  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 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>

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2014  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>E. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%



**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2014  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
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>
<b>II.</b>	<b>TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL DISCHARGES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<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+M CORPORATION</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2014</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 2013 ACTUAL</b>	<b>FY 2014 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$11,532,247	\$16,480,529	\$4,948,282	43%
2	Short Term Investments	\$181,339,986	\$184,426,039	\$3,086,053	2%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$44,410,454	\$47,482,954	\$3,072,500	7%
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	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$7,501,154	\$8,393,007	\$891,853	12%
8	Prepaid Expenses	\$3,557,507	\$3,748,725	\$191,218	5%
9	Other Current Assets	\$6,627,672	\$7,096,977	\$469,305	7%
	<b>Total Current Assets</b>	<b>\$254,969,020</b>	<b>\$267,628,231</b>	<b>\$12,659,211</b>	<b>5%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$985,034	\$925,227	(\$59,807)	-6%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$2,247,255	\$0	(\$2,247,255)	-100%
4	Other Noncurrent Assets Whose Use is Limited	\$57,539,269	\$52,255,363	(\$5,283,906)	-9%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$60,771,558</b>	<b>\$53,180,590</b>	<b>(\$7,590,968)</b>	<b>-12%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$7,676,513	\$7,875,163	\$198,650	3%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$412,504,108	\$478,783,309	\$66,279,201	16%
2	Less: Accumulated Depreciation	\$250,099,034	\$274,060,791	\$23,961,757	\$0
	<b>Property, Plant and Equipment, Net</b>	<b>\$162,405,074</b>	<b>\$204,722,518</b>	<b>\$42,317,444</b>	<b>26%</b>
3	Construction in Progress	\$45,776,965	\$2,127,781	(\$43,649,184)	-95%
	<b>Total Net Fixed Assets</b>	<b>\$208,182,039</b>	<b>\$206,850,299</b>	<b>(\$1,331,740)</b>	<b>-1%</b>
	<b>Total Assets</b>	<b>\$531,599,130</b>	<b>\$535,534,283</b>	<b>\$3,935,153</b>	<b>1%</b>

<b>L+M CORPORATION</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2014</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 2013 ACTUAL</b>	<b>FY 2014 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$55,192,177	\$51,753,578	(\$3,438,599)	-6%
2	Salaries, Wages and Payroll Taxes	\$10,101,654	\$10,671,516	\$569,862	6%
3	Due To Third Party Payers	\$5,870,981	\$7,257,949	\$1,386,968	24%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$9,347,876	\$5,476,980	(\$3,870,896)	-41%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$123,017	\$582,553	\$459,536	374%
	<b>Total Current Liabilities</b>	<b>\$80,635,705</b>	<b>\$75,742,576</b>	<b>(\$4,893,129)</b>	<b>-6%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$101,001,797	\$108,587,802	\$7,586,005	8%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	<b>Total Long Term Debt</b>	<b>\$101,001,797</b>	<b>\$108,587,802</b>	<b>\$7,586,005</b>	<b>8%</b>
3	Accrued Pension Liability	\$42,309,345	\$43,216,010	\$906,665	2%
4	Other Long Term Liabilities	\$21,676,677	\$25,610,890	\$3,934,213	18%
	<b>Total Long Term Liabilities</b>	<b>\$164,987,819</b>	<b>\$177,414,702</b>	<b>\$12,426,883</b>	<b>8%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$246,531,146	\$241,902,500	(\$4,628,646)	-2%
2	Temporarily Restricted Net Assets	\$24,154,982	\$24,770,687	\$615,705	3%
3	Permanently Restricted Net Assets	\$15,289,478	\$15,703,818	\$414,340	3%
	<b>Total Net Assets</b>	<b>\$285,975,606</b>	<b>\$282,377,005</b>	<b>(\$3,598,601)</b>	<b>-1%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$531,599,130</b>	<b>\$535,534,283</b>	<b>\$3,935,153</b>	<b>1%</b>

<b>L+M CORPORATION</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2014</b>					
<b>REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2013 ACTUAL</u>	<u>FY 2014 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>A. <u>Operating Revenue:</u></b>					
1	Total Gross Patient Revenue	\$837,486,803	\$1,078,626,933	\$241,140,130	29%
2	Less: Allowances	\$456,969,027	\$618,314,900	\$161,345,873	35%
3	Less: Charity Care	\$7,772,037	\$6,782,933	(\$989,104)	-13%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$372,745,739</b>	<b>\$453,529,100</b>	<b>\$80,783,361</b>	<b>22%</b>
5	Provision for Bad Debts	\$14,555,970	\$20,298,386	\$5,742,416	39%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$358,189,769</b>	<b>\$433,230,714</b>	<b>\$75,040,945</b>	<b>21%</b>
6	Other Operating Revenue	\$21,448,860	\$20,795,287	(\$653,573)	-3%
7	Net Assets Released from Restrictions	\$748,784	\$876,203	\$127,419	17%
	<b>Total Operating Revenue</b>	<b>\$380,387,413</b>	<b>\$454,902,204</b>	<b>\$74,514,791</b>	<b>20%</b>
<b>B. <u>Operating Expenses:</u></b>					
1	Salaries and Wages	\$193,780,844	\$213,467,507	\$19,686,663	10%
2	Fringe Benefits	\$49,062,244	\$59,185,837	\$10,123,593	21%
3	Physicians Fees	\$9,298,451	\$11,343,273	\$2,044,822	22%
4	Supplies and Drugs	\$49,529,083	\$71,998,110	\$22,469,027	45%
5	Depreciation and Amortization	\$23,023,433	\$27,479,122	\$4,455,689	19%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$2,865,011	\$3,554,919	\$689,908	24%
8	Malpractice Insurance Cost	\$11,940,143	\$13,571,427	\$1,631,284	14%
9	Other Operating Expenses	\$48,305,868	\$72,987,481	\$24,681,613	51%
	<b>Total Operating Expenses</b>	<b>\$387,805,077</b>	<b>\$473,587,676</b>	<b>\$85,782,599</b>	<b>22%</b>
	<b>Income/(Loss) From Operations</b>	<b>(\$7,417,664)</b>	<b>(\$18,685,472)</b>	<b>(\$11,267,808)</b>	<b>152%</b>
<b>C. <u>Non-Operating Revenue:</u></b>					
1	Income from Investments	\$9,671,018	\$15,297,404	\$5,626,386	58%
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>\$9,671,018</b>	<b>\$15,297,404</b>	<b>\$5,626,386</b>	<b>58%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$2,253,354</b>	<b>(\$3,388,068)</b>	<b>(\$5,641,422)</b>	<b>-250%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$2,253,354</b>	<b>(\$3,388,068)</b>	<b>(\$5,641,422)</b>	<b>-250%</b>

<b>L+M CORPORATION</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2014</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u> <u>FY 2012</u>	<u>ACTUAL</u> <u>FY 2013</u>	<u>ACTUAL</u> <u>FY 2014</u>
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$354,042,019	\$358,189,769	\$433,230,714
2	Other Operating Revenue	16,080,943	22,197,644	21,671,490
3	Total Operating Revenue	\$370,122,962	\$380,387,413	\$454,902,204
4	Total Operating Expenses	369,415,491	387,805,077	473,587,676
5	Income/(Loss) From Operations	\$707,471	(\$7,417,664)	(\$18,685,472)
6	Total Non-Operating Revenue	7,013,860	9,671,018	15,297,404
7	Excess/(Deficiency) of Revenue Over Expenses	\$7,721,331	\$2,253,354	(\$3,388,068)
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	0.19%	-1.90%	-3.97%
2	Parent Corporation Non-Operating Margin	1.86%	2.48%	3.25%
3	Parent Corporation Total Margin	2.05%	0.58%	-0.72%
4	Income/(Loss) From Operations	\$707,471	(\$7,417,664)	(\$18,685,472)
5	Total Operating Revenue	\$370,122,962	\$380,387,413	\$454,902,204
6	Total Non-Operating Revenue	\$7,013,860	\$9,671,018	\$15,297,404
7	Total Revenue	\$377,136,822	\$390,058,431	\$470,199,608
8	Excess/(Deficiency) of Revenue Over Expenses	\$7,721,331	\$2,253,354	(\$3,388,068)
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$225,862,751	\$246,531,146	\$241,902,500
2	Parent Corporation Total Net Assets	\$253,109,414	\$285,975,606	\$282,377,005
3	Parent Corporation Change in Total Net Assets	\$10,982,441	\$32,866,192	(\$3,598,601)
4	Parent Corporation Change in Total Net Assets %	104.5%	13.0%	-1.3%

<b>L+M CORPORATION</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2014</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>
<b>D. <u>Liquidity Measures Summary</u></b>				
<b>1</b>	<b><u>Current Ratio</u></b>	<b>5.01</b>	<b>3.16</b>	<b>3.53</b>
2	Total Current Assets	\$272,002,244	\$254,969,020	\$267,628,231
3	Total Current Liabilities	\$54,249,457	\$80,635,705	\$75,742,576
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>233</b>	<b>193</b>	<b>164</b>
5	Cash and Cash Equivalents	\$15,956,015	\$11,532,247	\$16,480,529
6	Short Term Investments	\$207,930,544	\$181,339,986	\$184,426,039
7	Total Cash and Short Term Investments	\$223,886,559	\$192,872,233	\$200,906,568
8	Total Operating Expenses	\$369,415,491	\$387,805,077	\$473,587,676
9	Depreciation Expense	\$19,255,553	\$23,023,433	\$27,479,122
10	Operating Expenses less Depreciation Expense	\$350,159,938	\$364,781,644	\$446,108,554
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>27</b>	<b>39</b>	<b>34</b>
12	Net Patient Accounts Receivable	\$ 32,312,475	\$ 44,410,454	\$ 47,482,954
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$5,646,905	\$5,870,981	\$7,257,949
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 26,665,570	\$ 38,539,473	\$ 40,225,005
16	Total Net Patient Revenue	\$354,042,019	\$358,189,769	\$433,230,714
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>57</b>	<b>81</b>	<b>62</b>
18	Total Current Liabilities	\$54,249,457	\$80,635,705	\$75,742,576
19	Total Operating Expenses	\$369,415,491	\$387,805,077	\$473,587,676
20	Depreciation Expense	\$19,255,553	\$23,023,433	\$27,479,122
20	Total Operating Expenses less Depreciation Expense	\$350,159,938	\$364,781,644	\$446,108,554

<b>L+M CORPORATION</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2014</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 2012</b>	<b>FY 2013</b>	<b>FY 2014</b>
<b>E.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>55.2</b>	<b>53.8</b>	<b>52.7</b>
2	Total Net Assets	\$253,109,414	\$285,975,606	\$282,377,005
3	Total Assets	\$458,436,535	\$531,599,130	\$535,534,283
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>20.2</b>	<b>13.9</b>	<b>13.1</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$7,721,331	\$2,253,354	(\$3,388,068)
6	Depreciation Expense	\$19,255,553	\$23,023,433	\$27,479,122
7	Excess of Revenues Over Expenses and Depreciation Expense	\$26,976,884	\$25,276,787	\$24,091,054
8	Total Current Liabilities	\$54,249,457	\$80,635,705	\$75,742,576
9	Total Long Term Debt	\$79,507,217	\$101,001,797	\$108,587,802
10	Total Current Liabilities and Total Long Term Debt	\$133,756,674	\$181,637,502	\$184,330,378
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>23.9</b>	<b>26.1</b>	<b>27.8</b>
12	Total Long Term Debt	\$79,507,217	\$101,001,797	\$108,587,802
13	Total Net Assets	\$253,109,414	\$285,975,606	\$282,377,005
14	Total Long Term Debt and Total Net Assets	\$332,616,631	\$386,977,403	\$390,964,807

LAWRENCE AND MEMORIAL HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2014								
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	40,375	9,878	9,467	148	148	74.7%	74.7%
2	ICU/CCU (Excludes Neonatal ICU)	5,247	412	0	20	20	71.9%	71.9%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	5,856	621	621	18	18	89.1%	89.1%
	<b>TOTAL PSYCHIATRIC</b>	<b>5,856</b>	<b>621</b>	<b>621</b>	<b>18</b>	<b>18</b>	<b>89.1%</b>	<b>89.1%</b>
5	Rehabilitation	4,657	316	316	16	16	79.7%	79.7%
6	Maternity	4,378	1,657	1,657	24	24	50.0%	50.0%
7	Newborn	3,529	1,470	1,470	14	14	69.1%	69.1%
8	Neonatal ICU	2,225	193	0	10	10	61.0%	61.0%
9	Pediatric	65	15	15	6	6	3.0%	3.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>62,803</b>	<b>12,680</b>	<b>12,076</b>	<b>242</b>	<b>242</b>	<b>71.1%</b>	<b>71.1%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>66,332</b>	<b>14,150</b>	<b>13,546</b>	<b>256</b>	<b>256</b>	<b>71.0%</b>	<b>71.0%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>66,332</b>	<b>14,150</b>	<b>13,546</b>	<b>256</b>	<b>256</b>	<b>71.0%</b>	<b>71.0%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>67,153</b>	<b>14,649</b>	<b>14,080</b>	<b>256</b>	<b>256</b>	<b>71.9%</b>	<b>71.9%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-821</b>	<b>-499</b>	<b>-534</b>	<b>0</b>	<b>0</b>	<b>-0.9%</b>	<b>-0.9%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-1%</b>	<b>-3%</b>	<b>-4%</b>	<b>0%</b>	<b>0%</b>	<b>-1%</b>	<b>-1%</b>
	Total Licensed Beds and Bassinets	308						
<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>								



LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	6,392	6,520	128	2%
2	Outpatient Scans (Excluding Emergency Department Scans)	9,679	9,978	299	3%
3	Emergency Department Scans	7,115	7,596	481	7%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>23,186</b>	<b>24,094</b>	<b>908</b>	<b>4%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	1,323	1,308	-15	-1%
2	Outpatient Scans (Excluding Emergency Department Scans)	9,819	10,062	243	2%
3	Emergency Department Scans	114	100	-14	-12%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>11,256</b>	<b>11,470</b>	<b>214</b>	<b>2%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	3	6	3	100%
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>3</b>	<b>6</b>	<b>3</b>	<b>100%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	6	2	-4	-67%
2	Outpatient Scans (Excluding Emergency Department Scans)	369	392	23	6%
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>375</b>	<b>394</b>	<b>19</b>	<b>5%</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	229	125	-104	-45%
2	Outpatient Procedures	9,439	11,696	2,257	24%
	<b>Total Linear Accelerator Procedures</b>	<b>9,668</b>	<b>11,821</b>	<b>2,153</b>	<b>22%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	390	344	-46	-12%
2	Outpatient Procedures	197	341	144	73%
	<b>Total Cardiac Catheterization Procedures</b>	<b>587</b>	<b>685</b>	<b>98</b>	<b>17%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	108	102	-6	-6%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>108</b>	<b>102</b>	<b>-6</b>	<b>-6%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	2,565	2,495	-70	-3%
2	Outpatient Surgical Procedures	10,165	9,710	-455	-4%
	<b>Total Surgical Procedures</b>	<b>12,730</b>	<b>12,205</b>	<b>-525</b>	<b>-4%</b>
<b>J. Endoscopy Procedures</b>					

LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Endoscopy Procedures	910	835	-75	-8%
2	Outpatient Endoscopy Procedures	2,473	2,096	-377	-15%
	<b>Total Endoscopy Procedures</b>	<b>3,383</b>	<b>2,931</b>	<b>-452</b>	<b>-13%</b>
	<b>K. Hospital Emergency Room Visits</b>				
1	Emergency Room Visits: Treated and Admitted	7,004	6,903	-101	-1%
2	Emergency Room Visits: Treated and Discharged	77,556	75,467	-2,089	-3%
	<b>Total Emergency Room Visits</b>	<b>84,560</b>	<b>82,370</b>	<b>-2,190</b>	<b>-3%</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	20,163	19,789	-374	-2%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0%
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%
9	Specialty Clinic Visits	0	0	0	0%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%
13	Specialty Clinic Visits - Other Speciality Clinics	0	0	0	0%
	<b>Total Hospital Clinic Visits</b>	<b>20,163</b>	<b>19,789</b>	<b>-374</b>	<b>-2%</b>
	<b>M. Other Hospital Outpatient Visits</b>				
1	Rehabilitation (PT/OT/ST)	79,048	76,408	-2,640	-3%
2	Cardiac Rehabilitation	4,113	4,278	165	4%
3	Chemotherapy	1,676	6,069	4,393	262%
4	Gastroenterology	3,664	3,240	-424	-12%
5	Other Outpatient Visits	260,754	264,932	4,178	2%
	<b>Total Other Hospital Outpatient Visits</b>	<b>349,255</b>	<b>354,927</b>	<b>5,672</b>	<b>2%</b>
	<b>N. Hospital Full Time Equivalent Employees</b>				
1	Total Nursing FTEs	452.3	407.3	-45.0	-10%
2	Total Physician FTEs	1.7	1.6	-0.1	-6%
3	Total Non-Nursing and Non-Physician FTEs	1,467.0	1,440.2	-26.8	-2%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>1,921.0</b>	<b>1,849.1</b>	<b>-71.9</b>	<b>-4%</b>

LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Outpatient Surgical Procedures</b>					
1	L&M 365 Montauk Hospital	7,414	7,455	41	1%
2	Pequot Health Center Groton	2,751	2,255	-496	-18%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>10,165</b>	<b>9,710</b>	<b>-455</b>	<b>-4%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	L&M 365 Montauk Ave Hospital	2,473	2,096	-377	-15%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>2,473</b>	<b>2,096</b>	<b>-377</b>	<b>-15%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	L&M 365 Montauk Ave Hospital	42,476	42,035	-441	-1%
2	Pequot Health Center Groton	35,080	33,432	-1,648	-5%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>77,556</b>	<b>75,467</b>	<b>-2,089</b>	<b>-3%</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>					

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2014</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>AMOUNT</b>	<b>%</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>DIFFERENCE</b>	<b>DIFFERENCE</b>
<b>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$160,976,571	\$165,812,566	\$4,835,995	3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$71,375,778	\$74,387,490	\$3,011,712	4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	44.34%	44.86%	0.52%	1%
4	DISCHARGES	6,658	6,362	(296)	-4%
5	CASE MIX INDEX (CMI)	1.40940	1.44560	0.03620	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	9,383.78520	9,196.90720	(186.87800)	-2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,606.29	\$8,088.32	\$482.03	6%
8	PATIENT DAYS	36,229	35,103	(1,126)	-3%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,970.13	\$2,119.12	\$148.99	8%
10	AVERAGE LENGTH OF STAY	5.4	5.5	0.1	1%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$132,585,334	\$173,051,967	\$40,466,633	31%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$31,200,240	\$41,714,082	\$10,513,842	34%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.53%	24.10%	0.57%	2%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	82.36%	104.37%	22.00%	27%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,483.73685	6,639.76585	1,156.02901	21%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,689.59	\$6,282.46	\$592.87	10%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$293,561,905	\$338,864,533	\$45,302,628	15%
18	TOTAL ACCRUED PAYMENTS	\$102,576,018	\$116,101,572	\$13,525,554	13%
19	TOTAL ALLOWANCES	\$190,985,887	\$222,762,961	\$31,777,074	17%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b><u>NON-GOVERNMENT INPATIENT</u></b>					
1	INPATIENT ACCRUED CHARGES	\$70,397,042	\$72,646,940	\$2,249,898	3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$51,821,467	\$51,017,386	(\$804,081)	-2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	73.61%	70.23%	-3.39%	-5%
4	DISCHARGES	3,952	3,795	(157)	-4%
5	CASE MIX INDEX (CMI)	1.13990	1.15850	0.01860	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,504.88480	4,396.50750	(108.37730)	-2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,503.39	\$11,604.07	\$100.68	1%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,897.11)	(\$3,515.76)	\$381.35	-10%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$17,556,013)	(\$15,457,045)	\$2,098,968	-12%
10	PATIENT DAYS	14,693	14,569	(124)	-1%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,526.95	\$3,501.78	(\$25.17)	-1%
12	AVERAGE LENGTH OF STAY	3.7	3.8	0.1	3%
<b><u>NON-GOVERNMENT OUTPATIENT</u></b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$186,816,281	\$204,619,360	\$17,803,079	10%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$101,871,248	\$111,905,973	\$10,034,725	10%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	54.53%	54.69%	0.16%	0%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	265.38%	281.66%	16.29%	6%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	10,487.62734	10,689.10089	201.47355	2%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,713.47	\$10,469.17	\$755.70	8%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$4,023.87)	(\$4,186.70)	(\$162.83)	4%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$42,200,899)	(\$44,752,094)	(\$2,551,195)	6%
<b><u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u></b>					
21	TOTAL ACCRUED CHARGES	\$257,213,323	\$277,266,300	\$20,052,977	8%
22	TOTAL ACCRUED PAYMENTS	\$153,692,715	\$162,923,359	\$9,230,644	6%
23	TOTAL ALLOWANCES	\$103,520,608	\$114,342,941	\$10,822,333	10%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$59,756,913)	(\$60,209,139)	(\$452,227)	1%
<b><u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u></b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$231,817,118	\$250,404,746	\$18,587,628	8%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$150,271,830	\$161,193,549	\$10,921,719	7%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$81,545,288	\$89,211,197	\$7,665,909	9%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	35.18%	35.63%	0.45%	

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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
<b>C. UNINSURED</b>					
<b>UNINSURED INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$1,115,273	\$1,312,711	\$197,438	18%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	67	89	22	33%
5	CASE MIX INDEX (CMI)	1.02440	1.05920	0.03480	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	68.63480	94.26880	25.63400	37%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$11,503.39	\$11,604.07	\$100.68	1%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$7,606.29	\$8,088.32	\$482.03	6%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$522,056	\$762,476	\$240,420	46%
11	PATIENT DAYS	191	259	68	36%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	2.9	2.9	0.1	2%
<b>UNINSURED OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$10,987,518	\$10,088,487	(\$899,031)	-8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	985.19%	768.52%	-216.66%	-22%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	660.07489	683.98554	23.91065	4%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$9,713.47	\$10,469.17	\$755.70	8%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,689.59	\$6,282.46	\$592.87	10%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,755,559	\$4,297,114	\$541,555	14%
<b>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$12,102,791	\$11,401,198	(\$701,593)	-6%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$12,102,791	\$11,401,198	(\$701,593)	-6%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,277,615	\$5,059,590	\$781,975	18%

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<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$49,696,839	\$53,016,167	\$3,319,328	7%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$15,986,391	\$15,703,121	(\$283,270)	-2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	32.17%	29.62%	-2.55%	-8%
4	DISCHARGES	3,069	3,032	(37)	-1%
5	CASE MIX INDEX (CMI)	0.97390	1.05160	0.07770	8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,988.89910	3,188.45120	199.55210	7%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,348.59	\$4,925.00	(\$423.59)	-8%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,154.81	\$6,679.07	\$524.27	9%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,257.70	\$3,163.32	\$905.62	40%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,748,038	\$10,086,079	\$3,338,041	49%
11	PATIENT DAYS	13,305	13,576	271	2%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,201.53	\$1,156.68	(\$44.85)	-4%
13	AVERAGE LENGTH OF STAY	4.3	4.5	0.1	3%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$71,559,253	\$81,713,156	\$10,153,903	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,407,037	\$18,881,597	(\$525,440)	-3%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.12%	23.11%	-4.01%	-15%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	143.99%	154.13%	10.14%	7%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,419.10093	4,673.18373	254.08280	6%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,391.63	\$4,040.41	(\$351.21)	-8%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$5,321.84	\$6,428.75	\$1,106.91	21%
21	MEDICARE - MEDICAID OP PMT / OPED	\$1,297.97	\$2,242.05	\$944.08	73%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,735,856	\$10,477,506	\$4,741,650	83%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$121,256,092	\$134,729,323	\$13,473,231	11%
24	TOTAL ACCRUED PAYMENTS	\$35,393,428	\$34,584,718	(\$808,710)	-2%
25	TOTAL ALLOWANCES	\$85,862,664	\$100,144,605	\$14,281,941	17%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$12,483,894	\$20,563,585	\$8,079,691	65%

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<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>E.</b>	<b><u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u></b>				
	<b><u>OTHER MEDICAL ASSISTANCE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$371,552	\$1,736,683	\$1,365,131	367%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$118,145	\$554,981	\$436,836	370%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	31.80%	31.96%	0.16%	0%
4	DISCHARGES	27	106	79	293%
5	CASE MIX INDEX (CMI)	0.85900	0.96050	0.10150	12%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	23.19300	101.81300	78.62000	339%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,093.99	\$5,450.98	\$356.99	7%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$6,409.40	\$6,153.09	(\$256.31)	-4%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$2,512.29	\$2,637.33	\$125.04	5%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$58,268	\$268,515	\$210,247	361%
11	PATIENT DAYS	75	402	327	436%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,575.27	\$1,380.55	(\$194.72)	-12%
13	AVERAGE LENGTH OF STAY	2.8	3.8	1.0	37%
	<b><u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,706,206	\$1,873,241	\$167,035	10%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$427,749	\$468,477	\$40,728	10%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.07%	25.01%	-0.06%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	459.21%	107.86%	-351.35%	-77%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	123.98685	114.33494	(9.65191)	-8%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,449.95	\$4,097.41	\$647.45	19%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$6,263.51	\$6,371.76	\$108.24	2%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$2,239.64	\$2,185.05	(\$54.59)	-2%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$277,686	\$249,828	(\$27,858)	-10%
	<b><u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$2,077,758	\$3,609,924	\$1,532,166	74%
24	TOTAL ACCRUED PAYMENTS	\$545,894	\$1,023,458	\$477,564	87%
25	TOTAL ALLOWANCES	\$1,531,864	\$2,586,466	\$1,054,602	69%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$335,954	\$518,343	\$182,389	54%



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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
<b>F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>					
<b>TOTAL MEDICAL ASSISTANCE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$50,068,391	\$54,752,850	\$4,684,459	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$16,104,536	\$16,258,102	\$153,566	1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	32.17%	29.69%	-2.47%	-8%
4	DISCHARGES	3,096	3,138	42	1%
5	CASE MIX INDEX (CMI)	0.97290	1.04852	0.07562	8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,012.09210	3,290.26420	278.17210	9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,346.63	\$4,941.28	(\$405.35)	-8%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$6,156.77	\$6,662.80	\$506.03	8%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,259.66	\$3,147.04	\$887.38	39%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,806,306	\$10,354,594	\$3,548,288	52%
11	PATIENT DAYS	13,380	13,978	598	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,203.63	\$1,163.12	(\$40.51)	-3%
13	AVERAGE LENGTH OF STAY	4.3	4.5	0.1	3%
<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$73,265,459	\$83,586,397	\$10,320,938	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,834,786	\$19,350,074	(\$484,712)	-2%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.07%	23.15%	-3.92%	-14%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	146.33%	152.66%	6.33%	4%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,543.08778	4,787.51867	244.43089	5%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,365.93	\$4,041.78	(\$324.15)	-7%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,347.54	\$6,427.39	\$1,079.85	20%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$1,323.67	\$2,240.69	\$917.02	69%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,013,542	\$10,727,334	\$4,713,792	78%
<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$123,333,850	\$138,339,247	\$15,005,397	12%
24	TOTAL ACCRUED PAYMENTS	\$35,939,322	\$35,608,176	(\$331,146)	-1%
25	TOTAL ALLOWANCES	\$87,394,528	\$102,731,071	\$15,336,543	18%

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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$11,605,898	\$11,029,201	(\$576,697)	-5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,936,371	\$5,008,631	\$72,260	1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	42.53%	45.41%	2.88%	7%
4	DISCHARGES	943	855	(88)	-9%
5	CASE MIX INDEX (CMI)	0.88970	0.99040	0.10070	11%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	838.98710	846.79200	7.80490	1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,883.73	\$5,914.83	\$31.10	1%
8	PATIENT DAYS	2,851	2,682	(169)	-6%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,731.45	\$1,867.50	\$136.05	8%
10	AVERAGE LENGTH OF STAY	3.0	3.1	0.1	4%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$23,612,888	\$22,637,292	(\$975,596)	-4%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$6,217,879	\$5,573,648	(\$644,231)	-10%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$35,218,786	\$33,666,493	(\$1,552,293)	-4%
14	TOTAL ACCRUED PAYMENTS	\$11,154,250	\$10,582,279	(\$571,971)	-5%
15	TOTAL ALLOWANCES	\$24,064,536	\$23,084,214	(\$980,322)	-4%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$22,653,789	\$29,607,174	\$6,953,385	31%
2	TOTAL OPERATING EXPENSES	\$312,019,235	\$348,525,480	\$36,506,245	12%
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)	\$3,684,045	\$2,681,674	(\$1,002,371)	-27%
5	BAD DEBTS (CHARGES)	\$12,037,777	\$14,966,698	\$2,928,921	24%
6	UNCOMPENSATED CARE (CHARGES)	\$15,721,822	\$17,648,372	\$1,926,550	12%
7	COST OF UNCOMPENSATED CARE	\$6,723,842	\$7,282,395	\$558,554	8%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$123,333,850	\$138,339,247	\$15,005,397	12%
9	TOTAL ACCRUED PAYMENTS	\$35,939,322	\$35,608,176	(\$331,146)	-1%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$52,746,893	\$57,084,081	\$4,337,187	8%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$16,807,571	\$21,475,905	\$4,668,333	28%

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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$293,047,902	\$304,241,557	\$11,193,655	4%
2	TOTAL INPATIENT PAYMENTS	\$144,238,152	\$146,671,609	\$2,433,457	2%
3	TOTAL INPATIENT PAYMENTS / CHARGES	49.22%	48.21%	-1.01%	-2%
4	TOTAL DISCHARGES	14,649	14,150	(499)	-3%
5	TOTAL CASE MIX INDEX	1.21099	1.25304	0.04205	3%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	17,739.74920	17,730.47090	(9.27830)	0%
7	TOTAL OUTPATIENT CHARGES	\$416,279,962	\$483,895,016	\$67,615,054	16%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	142.05%	159.05%	17.00%	12%
9	TOTAL OUTPATIENT PAYMENTS	\$159,124,153	\$178,543,777	\$19,419,624	12%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	38.23%	36.90%	-1.33%	-3%
11	TOTAL CHARGES	\$709,327,864	\$788,136,573	\$78,808,709	11%
12	TOTAL PAYMENTS	\$303,362,305	\$325,215,386	\$21,853,081	7%
13	TOTAL PAYMENTS / TOTAL CHARGES	42.77%	41.26%	-1.50%	-4%
14	PATIENT DAYS	67,153	66,332	(821)	-1%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$222,650,860	\$231,594,617	\$8,943,757	4%
2	INPATIENT PAYMENTS	\$92,416,685	\$95,654,223	\$3,237,538	4%
3	GOVT. INPATIENT PAYMENTS / CHARGES	41.51%	41.30%	-0.21%	0%
4	DISCHARGES	10,697	10,355	(342)	-3%
5	CASE MIX INDEX	1.23725	1.28768	0.05043	4%
6	CASE MIX ADJUSTED DISCHARGES	13,234.86440	13,333.96340	99.09900	1%
7	OUTPATIENT CHARGES	\$229,463,681	\$279,275,656	\$49,811,975	22%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	103.06%	120.59%	17.53%	17%
9	OUTPATIENT PAYMENTS	\$57,252,905	\$66,637,804	\$9,384,899	16%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.95%	23.86%	-1.09%	-4%
11	TOTAL CHARGES	\$452,114,541	\$510,870,273	\$58,755,732	13%
12	TOTAL PAYMENTS	\$149,669,590	\$162,292,027	\$12,622,437	8%
13	TOTAL PAYMENTS / CHARGES	33.10%	31.77%	-1.34%	-4%
14	PATIENT DAYS	52,460	51,763	(697)	-1%
15	TOTAL GOVERNMENT DEDUCTIONS	\$302,444,951	\$348,578,246	\$46,133,295	15%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	5.4	5.5	0.1	1%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.7	3.8	0.1	3%
3	UNINSURED	2.9	2.9	0.1	2%
4	MEDICAID	4.3	4.5	0.1	3%
5	OTHER MEDICAL ASSISTANCE	2.8	3.8	1.0	37%
6	CHAMPUS / TRICARE	3.0	3.1	0.1	4%
7	TOTAL AVERAGE LENGTH OF STAY	4.6	4.7	0.1	2%

LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$709,327,864	\$788,136,573	\$78,808,709	11%
2	TOTAL GOVERNMENT DEDUCTIONS	\$302,444,951	\$348,578,246	\$46,133,295	15%
3	UNCOMPENSATED CARE	\$15,721,822	\$17,648,372	\$1,926,550	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$81,545,288	\$89,211,197	\$7,665,909	9%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,253,497	\$7,483,372	\$1,229,875	20%
6	TOTAL ADJUSTMENTS	\$405,965,558	\$462,921,187	\$56,955,629	14%
7	TOTAL ACCRUED PAYMENTS	\$303,362,306	\$325,215,386	\$21,853,080	7%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$303,362,306	\$325,215,386	\$21,853,080	7%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4276757215	0.4126383639	(0.0150373576)	-4%
11	COST OF UNCOMPENSATED CARE	\$6,723,842	\$7,282,395	\$558,554	8%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$16,807,571	\$21,475,905	\$4,668,333	28%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$23,531,413	\$28,758,300	\$5,226,887	22%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$5,735,856	\$10,477,506	\$4,741,650	83%
2	OTHER MEDICAL ASSISTANCE	\$335,954	\$518,343	\$182,389	54%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,277,615	\$5,059,590	\$781,975	18%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$10,349,424	\$16,055,438	\$5,706,014	55%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$13,293,414	\$15,460,356	\$2,166,942	16.30%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$4,432,141)	(\$6,430,155)	(\$1,998,014)	45.08%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$298,930,165	\$318,785,233	\$19,855,068	6.64%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$9,026,355	\$7,150,730	(\$1,875,625)	-20.78%
5	GROSS REVENUE FROM HOSP. AUDIT. FINANCIAL STATEMENTS	\$718,354,285	\$795,287,303	\$76,933,018	10.71%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$3,531,183	\$2,730,999	(\$800,184)	-22.66%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$19,253,005	\$20,379,371	\$1,126,366	5.85%

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$70,397,042	\$72,646,940	\$2,249,898
2	MEDICARE	\$160,976,571	165,812,566	\$4,835,995
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$50,068,391	54,752,850	\$4,684,459
4	MEDICAID	\$49,696,839	53,016,167	\$3,319,328
5	OTHER MEDICAL ASSISTANCE	\$371,552	1,736,683	\$1,365,131
6	CHAMPUS / TRICARE	\$11,605,898	11,029,201	(\$576,697)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,115,273	1,312,711	\$197,438
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$222,650,860</b>	<b>\$231,594,617</b>	<b>\$8,943,757</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$293,047,902</b>	<b>\$304,241,557</b>	<b>\$11,193,655</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$186,816,281	\$204,619,360	\$17,803,079
2	MEDICARE	\$132,585,334	173,051,967	\$40,466,633
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$73,265,459	83,586,397	\$10,320,938
4	MEDICAID	\$71,559,253	81,713,156	\$10,153,903
5	OTHER MEDICAL ASSISTANCE	\$1,706,206	1,873,241	\$167,035
6	CHAMPUS / TRICARE	\$23,612,888	22,637,292	(\$975,596)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,987,518	10,088,487	(\$899,031)
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$229,463,681</b>	<b>\$279,275,656</b>	<b>\$49,811,975</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$416,279,962</b>	<b>\$483,895,016</b>	<b>\$67,615,054</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$257,213,323	\$277,266,300	\$20,052,977
2	TOTAL MEDICARE	\$293,561,905	\$338,864,533	\$45,302,628
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$123,333,850	\$138,339,247	\$15,005,397
4	TOTAL MEDICAID	\$121,256,092	\$134,729,323	\$13,473,231
5	TOTAL OTHER MEDICAL ASSISTANCE	\$2,077,758	\$3,609,924	\$1,532,166
6	TOTAL CHAMPUS / TRICARE	\$35,218,786	\$33,666,493	(\$1,552,293)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,102,791	\$11,401,198	(\$701,593)
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$452,114,541</b>	<b>\$510,870,273</b>	<b>\$58,755,732</b>
	<b>TOTAL CHARGES</b>	<b>\$709,327,864</b>	<b>\$788,136,573</b>	<b>\$78,808,709</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$51,821,467	\$51,017,386	(\$804,081)
2	MEDICARE	\$71,375,778	74,387,490	\$3,011,712
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$16,104,536	16,258,102	\$153,566
4	MEDICAID	\$15,986,391	15,703,121	(\$283,270)
5	OTHER MEDICAL ASSISTANCE	\$118,145	554,981	\$436,836
6	CHAMPUS / TRICARE	\$4,936,371	5,008,631	\$72,260
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	0	\$0
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$92,416,685</b>	<b>\$95,654,223</b>	<b>\$3,237,538</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$144,238,152</b>	<b>\$146,671,609</b>	<b>\$2,433,457</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$101,871,248	\$111,905,973	\$10,034,725
2	MEDICARE	\$31,200,240	41,714,082	\$10,513,842
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$19,834,786	19,350,074	(\$484,712)
4	MEDICAID	\$19,407,037	18,881,597	(\$525,440)
5	OTHER MEDICAL ASSISTANCE	\$427,749	468,477	\$40,728
6	CHAMPUS / TRICARE	\$6,217,879	5,573,648	(\$644,231)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	0	\$0
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$57,252,905</b>	<b>\$66,637,804</b>	<b>\$9,384,899</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$159,124,153</b>	<b>\$178,543,777</b>	<b>\$19,419,624</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$153,692,715	\$162,923,359	\$9,230,644
2	TOTAL MEDICARE	\$102,576,018	\$116,101,572	\$13,525,554
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$35,939,322	\$35,608,176	(\$331,146)
4	TOTAL MEDICAID	\$35,393,428	\$34,584,718	(\$808,710)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$545,894	\$1,023,458	\$477,564
6	TOTAL CHAMPUS / TRICARE	\$11,154,250	\$10,582,279	(\$571,971)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	\$0	\$0
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$149,669,590</b>	<b>\$162,292,027</b>	<b>\$12,622,437</b>
	<b>TOTAL PAYMENTS</b>	<b>\$303,362,305</b>	<b>\$325,215,386</b>	<b>\$21,853,081</b>

LAWRENCE AND MEMORIAL HOSPITAL						
TWELVE MONTHS ACTUAL FILING						
FISCAL YEAR 2014						
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND						
BASELINE UNDERPAYMENT DATA						
(1)	(2)	(3)		(4)	(5)	
LINE	DESCRIPTION	ACTUAL 2013	FY	ACTUAL 2014	FY	AMOUNT DIFFERENCE
<b>II. PAYER MIX</b>						
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		9.92%	9.22%		-0.71%
2	MEDICARE		22.69%	21.04%		-1.66%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		7.06%	6.95%		-0.11%
4	MEDICAID		7.01%	6.73%		-0.28%
5	OTHER MEDICAL ASSISTANCE		0.05%	0.22%		0.17%
6	CHAMPUS / TRICARE		1.64%	1.40%		-0.24%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)		0.16%	0.17%		0.01%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>		<b>31.39%</b>	<b>29.39%</b>		<b>-2.00%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>		<b>41.31%</b>	<b>38.60%</b>		<b>-2.71%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		26.34%	25.96%		-0.37%
2	MEDICARE		18.69%	21.96%		3.27%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		10.33%	10.61%		0.28%
4	MEDICAID		10.09%	10.37%		0.28%
5	OTHER MEDICAL ASSISTANCE		0.24%	0.24%		0.00%
6	CHAMPUS / TRICARE		3.33%	2.87%		-0.46%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)		1.55%	1.28%		-0.27%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>		<b>32.35%</b>	<b>35.43%</b>		<b>3.09%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>		<b>58.69%</b>	<b>61.40%</b>		<b>2.71%</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)		17.08%	15.69%		-1.40%
2	MEDICARE		23.53%	22.87%		-0.65%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		5.31%	5.00%		-0.31%
4	MEDICAID		5.27%	4.83%		-0.44%
5	OTHER MEDICAL ASSISTANCE		0.04%	0.17%		0.13%
6	CHAMPUS / TRICARE		1.63%	1.54%		-0.09%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)		0.00%	0.00%		0.00%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>		<b>30.46%</b>	<b>29.41%</b>		<b>-1.05%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>		<b>47.55%</b>	<b>45.10%</b>		<b>-2.45%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)		33.58%	34.41%		0.83%
2	MEDICARE		10.28%	12.83%		2.54%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)		6.54%	5.95%		-0.59%
4	MEDICAID		6.40%	5.81%		-0.59%
5	OTHER MEDICAL ASSISTANCE		0.14%	0.14%		0.00%
6	CHAMPUS / TRICARE		2.05%	1.71%		-0.34%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)		0.00%	0.00%		0.00%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>		<b>18.87%</b>	<b>20.49%</b>		<b>1.62%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>		<b>52.45%</b>	<b>54.90%</b>		<b>2.45%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>		<b>100.00%</b>	<b>100.00%</b>		<b>0.00%</b>

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	FY AMOUNT DIFFERENCE
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,952	3,795	(157)
2	MEDICARE	6,658	6,362	(296)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,096	3,138	42
4	MEDICAID	3,069	3,032	(37)
5	OTHER MEDICAL ASSISTANCE	27	106	79
6	CHAMPUS / TRICARE	943	855	(88)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	67	89	22
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>10,697</b>	<b>10,355</b>	<b>(342)</b>
	<b>TOTAL DISCHARGES</b>	<b>14,649</b>	<b>14,150</b>	<b>(499)</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14,693	14,569	(124)
2	MEDICARE	36,229	35,103	(1,126)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13,380	13,978	598
4	MEDICAID	13,305	13,576	271
5	OTHER MEDICAL ASSISTANCE	75	402	327
6	CHAMPUS / TRICARE	2,851	2,682	(169)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	191	259	68
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>52,460</b>	<b>51,763</b>	<b>(697)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>67,153</b>	<b>66,332</b>	<b>(821)</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.7	3.8	0.1
2	MEDICARE	5.4	5.5	0.1
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.3	4.5	0.1
4	MEDICAID	4.3	4.5	0.1
5	OTHER MEDICAL ASSISTANCE	2.8	3.8	1.0
6	CHAMPUS / TRICARE	3.0	3.1	0.1
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.9	2.9	0.1
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>4.9</b>	<b>5.0</b>	<b>0.1</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.6</b>	<b>4.7</b>	<b>0.1</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.13990	1.15850	0.01860
2	MEDICARE	1.40940	1.44560	0.03620
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.97290	1.04852	0.07562
4	MEDICAID	0.97390	1.05160	0.07770
5	OTHER MEDICAL ASSISTANCE	0.85900	0.96050	0.10150
6	CHAMPUS / TRICARE	0.88970	0.99040	0.10070
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.02440	1.05920	0.03480
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.23725</b>	<b>1.28768</b>	<b>0.05043</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.21099</b>	<b>1.25304</b>	<b>0.04205</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$231,817,118	\$250,404,746	\$18,587,628
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$150,271,830	\$161,193,549	\$10,921,719
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$81,545,288	\$89,211,197	\$7,665,909
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	35.18%	35.63%	0.45%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$13,293,414	\$15,460,356	\$2,166,942
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,253,497	\$7,483,372	\$1,229,875
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$3,684,045	\$2,681,674	(\$1,002,371)
9	BAD DEBTS	\$12,037,777	\$14,966,698	\$2,928,921
10	TOTAL UNCOMPENSATED CARE	\$15,721,822	\$17,648,372	\$1,926,550
11	TOTAL OTHER OPERATING REVENUE	\$22,653,789	\$29,607,174	\$6,953,385
12	TOTAL OPERATING EXPENSES	\$312,019,235	\$348,525,480	\$36,506,245

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
<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)	4,504.88480	4,396.50750	(108.37730)
2	MEDICARE	9,383.78520	9,196.90720	(186.87800)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,012.09210	3,290.26420	278.17210
4	MEDICAID	2,988.89910	3,188.45120	199.55210
5	OTHER MEDICAL ASSISTANCE	23.19300	101.81300	78.62000
6	CHAMPUS / TRICARE	838.98710	846.79200	7.80490
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	68.63480	94.26880	25.63400
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>13,234.86440</b>	<b>13,333.96340</b>	<b>99.09900</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>17,739.74920</b>	<b>17,730.47090</b>	<b>(9.27830)</b>
<b>B.</b>	<b>OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,487.62734	10,689.10089	201.47355
2	MEDICARE	5,483.73685	6,639.76585	1,156.02901
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,543.08778	4,787.51867	244.43089
4	MEDICAID	4,419.10093	4,673.18373	254.08280
5	OTHER MEDICAL ASSISTANCE	123.98685	114.33494	-9.65191
6	CHAMPUS / TRICARE	1,918.58944	1,754.87641	-163.71303
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	660.07489	683.98554	23.91065
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>11,945.41407</b>	<b>13,182.16093</b>	<b>1,236.74686</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>22,433.04141</b>	<b>23,871.26183</b>	<b>1,438.22041</b>
<b>C.</b>	<b>INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,503.39	\$11,604.07	\$100.68
2	MEDICARE	\$7,606.29	\$8,088.32	\$482.03
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,346.63	\$4,941.28	(\$405.35)
4	MEDICAID	\$5,348.59	\$4,925.00	(\$423.59)
5	OTHER MEDICAL ASSISTANCE	\$5,093.99	\$5,450.98	\$356.99
6	CHAMPUS / TRICARE	\$5,883.73	\$5,914.83	\$31.10
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0.00	\$0.00	\$0.00
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$6,982.82</b>	<b>\$7,173.73</b>	<b>\$190.91</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$8,130.79</b>	<b>\$8,272.29</b>	<b>\$141.50</b>
<b>D.</b>	<b>OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,713.47	\$10,469.17	\$755.70
2	MEDICARE	\$5,689.59	\$6,282.46	\$592.87
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,365.93	\$4,041.78	(\$324.15)
4	MEDICAID	\$4,391.63	\$4,040.41	(\$351.21)
5	OTHER MEDICAL ASSISTANCE	\$3,449.95	\$4,097.41	\$647.45
6	CHAMPUS / TRICARE	\$3,240.86	\$3,176.09	(\$64.77)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0.00	\$0.00	\$0.00
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$4,792.88</b>	<b>\$5,055.15</b>	<b>\$262.27</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$7,093.29</b>	<b>\$7,479.44</b>	<b>\$386.15</b>



LAWRENCE AND MEMORIAL HOSPITAL				
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REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$5,735,856	\$10,477,506	\$4,741,650
2	OTHER MEDICAL ASSISTANCE	\$335,954	\$518,343	\$182,389
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	\$0	\$0
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$6,071,810</b>	<b>\$10,995,849</b>	<b>\$4,924,039</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$709,327,864	\$788,136,573	\$78,808,709
2	TOTAL GOVERNMENT DEDUCTIONS	\$302,444,951	\$348,578,246	\$46,133,295
3	UNCOMPENSATED CARE	\$15,721,822	\$17,648,372	\$1,926,550
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$81,545,288	\$89,211,197	\$7,665,909
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,253,497	\$7,483,372	\$1,229,875
6	TOTAL ADJUSTMENTS	\$405,965,558	\$462,921,187	\$56,955,629
7	TOTAL ACCRUED PAYMENTS	\$303,362,306	\$325,215,386	\$21,853,080
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$303,362,306	\$325,215,386	\$21,853,080
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4276757215	0.4126383639	(0.0150373576)
11	COST OF UNCOMPENSATED CARE	\$6,723,842	\$7,282,395	\$558,554
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$16,807,571	\$21,475,905	\$4,668,333
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$23,531,413	\$28,758,300	\$5,226,887
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	73.61%	70.23%	-3.39%
2	MEDICARE	44.34%	44.86%	0.52%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	32.17%	29.69%	-2.47%
4	MEDICAID	32.17%	29.62%	-2.55%
5	OTHER MEDICAL ASSISTANCE	31.80%	31.96%	0.16%
6	CHAMPUS / TRICARE	42.53%	45.41%	2.88%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.00%	0.00%	0.00%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>41.51%</b>	<b>41.30%</b>	<b>-0.21%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>49.22%</b>	<b>48.21%</b>	<b>-1.01%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	54.53%	54.69%	0.16%
2	MEDICARE	23.53%	24.10%	0.57%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27.07%	23.15%	-3.92%
4	MEDICAID	27.12%	23.11%	-4.01%
5	OTHER MEDICAL ASSISTANCE	25.07%	25.01%	-0.06%
6	CHAMPUS / TRICARE	26.33%	24.62%	-1.71%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.00%	0.00%	0.00%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>24.95%</b>	<b>23.86%</b>	<b>-1.09%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>38.23%</b>	<b>36.90%</b>	<b>-1.33%</b>

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
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REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
<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	\$303,362,305	\$325,215,386	\$21,853,081
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$303,362,305</b>	<b>\$325,215,386</b>	<b>\$21,853,081</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$4,432,141)	(\$6,430,155)	(\$1,998,014)
4	<b>CALCULATED NET REVENUE</b>	<b>\$318,007,858</b>	<b>\$318,785,231</b>	<b>\$777,373</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$298,930,165	\$318,785,233	\$19,855,068
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$19,077,693</b>	<b>(\$2)</b>	<b>(\$19,077,695)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$709,327,864	\$788,136,573	\$78,808,709
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$9,026,355	\$7,150,730	(\$1,875,625)
	<b>CALCULATED GROSS REVENUE</b>	<b>\$718,354,219</b>	<b>\$795,287,303</b>	<b>\$76,933,084</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$718,354,285	\$795,287,303	\$76,933,018
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$66)</b>	<b>\$0</b>	<b>\$66</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)	\$15,721,822	\$17,648,372	\$1,926,550
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$3,531,183	\$2,730,999	(\$800,184)
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$19,253,005</b>	<b>\$20,379,371</b>	<b>\$1,126,366</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$19,253,005	\$20,379,371	\$1,126,366
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2014</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 2014</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$72,646,940
2	MEDICARE	165,812,566
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	54,752,850
4	MEDICAID	53,016,167
5	OTHER MEDICAL ASSISTANCE	1,736,683
6	CHAMPUS / TRICARE	11,029,201
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,312,711
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$231,594,617</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$304,241,557</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$204,619,360
2	MEDICARE	173,051,967
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	83,586,397
4	MEDICAID	81,713,156
5	OTHER MEDICAL ASSISTANCE	1,873,241
6	CHAMPUS / TRICARE	22,637,292
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,088,487
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$279,275,656</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$483,895,016</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$277,266,300
2	TOTAL GOVERNMENT ACCRUED CHARGES	510,870,273
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$788,136,573</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$51,017,386
2	MEDICARE	74,387,490
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16,258,102
4	MEDICAID	15,703,121
5	OTHER MEDICAL ASSISTANCE	554,981
6	CHAMPUS / TRICARE	5,008,631
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$95,654,223</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$146,671,609</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$111,905,973
2	MEDICARE	41,714,082
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19,350,074
4	MEDICAID	18,881,597
5	OTHER MEDICAL ASSISTANCE	468,477
6	CHAMPUS / TRICARE	5,573,648
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$66,637,804</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$178,543,777</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$162,923,359
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	162,292,027
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$325,215,386</b>

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2014</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 2014</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)	3,795
2	MEDICARE	6,362
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,138
4	MEDICAID	3,032
5	OTHER MEDICAL ASSISTANCE	106
6	CHAMPUS / TRICARE	855
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	89
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>10,355</b>
	<b>TOTAL DISCHARGES</b>	<b>14,150</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.15850
2	MEDICARE	1.44560
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.04852
4	MEDICAID	1.05160
5	OTHER MEDICAL ASSISTANCE	0.96050
6	CHAMPUS / TRICARE	0.99040
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.05920
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.28768</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.25304</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$250,404,746
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$161,193,549
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$89,211,197
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	35.63%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$15,460,356
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$7,483,372
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$2,681,674
9	BAD DEBTS	\$14,966,698
10	TOTAL UNCOMPENSATED CARE	\$17,648,372
11	TOTAL OTHER OPERATING REVENUE	\$29,607,174
12	TOTAL OPERATING EXPENSES	\$348,525,480

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>		
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<b>FISCAL YEAR 2014</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 2014</b>
<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	\$325,215,386
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$325,215,386</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$6,430,155)
	<b>CALCULATED NET REVENUE</b>	<b>\$318,785,231</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$318,785,233
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$2)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$788,136,573
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$7,150,730
	<b>CALCULATED GROSS REVENUE</b>	<b>\$795,287,303</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$795,287,303
	<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)	\$17,648,372
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$2,730,999
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$20,379,371</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$20,379,371
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

**LAWRENCE AND MEMORIAL HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2014**  
**REPORT 650 - HOSPITAL UNCOMPENSATED CARE**

(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. <u>Hospital Charity Care (from HRS Report 500)</u></b>					
1	Number of Applicants	1,665	885	(780)	-47%
2	Number of Approved Applicants	1,258	763	(495)	-39%
3	<b>Total Charges (A)</b>	<b>\$3,684,045</b>	<b>\$2,681,674</b>	<b>(\$1,002,371)</b>	<b>-27%</b>
4	<b>Average Charges</b>	<b>\$2,928</b>	<b>\$3,515</b>	<b>\$586</b>	<b>20%</b>
5	Ratio of Cost to Charges (RCC)	0.449795	0.426266	(0.023529)	-5%
6	<b>Total Cost</b>	<b>\$1,657,065</b>	<b>\$1,143,106</b>	<b>(\$513,959)</b>	<b>-31%</b>
7	<b>Average Cost</b>	<b>\$1,317</b>	<b>\$1,498</b>	<b>\$181</b>	<b>14%</b>
8	Charity Care - Inpatient Charges	\$614,852	\$478,038	(\$136,814)	-22%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,262,586	1,612,052	(650,534)	-29%
10	Charity Care - Emergency Department Charges	806,607	591,584	(215,023)	-27%
11	<b>Total Charges (A)</b>	<b>\$3,684,045</b>	<b>\$2,681,674</b>	<b>(\$1,002,371)</b>	<b>-27%</b>
12	Charity Care - Number of Patient Days	114	96	(18)	-16%
13	Charity Care - Number of Discharges	34	27	(7)	-21%
14	Charity Care - Number of Outpatient ED Visits	741	448	(293)	-40%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	1,552	1,026	(526)	-34%
<b>B. <u>Hospital Bad Debts (from HRS Report 500)</u></b>					
1	Bad Debts - Inpatient Services	\$2,841,664	\$3,910,121	\$1,068,457	38%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	3,342,959	4,632,939	1,289,980	39%
3	Bad Debts - Emergency Department	5,853,154	6,423,638	570,484	10%
4	<b>Total Bad Debts (A)</b>	<b>\$12,037,777</b>	<b>\$14,966,698</b>	<b>\$2,928,921</b>	<b>24%</b>
<b>C. <u>Hospital Uncompensated Care (from HRS Report 500)</u></b>					
1	Charity Care (A)	\$3,684,045	\$2,681,674	(\$1,002,371)	-27%
2	Bad Debts (A)	12,037,777	14,966,698	2,928,921	24%
3	<b>Total Uncompensated Care (A)</b>	<b>\$15,721,822</b>	<b>\$17,648,372</b>	<b>\$1,926,550</b>	<b>12%</b>
4	Uncompensated Care - Inpatient Services	\$3,456,516	\$4,388,159	\$931,643	27%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	5,605,545	6,244,991	639,446	11%
6	Uncompensated Care - Emergency Department	6,659,761	7,015,222	355,461	5%
7	<b>Total Uncompensated Care (A)</b>	<b>\$15,721,822</b>	<b>\$17,648,372</b>	<b>\$1,926,550</b>	<b>12%</b>

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

LAWRENCE AND MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2014 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL TOTAL NON-GOVERNMENT	FY 2014 ACTUAL TOTAL NON-GOVERNMENT	AMOUNT DIFFERENCE	% DIFFERENCE
	<b><u>COMMERCIAL - ALL PAYERS</u></b>				
1	Total Gross Revenue	\$231,817,118	\$250,404,746	\$18,587,628	8%
2	Total Contractual Allowances	\$81,545,288	\$89,211,197	\$7,665,909	9%
	<b>Total Accrued Payments (A)</b>	<b>\$150,271,830</b>	<b>\$161,193,549</b>	<b>\$10,921,719</b>	<b>7%</b>
	<b>Total Discount Percentage</b>	<b>35.18%</b>	<b>35.63%</b>	<b>0.45%</b>	<b>1%</b>
<b>(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.</b>					

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
<b>A. Gross and Net Revenue</b>				
1	Inpatient Gross Revenue	\$290,545,603	\$293,047,902	\$304,241,557
2	Outpatient Gross Revenue	\$401,441,594	\$416,279,962	\$483,895,016
3	Total Gross Patient Revenue	\$691,987,197	\$709,327,864	\$788,136,573
4	Net Patient Revenue	\$323,643,197	\$298,930,165	\$318,785,233
<b>B. Total Operating Expenses</b>				
1	Total Operating Expense	\$318,194,716	\$312,019,235	\$348,525,480
<b>C. Utilization Statistics</b>				
1	Patient Days	70,558	67,153	66,332
2	Discharges	14,932	14,649	14,150
3	Average Length of Stay	4.7	4.6	4.7
4	Equivalent (Adjusted) Patient Days (EPD)	168,047	162,545	171,833
0	Equivalent (Adjusted) Discharges (ED)	35,563	35,458	36,656
<b>D. Case Mix Statistics</b>				
1	Case Mix Index	1.21980	1.21099	1.25304
2	Case Mix Adjusted Patient Days (CMAPD)	86,067	81,321	83,116
3	Case Mix Adjusted Discharges (CMAD)	18,214	17,740	17,730
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	204,983	196,840	215,313
5	Case Mix Adjusted Equivalent Discharges (CMAED)	43,380	42,939	45,931
<b>E. Gross Revenue Per Statistic</b>				
1	Total Gross Revenue per Patient Day	\$9,807	\$10,563	\$11,882
2	Total Gross Revenue per Discharge	\$46,343	\$48,422	\$55,699
3	Total Gross Revenue per EPD	\$4,118	\$4,364	\$4,587
4	Total Gross Revenue per ED	\$19,458	\$20,005	\$21,501
5	Total Gross Revenue per CMAEPD	\$3,376	\$3,604	\$3,660
6	Total Gross Revenue per CMAED	\$15,952	\$16,519	\$17,159
7	Inpatient Gross Revenue per EPD	\$1,729	\$1,803	\$1,771
8	Inpatient Gross Revenue per ED	\$8,170	\$8,265	\$8,300



LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
<b>F. Net Revenue Per Statistic</b>				
1	Net Patient Revenue per Patient Day	\$4,587	\$4,451	\$4,806
2	Net Patient Revenue per Discharge	\$21,674	\$20,406	\$22,529
3	Net Patient Revenue per EPD	\$1,926	\$1,839	\$1,855
4	Net Patient Revenue per ED	\$9,100	\$8,431	\$8,697
5	Net Patient Revenue per CMAEPD	\$1,579	\$1,519	\$1,481
6	Net Patient Revenue per CMAED	\$7,461	\$6,962	\$6,941
<b>G. Operating Expense Per Statistic</b>				
1	Total Operating Expense per Patient Day	\$4,510	\$4,646	\$5,254
2	Total Operating Expense per Discharge	\$21,310	\$21,300	\$24,631
3	Total Operating Expense per EPD	\$1,893	\$1,920	\$2,028
4	Total Operating Expense per ED	\$8,947	\$8,800	\$9,508
5	Total Operating Expense per CMAEPD	\$1,552	\$1,585	\$1,619
6	Total Operating Expense per CMAED	\$7,335	\$7,267	\$7,588
<b>H. Nursing Salary and Fringe Benefits Expense</b>				
1	Nursing Salary Expense	\$43,204,569	\$43,409,289	\$40,921,636
2	Nursing Fringe Benefits Expense	\$12,428,142	\$13,009,754	\$14,645,164
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$55,632,711</b>	<b>\$56,419,043</b>	<b>\$55,566,800</b>
<b>I. Physician Salary and Fringe Expense</b>				
1	Physician Salary Expense	\$799,526	\$376,629	\$367,754
2	Physician Fringe Benefits Expense	\$229,988	\$112,876	\$131,613
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$1,029,514</b>	<b>\$489,505</b>	<b>\$499,367</b>
<b>J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</b>				
1	Non-Nursing, Non-Physician Salary Expense	\$101,709,933	\$100,758,446	\$101,054,229
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$29,257,357	\$30,197,282	\$36,165,592
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$130,967,290</b>	<b>\$130,955,728</b>	<b>\$137,219,821</b>
<b>K. Total Salary and Fringe Benefits Expense</b>				
1	Total Salary Expense	\$145,714,028	\$144,544,364	\$142,343,619
2	Total Fringe Benefits Expense	\$41,915,487	\$43,319,912	\$50,942,369
3	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$187,629,515</b>	<b>\$187,864,276</b>	<b>\$193,285,988</b>

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
<b>L.</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>			
1	Total Nursing FTEs	460.5	452.3	407.3
2	Total Physician FTEs	2.3	1.7	1.6
3	Total Non-Nursing, Non-Physician FTEs	1492.0	1467.0	1440.2
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>1,954.8</b>	<b>1,921.0</b>	<b>1,849.1</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$93,821	\$95,975	\$100,471
2	Nursing Fringe Benefits Expense per FTE	\$26,988	\$28,764	\$35,957
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$120,809</b>	<b>\$124,738</b>	<b>\$136,427</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$347,620	\$221,546	\$229,846
2	Physician Fringe Benefits Expense per FTE	\$99,995	\$66,398	\$82,258
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$447,615</b>	<b>\$287,944</b>	<b>\$312,104</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	\$68,170	\$68,683	\$70,167
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$19,609	\$20,584	\$25,112
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$87,780</b>	<b>\$89,268</b>	<b>\$95,278</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$74,542	\$75,244	\$76,980
2	Total Fringe Benefits Expense per FTE	\$21,442	\$22,551	\$27,550
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$95,984</b>	<b>\$97,795</b>	<b>\$104,530</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,659	\$2,798	\$2,914
2	Total Salary and Fringe Benefits Expense per Discharge	\$12,566	\$12,824	\$13,660
3	Total Salary and Fringe Benefits Expense per EPD	\$1,117	\$1,156	\$1,125
4	Total Salary and Fringe Benefits Expense per ED	\$5,276	\$5,298	\$5,273
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$915	\$954	\$898
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,325	\$4,375	\$4,208