

MIDSTATE MEDICAL CENTER					
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.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$27,158,493	\$45,140,915	\$17,982,422	66%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$27,767,137	\$23,724,146	(\$4,042,991)	-15%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$2,663,150	\$387,409	(\$2,275,741)	-85%
6	Due From Third Party Payers	\$1,517,735	\$0	(\$1,517,735)	-100%
7	Inventories of Supplies	\$2,719,853	\$3,431,508	\$711,655	26%
8	Prepaid Expenses	\$4,878,472	\$2,245,299	(\$2,633,173)	-54%
9	Other Current Assets	\$6,718,647	\$4,746,679	(\$1,971,968)	-29%
	Total Current Assets	\$73,423,487	\$79,675,956	\$6,252,469	9%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$13,953,158	\$14,799,538	\$846,380	6%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$6,312,325	\$6,307,694	(\$4,631)	0%
4	Other Noncurrent Assets Whose Use is Limited	\$62,809	\$41,986	(\$20,823)	-33%
	Total Noncurrent Assets Whose Use is Limited:	\$20,328,292	\$21,149,218	\$820,926	4%
5	Interest in Net Assets of Foundation	\$38,819,627	\$42,123,273	\$3,303,646	9%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$18,517,286	\$18,463,116	(\$54,170)	0%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$252,854,982	\$260,616,400	\$7,761,418	3%
2	Less: Accumulated Depreciation	\$132,718,605	\$145,547,861	\$12,829,256	10%
	Property, Plant and Equipment, Net	\$120,136,377	\$115,068,539	(\$5,067,838)	-4%
3	Construction in Progress	\$1,879,662	\$584,432	(\$1,295,230)	-69%
	Total Net Fixed Assets	\$122,016,039	\$115,652,971	(\$6,363,068)	-5%
	Total Assets	\$273,104,731	\$277,064,534	\$3,959,803	1%

MIDSTATE MEDICAL CENTER
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FISCAL YEAR 2014

REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION

(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>
II. <u>LIABILITIES AND NET ASSETS</u>					
A. <u>Current Liabilities:</u>					
1	Accounts Payable and Accrued Expenses	\$12,841,942	\$2,689,312	(\$10,152,630)	-79%
2	Salaries, Wages and Payroll Taxes	\$9,070,645	\$7,004,880	(\$2,065,765)	-23%
3	Due To Third Party Payers	\$0	\$4,070,103	\$4,070,103	0%
4	Due To Affiliates	\$1,445,398	\$3,582,982	\$2,137,584	148%
5	Current Portion of Long Term Debt	\$669,578	\$757,808	\$88,230	13%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$6,458,439	\$8,394,597	\$1,936,158	30%
	Total Current Liabilities	\$30,486,002	\$26,499,682	(\$3,986,320)	-13%
B. <u>Long Term Debt:</u>					
1	Bonds Payable (Net of Current Portion)	\$87,806,192	\$86,762,098	(\$1,044,094)	-1%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$87,806,192	\$86,762,098	(\$1,044,094)	-1%
3	Accrued Pension Liability	\$18,941,059	\$34,688,717	\$15,747,658	83%
4	Other Long Term Liabilities	\$22,285,452	\$21,672,445	(\$613,007)	-3%
	Total Long Term Liabilities	\$129,032,703	\$143,123,260	\$14,090,557	11%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. <u>Net Assets:</u>					
1	Unrestricted Net Assets or Equity	\$96,806,371	\$89,763,992	(\$7,042,379)	-7%
2	Temporarily Restricted Net Assets	\$2,047,687	\$2,099,252	\$51,565	3%
3	Permanently Restricted Net Assets	\$14,731,968	\$15,578,348	\$846,380	6%
	Total Net Assets	\$113,586,026	\$107,441,592	(\$6,144,434)	-5%
	Total Liabilities and Net Assets	\$273,104,731	\$277,064,534	\$3,959,803	1%

MIDSTATE MEDICAL CENTER					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(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>
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$505,047,658	\$543,429,524	\$38,381,866	8%
2	Less: Allowances	\$277,904,920	\$309,787,045	\$31,882,125	11%
3	Less: Charity Care	\$7,131,143	\$8,125,010	\$993,867	14%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$220,011,595	\$225,517,469	\$5,505,874	3%
5	Provision for Bad Debts	\$2,265,391	\$6,385,283	\$4,119,892	182%
	Net Patient Service Revenue less provision for bad debts	\$217,746,204	\$219,132,186	\$1,385,982	1%
6	Other Operating Revenue	\$8,871,000	\$8,274,793	(\$596,207)	-7%
7	Net Assets Released from Restrictions	\$245,321	\$322,248	\$76,927	31%
	Total Operating Revenue	\$226,862,525	\$227,729,227	\$866,702	0%
B. Operating Expenses:					
1	Salaries and Wages	\$75,257,780	\$69,745,355	(\$5,512,425)	-7%
2	Fringe Benefits	\$22,649,817	\$19,652,817	(\$2,997,000)	-13%
3	Physicians Fees	\$3,631,661	\$3,834,533	\$202,872	6%
4	Supplies and Drugs	\$31,535,293	\$32,858,794	\$1,323,501	4%
5	Depreciation and Amortization	\$13,104,256	\$12,906,996	(\$197,260)	-2%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$3,987,276	\$3,992,280	\$5,004	0%
8	Malpractice Insurance Cost	\$2,356,019	\$2,753,277	\$397,258	17%
9	Other Operating Expenses	\$57,998,046	\$63,048,599	\$5,050,553	9%
	Total Operating Expenses	\$210,520,148	\$208,792,651	(\$1,727,497)	-1%
	Income/(Loss) From Operations	\$16,342,377	\$18,936,576	\$2,594,199	16%
C. Non-Operating Revenue:					
1	Income from Investments	\$51,290	\$17,066	(\$34,224)	-67%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$4,886,057	\$3,854,108	(\$1,031,949)	-21%
	Total Non-Operating Revenue	\$4,937,347	\$3,871,174	(\$1,066,173)	-22%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$21,279,724	\$22,807,750	\$1,528,026	7%
Other Adjustments:					
	Unrealized Gains/(Losses)	(\$1,295,573)	\$0	\$1,295,573	-100%

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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2013</u>	<u>FY 2014</u>	<u>AMOUNT</u>	<u>%</u>
		<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	All Other Adjustments	\$586,303	(\$723,879)	(\$1,310,182)	-223%
	Total Other Adjustments	(\$709,270)	(\$723,879)	(\$14,609)	2%
	Excess/(Deficiency) of Revenue Over Expenses	\$20,570,454	\$22,083,871	\$1,513,417	7%
	Principal Payments	\$255,545	\$955,854	\$700,309	274%

**MIDSTATE MEDICAL CENTER
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
I.	<u>GROSS REVENUE BY PAYER</u>				
A.	<u>INPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$100,322,769	\$99,307,055	(\$1,015,714)	-1%
2	MEDICARE MANAGED CARE	\$29,868,404	\$33,861,421	\$3,993,017	13%
3	MEDICAID	\$36,142,007	\$40,223,929	\$4,081,922	11%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$291,509	\$106,532	(\$184,977)	-63%
6	COMMERCIAL INSURANCE	\$2,625,959	\$2,033,161	(\$592,798)	-23%
7	NON-GOVERNMENT MANAGED CARE	\$44,753,224	\$47,276,274	\$2,523,050	6%
8	WORKER'S COMPENSATION	\$1,090,524	\$1,007,372	(\$83,152)	-8%
9	SELF- PAY/UNINSURED	\$4,451,612	\$2,576,251	(\$1,875,361)	-42%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$219,546,008	\$226,391,995	\$6,845,987	3%
B.	<u>OUTPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$70,829,456	\$77,323,593	\$6,494,137	9%
2	MEDICARE MANAGED CARE	\$26,050,244	\$32,585,129	\$6,534,885	25%
3	MEDICAID	\$64,876,057	\$78,467,175	\$13,591,118	21%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$894,335	\$763,906	(\$130,429)	-15%
6	COMMERCIAL INSURANCE	\$3,725,589	\$5,437,931	\$1,712,342	46%
7	NON-GOVERNMENT MANAGED CARE	\$107,453,867	\$111,555,273	\$4,101,406	4%
8	WORKER'S COMPENSATION	\$3,623,773	\$4,070,092	\$446,319	12%
9	SELF- PAY/UNINSURED	\$8,048,329	\$6,834,430	(\$1,213,899)	-15%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$285,501,650	\$317,037,529	\$31,535,879	11%
C.	<u>TOTAL GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$171,152,225	\$176,630,648	\$5,478,423	3%
2	MEDICARE MANAGED CARE	\$55,918,648	\$66,446,550	\$10,527,902	19%
3	MEDICAID	\$101,018,064	\$118,691,104	\$17,673,040	17%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,185,844	\$870,438	(\$315,406)	-27%
6	COMMERCIAL INSURANCE	\$6,351,548	\$7,471,092	\$1,119,544	18%
7	NON-GOVERNMENT MANAGED CARE	\$152,207,091	\$158,831,547	\$6,624,456	4%
8	WORKER'S COMPENSATION	\$4,714,297	\$5,077,464	\$363,167	8%
9	SELF- PAY/UNINSURED	\$12,499,941	\$9,410,681	(\$3,089,260)	-25%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$505,047,658	\$543,429,524	\$38,381,866	8%
II.	<u>NET REVENUE BY PAYER</u>				
A.	<u>INPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$39,218,991	\$37,721,640	(\$1,497,351)	-4%
2	MEDICARE MANAGED CARE	\$11,628,291	\$14,121,343	\$2,493,052	21%

**MIDSTATE MEDICAL CENTER
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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	\$12,657,458	\$12,188,046	(\$469,412)	-4%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$60,612	\$21,397	(\$39,215)	-65%
6	COMMERCIAL INSURANCE	\$1,988,185	\$2,192,183	\$203,998	10%
7	NON-GOVERNMENT MANAGED CARE	\$31,085,059	\$29,217,508	(\$1,867,551)	-6%
8	WORKER'S COMPENSATION	\$993,725	\$1,007,372	\$13,647	1%
9	SELF- PAY/UNINSURED	\$943,085	\$1,035,766	\$92,681	10%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$98,575,406	\$97,505,255	(\$1,070,151)	-1%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$20,129,801	\$21,320,301	\$1,190,500	6%
2	MEDICARE MANAGED CARE	\$6,863,581	\$8,352,550	\$1,488,969	22%
3	MEDICAID	\$15,757,381	\$17,449,662	\$1,692,281	11%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$185,955	\$153,431	(\$32,524)	-17%
6	COMMERCIAL INSURANCE	\$2,820,180	\$5,790,564	\$2,970,384	105%
7	NON-GOVERNMENT MANAGED CARE	\$75,024,670	\$71,988,557	(\$3,036,113)	-4%
8	WORKER'S COMPENSATION	\$3,302,115	\$4,070,093	\$767,978	23%
9	SELF- PAY/UNINSURED	\$2,160,322	\$1,001,844	(\$1,158,478)	-54%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$126,244,005	\$130,127,002	\$3,882,997	3%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$59,348,792	\$59,041,941	(\$306,851)	-1%
2	MEDICARE MANAGED CARE	\$18,491,872	\$22,473,893	\$3,982,021	22%
3	MEDICAID	\$28,414,839	\$29,637,708	\$1,222,869	4%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$246,567	\$174,828	(\$71,739)	-29%
6	COMMERCIAL INSURANCE	\$4,808,365	\$7,982,747	\$3,174,382	66%
7	NON-GOVERNMENT MANAGED CARE	\$106,109,729	\$101,206,065	(\$4,903,664)	-5%
8	WORKER'S COMPENSATION	\$4,295,840	\$5,077,465	\$781,625	18%
9	SELF- PAY/UNINSURED	\$3,103,407	\$2,037,610	(\$1,065,797)	-34%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$224,819,411	\$227,632,257	\$2,812,846	1%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	3,799	3,388	(411)	-11%
2	MEDICARE MANAGED CARE	1,109	1,095	(14)	-1%
3	MEDICAID	2,111	2,182	71	3%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	24	12	(12)	-50%
6	COMMERCIAL INSURANCE	113	107	(6)	-5%
7	NON-GOVERNMENT MANAGED CARE	2,418	2,346	(72)	-3%
8	WORKER'S COMPENSATION	31	27	(4)	-13%

**MIDSTATE MEDICAL CENTER
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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	242	127	(115)	-48%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	9,847	9,284	(563)	-6%
B.	<u>PATIENT DAYS</u>				
1	MEDICARE TRADITIONAL	18,756	17,151	(1,605)	-9%
2	MEDICARE MANAGED CARE	5,501	5,449	(52)	-1%
3	MEDICAID	8,183	8,199	16	0%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	70	26	(44)	-63%
6	COMMERCIAL INSURANCE	421	337	(84)	-20%
7	NON-GOVERNMENT MANAGED CARE	8,001	7,571	(430)	-5%
8	WORKER'S COMPENSATION	84	97	13	15%
9	SELF- PAY/UNINSURED	882	662	(220)	-25%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	41,898	39,492	(2,406)	-6%
C.	<u>OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	32,754	31,790	(964)	-3%
2	MEDICARE MANAGED CARE	11,447	12,539	1,092	10%
3	MEDICAID	48,221	52,128	3,907	8%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	539	505	(34)	-6%
6	COMMERCIAL INSURANCE	2,377	2,207	(170)	-7%
7	NON-GOVERNMENT MANAGED CARE	65,015	61,518	(3,497)	-5%
8	WORKER'S COMPENSATION	2,391	1,828	(563)	-24%
9	SELF- PAY/UNINSURED	7,718	5,556	(2,162)	-28%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	170,462	168,071	(2,391)	-1%
IV.	<u>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</u>				
A.	<u>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$17,000,000	\$22,709,728	\$5,709,728	34%
2	MEDICARE MANAGED CARE	\$5,500,000	\$8,015,275	\$2,515,275	46%
3	MEDICAID	\$35,500,000	\$42,555,224	\$7,055,224	20%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$280,000	\$307,105	\$27,105	10%
6	COMMERCIAL INSURANCE	\$1,200,000	\$1,061,296	(\$138,704)	-12%
7	NON-GOVERNMENT MANAGED CARE	\$25,370,000	\$28,482,162	\$3,112,162	12%
8	WORKER'S COMPENSATION	\$900,000	\$974,263	\$74,263	8%
9	SELF- PAY/UNINSURED	\$6,250,000	\$5,186,682	(\$1,063,318)	-17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$92,000,000	\$109,291,735	\$17,291,735	19%
B.	<u>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$3,450,000	\$4,545,010	\$1,095,010	32%

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LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
2	MEDICARE MANAGED CARE	\$1,150,000	\$1,602,904	\$452,904	39%
3	MEDICAID	\$6,500,000	\$8,397,392	\$1,897,392	29%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$55,000	\$56,545	\$1,545	3%
6	COMMERCIAL INSURANCE	\$600,000	\$551,986	(\$48,014)	-8%
7	NON-GOVERNMENT MANAGED CARE	\$15,500,000	\$17,344,209	\$1,844,209	12%
8	WORKER'S COMPENSATION	\$750,000	\$610,221	(\$139,779)	-19%
9	SELF- PAY/UNINSURED	\$250,000	\$146,156	(\$103,844)	-42%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$28,255,000	\$33,254,423	\$4,999,423	18%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	7,492	7,940	448	6%
2	MEDICARE MANAGED CARE	2,171	2,501	330	15%
3	MEDICAID	23,383	23,826	443	2%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	193	200	7	4%
6	COMMERCIAL INSURANCE	686	542	(144)	-21%
7	NON-GOVERNMENT MANAGED CARE	13,770	13,205	(565)	-4%
8	WORKER'S COMPENSATION	832	779	(53)	-6%
9	SELF- PAY/UNINSURED	4,370	3,276	(1,094)	-25%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	52,897	52,269	(628)	-1%

MIDSTATE MEDICAL CENTER					
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
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$27,207,529	\$27,000,116	(\$207,413)	-1%
2	Physician Salaries	\$7,916,881	\$8,218,072	\$301,191	4%
3	Non-Nursing, Non-Physician Salaries	\$40,133,370	\$34,527,167	(\$5,606,203)	-14%
	Total Salaries & Wages	\$75,257,780	\$69,745,355	(\$5,512,425)	-7%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$8,488,460	\$7,365,276	(\$1,123,184)	-13%
2	Physician Fringe Benefits	\$1,632,894	\$1,416,831	(\$216,063)	-13%
3	Non-Nursing, Non-Physician Fringe Benefits	\$12,528,463	\$10,870,710	(\$1,657,753)	-13%
	Total Fringe Benefits	\$22,649,817	\$19,652,817	(\$2,997,000)	-13%
C. Contractual Labor Fees:					
1	Nursing Fees	\$351,733	\$675,439	\$323,706	92%
2	Physician Fees	\$3,631,661	\$3,834,533	\$202,872	6%
3	Non-Nursing, Non-Physician Fees	\$21,550,046	\$25,612,148	\$4,062,102	19%
	Total Contractual Labor Fees	\$25,533,440	\$30,122,120	\$4,588,680	18%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$16,121,782	\$17,137,898	\$1,016,116	6%
2	Pharmaceutical Costs	\$15,413,511	\$15,720,896	\$307,385	2%
	Total Medical Supplies and Pharmaceutical Cost	\$31,535,293	\$32,858,794	\$1,323,501	4%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$6,025,688	\$6,126,074	\$100,386	2%
2	Depreciation-Equipment	\$7,000,825	\$6,703,183	(\$297,642)	-4%
3	Amortization	\$77,743	\$77,739	(\$4)	0%
	Total Depreciation and Amortization	\$13,104,256	\$12,906,996	(\$197,260)	-2%
F. Bad Debts:					
1	Bad Debts	\$0	\$0	\$0	0%
G. Interest Expense:					
1	Interest Expense	\$3,987,276	\$3,992,280	\$5,004	0%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$2,356,019	\$2,753,277	\$397,258	17%
I. Utilities:					
1	Water	\$300,000	\$300,000	\$0	0%
2	Natural Gas	\$604,961	\$632,574	\$27,613	5%
3	Oil	\$148,208	\$87,755	(\$60,453)	-41%
4	Electricity	\$1,874,238	\$1,791,375	(\$82,863)	-4%
5	Telephone	\$395,177	\$436,294	\$41,117	10%
6	Other Utilities	\$17,522	\$18,868	\$1,346	8%
	Total Utilities	\$3,340,106	\$3,266,866	(\$73,240)	-2%
J. Business Expenses:					
1	Accounting Fees	\$185,417	\$277,664	\$92,247	50%
2	Legal Fees	\$171,712	\$74,739	(\$96,973)	-56%
3	Consulting Fees	\$2,083,666	\$2,532,438	\$448,772	22%
4	Dues and Membership	\$486,820	\$517,498	\$30,678	6%
5	Equipment Leases	\$832,665	\$754,635	(\$78,030)	-9%
6	Building Leases	\$3,071,032	\$2,985,159	(\$85,873)	-3%
7	Repairs and Maintenance	\$4,774,218	\$4,541,385	(\$232,833)	-5%
8	Insurance	\$321,937	\$276,208	(\$45,729)	-14%
9	Travel	\$91,772	\$78,607	(\$13,165)	-14%
10	Conferences	\$29,571	\$49,817	\$20,246	68%

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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	\$141,109	\$235,818	\$94,709	67%
12	General Supplies	\$2,434,462	\$2,246,524	(\$187,938)	-8%
13	Licenses and Subscriptions	\$100,962	\$73,454	(\$27,508)	-27%
14	Postage and Shipping	\$163,065	\$151,692	(\$11,373)	-7%
15	Advertising	\$712,202	\$421,006	(\$291,196)	-41%
16	Corporate parent/system fees	\$3,179,898	\$4,378,866	\$1,198,968	38%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$1,092,054	\$1,030,017	(\$62,037)	-6%
20	Lab Fees / Red Cross charges	\$990,532	\$967,932	(\$22,600)	-2%
21	Billing & Collection / Bank Fees	\$320,756	\$367,647	\$46,891	15%
22	Recruiting / Employee Education & Recognition	\$763,130	\$661,959	(\$101,171)	-13%
23	Laundry / Linen	\$594,827	\$579,637	(\$15,190)	-3%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$154,221	\$144,916	(\$9,305)	-6%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$10,060,133	\$10,146,528	\$86,395	1%
	Total Business Expenses	\$32,756,161	\$33,494,146	\$737,985	2%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$210,520,148	\$208,792,651	(\$1,727,497)	-1%
	*A.-K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$58,902,500	\$55,746,633	(\$3,155,867)	-5%
2	General Accounting	\$2,059,869	\$1,892,098	(\$167,771)	-8%
3	Patient Billing & Collection	\$4,350,292	\$5,758,412	\$1,408,120	32%
4	Admitting / Registration Office	\$1,711,781	\$1,767,947	\$56,166	3%
5	Data Processing	\$6,012,543	\$6,872,313	\$859,770	14%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$1,267,566	\$731,407	(\$536,159)	-42%
8	Public Relations	\$1,730,158	\$1,180,987	(\$549,171)	-32%
9	Purchasing	\$980,434	\$843,469	(\$136,965)	-14%
10	Dietary and Cafeteria	\$3,389,564	\$3,265,897	(\$123,667)	-4%
11	Housekeeping	\$2,500,274	\$2,515,924	\$15,650	1%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$6,469,654	\$6,332,665	(\$136,989)	-2%
14	Security	\$0	\$0	\$0	0%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$0	\$0	\$0	0%
17	Pharmacy Department	\$17,569,388	\$17,690,612	\$121,224	1%
18	Other General Services	\$0	\$0	\$0	0%
	Total General Services	\$106,944,023	\$104,598,364	(\$2,345,659)	-2%
B.	Professional Services:				
1	Medical Care Administration	\$1,047,804	\$1,033,740	(\$14,064)	-1%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,846,633	\$1,489,652	(\$356,981)	-19%
4	Medical Records	\$2,207,906	\$858,654	(\$1,349,252)	-61%
5	Social Service	\$1,626,449	\$1,579,067	(\$47,382)	-3%
6	Other Professional Services	\$4,835,268	\$5,167,186	\$331,918	7%
	Total Professional Services	\$11,564,060	\$10,128,299	(\$1,435,761)	-12%
C.	Special Services:				

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Operating Room	\$17,749,198	\$18,966,633	\$1,217,435	7%
2	Recovery Room	\$2,490,713	\$2,522,300	\$31,587	1%
3	Anesthesiology	\$390,198	\$419,320	\$29,122	7%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$6,694,816	\$7,312,876	\$618,060	9%
6	Diagnostic Ultrasound	\$1,062,639	\$1,064,705	\$2,066	0%
7	Radiation Therapy	\$4,244,945	\$4,678,579	\$433,634	10%
8	Radioisotopes	\$720,845	\$757,676	\$36,831	5%
9	CT Scan	\$1,103,819	\$1,282,770	\$178,951	16%
10	Laboratory	\$7,684,942	\$7,433,896	(\$251,046)	-3%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$1,131,801	\$1,007,867	(\$123,934)	-11%
14	Electroencephalography	\$0	\$0	\$0	0%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,249,534	\$1,234,637	(\$14,897)	-1%
19	Pulmonary Function	\$90,807	\$90,360	(\$447)	0%
20	Intravenous Therapy	\$364,203	\$373,744	\$9,541	3%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$12,920,123	\$13,129,201	\$209,078	2%
25	MRI	\$1,407,343	\$1,425,013	\$17,670	1%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$138,841	\$74,090	(\$64,751)	-47%
28	Endoscopy	\$3,128,938	\$3,253,416	\$124,478	4%
29	Sleep Center	\$967,822	\$917,937	(\$49,885)	-5%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$148,047	\$152,163	\$4,116	3%
32	Occupational Therapy / Physical Therapy	\$800,049	\$739,954	(\$60,095)	-8%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,097,175	\$1,893,036	(\$204,139)	-10%
	Total Special Services	\$66,586,798	\$68,730,173	\$2,143,375	3%
D.	Routine Services:				
1	Medical & Surgical Units	\$18,651,936	\$18,530,257	(\$121,679)	-1%
2	Intensive Care Unit	\$0	\$0	\$0	0%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$1,856,551	\$2,048,096	\$191,545	10%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,916,780	\$4,757,462	(\$159,318)	-3%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
	Total Routine Services	\$25,425,267	\$25,335,815	(\$89,452)	0%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses - All Departments*	\$210,520,148	\$208,792,651	(\$1,727,497)	-1%
	*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

MIDSTATE MEDICAL CENTER				
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
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$218,353,748	\$217,746,204	\$219,132,186
2	Other Operating Revenue	27,846,850	9,116,321	8,597,041
3	Total Operating Revenue	\$246,200,598	\$226,862,525	\$227,729,227
4	Total Operating Expenses	221,306,295	210,520,148	208,792,651
5	Income/(Loss) From Operations	\$24,894,303	\$16,342,377	\$18,936,576
6	Total Non-Operating Revenue	1,222,491	4,228,077	3,147,295
7	Excess/(Deficiency) of Revenue Over Expenses	\$26,116,794	\$20,570,454	\$22,083,871
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	10.06%	7.07%	8.20%
2	Hospital Non Operating Margin	0.49%	1.83%	1.36%
3	Hospital Total Margin	10.56%	8.90%	9.57%
4	Income/(Loss) From Operations	\$24,894,303	\$16,342,377	\$18,936,576
5	Total Operating Revenue	\$246,200,598	\$226,862,525	\$227,729,227
6	Total Non-Operating Revenue	\$1,222,491	\$4,228,077	\$3,147,295
7	Total Revenue	\$247,423,089	\$231,090,602	\$230,876,522
8	Excess/(Deficiency) of Revenue Over Expenses	\$26,116,794	\$20,570,454	\$22,083,871
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$73,637,750	\$96,806,371	\$89,763,992
2	Hospital Total Net Assets	\$89,918,628	\$113,586,026	\$107,441,592
3	Hospital Change in Total Net Assets	\$22,671,022	\$23,667,398	(\$6,144,434)
4	Hospital Change in Total Net Assets %	133.7%	26.3%	-5.4%

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REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
D.	<u>Cost Data Summary</u>			
1	<u>Ratio of Cost to Charges</u>	0.44	0.41	0.38
2	Total Operating Expenses	\$221,306,295	\$210,520,148	\$208,792,651
3	Total Gross Revenue	\$479,645,635	\$505,047,658	\$543,429,524
4	Total Other Operating Revenue	\$27,519,593	\$9,116,321	\$8,597,041
5	<u>Private Payment to Cost Ratio</u>	1.56	1.72	1.76
6	Total Non-Government Payments	\$114,144,204	\$118,317,341	\$116,303,887
7	Total Uninsured Payments	\$1,185,069	\$3,103,407	\$2,037,610
8	Total Non-Government Charges	\$176,670,460	\$175,772,877	\$180,790,784
9	Total Uninsured Charges	\$11,229,938	\$12,499,941	\$9,410,681
10	<u>Medicare Payment to Cost Ratio</u>	0.84	0.84	0.89
11	Total Medicare Payments	\$77,225,155	\$77,840,664	\$81,515,834
12	Total Medicare Charges	\$211,253,256	\$227,070,873	\$243,077,198
13	<u>Medicaid Payment to Cost Ratio</u>	0.65	0.69	0.66
14	Total Medicaid Payments	\$25,550,883	\$28,414,839	\$29,637,708
15	Total Medicaid Charges	\$90,683,066	\$101,018,064	\$118,691,104
16	<u>Uncompensated Care Cost</u>	\$4,666,905	\$3,847,332	\$5,488,219
17	Charity Care	\$4,233,596	\$7,131,143	\$8,125,010
18	Bad Debts	\$6,461,499	\$2,265,391	\$6,385,283
19	Total Uncompensated Care	\$10,695,095	\$9,396,534	\$14,510,293
20	<u>Uncompensated Care % of Total Expenses</u>	2.1%	1.8%	2.6%

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REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
21	Total Operating Expenses	\$221,306,295	\$210,520,148	\$208,792,651
E. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	3	2	3
2	Total Current Assets	\$91,144,165	\$73,423,487	\$79,675,956
3	Total Current Liabilities	\$29,607,292	\$30,486,002	\$26,499,682
4	<u>Days Cash on Hand</u>	81	50	84
5	Cash and Cash Equivalents	\$46,117,517	\$27,158,493	\$45,140,915
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$46,117,517	\$27,158,493	\$45,140,915
8	Total Operating Expenses	\$221,306,295	\$210,520,148	\$208,792,651
9	Depreciation Expense	\$12,961,930	\$13,104,256	\$12,906,996
10	Operating Expenses less Depreciation Expense	\$208,344,365	\$197,415,892	\$195,885,655
11	<u>Days Revenue in Patient Accounts Receivable</u>	36	49	33
12	Net Patient Accounts Receivable	\$25,147,640	\$27,767,137	\$23,724,146
13	Due From Third Party Payers	\$0	\$1,517,735	\$0
14	Due To Third Party Payers	\$3,562,417	\$0	\$4,070,103
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$21,585,223	\$29,284,872	\$19,654,043
16	Total Net Patient Revenue	\$218,353,748	\$217,746,204	\$219,132,186
17	<u>Average Payment Period</u>	52	56	49
18	Total Current Liabilities	\$29,607,292	\$30,486,002	\$26,499,682
19	Total Operating Expenses	\$221,306,295	\$210,520,148	\$208,792,651
20	Depreciation Expense	\$12,961,930	\$13,104,256	\$12,906,996

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REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
21	Total Operating Expenses less Depreciation Expense	\$208,344,365	\$197,415,892	\$195,885,655
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	30.9	41.6	38.8
2	Total Net Assets	\$89,918,628	\$113,586,026	\$107,441,592
3	Total Assets	\$291,421,640	\$273,104,731	\$277,064,534
4	<u>Cash Flow to Total Debt Ratio</u>	33.0	28.5	30.9
5	Excess/(Deficiency) of Revenues Over Expenses	\$26,116,794	\$20,570,454	\$22,083,871
6	Depreciation Expense	\$12,961,930	\$13,104,256	\$12,906,996
7	Excess of Revenues Over Expenses and Depreciation Expense	\$39,078,724	\$33,674,710	\$34,990,867
8	Total Current Liabilities	\$29,607,292	\$30,486,002	\$26,499,682
9	Total Long Term Debt	\$88,731,315	\$87,806,192	\$86,762,098
10	Total Current Liabilities and Total Long Term Debt	\$118,338,607	\$118,292,194	\$113,261,780
11	<u>Long Term Debt to Capitalization Ratio</u>	49.7	43.6	44.7
12	Total Long Term Debt	\$88,731,315	\$87,806,192	\$86,762,098
13	Total Net Assets	\$89,918,628	\$113,586,026	\$107,441,592
14	Total Long Term Debt and Total Net Assets	\$178,649,943	\$201,392,218	\$194,203,690
15	<u>Debt Service Coverage Ratio</u>	10.7	8.9	7.9
16	Excess Revenues over Expenses	26,116,794	\$20,570,454	\$22,083,871
17	Interest Expense	3,996,300	\$3,987,276	\$3,992,280
18	Depreciation and Amortization Expense	12,961,930	\$13,104,256	\$12,906,996
19	Principal Payments	23,328	\$255,545	\$955,854
G.	<u>Other Financial Ratios</u>			

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(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
20	Average Age of Plant	9.6	10.1	11.3
21	Accumulated Depreciation	124,211,246	132,718,605	145,547,861
22	Depreciation and Amortization Expense	12,961,930	13,104,256	12,906,996
H. Utilization Measures Summary				
1	Patient Days	42,530	41,898	39,492
2	Discharges	10,330	9,847	9,284
3	ALOS	4.1	4.3	4.3
4	Staffed Beds	144	139	135
5	Available Beds	-	156	156
6	Licensed Beds	156	156	156
7	Occupancy of Staffed Beds	80.9%	82.6%	80.1%
8	Occupancy of Available Beds	74.7%	73.6%	69.4%
9	Full Time Equivalent Employees	1,054.6	1,028.1	963.3
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	34.5%	32.3%	31.5%
2	Medicare Gross Revenue Payer Mix Percentage	44.0%	45.0%	44.7%
3	Medicaid Gross Revenue Payer Mix Percentage	18.9%	20.0%	21.8%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	2.3%	2.5%	1.7%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.2%	0.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$165,440,522	\$163,272,936	\$171,380,103
9	Medicare Gross Revenue (Charges)	\$211,253,256	\$227,070,873	\$243,077,198
10	Medicaid Gross Revenue (Charges)	\$90,683,066	\$101,018,064	\$118,691,104
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$11,229,938	\$12,499,941	\$9,410,681
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,038,853	\$1,185,844	\$870,438
14	Total Gross Revenue (Charges)	\$479,645,635	\$505,047,658	\$543,429,524
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	52.0%	51.2%	50.2%
2	Medicare Net Revenue Payer Mix Percentage	35.5%	34.6%	35.8%

MIDSTATE MEDICAL CENTER				
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
3	Medicaid Net Revenue Payer Mix Percentage	11.8%	12.6%	13.0%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.5%	1.4%	0.9%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$112,959,135	\$115,213,934	\$114,266,277
9	Medicare Net Revenue (Payments)	\$77,225,155	\$77,840,664	\$81,515,834
10	Medicaid Net Revenue (Payments)	\$25,550,883	\$28,414,839	\$29,637,708
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$1,185,069	\$3,103,407	\$2,037,610
13	CHAMPUS / TRICARE Net Revenue Payments)	\$309,744	\$246,567	\$174,828
14	Total Net Revenue (Payments)	\$217,229,986	\$224,819,411	\$227,632,257
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	3,098	2,804	2,607
2	Medicare	5,054	4,908	4,483
3	Medical Assistance	2,151	2,111	2,182
4	Medicaid	2,151	2,111	2,182
5	Other Medical Assistance	-	-	-
6	CHAMPUS / TRICARE	27	24	12
7	Uninsured (Included In Non-Government)	254	242	127
8	Total	10,330	9,847	9,284
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	1.09210	1.10877	1.14295
2	Medicare	1.38600	1.52013	1.59467
3	Medical Assistance	0.93073	0.98576	0.99991
4	Medicaid	0.93073	0.98576	0.99991
5	Other Medical Assistance	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.70038	0.72830	0.55530
7	Uninsured (Included In Non-Government)	0.97825	0.94379	0.34031
8	Total Case Mix Index	1.20127	1.28650	1.32670
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	7,232	6,894	6,344
2	Emergency Room - Treated and Discharged	84,907	52,897	52,269
3	Total Emergency Room Visits	92,139	59,791	58,613

**MIDSTATE MEDICAL CENTER
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
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$3,095,986	\$2,563,175	(\$532,811)	-17%
2	Inpatient Payments	\$1,192,066	\$939,614	(\$252,452)	-21%
3	Outpatient Charges	\$2,239,987	\$1,442,991	(\$796,996)	-36%
4	Outpatient Payments	\$713,884	\$507,894	(\$205,990)	-29%
5	Discharges	115	82	(33)	-29%
6	Patient Days	602	424	(178)	-30%
7	Outpatient Visits (Excludes ED Visits)	925	579	(346)	-37%
8	Emergency Department Outpatient Visits	188	118	(70)	-37%
9	Emergency Department Inpatient Admissions	104	75	(29)	-28%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,335,973	\$4,006,166	(\$1,329,807)	-25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,905,950	\$1,447,508	(\$458,442)	-24%
B.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$6,763,542	\$8,596,148	\$1,832,606	27%
2	Inpatient Payments	\$2,766,769	\$3,388,043	\$621,274	22%
3	Outpatient Charges	\$8,287,112	\$9,779,891	\$1,492,779	18%
4	Outpatient Payments	\$2,252,437	\$2,611,667	\$359,230	16%
5	Discharges	252	274	22	9%
6	Patient Days	1,171	1,304	133	11%
7	Outpatient Visits (Excludes ED Visits)	2,720	3,009	289	11%
8	Emergency Department Outpatient Visits	475	507	32	7%
9	Emergency Department Inpatient Admissions	210	215	5	2%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$15,050,654	\$18,376,039	\$3,325,385	22%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,019,206	\$5,999,710	\$980,504	20%

**MIDSTATE MEDICAL CENTER
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
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$0	\$559,904	\$559,904	0%
2	Inpatient Payments	\$0	\$241,390	\$241,390	0%
3	Outpatient Charges	\$0	\$251,386	\$251,386	0%
4	Outpatient Payments	\$0	\$56,925	\$56,925	0%
5	Discharges	0	19	19	0%
6	Patient Days	0	88	88	0%
7	Outpatient Visits (Excludes ED Visits)	0	60	60	0%
8	Emergency Department Outpatient Visits	0	48	48	0%
9	Emergency Department Inpatient Admissions	0	18	18	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$811,290	\$811,290	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$298,315	\$298,315	0%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MIDSTATE MEDICAL CENTER
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
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$1,310,984	\$2,138,485	\$827,501	63%
2	Inpatient Payments	\$489,514	\$834,346	\$344,832	70%
3	Outpatient Charges	\$909,039	\$2,314,416	\$1,405,377	155%
4	Outpatient Payments	\$219,624	\$415,818	\$196,194	89%
5	Discharges	46	87	41	89%
6	Patient Days	223	354	131	59%
7	Outpatient Visits (Excludes ED Visits)	312	644	332	106%
8	Emergency Department Outpatient Visits	145	387	242	167%
9	Emergency Department Inpatient Admissions	43	82	39	91%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,220,023	\$4,452,901	\$2,232,878	101%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$709,138	\$1,250,164	\$541,026	76%
I. AETNA					
1	Inpatient Charges	\$3,597,321	\$5,344,142	\$1,746,821	49%
2	Inpatient Payments	\$1,388,831	\$3,028,593	\$1,639,762	118%
3	Outpatient Charges	\$3,163,088	\$5,334,278	\$2,171,190	69%
4	Outpatient Payments	\$777,803	\$1,307,832	\$530,029	68%
5	Discharges	134	173	39	29%
6	Patient Days	669	861	192	29%
7	Outpatient Visits (Excludes ED Visits)	1,169	1,736	567	49%
8	Emergency Department Outpatient Visits	233	389	156	67%
9	Emergency Department Inpatient Admissions	119	150	31	26%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,760,409	\$10,678,420	\$3,918,011	58%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,166,634	\$4,336,425	\$2,169,791	100%

**MIDSTATE MEDICAL CENTER
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
J. HUMANA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MIDSTATE MEDICAL CENTER
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
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$15,100,571	\$14,659,567	(\$441,004)	-3%
2	Inpatient Payments	\$5,791,111	\$5,689,357	(\$101,754)	-2%
3	Outpatient Charges	\$11,451,018	\$13,462,167	\$2,011,149	18%
4	Outpatient Payments	\$2,899,833	\$3,452,414	\$552,581	19%
5	Discharges	562	460	(102)	-18%
6	Patient Days	2,836	2,418	(418)	-15%
7	Outpatient Visits (Excludes ED Visits)	4,150	4,010	(140)	-3%
8	Emergency Department Outpatient Visits	1,130	1,052	(78)	-7%
9	Emergency Department Inpatient Admissions	506	403	(103)	-20%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$26,551,589	\$28,121,734	\$1,570,145	6%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,690,944	\$9,141,771	\$450,827	5%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$29,868,404	\$33,861,421	\$3,993,017	13%
	TOTAL INPATIENT PAYMENTS	\$11,628,291	\$14,121,343	\$2,493,052	21%
	TOTAL OUTPATIENT CHARGES	\$26,050,244	\$32,585,129	\$6,534,885	25%
	TOTAL OUTPATIENT PAYMENTS	\$6,863,581	\$8,352,550	\$1,488,969	22%
	TOTAL DISCHARGES	1,109	1,095	(14)	-1%
	TOTAL PATIENT DAYS	5,501	5,449	(52)	-1%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	9,276	10,038	762	8%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	2,171	2,501	330	15%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	982	943	(39)	-4%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$55,918,648	\$66,446,550	\$10,527,902	19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$18,491,872	\$22,473,893	\$3,982,021	22%

**MIDSTATE MEDICAL CENTER
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
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MIDSTATE MEDICAL CENTER
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
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**MIDSTATE MEDICAL CENTER
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%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H.	AETNA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL DISCHARGES	0	0	0	0%
	TOTAL PATIENT DAYS	0	0	0	0%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$28,465,876	\$45,862,697	\$17,396,821	61%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$27,767,137	\$23,724,146	(\$4,042,991)	-15%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$2,663,150	\$387,409	(\$2,275,741)	-85%
6	Due From Third Party Payers	\$1,517,735	\$0	(\$1,517,735)	-100%
7	Inventories of Supplies	\$2,719,853	\$3,431,508	\$711,655	26%
8	Prepaid Expenses	\$4,945,131	\$2,297,359	(\$2,647,772)	-54%
9	Other Current Assets	\$7,456,493	\$5,479,797	(\$1,976,696)	-27%
	Total Current Assets	\$75,535,375	\$81,182,916	\$5,647,541	7%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$13,953,158	\$14,799,538	\$846,380	6%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$6,312,325	\$6,307,694	(\$4,631)	0%
4	Other Noncurrent Assets Whose Use is Limited	\$62,809	\$41,986	(\$20,823)	-33%
	Total Noncurrent Assets Whose Use is Limited:	\$20,328,292	\$21,149,218	\$820,926	4%
5	Interest in Net Assets of Foundation	\$38,819,627	\$42,123,273	\$3,303,646	9%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$15,933,679	\$17,029,004	\$1,095,325	7%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$255,439,409	\$263,193,906	\$7,754,497	3%
2	Less: Accumulated Depreciation	\$134,829,314	\$147,817,759	\$12,988,445	\$0
	Property, Plant and Equipment, Net	\$120,610,095	\$115,376,147	(\$5,233,948)	-4%
3	Construction in Progress	\$1,879,662	\$584,432	(\$1,295,230)	-69%
	Total Net Fixed Assets	\$122,489,757	\$115,960,579	(\$6,529,178)	-5%
	Total Assets	\$273,106,730	\$277,444,990	\$4,338,260	2%

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$13,352,496	\$3,147,145	(\$10,205,351)	-76%
2	Salaries, Wages and Payroll Taxes	\$9,070,645	\$7,004,880	(\$2,065,765)	-23%
3	Due To Third Party Payers	\$0	\$4,070,103	\$4,070,103	0%
4	Due To Affiliates	\$1,445,398	\$3,582,982	\$2,137,584	148%
5	Current Portion of Long Term Debt	\$669,578	\$757,808	\$88,230	13%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$6,458,439	\$8,394,597	\$1,936,158	30%
	Total Current Liabilities	\$30,996,556	\$26,957,515	(\$4,039,041)	-13%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$87,806,192	\$86,762,098	(\$1,044,094)	-1%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$87,806,192	\$86,762,098	(\$1,044,094)	-1%
3	Accrued Pension Liability	\$18,941,059	\$34,688,717	\$15,747,658	83%
4	Other Long Term Liabilities	\$22,700,592	\$22,023,821	(\$676,771)	-3%
	Total Long Term Liabilities	\$129,447,843	\$143,474,636	\$14,026,793	11%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$95,882,676	\$89,335,239	(\$6,547,437)	-7%
2	Temporarily Restricted Net Assets	\$2,047,687	\$2,099,252	\$51,565	3%
3	Permanently Restricted Net Assets	\$14,731,968	\$15,578,348	\$846,380	6%
	Total Net Assets	\$112,662,331	\$107,012,839	(\$5,649,492)	-5%
	Total Liabilities and Net Assets	\$273,106,730	\$277,444,990	\$4,338,260	2%

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$505,047,658	\$543,429,524	\$38,381,866	8%
2	Less: Allowances	\$277,904,920	\$309,787,045	\$31,882,125	11%
3	Less: Charity Care	\$7,131,143	\$8,125,010	\$993,867	14%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$220,011,595	\$225,517,469	\$5,505,874	3%
5	Provision for Bad Debts	\$2,265,391	\$6,385,283	\$4,119,892	182%
	Net Patient Service Revenue less provision for bad debts	\$217,746,204	\$219,132,186	\$1,385,982	1%
6	Other Operating Revenue	\$18,894,548	\$15,841,929	(\$3,052,619)	-16%
7	Net Assets Released from Restrictions	\$245,321	\$322,248	\$76,927	31%
	Total Operating Revenue	\$236,886,073	\$235,296,363	(\$1,589,710)	-1%
B. Operating Expenses:					
1	Salaries and Wages	\$76,115,980	\$69,745,355	(\$6,370,625)	-8%
2	Fringe Benefits	\$22,947,534	\$19,652,817	(\$3,294,717)	-14%
3	Physicians Fees	\$6,572,446	\$6,724,322	\$151,876	2%
4	Supplies and Drugs	\$32,274,734	\$33,088,173	\$813,439	3%
5	Depreciation and Amortization	\$13,310,897	\$13,076,585	(\$234,312)	-2%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$3,987,276	\$3,992,280	\$5,004	0%
8	Malpractice Insurance Cost	\$2,356,019	\$2,753,277	\$397,258	17%
9	Other Operating Expenses	\$65,347,599	\$67,582,036	\$2,234,437	3%
	Total Operating Expenses	\$222,912,485	\$216,614,845	(\$6,297,640)	-3%
	Income/(Loss) From Operations	\$13,973,588	\$18,681,518	\$4,707,930	34%
C. Non-Operating Revenue:					
1	Income from Investments	\$51,290	\$17,066	(\$34,224)	-67%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$4,886,057	\$3,854,108	(\$1,031,949)	-21%
	Total Non-Operating Revenue	\$4,937,347	\$3,871,174	(\$1,066,173)	-22%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$18,910,935	\$22,552,692	\$3,641,757	19%
Other Adjustments:					
	Unrealized Gains/(Losses)	(\$1,295,573)	\$0	\$1,295,573	-100%
	All Other Adjustments	\$586,303	(\$723,879)	(\$1,310,182)	-223%
	Total Other Adjustments	(\$709,270)	(\$723,879)	(\$14,609)	2%
	Excess/(Deficiency) of Revenue Over Expenses	\$18,201,665	\$21,828,813	\$3,627,148	20%

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$218,353,748	\$217,746,204	\$219,132,186
2	Other Operating Revenue	42,214,373	19,139,869	16,164,177
3	Total Operating Revenue	\$260,568,121	\$236,886,073	\$235,296,363
4	Total Operating Expenses	244,146,156	222,912,485	216,614,845
5	Income/(Loss) From Operations	\$16,421,965	\$13,973,588	\$18,681,518
6	Total Non-Operating Revenue	1,222,491	4,228,077	3,147,295
7	Excess/(Deficiency) of Revenue Over Expenses	\$17,644,456	\$18,201,665	\$21,828,813
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	6.27%	5.80%	7.83%
2	Parent Corporation Non-Operating Margin	0.47%	1.75%	1.32%
3	Parent Corporation Total Margin	6.74%	7.55%	9.15%
4	Income/(Loss) From Operations	\$16,421,965	\$13,973,588	\$18,681,518
5	Total Operating Revenue	\$260,568,121	\$236,886,073	\$235,296,363
6	Total Non-Operating Revenue	\$1,222,491	\$4,228,077	\$3,147,295
7	Total Revenue	\$261,790,612	\$241,114,150	\$238,443,658
8	Excess/(Deficiency) of Revenue Over Expenses	\$17,644,456	\$18,201,665	\$21,828,813
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$74,346,080	\$95,882,676	\$89,335,239
2	Parent Corporation Total Net Assets	\$90,626,958	\$112,662,331	\$107,012,839
3	Parent Corporation Change in Total Net Assets	\$18,223,683	\$22,035,373	(\$5,649,492)
4	Parent Corporation Change in Total Net Assets %	125.2%	24.3%	-5.0%

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	3.11	2.44	3.01
2	Total Current Assets	\$93,915,090	\$75,535,375	\$81,182,916
3	Total Current Liabilities	\$30,181,334	\$30,996,556	\$26,957,515
4	<u>Days Cash on Hand</u>	76	50	82
5	Cash and Cash Equivalents	\$47,972,840	\$28,465,876	\$45,862,697
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$47,972,840	\$28,465,876	\$45,862,697
8	Total Operating Expenses	\$244,146,156	\$222,912,485	\$216,614,845
9	Depreciation Expense	\$13,214,810	\$13,310,897	\$13,076,585
10	Operating Expenses less Depreciation Expense	\$230,931,346	\$209,601,588	\$203,538,260
11	<u>Days Revenue in Patient Accounts Receivable</u>	36	49	33
12	Net Patient Accounts Receivable	\$ 25,147,640	\$ 27,767,137	\$ 23,724,146
13	Due From Third Party Payers	\$0	\$1,517,735	\$0
14	Due To Third Party Payers	\$3,562,417	\$0	\$4,070,103
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 21,585,223	\$ 29,284,872	\$ 19,654,043
16	Total Net Patient Revenue	\$218,353,748	\$217,746,204	\$219,132,186
17	<u>Average Payment Period</u>	48	54	48
18	Total Current Liabilities	\$30,181,334	\$30,996,556	\$26,957,515
19	Total Operating Expenses	\$244,146,156	\$222,912,485	\$216,614,845
20	Depreciation Expense	\$13,214,810	\$13,310,897	\$13,076,585
20	Total Operating Expenses less Depreciation Expense	\$230,931,346	\$209,601,588	\$203,538,260

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL 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>
E. Solvency Measures Summary				
1	<u>Equity Financing Ratio</u>	30.9	41.3	38.6
2	Total Net Assets	\$90,626,958	\$112,662,331	\$107,012,839
3	Total Assets	\$293,191,806	\$273,106,730	\$277,444,990
4	<u>Cash Flow to Total Debt Ratio</u>	26.0	26.5	30.7
5	Excess/(Deficiency) of Revenues Over Expenses	\$17,644,456	\$18,201,665	\$21,828,813
6	Depreciation Expense	\$13,214,810	\$13,310,897	\$13,076,585
7	Excess of Revenues Over Expenses and Depreciation Expense	\$30,859,266	\$31,512,562	\$34,905,398
8	Total Current Liabilities	\$30,181,334	\$30,996,556	\$26,957,515
9	Total Long Term Debt	\$88,731,315	\$87,806,192	\$86,762,098
10	Total Current Liabilities and Total Long Term Debt	\$118,912,649	\$118,802,748	\$113,719,613
11	<u>Long Term Debt to Capitalization Ratio</u>	49.5	43.8	44.8
12	Total Long Term Debt	\$88,731,315	\$87,806,192	\$86,762,098
13	Total Net Assets	\$90,626,958	\$112,662,331	\$107,012,839
14	Total Long Term Debt and Total Net Assets	\$179,358,273	\$200,468,523	\$193,774,937

MIDSTATE MEDICAL CENTER								
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	31,136	7,228	7,228	102	116	83.6%	73.5%
2	ICU/CCU (Excludes Neonatal ICU)	1,773	578	0	7	9	69.4%	54.0%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	2,038	179	179	6	6	93.1%	93.1%
	TOTAL PSYCHIATRIC	2,038	179	179	6	6	93.1%	93.1%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	2,335	941	941	10	13	64.0%	49.2%
7	Newborn	2,210	936	936	10	12	60.5%	50.5%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	37,282	8,348	8,348	125	144	81.7%	70.9%
	TOTAL INPATIENT BED UTILIZATION	39,492	9,284	9,284	135	156	80.1%	69.4%
	TOTAL INPATIENT REPORTED YEAR	39,492	9,284	9,284	135	156	80.1%	69.4%
	TOTAL INPATIENT PRIOR YEAR	41,898	9,847	9,847	139	156	82.6%	73.6%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-2,406	-563	-563	-4	0	-2.4%	-4.2%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-6%	-6%	-6%	-3%	0%	-3%	-6%
	Total Licensed Beds and Bassinets	156						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

MIDSTATE MEDICAL CENTER					
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
A. CT Scans (A)					
1	Inpatient Scans	4,903	4,657	-246	-5%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,717	4,111	394	11%
3	Emergency Department Scans	7,733	8,323	590	8%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	16,353	17,091	738	5%
B. MRI Scans (A)					
1	Inpatient Scans	1,486	1,134	-352	-24%
2	Outpatient Scans (Excluding Emergency Department Scans)	5,177	4,858	-319	-6%
3	Emergency Department Scans	634	804	170	27%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	7,297	6,796	-501	-7%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	8	6	-2	-25%
2	Outpatient Scans (Excluding Emergency Department Scans)	476	379	-97	-20%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	484	385	-99	-20%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	115	98	-17	-15%
2	Outpatient Procedures	5,128	5,230	102	2%
	Total Linear Accelerator Procedures	5,243	5,328	85	2%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	2,267	2,336	69	3%
2	Outpatient Surgical Procedures	6,055	6,023	-32	-1%
	Total Surgical Procedures	8,322	8,359	37	0%
J. Endoscopy Procedures					

MIDSTATE MEDICAL CENTER					
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	1,145	1,170	25	2%
2	Outpatient Endoscopy Procedures	7,319	7,623	304	4%
	Total Endoscopy Procedures	8,464	8,793	329	4%
K. Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	6,894	6,344	-550	-8%
2	Emergency Room Visits: Treated and Discharged	52,897	52,269	-628	-1%
	Total Emergency Room Visits	59,791	58,613	-1,178	-2%
L. Hospital Clinic Visits					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	33,972	31,757	-2,215	-7%
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	2,306	2,395	89	4%
	Total Hospital Clinic Visits	36,278	34,152	-2,126	-6%
M. Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	613	1,145	532	87%
2	Cardiac Rehabilitation	2,254	2,239	-15	-1%
3	Chemotherapy	931	874	-57	-6%
4	Gastroenterology	7,319	7,623	304	4%
5	Other Outpatient Visits	62,972	59,696	-3,276	-5%
	Total Other Hospital Outpatient Visits	74,089	71,577	-2,512	-3%
N. Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	310.2	298.4	-11.8	-4%
2	Total Physician FTEs	44.7	45.6	0.9	2%
3	Total Non-Nursing and Non-Physician FTEs	673.2	619.3	-53.9	-8%
	Total Hospital Full Time Equivalent Employees	1,028.1	963.3	-64.8	-6%

MIDSTATE MEDICAL CENTER					
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
A. Outpatient Surgical Procedures					
1	Main hospital campus	6,055	6,023	-32	-1%
	Total Outpatient Surgical Procedures(A)	6,055	6,023	-32	-1%
B. Outpatient Endoscopy Procedures					
1	Main hospital campus	7,319	7,623	304	4%
	Total Outpatient Endoscopy Procedures(B)	7,319	7,623	304	4%
C. Outpatient Hospital Emergency Room Visits					
1	61 Pomeroy Ave	0	0	0	0%
2	680 S. Main St Cheshire	0	0	0	0%
3	Main hospital campus	52,897	52,269	-628	-1%
	Total Outpatient Hospital Emergency Room Visits(C)	52,897	52,269	-628	-1%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

MIDSTATE MEDICAL CENTER					
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
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$130,191,173	\$133,168,476	\$2,977,303	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$50,847,282	\$51,842,983	\$995,701	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	39.06%	38.93%	-0.13%	0%
4	DISCHARGES	4,908	4,483	(425)	-9%
5	CASE MIX INDEX (CMI)	1.52013	1.59467	0.07454	5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,460.79804	7,148.90561	(311.89243)	-4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,815.26	\$7,251.88	\$436.62	6%
8	PATIENT DAYS	24,257	22,600	(1,657)	-7%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,096.19	\$2,293.94	\$197.75	9%
10	AVERAGE LENGTH OF STAY	4.9	5.0	0.1	2%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$96,879,700	\$109,908,722	\$13,029,022	13%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$26,993,382	\$29,672,851	\$2,679,469	10%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.86%	27.00%	-0.87%	-3%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	74.41%	82.53%	8.12%	11%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,652.21049	3,699.98077	47.77028	1%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,390.97	\$8,019.73	\$628.76	9%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$227,070,873	\$243,077,198	\$16,006,325	7%
18	TOTAL ACCRUED PAYMENTS	\$77,840,664	\$81,515,834	\$3,675,170	5%
19	TOTAL ALLOWANCES	\$149,230,209	\$161,561,364	\$12,331,155	8%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
<u>NON-GOVERNMENT INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$52,921,319	\$52,893,058	(\$28,261)	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$35,010,054	\$33,452,829	(\$1,557,225)	-4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	66.15%	63.25%	-2.91%	-4%
4	DISCHARGES	2,804	2,607	(197)	-7%
5	CASE MIX INDEX (CMI)	1.10877	1.14295	0.03418	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,108.99108	2,979.67065	(129.32043)	-4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,260.91	\$11,227.02	(\$33.88)	0%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$4,445.64)	(\$3,975.15)	\$470.50	-11%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$13,821,470)	(\$11,844,624)	\$1,976,846	-14%
10	PATIENT DAYS	9,388	8,667	(721)	-8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,729.23	\$3,859.79	\$130.56	4%
12	AVERAGE LENGTH OF STAY	3.3	3.3	(0.0)	-1%
<u>NON-GOVERNMENT OUTPATIENT</u>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$122,851,558	\$127,897,726	\$5,046,168	4%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$83,307,287	\$82,851,058	(\$456,229)	-1%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	67.81%	64.78%	-3.03%	-4%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	232.14%	241.80%	9.66%	4%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,509.20603	6,303.83994	(205.36609)	-3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,798.38	\$13,142.95	\$344.57	3%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$5,407.41)	(\$5,123.22)	\$284.19	-5%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$35,197,934)	(\$32,295,957)	\$2,901,977	-8%
<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>					
21	TOTAL ACCRUED CHARGES	\$175,772,877	\$180,790,784	\$5,017,907	3%
22	TOTAL ACCRUED PAYMENTS	\$118,317,341	\$116,303,887	(\$2,013,454)	-2%
23	TOTAL ALLOWANCES	\$57,455,536	\$64,486,897	\$7,031,361	12%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$49,019,404)	(\$44,140,581)	\$4,878,823	-10%
<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$163,272,936	\$180,790,784	\$17,517,848	11%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$115,287,227	\$130,814,180	\$15,526,953	13%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$47,985,709	\$49,976,604	\$1,990,895	4%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	29.39%	27.64%	-1.75%	

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$4,451,612	\$2,576,251	(\$1,875,361)	-42%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$943,085	\$1,035,766	\$92,681	10%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	21.19%	40.20%	19.02%	90%
4	DISCHARGES	242	127	(115)	-48%
5	CASE MIX INDEX (CMI)	0.94379	0.34031	(0.60348)	-64%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	228.39718	43.21937	(185.17781)	-81%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,129.14	\$23,965.32	\$19,836.17	480%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$7,131.76	(\$12,738.30)	(\$19,870.06)	-279%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$2,686.12	(\$16,713.44)	(\$19,399.56)	-722%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$613,501	(\$722,344)	(\$1,335,846)	-218%
11	PATIENT DAYS	882	662	(220)	-25%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,069.26	\$1,564.60	\$495.34	46%
13	AVERAGE LENGTH OF STAY	3.6	5.2	1.6	43%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$8,048,329	\$6,834,430	(\$1,213,899)	-15%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,160,322	\$1,001,844	(\$1,158,478)	-54%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.84%	14.66%	-12.18%	-45%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	180.80%	265.29%	84.49%	47%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	437.52592	336.91306	(100.61286)	-23%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,937.59	\$2,973.60	(\$1,963.99)	-40%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$7,860.79	\$10,169.35	\$2,308.56	29%
21	MEDICARE - UNINSURED OP PMT / OPED	\$2,453.38	\$5,046.13	\$2,592.75	106%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,073,419	\$1,700,108	\$626,689	58%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$12,499,941	\$9,410,681	(\$3,089,260)	-25%
24	TOTAL ACCRUED PAYMENTS	\$3,103,407	\$2,037,610	(\$1,065,797)	-34%
25	TOTAL ALLOWANCES	\$9,396,534	\$7,373,071	(\$2,023,463)	-22%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,686,921	\$977,764	(\$709,157)	-42%

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D. STATE OF CONNECTICUT MEDICAID					
<u>MEDICAID INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$36,142,007	\$40,223,929	\$4,081,922	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$12,657,458	\$12,188,046	(\$469,412)	-4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.02%	30.30%	-4.72%	-13%
4	DISCHARGES	2,111	2,182	71	3%
5	CASE MIX INDEX (CMI)	0.98576	0.99991	0.01415	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,080.93936	2,181.80362	100.86426	5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,082.57	\$5,586.23	(\$496.34)	-8%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,178.34	\$5,640.80	\$462.46	9%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$732.69	\$1,665.65	\$932.96	127%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,524,686	\$3,634,125	\$2,109,439	138%
11	PATIENT DAYS	8,183	8,199	16	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,546.80	\$1,486.53	(\$60.27)	-4%
13	AVERAGE LENGTH OF STAY	3.9	3.8	(0.1)	-3%
<u>MEDICAID OUTPATIENT</u>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$64,876,057	\$78,467,175	\$13,591,118	21%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$15,757,381	\$17,449,662	\$1,692,281	11%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.29%	22.24%	-2.05%	-8%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	179.50%	195.08%	15.57%	9%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,789.31243	4,256.55524	467.24281	12%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,158.37	\$4,099.48	(\$58.89)	-1%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$8,640.00	\$9,043.47	\$403.47	5%
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,232.60	\$3,920.25	\$687.66	21%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$12,249,317	\$16,686,767	\$4,437,449	36%
<u>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</u>					
23	TOTAL ACCRUED CHARGES	\$101,018,064	\$118,691,104	\$17,673,040	17%
24	TOTAL ACCRUED PAYMENTS	\$28,414,839	\$29,637,708	\$1,222,869	4%
25	TOTAL ALLOWANCES	\$72,603,225	\$89,053,396	\$16,450,171	23%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$13,774,003	\$20,320,892	\$6,546,888	48%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
E.	<u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u>				
	<u>OTHER MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$11,260.91	\$11,227.02	(\$33.88)	0%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$6,815.26	\$7,251.88	\$436.62	6%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$12,798.38	\$13,142.95	\$344.57	3%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$7,390.97	\$8,019.73	\$628.76	9%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%

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F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$36,142,007	\$40,223,929	\$4,081,922	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$12,657,458	\$12,188,046	(\$469,412)	-4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.02%	30.30%	-4.72%	-13%
4	DISCHARGES	2,111	2,182	71	3%
5	CASE MIX INDEX (CMI)	0.98576	0.99991	0.01415	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,080.93936	2,181.80362	100.86426	5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,082.57	\$5,586.23	(\$496.34)	-8%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,178.34	\$5,640.80	\$462.46	9%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$732.69	\$1,665.65	\$932.96	127%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,524,686	\$3,634,125	\$2,109,439	138%
11	PATIENT DAYS	8,183	8,199	16	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,546.80	\$1,486.53	(\$60.27)	-4%
13	AVERAGE LENGTH OF STAY	3.9	3.8	(0.1)	-3%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$64,876,057	\$78,467,175	\$13,591,118	21%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$15,757,381	\$17,449,662	\$1,692,281	11%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.29%	22.24%	-2.05%	-8%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	179.50%	195.08%	15.57%	9%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,789.31243	4,256.55524	467.24281	12%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,158.37	\$4,099.48	(\$58.89)	-1%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$8,640.00	\$9,043.47	\$403.47	5%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,232.60	\$3,920.25	\$687.66	21%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$12,249,317	\$16,686,767	\$4,437,449	36%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$101,018,064	\$118,691,104	\$17,673,040	17%
24	TOTAL ACCRUED PAYMENTS	\$28,414,839	\$29,637,708	\$1,222,869	4%
25	TOTAL ALLOWANCES	\$72,603,225	\$89,053,396	\$16,450,171	23%

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G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$291,509	\$106,532	(\$184,977)	-63%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$60,612	\$21,397	(\$39,215)	-65%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	20.79%	20.09%	-0.71%	-3%
4	DISCHARGES	24	12	(12)	-50%
5	CASE MIX INDEX (CMI)	0.72830	0.55530	(0.17300)	-24%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	17.47920	6.66360	(10.81560)	-62%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,467.66	\$3,211.03	(\$256.64)	-7%
8	PATIENT DAYS	70	26	(44)	-63%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$865.89	\$822.96	(\$42.92)	-5%
10	AVERAGE LENGTH OF STAY	2.9	2.2	(0.8)	-26%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$894,335	\$763,906	(\$130,429)	-15%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$185,955	\$153,431	(\$32,524)	-17%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$1,185,844	\$870,438	(\$315,406)	-27%
14	TOTAL ACCRUED PAYMENTS	\$246,567	\$174,828	(\$71,739)	-29%
15	TOTAL ALLOWANCES	\$939,277	\$695,610	(\$243,667)	-26%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$9,116,321	\$8,597,041	(\$519,280)	-6%
2	TOTAL OPERATING EXPENSES	\$210,520,148	\$208,792,651	(\$1,727,497)	-1%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$7,131,143	\$8,125,010	\$993,867	14%
5	BAD DEBTS (CHARGES)	\$2,265,391	\$6,385,283	\$4,119,892	182%
6	UNCOMPENSATED CARE (CHARGES)	\$9,396,534	\$14,510,293	\$5,113,759	54%
7	COST OF UNCOMPENSATED CARE	\$4,148,556	\$6,035,506	\$1,886,950	45%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$101,018,064	\$118,691,104	\$17,673,040	17%
9	TOTAL ACCRUED PAYMENTS	\$28,414,839	\$29,637,708	\$1,222,869	4%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$44,599,332	\$49,369,156	\$4,769,824	11%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$16,184,493	\$19,731,448	\$3,546,955	22%

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II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$219,546,008	\$226,391,995	\$6,845,987	3%
2	TOTAL INPATIENT PAYMENTS	\$98,575,406	\$97,505,255	(\$1,070,151)	-1%
3	TOTAL INPATIENT PAYMENTS / CHARGES	44.90%	43.07%	-1.83%	-4%
4	TOTAL DISCHARGES	9,847	9,284	(563)	-6%
5	TOTAL CASE MIX INDEX	1.28650	1.32670	0.04019	3%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	12,668.20768	12,317.04348	(351.16420)	-3%
7	TOTAL OUTPATIENT CHARGES	\$285,501,650	\$317,037,529	\$31,535,879	11%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	130.04%	140.04%	10.00%	8%
9	TOTAL OUTPATIENT PAYMENTS	\$126,244,005	\$130,127,002	\$3,882,997	3%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	44.22%	41.04%	-3.17%	-7%
11	TOTAL CHARGES	\$505,047,658	\$543,429,524	\$38,381,866	8%
12	TOTAL PAYMENTS	\$224,819,411	\$227,632,257	\$2,812,846	1%
13	TOTAL PAYMENTS / TOTAL CHARGES	44.51%	41.89%	-2.63%	-6%
14	PATIENT DAYS	41,898	39,492	(2,406)	-6%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$166,624,689	\$173,498,937	\$6,874,248	4%
2	INPATIENT PAYMENTS	\$63,565,352	\$64,052,426	\$487,074	1%
3	GOVT. INPATIENT PAYMENTS / CHARGES	38.15%	36.92%	-1.23%	-3%
4	DISCHARGES	7,043	6,677	(366)	-5%
5	CASE MIX INDEX	1.35726	1.39844	0.04117	3%
6	CASE MIX ADJUSTED DISCHARGES	9,559.21660	9,337.37283	(221.84377)	-2%
7	OUTPATIENT CHARGES	\$162,650,092	\$189,139,803	\$26,489,711	16%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	97.61%	109.01%	11.40%	12%
9	OUTPATIENT PAYMENTS	\$42,936,718	\$47,275,944	\$4,339,226	10%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.40%	25.00%	-1.40%	-5%
11	TOTAL CHARGES	\$329,274,781	\$362,638,740	\$33,363,959	10%
12	TOTAL PAYMENTS	\$106,502,070	\$111,328,370	\$4,826,300	5%
13	TOTAL PAYMENTS / CHARGES	32.34%	30.70%	-1.64%	-5%
14	PATIENT DAYS	32,510	30,825	(1,685)	-5%
15	TOTAL GOVERNMENT DEDUCTIONS	\$222,772,711	\$251,310,370	\$28,537,659	13%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	4.9	5.0	0.1	2%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.3	3.3	(0.0)	-1%
3	UNINSURED	3.6	5.2	1.6	43%
4	MEDICAID	3.9	3.8	(0.1)	-3%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	2.9	2.2	(0.8)	-26%
7	TOTAL AVERAGE LENGTH OF STAY	4.3	4.3	(0.0)	0%

MIDSTATE MEDICAL CENTER					
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
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$505,047,658	\$543,429,524	\$38,381,866	8%
2	TOTAL GOVERNMENT DEDUCTIONS	\$222,772,711	\$251,310,370	\$28,537,659	13%
3	UNCOMPENSATED CARE	\$9,396,534	\$14,510,293	\$5,113,759	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$47,985,709	\$49,976,604	\$1,990,895	4%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,914,881	\$1,594,619	(\$320,262)	-17%
6	TOTAL ADJUSTMENTS	\$282,069,835	\$317,391,886	\$35,322,051	13%
7	TOTAL ACCRUED PAYMENTS	\$222,977,823	\$226,037,638	\$3,059,815	1%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$222,977,823	\$226,037,638	\$3,059,815	1%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4414985783	0.4159465543	(0.0255520241)	-6%
11	COST OF UNCOMPENSATED CARE	\$4,148,556	\$6,035,506	\$1,886,950	45%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$16,184,493	\$19,731,448	\$3,546,955	22%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$20,333,049	\$25,766,954	\$5,433,905	27%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$12,249,317	\$16,686,767	\$4,437,449	36%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,686,921	\$977,764	(\$709,157)	-42%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$13,936,238	\$17,664,530	\$3,728,292	27%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,925,009	\$3,925,009	\$0	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$5,231,619)	(\$8,500,070)	(\$3,268,451)	62.47%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$217,746,204	\$219,132,186	\$1,385,982	0.64%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$505,047,658	\$543,429,524	\$38,381,866	7.60%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$9,396,534	\$14,510,293	\$5,113,759	54.42%

MIDSTATE MEDICAL CENTER						
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	FY	ACTUAL	FY	AMOUNT
		2013		2014		DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS					
A.	INPATIENT ACCRUED CHARGES					
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$52,921,319		\$52,893,058		(\$28,261)
2	MEDICARE	\$130,191,173		133,168,476		\$2,977,303
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$36,142,007		40,223,929		\$4,081,922
4	MEDICAID	\$36,142,007		40,223,929		\$4,081,922
5	OTHER MEDICAL ASSISTANCE	\$0		0		\$0
6	CHAMPUS / TRICARE	\$291,509		106,532		(\$184,977)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,451,612		2,576,251		(\$1,875,361)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$166,624,689		\$173,498,937		\$6,874,248
	TOTAL INPATIENT CHARGES	\$219,546,008		\$226,391,995		\$6,845,987
B.	OUTPATIENT ACCRUED CHARGES					
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$122,851,558		\$127,897,726		\$5,046,168
2	MEDICARE	\$96,879,700		109,908,722		\$13,029,022
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$64,876,057		78,467,175		\$13,591,118
4	MEDICAID	\$64,876,057		78,467,175		\$13,591,118
5	OTHER MEDICAL ASSISTANCE	\$0		0		\$0
6	CHAMPUS / TRICARE	\$894,335		763,906		(\$130,429)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$8,048,329		6,834,430		(\$1,213,899)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$162,650,092		\$189,139,803		\$26,489,711
	TOTAL OUTPATIENT CHARGES	\$285,501,650		\$317,037,529		\$31,535,879
C.	TOTAL ACCRUED CHARGES					
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$175,772,877		\$180,790,784		\$5,017,907
2	TOTAL MEDICARE	\$227,070,873		\$243,077,198		\$16,006,325
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$101,018,064		\$118,691,104		\$17,673,040
4	TOTAL MEDICAID	\$101,018,064		\$118,691,104		\$17,673,040
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0		\$0		\$0
6	TOTAL CHAMPUS / TRICARE	\$1,185,844		\$870,438		(\$315,406)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,499,941		\$9,410,681		(\$3,089,260)
	TOTAL GOVERNMENT CHARGES	\$329,274,781		\$362,638,740		\$33,363,959
	TOTAL CHARGES	\$505,047,658		\$543,429,524		\$38,381,866
D.	INPATIENT ACCRUED PAYMENTS					
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,010,054		\$33,452,829		(\$1,557,225)
2	MEDICARE	\$50,847,282		51,842,983		\$995,701
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$12,657,458		12,188,046		(\$469,412)
4	MEDICAID	\$12,657,458		12,188,046		(\$469,412)
5	OTHER MEDICAL ASSISTANCE	\$0		0		\$0
6	CHAMPUS / TRICARE	\$60,612		21,397		(\$39,215)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$943,085		1,035,766		\$92,681
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$63,565,352		\$64,052,426		\$487,074
	TOTAL INPATIENT PAYMENTS	\$98,575,406		\$97,505,255		(\$1,070,151)
E.	OUTPATIENT ACCRUED PAYMENTS					
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$83,307,287		\$82,851,058		(\$456,229)
2	MEDICARE	\$26,993,382		29,672,851		\$2,679,469
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$15,757,381		17,449,662		\$1,692,281
4	MEDICAID	\$15,757,381		17,449,662		\$1,692,281
5	OTHER MEDICAL ASSISTANCE	\$0		0		\$0
6	CHAMPUS / TRICARE	\$185,955		153,431		(\$32,524)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,160,322		1,001,844		(\$1,158,478)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$42,936,718		\$47,275,944		\$4,339,226
	TOTAL OUTPATIENT PAYMENTS	\$126,244,005		\$130,127,002		\$3,882,997
F.	TOTAL ACCRUED PAYMENTS					
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$118,317,341		\$116,303,887		(\$2,013,454)
2	TOTAL MEDICARE	\$77,840,664		\$81,515,834		\$3,675,170
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$28,414,839		\$29,637,708		\$1,222,869
4	TOTAL MEDICAID	\$28,414,839		\$29,637,708		\$1,222,869
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0		\$0		\$0
6	TOTAL CHAMPUS / TRICARE	\$246,567		\$174,828		(\$71,739)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,103,407		\$2,037,610		(\$1,065,797)
	TOTAL GOVERNMENT PAYMENTS	\$106,502,070		\$111,328,370		\$4,826,300
	TOTAL PAYMENTS	\$224,819,411		\$227,632,257		\$2,812,846

MIDSTATE MEDICAL CENTER						
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
II. PAYER MIX						
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10.48%		9.73%		-0.75%
2	MEDICARE	25.78%		24.51%		-1.27%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.16%		7.40%		0.25%
4	MEDICAID	7.16%		7.40%		0.25%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%		0.00%
6	CHAMPUS / TRICARE	0.06%		0.02%		-0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.88%		0.47%		-0.41%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	32.99%		31.93%		-1.07%
	TOTAL INPATIENT PAYER MIX	43.47%		41.66%		-1.81%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	24.32%		23.54%		-0.79%
2	MEDICARE	19.18%		20.23%		1.04%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12.85%		14.44%		1.59%
4	MEDICAID	12.85%		14.44%		1.59%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%		0.00%
6	CHAMPUS / TRICARE	0.18%		0.14%		-0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.59%		1.26%		-0.34%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	32.20%		34.80%		2.60%
	TOTAL OUTPATIENT PAYER MIX	56.53%		58.34%		1.81%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%		100.00%		0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15.57%		14.70%		-0.88%
2	MEDICARE	22.62%		22.77%		0.16%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.63%		5.35%		-0.28%
4	MEDICAID	5.63%		5.35%		-0.28%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%		0.00%
6	CHAMPUS / TRICARE	0.03%		0.01%		-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.42%		0.46%		0.04%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	28.27%		28.14%		-0.14%
	TOTAL INPATIENT PAYER MIX	43.85%		42.83%		-1.01%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	37.06%		36.40%		-0.66%
2	MEDICARE	12.01%		13.04%		1.03%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.01%		7.67%		0.66%
4	MEDICAID	7.01%		7.67%		0.66%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%		0.00%
6	CHAMPUS / TRICARE	0.08%		0.07%		-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.96%		0.44%		-0.52%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	19.10%		20.77%		1.67%
	TOTAL OUTPATIENT PAYER MIX	56.15%		57.17%		1.01%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%		100.00%		0.00%

MIDSTATE MEDICAL CENTER				
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
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,804	2,607	(197)
2	MEDICARE	4,908	4,483	(425)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,111	2,182	71
4	MEDICAID	2,111	2,182	71
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	24	12	(12)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	242	127	(115)
	TOTAL GOVERNMENT DISCHARGES	7,043	6,677	(366)
	TOTAL DISCHARGES	9,847	9,284	(563)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9,388	8,667	(721)
2	MEDICARE	24,257	22,600	(1,657)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,183	8,199	16
4	MEDICAID	8,183	8,199	16
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	70	26	(44)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	882	662	(220)
	TOTAL GOVERNMENT PATIENT DAYS	32,510	30,825	(1,685)
	TOTAL PATIENT DAYS	41,898	39,492	(2,406)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.3	3.3	(0.0)
2	MEDICARE	4.9	5.0	0.1
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.9	3.8	(0.1)
4	MEDICAID	3.9	3.8	(0.1)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	2.9	2.2	(0.8)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.6	5.2	1.6
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.6	4.6	0.0
	TOTAL AVERAGE LENGTH OF STAY	4.3	4.3	(0.0)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.10877	1.14295	0.03418
2	MEDICARE	1.52013	1.59467	0.07454
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.98576	0.99991	0.01415
4	MEDICAID	0.98576	0.99991	0.01415
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.72830	0.55530	(0.17300)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.94379	0.34031	(0.60348)
	TOTAL GOVERNMENT CASE MIX INDEX	1.35726	1.39844	0.04117
	TOTAL CASE MIX INDEX	1.28650	1.32670	0.04019
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$163,272,936	\$180,790,784	\$17,517,848
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$115,287,227	\$130,814,180	\$15,526,953
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$47,985,709	\$49,976,604	\$1,990,895
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	29.39%	27.64%	-1.75%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,925,009	\$3,925,009	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,914,881	\$1,594,619	(\$320,262)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$7,131,143	\$8,125,010	\$993,867
9	BAD DEBTS	\$2,265,391	\$6,385,283	\$4,119,892
10	TOTAL UNCOMPENSATED CARE	\$9,396,534	\$14,510,293	\$5,113,759
11	TOTAL OTHER OPERATING REVENUE	\$9,116,321	\$8,597,041	(\$519,280)
12	TOTAL OPERATING EXPENSES	\$210,520,148	\$208,792,651	(\$1,727,497)

MIDSTATE MEDICAL CENTER				
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
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,108.99108	2,979.67065	(129.32043)
2	MEDICARE	7,460.79804	7,148.90561	(311.89243)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,080.93936	2,181.80362	100.86426
4	MEDICAID	2,080.93936	2,181.80362	100.86426
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	17.47920	6.66360	(10.81560)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	228.39718	43.21937	(185.17781)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	9,559.21660	9,337.37283	(221.84377)
	TOTAL CASE MIX ADJUSTED DISCHARGES	12,668.20768	12,317.04348	(351.16420)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,509.20603	6,303.83994	-205.36609
2	MEDICARE	3,652.21049	3,699.98077	47.77028
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,789.31243	4,256.55524	467.24281
4	MEDICAID	3,789.31243	4,256.55524	467.24281
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	73.63080	86.04806	12.41726
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	437.52592	336.91306	-100.61286
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	7,515.15371	8,042.58408	527.43036
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	14,024.35974	14,346.42402	322.06428
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,260.91	\$11,227.02	(\$33.88)
2	MEDICARE	\$6,815.26	\$7,251.88	\$436.62
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,082.57	\$5,586.23	(\$496.34)
4	MEDICAID	\$6,082.57	\$5,586.23	(\$496.34)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$3,467.66	\$3,211.03	(\$256.64)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,129.14	\$23,965.32	\$19,836.17
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,649.64	\$6,859.79	\$210.15
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,781.32	\$7,916.29	\$134.97
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,798.38	\$13,142.95	\$344.57
2	MEDICARE	\$7,390.97	\$8,019.73	\$628.76
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,158.37	\$4,099.48	(\$58.89)
4	MEDICAID	\$4,158.37	\$4,099.48	(\$58.89)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$2,525.51	\$1,783.08	(\$742.42)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,937.59	\$2,973.60	(\$1,963.99)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$5,713.35	\$5,878.20	\$164.85
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$9,001.77	\$9,070.34	\$68.58

MIDSTATE MEDICAL CENTER				
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
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$12,249,317	\$16,686,767	\$4,437,449
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,686,921	\$977,764	(\$709,157)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$13,936,238	\$17,664,530	\$3,728,292
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$505,047,658	\$543,429,524	\$38,381,866
2	TOTAL GOVERNMENT DEDUCTIONS	\$222,772,711	\$251,310,370	\$28,537,659
3	UNCOMPENSATED CARE	\$9,396,534	\$14,510,293	\$5,113,759
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$47,985,709	\$49,976,604	\$1,990,895
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,914,881	\$1,594,619	(\$320,262)
6	TOTAL ADJUSTMENTS	\$282,069,835	\$317,391,886	\$35,322,051
7	TOTAL ACCRUED PAYMENTS	\$222,977,823	\$226,037,638	\$3,059,815
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$222,977,823	\$226,037,638	\$3,059,815
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4414985783	0.4159465543	(0.0255520241)
11	COST OF UNCOMPENSATED CARE	\$4,148,556	\$6,035,506	\$1,886,950
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$16,184,493	\$19,731,448	\$3,546,955
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$20,333,049	\$25,766,954	\$5,433,905
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	66.15%	63.25%	-2.91%
2	MEDICARE	39.06%	38.93%	-0.13%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	35.02%	30.30%	-4.72%
4	MEDICAID	35.02%	30.30%	-4.72%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	20.79%	20.09%	-0.71%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	21.19%	40.20%	19.02%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	38.15%	36.92%	-1.23%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	44.90%	43.07%	-1.83%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	67.81%	64.78%	-3.03%
2	MEDICARE	27.86%	27.00%	-0.87%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	24.29%	22.24%	-2.05%
4	MEDICAID	24.29%	22.24%	-2.05%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	20.79%	20.09%	-0.71%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	26.84%	14.66%	-12.18%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	26.40%	25.00%	-1.40%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	44.22%	41.04%	-3.17%

MIDSTATE MEDICAL CENTER						
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
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS						
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS						
1	TOTAL ACCRUED PAYMENTS	\$224,819,411		\$227,632,257		\$2,812,846
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)		\$0		\$0	\$0
	OHCA DEFINED NET REVENUE	\$224,819,411		\$227,632,257		\$2,812,846
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE		(\$5,231,619)		(\$8,500,070)	(\$3,268,451)
4	CALCULATED NET REVENUE	\$223,863,311		\$219,132,187		(\$4,731,124)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$217,746,204		\$219,132,186		\$1,385,982
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$6,117,107		\$1		(\$6,117,106)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS						
1	OHCA DEFINED GROSS REVENUE	\$505,047,658		\$543,429,524		\$38,381,866
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE		\$0		\$0	\$0
	CALCULATED GROSS REVENUE	\$505,047,658		\$543,429,524		\$38,381,866
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$505,047,658		\$543,429,524		\$38,381,866
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0		\$0		\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS						
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$9,396,534		\$14,510,293		\$5,113,759
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE		\$0		\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$9,396,534		\$14,510,293		\$5,113,759
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$9,396,534		\$14,510,293		\$5,113,759
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0		\$0		\$0

MIDSTATE MEDICAL CENTER		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$52,893,058
2	MEDICARE	133,168,476
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	40,223,929
4	MEDICAID	40,223,929
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	106,532
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,576,251
	TOTAL INPATIENT GOVERNMENT CHARGES	\$173,498,937
	TOTAL INPATIENT CHARGES	\$226,391,995
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$127,897,726
2	MEDICARE	109,908,722
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	78,467,175
4	MEDICAID	78,467,175
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	763,906
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6,834,430
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$189,139,803
	TOTAL OUTPATIENT CHARGES	\$317,037,529
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$180,790,784
2	TOTAL GOVERNMENT ACCRUED CHARGES	362,638,740
	TOTAL ACCRUED CHARGES	\$543,429,524
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$33,452,829
2	MEDICARE	51,842,983
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12,188,046
4	MEDICAID	12,188,046
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	21,397
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,035,766
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$64,052,426
	TOTAL INPATIENT PAYMENTS	\$97,505,255
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$82,851,058
2	MEDICARE	29,672,851
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17,449,662
4	MEDICAID	17,449,662
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	153,431
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,001,844
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$47,275,944
	TOTAL OUTPATIENT PAYMENTS	\$130,127,002
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$116,303,887
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	111,328,370
	TOTAL ACCRUED PAYMENTS	\$227,632,257

MIDSTATE MEDICAL CENTER		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,607
2	MEDICARE	4,483
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,182
4	MEDICAID	2,182
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	12
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	127
	TOTAL GOVERNMENT DISCHARGES	6,677
	TOTAL DISCHARGES	9,284
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.14295
2	MEDICARE	1.59467
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.99991
4	MEDICAID	0.99991
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	0.55530
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.34031
	TOTAL GOVERNMENT CASE MIX INDEX	1.39844
	TOTAL CASE MIX INDEX	1.32670
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$180,790,784
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$130,814,180
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$49,976,604
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	27.64%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,925,009
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,594,619
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$8,125,010
9	BAD DEBTS	\$6,385,283
10	TOTAL UNCOMPENSATED CARE	\$14,510,293
11	TOTAL OTHER OPERATING REVENUE	\$8,597,041
12	TOTAL OPERATING EXPENSES	\$208,792,651

MIDSTATE MEDICAL CENTER		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$227,632,257
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$227,632,257
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$8,500,070)
	CALCULATED NET REVENUE	\$219,132,187
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$219,132,186
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$543,429,524
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$543,429,524
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$543,429,524
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$14,510,293
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$14,510,293
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$14,510,293
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

MIDSTATE MEDICAL CENTER					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
A. <u>Hospital Charity Care (from HRS Report 500)</u>					
1	Number of Applicants	6,890	7,006	116	2%
2	Number of Approved Applicants	6,546	6,656	110	2%
3	Total Charges (A)	\$7,131,143	\$8,125,010	\$993,867	14%
4	Average Charges	\$1,089	\$1,221	\$131	12%
5	Ratio of Cost to Charges (RCC)	0.436359	0.409442	(0.026917)	-6%
6	Total Cost	\$3,111,738	\$3,326,720	\$214,982	7%
7	Average Cost	\$475	\$500	\$24	5%
8	Charity Care - Inpatient Charges	\$1,787,698	\$1,646,964	(\$140,734)	-8%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	1,627,152	1,688,334	61,182	4%
10	Charity Care - Emergency Department Charges	3,716,293	4,789,712	1,073,419	29%
11	Total Charges (A)	\$7,131,143	\$8,125,010	\$993,867	14%
12	Charity Care - Number of Patient Days	760	715	(45)	-6%
13	Charity Care - Number of Discharges	483	500	17	4%
14	Charity Care - Number of Outpatient ED Visits	6,870	7,893	1,023	15%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	2,072	2,235	163	8%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$1,720,829	\$3,093,127	\$1,372,298	80%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	222,216	1,217,619	995,403	448%
3	Bad Debts - Emergency Department	322,346	2,074,537	1,752,191	544%
4	Total Bad Debts (A)	\$2,265,391	\$6,385,283	\$4,119,892	182%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$7,131,143	\$8,125,010	\$993,867	14%
2	Bad Debts (A)	2,265,391	6,385,283	4,119,892	182%
3	Total Uncompensated Care (A)	\$9,396,534	\$14,510,293	\$5,113,759	54%
4	Uncompensated Care - Inpatient Services	\$3,508,527	\$4,740,091	\$1,231,564	35%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	1,849,368	2,905,953	1,056,585	57%
6	Uncompensated Care - Emergency Department	4,038,639	6,864,249	2,825,610	70%
7	Total Uncompensated Care (A)	\$9,396,534	\$14,510,293	\$5,113,759	54%

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

MIDSTATE MEDICAL CENTER 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
<u>COMMERCIAL - ALL PAYERS</u>					
1	Total Gross Revenue	\$163,272,936	\$180,790,784	\$17,517,848	11%
2	Total Contractual Allowances	\$47,985,709	\$49,976,604	\$1,990,895	4%
	Total Accrued Payments (A)	\$115,287,227	\$130,814,180	\$15,526,953	13%
	Total Discount Percentage	29.39%	27.64%	-1.75%	-6%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

MIDSTATE MEDICAL CENTER				
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
A. Gross and Net Revenue				
1	Inpatient Gross Revenue	\$212,045,748	\$219,546,008	\$226,391,995
2	Outpatient Gross Revenue	\$267,599,887	\$285,501,650	\$317,037,529
3	Total Gross Patient Revenue	\$479,645,635	\$505,047,658	\$543,429,524
4	Net Patient Revenue	\$218,353,748	\$217,746,204	\$219,132,186
B. Total Operating Expenses				
1	Total Operating Expense	\$221,306,295	\$210,520,148	\$208,792,651
C. Utilization Statistics				
1	Patient Days	42,530	41,898	39,492
2	Discharges	10,330	9,847	9,284
3	Average Length of Stay	4.1	4.3	4.3
4	Equivalent (Adjusted) Patient Days (EPD)	96,202	96,383	94,796
0	Equivalent (Adjusted) Discharges (ED)	23,366	22,652	22,285
D. Case Mix Statistics				
1	Case Mix Index	1.20127	1.28650	1.32670
2	Case Mix Adjusted Patient Days (CMAPD)	51,090	53,902	52,394
3	Case Mix Adjusted Discharges (CMAD)	12,409	12,668	12,317
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	115,565	123,997	125,766
5	Case Mix Adjusted Equivalent Discharges (CMAED)	28,069	29,142	29,566
E. Gross Revenue Per Statistic				
1	Total Gross Revenue per Patient Day	\$11,278	\$12,054	\$13,760
2	Total Gross Revenue per Discharge	\$46,432	\$51,289	\$58,534
3	Total Gross Revenue per EPD	\$4,986	\$5,240	\$5,733
4	Total Gross Revenue per ED	\$20,527	\$22,296	\$24,385
5	Total Gross Revenue per CMAEPD	\$4,150	\$4,073	\$4,321
6	Total Gross Revenue per CMAED	\$17,088	\$17,330	\$18,380
7	Inpatient Gross Revenue per EPD	\$2,204	\$2,278	\$2,388
8	Inpatient Gross Revenue per ED	\$9,075	\$9,692	\$10,159

MIDSTATE MEDICAL CENTER				
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
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$5,134	\$5,197	\$5,549
2	Net Patient Revenue per Discharge	\$21,138	\$22,113	\$23,603
3	Net Patient Revenue per EPD	\$2,270	\$2,259	\$2,312
4	Net Patient Revenue per ED	\$9,345	\$9,613	\$9,833
5	Net Patient Revenue per CMAEPD	\$1,889	\$1,756	\$1,742
6	Net Patient Revenue per CMAED	\$7,779	\$7,472	\$7,412
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$5,204	\$5,025	\$5,287
2	Total Operating Expense per Discharge	\$21,424	\$21,379	\$22,490
3	Total Operating Expense per EPD	\$2,300	\$2,184	\$2,203
4	Total Operating Expense per ED	\$9,471	\$9,294	\$9,369
5	Total Operating Expense per CMAEPD	\$1,915	\$1,698	\$1,660
6	Total Operating Expense per CMAED	\$7,884	\$7,224	\$7,062
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$28,460,163	\$27,207,529	\$27,000,116
2	Nursing Fringe Benefits Expense	\$10,526,845	\$8,488,460	\$7,365,276
3	Total Nursing Salary and Fringe Benefits Expense	\$38,987,008	\$35,695,989	\$34,365,392
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$7,503,379	\$7,916,881	\$8,218,072
2	Physician Fringe Benefits Expense	\$2,025,011	\$1,632,894	\$1,416,831
3	Total Physician Salary and Fringe Benefits Expense	\$9,528,390	\$9,549,775	\$9,634,903
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$39,975,318	\$40,133,370	\$34,527,167
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$15,536,997	\$12,528,463	\$10,870,710
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$55,512,315	\$52,661,833	\$45,397,877
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$75,938,860	\$75,257,780	\$69,745,355
2	Total Fringe Benefits Expense	\$28,088,853	\$22,649,817	\$19,652,817
3	Total Salary and Fringe Benefits Expense	\$104,027,713	\$97,907,597	\$89,398,172

MIDSTATE MEDICAL CENTER				
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
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	332.6	310.2	298.4
2	Total Physician FTEs	43.8	44.7	45.6
3	Total Non-Nursing, Non-Physician FTEs	678.2	673.2	619.3
4	Total Full Time Equivalent Employees (FTEs)	1,054.6	1,028.1	963.3
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$85,569	\$87,710	\$90,483
2	Nursing Fringe Benefits Expense per FTE	\$31,650	\$27,364	\$24,683
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$117,219	\$115,074	\$115,166
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$171,310	\$177,111	\$180,221
2	Physician Fringe Benefits Expense per FTE	\$46,233	\$36,530	\$31,071
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$217,543	\$213,641	\$211,292
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$58,943	\$59,616	\$55,752
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$22,909	\$18,610	\$17,553
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$81,852	\$78,226	\$73,305
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$72,007	\$73,201	\$72,403
2	Total Fringe Benefits Expense per FTE	\$26,635	\$22,031	\$20,402
3	Total Salary and Fringe Benefits Expense per FTE	\$98,642	\$95,232	\$92,804
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,446	\$2,337	\$2,264
2	Total Salary and Fringe Benefits Expense per Discharge	\$10,070	\$9,943	\$9,629
3	Total Salary and Fringe Benefits Expense per EPD	\$1,081	\$1,016	\$943
4	Total Salary and Fringe Benefits Expense per ED	\$4,452	\$4,322	\$4,012
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$900	\$790	\$711
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,706	\$3,360	\$3,024