

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I. ASSETS					
A. Current Assets:					
1	Cash and Cash Equivalents	\$46,717,416	\$57,570,735	\$10,853,319	23%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$33,683,248	\$36,111,295	\$2,428,047	7%
4	Current Assets Whose Use is Limited for Current Liabilities	\$6,648,187	\$7,240,812	\$592,625	9%
5	Due From Affiliates	\$3,388,030	\$3,901,924	\$513,894	15%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,923,318	\$3,252,641	\$1,329,323	69%
8	Prepaid Expenses	\$1,760,273	\$905,576	(\$854,697)	-49%
9	Other Current Assets	\$0	\$0	\$0	0%
	Total Current Assets	\$94,120,472	\$108,982,983	\$14,862,511	16%
B. Noncurrent Assets Whose Use is Limited:					
1	Held by Trustee	\$18,156,456	\$22,743,662	\$4,587,206	25%
2	Board Designated for Capital Acquisition	\$36,354,725	\$37,259,421	\$904,696	2%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$54,511,181	\$60,003,083	\$5,491,902	10%
5	Interest in Net Assets of Foundation	\$39,032,937	\$41,147,474	\$2,114,537	5%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$5,906,735	\$3,827,148	(\$2,079,587)	-35%
C. Net Fixed Assets:					
1	Property, Plant and Equipment	\$191,006,781	\$208,277,975	\$17,271,194	9%
2	Less: Accumulated Depreciation	\$100,305,907	\$114,398,504	\$14,092,597	14%
	Property, Plant and Equipment, Net	\$90,700,874	\$93,879,471	\$3,178,597	4%
3	Construction in Progress	\$4,429,799	\$4,251,661	(\$178,138)	-4%
	Total Net Fixed Assets	\$95,130,673	\$98,131,132	\$3,000,459	3%
	Total Assets	\$288,701,998	\$312,091,820	\$23,389,822	8%

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<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$9,994,419	\$10,508,835	\$514,416	5%
2	Salaries, Wages and Payroll Taxes	\$6,787,976	\$8,205,022	\$1,417,046	21%
3	Due To Third Party Payers	\$1,270,638	\$1,831,013	\$560,375	44%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,755,000	\$1,825,000	\$70,000	4%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$6,722,114	\$7,188,517	\$466,403	7%
	Total Current Liabilities	\$26,530,147	\$29,558,387	\$3,028,240	11%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$65,808,169	\$63,931,536	(\$1,876,633)	-3%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$65,808,169	\$63,931,536	(\$1,876,633)	-3%
3	Accrued Pension Liability	\$35,623,338	\$75,300,446	\$39,677,108	111%
4	Other Long Term Liabilities	\$19,952,258	\$30,697,882	\$10,745,624	54%
	Total Long Term Liabilities	\$121,383,765	\$169,929,864	\$48,546,099	40%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$132,391,851	\$102,294,307	(\$30,097,544)	-23%
2	Temporarily Restricted Net Assets	\$2,475,427	\$3,447,432	\$972,005	39%
3	Permanently Restricted Net Assets	\$5,920,808	\$6,861,830	\$941,022	16%
	Total Net Assets	\$140,788,086	\$112,603,569	(\$28,184,517)	-20%
	Total Liabilities and Net Assets	\$288,701,998	\$312,091,820	\$23,389,822	8%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$512,314,357	\$560,641,054	\$48,326,697	9%
2	Less: Allowances	\$263,580,702	\$294,073,379	\$30,492,677	12%
3	Less: Charity Care	\$6,601,828	\$6,915,404	\$313,576	5%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$242,131,827	\$259,652,271	\$17,520,444	7%
5	Other Operating Revenue	\$4,421,056	\$3,773,294	(\$647,762)	-15%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$246,552,883	\$263,425,565	\$16,872,682	7%
B. Operating Expenses:					
1	Salaries and Wages	\$99,956,497	\$109,597,557	\$9,641,060	10%
2	Fringe Benefits	\$23,695,796	\$27,425,902	\$3,730,106	16%
3	Physicians Fees	\$2,299,851	\$2,586,476	\$286,625	12%
4	Supplies and Drugs	\$39,809,556	\$40,539,790	\$730,234	2%
5	Depreciation and Amortization	\$16,453,137	\$16,939,369	\$486,232	3%
6	Bad Debts	\$14,162,003	\$16,898,318	\$2,736,315	19%
7	Interest	\$3,003,005	\$3,091,298	\$88,293	3%
8	Malpractice	\$5,820,329	\$119,872	(\$5,700,457)	-98%
9	Other Operating Expenses	\$32,732,983	\$33,447,989	\$715,006	2%
	Total Operating Expenses	\$237,933,157	\$250,646,571	\$12,713,414	5%
	Income/(Loss) From Operations	\$8,619,726	\$12,778,994	\$4,159,268	48%
C. Non-Operating Revenue:					
1	Income from Investments	(\$4,802,633)	(\$2,817,022)	\$1,985,611	-41%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$809,787)	(\$4,101,843)	(\$3,292,056)	407%
	Total Non-Operating Revenue	(\$5,612,420)	(\$6,918,865)	(\$1,306,445)	23%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$3,007,306	\$5,860,129	\$2,852,823	95%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$5,616,230	\$5,616,230	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$5,616,230	\$5,616,230	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$3,007,306	\$11,476,359	\$8,469,053	282%
	Principal Payments	\$0	\$1,755,000	\$1,755,000	0%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009**

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$104,515,107	\$103,774,390	(\$740,717)	-1%
2	MEDICARE MANAGED CARE	\$7,133,038	\$12,174,093	\$5,041,055	71%
3	MEDICAID	\$12,248,535	\$12,559,457	\$310,922	3%
4	MEDICAID MANAGED CARE	\$7,410,511	\$9,180,812	\$1,770,301	24%
5	CHAMPUS/TRICARE	\$2,859,279	\$2,651,102	(\$208,177)	-7%
6	COMMERCIAL INSURANCE	\$3,323,201	\$3,581,405	\$258,204	8%
7	NON-GOVERNMENT MANAGED CARE	\$62,230,564	\$64,344,529	\$2,113,965	3%
8	WORKER'S COMPENSATION	\$3,876,437	\$3,491,500	(\$384,937)	-10%
9	SELF- PAY/UNINSURED	\$4,441,859	\$4,648,083	\$206,224	5%
10	SAGA	\$6,542,326	\$8,457,589	\$1,915,263	29%
11	OTHER	\$1,404,720	\$990,474	(\$414,246)	-29%
	TOTAL INPATIENT GROSS REVENUE	\$215,985,577	\$225,853,434	\$9,867,857	5%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$83,776,198	\$91,235,645	\$7,459,447	9%
2	MEDICARE MANAGED CARE	\$6,236,785	\$11,292,497	\$5,055,712	81%
3	MEDICAID	\$12,793,361	\$14,472,177	\$1,678,816	13%
4	MEDICAID MANAGED CARE	\$17,356,280	\$22,884,220	\$5,527,940	32%
5	CHAMPUS/TRICARE	\$7,245,309	\$6,720,868	(\$524,441)	-7%
6	COMMERCIAL INSURANCE	\$8,264,458	\$8,845,432	\$580,974	7%
7	NON-GOVERNMENT MANAGED CARE	\$133,157,174	\$148,714,892	\$15,557,718	12%
8	WORKER'S COMPENSATION	\$6,707,516	\$6,671,090	(\$36,426)	-1%
9	SELF- PAY/UNINSURED	\$10,713,332	\$11,539,441	\$826,109	8%
10	SAGA	\$9,276,178	\$11,443,409	\$2,167,231	23%
11	OTHER	\$802,190	\$967,949	\$165,759	21%
	TOTAL OUTPATIENT GROSS REVENUE	\$296,328,781	\$334,787,620	\$38,458,839	13%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$188,291,305	\$195,010,035	\$6,718,730	4%
2	MEDICARE MANAGED CARE	\$13,369,823	\$23,466,590	\$10,096,767	76%
3	MEDICAID	\$25,041,896	\$27,031,634	\$1,989,738	8%
4	MEDICAID MANAGED CARE	\$24,766,791	\$32,065,032	\$7,298,241	29%
5	CHAMPUS/TRICARE	\$10,104,588	\$9,371,970	(\$732,618)	-7%
6	COMMERCIAL INSURANCE	\$11,587,659	\$12,426,837	\$839,178	7%
7	NON-GOVERNMENT MANAGED CARE	\$195,387,738	\$213,059,421	\$17,671,683	9%
8	WORKER'S COMPENSATION	\$10,583,953	\$10,162,590	(\$421,363)	-4%
9	SELF- PAY/UNINSURED	\$15,155,191	\$16,187,524	\$1,032,333	7%
10	SAGA	\$15,818,504	\$19,900,998	\$4,082,494	26%
11	OTHER	\$2,206,910	\$1,958,423	(\$248,487)	-11%
	TOTAL GROSS REVENUE	\$512,314,358	\$560,641,054	\$48,326,696	9%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$45,038,713	\$41,315,073	(\$3,723,640)	-8%
2	MEDICARE MANAGED CARE	\$3,210,020	\$5,162,259	\$1,952,239	61%
3	MEDICAID	\$3,208,651	\$3,582,546	\$373,895	12%
4	MEDICAID MANAGED CARE	\$2,011,864	\$2,598,714	\$586,850	29%
5	CHAMPUS/TRICARE	\$1,152,336	\$1,174,297	\$21,961	2%
6	COMMERCIAL INSURANCE	\$2,849,392	\$3,078,085	\$228,693	8%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$45,874,378	\$49,428,042	\$3,553,664	8%
8	WORKER'S COMPENSATION	\$2,945,487	\$2,792,546	(\$152,941)	-5%
9	SELF- PAY/UNINSURED	\$1,020,992	\$839,769	(\$181,223)	-18%
10	SAGA	\$823,163	\$1,278,014	\$454,851	55%
11	OTHER	\$520,702	\$151,073	(\$369,629)	-71%
	TOTAL INPATIENT NET REVENUE	\$108,655,698	\$111,400,418	\$2,744,720	3%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$22,232,904	\$21,982,666	(\$250,238)	-1%
2	MEDICARE MANAGED CARE	\$1,571,111	\$2,715,894	\$1,144,783	73%
3	MEDICAID	\$2,917,458	\$2,935,239	\$17,781	1%
4	MEDICAID MANAGED CARE	\$4,956,790	\$7,220,658	\$2,263,868	46%
5	CHAMPUS/TRICARE	\$2,521,543	\$2,520,995	(\$548)	0%
6	COMMERCIAL INSURANCE	\$6,936,152	\$7,207,698	\$271,546	4%
7	NON-GOVERNMENT MANAGED CARE	\$71,893,174	\$80,032,583	\$8,139,409	11%
8	WORKER'S COMPENSATION	\$4,965,893	\$4,902,939	(\$62,954)	-1%
9	SELF- PAY/UNINSURED	\$2,232,432	\$2,437,935	\$205,503	9%
10	SAGA	\$1,535,567	\$1,928,582	\$393,015	26%
11	OTHER	\$112,237	\$344,588	\$232,351	207%
	TOTAL OUTPATIENT NET REVENUE	\$121,875,261	\$134,229,777	\$12,354,516	10%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$67,271,617	\$63,297,739	(\$3,973,878)	-6%
2	MEDICARE MANAGED CARE	\$4,781,131	\$7,878,153	\$3,097,022	65%
3	MEDICAID	\$6,126,109	\$6,517,785	\$391,676	6%
4	MEDICAID MANAGED CARE	\$6,968,654	\$9,819,372	\$2,850,718	41%
5	CHAMPUS/TRICARE	\$3,673,879	\$3,695,292	\$21,413	1%
6	COMMERCIAL INSURANCE	\$9,785,544	\$10,285,783	\$500,239	5%
7	NON-GOVERNMENT MANAGED CARE	\$117,767,552	\$129,460,625	\$11,693,073	10%
8	WORKER'S COMPENSATION	\$7,911,380	\$7,695,485	(\$215,895)	-3%
9	SELF- PAY/UNINSURED	\$3,253,424	\$3,277,704	\$24,280	1%
10	SAGA	\$2,358,730	\$3,206,596	\$847,866	36%
11	OTHER	\$632,939	\$495,661	(\$137,278)	-22%
	TOTAL NET REVENUE	\$230,530,959	\$245,630,195	\$15,099,236	7%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	4,727	4,537	(190)	-4%
2	MEDICARE MANAGED CARE	321	502	181	56%
3	MEDICAID	526	673	147	28%
4	MEDICAID MANAGED CARE	933	1,091	158	17%
5	CHAMPUS/TRICARE	264	237	(27)	-10%
6	COMMERCIAL INSURANCE	209	188	(21)	-10%
7	NON-GOVERNMENT MANAGED CARE	4,031	3,891	(140)	-3%
8	WORKER'S COMPENSATION	130	117	(13)	-10%
9	SELF- PAY/UNINSURED	350	265	(85)	-24%
10	SAGA	402	339	(63)	-16%
11	OTHER	47	45	(2)	-4%
	TOTAL DISCHARGES	11,940	11,885	(55)	0%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	24,916	23,279	(1,637)	-7%
2	MEDICARE MANAGED CARE	1,586	2,728	1,142	72%
3	MEDICAID	3,384	3,153	(231)	-7%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	2,377	3,117	740	31%
5	CHAMPUS/TRICARE	730	649	(81)	-11%
6	COMMERCIAL INSURANCE	623	655	32	5%
7	NON-GOVERNMENT MANAGED CARE	13,381	13,164	(217)	-2%
8	WORKER'S COMPENSATION	473	360	(113)	-24%
9	SELF- PAY/UNINSURED	1,016	1,101	85	8%
10	SAGA	1,716	1,665	(51)	-3%
11	OTHER	310	161	(149)	-48%
	TOTAL PATIENT DAYS	50,512	50,032	(480)	-1%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	106,000	110,601	4,601	4%
2	MEDICARE MANAGED CARE	6,300	10,953	4,653	74%
3	MEDICAID	21,461	15,066	(6,395)	-30%
4	MEDICAID MANAGED CARE	18,977	31,568	12,591	66%
5	CHAMPUS/TRICARE	7,732	7,697	(35)	0%
6	COMMERCIAL INSURANCE	9,387	8,717	(670)	-7%
7	NON-GOVERNMENT MANAGED CARE	161,730	185,661	23,931	15%
8	WORKER'S COMPENSATION	7,479	5,532	(1,947)	-26%
9	SELF- PAY/UNINSURED	25,500	16,997	(8,503)	-33%
10	SAGA	9,049	10,957	1,908	21%
11	OTHER	647	909	262	40%
	TOTAL OUTPATIENT VISITS	374,262	404,658	30,396	8%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$13,512,116	\$15,169,593	\$1,657,477	12%
2	MEDICARE MANAGED CARE	\$904,892	\$1,471,167	\$566,275	63%
3	MEDICAID	\$5,344,255	\$5,514,203	\$169,948	3%
4	MEDICAID MANAGED CARE	\$8,949,218	\$12,199,998	\$3,250,780	36%
5	CHAMPUS/TRICARE	\$1,897,878	\$2,347,986	\$450,108	24%
6	COMMERCIAL INSURANCE	\$2,981,891	\$2,666,330	(\$315,561)	-11%
7	NON-GOVERNMENT MANAGED CARE	\$25,824,802	\$29,872,032	\$4,047,230	16%
8	WORKER'S COMPENSATION	\$1,659,804	\$1,569,894	(\$89,910)	-5%
9	SELF- PAY/UNINSURED	\$7,085,285	\$8,298,404	\$1,213,119	17%
10	SAGA	\$4,732,826	\$6,110,223	\$1,377,397	29%
11	OTHER	\$593,126	\$681,915	\$88,789	15%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$73,486,093	\$85,901,745	\$12,415,652	17%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$4,162,221	\$4,463,680	\$301,459	7%
2	MEDICARE MANAGED CARE	\$284,824	\$456,870	\$172,046	60%
3	MEDICAID	\$1,278,719	\$1,321,314	\$42,595	3%
4	MEDICAID MANAGED CARE	\$2,249,844	\$3,888,659	\$1,638,815	73%
5	CHAMPUS/TRICARE	\$922,180	\$1,106,584	\$184,404	20%
6	COMMERCIAL INSURANCE	\$2,573,697	\$2,324,389	(\$249,308)	-10%
7	NON-GOVERNMENT MANAGED CARE	\$18,371,668	\$21,652,931	\$3,281,263	18%
8	WORKER'S COMPENSATION	\$1,324,250	\$1,288,481	(\$35,769)	-3%
9	SELF- PAY/UNINSURED	\$1,476,183	\$1,753,202	\$277,019	19%
10	SAGA	\$717,547	\$857,416	\$139,869	19%
11	OTHER	\$149,809	\$184,387	\$34,578	23%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$33,510,942	\$39,297,913	\$5,786,971	17%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	8,191	7,819	(372)	-5%
2	MEDICARE MANAGED CARE	434	696	262	60%
3	MEDICAID	3,795	3,508	(287)	-8%
4	MEDICAID MANAGED CARE	8,178	11,975	3,797	46%
5	CHAMPUS/TRICARE	1,436	1,680	244	17%
6	COMMERCIAL INSURANCE	1,909	1,484	(425)	-22%
7	NON-GOVERNMENT MANAGED CARE	17,940	19,136	1,196	7%
8	WORKER'S COMPENSATION	1,577	1,305	(272)	-17%
9	SELF- PAY/UNINSURED	5,279	5,494	215	4%
10	SAGA	3,390	3,830	440	13%
11	OTHER	303	378	75	25%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	52,432	57,305	4,873	9%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$38,205,041	\$39,916,076	\$1,711,035	4%
2	Physician Salaries	\$9,040,475	\$9,282,412	\$241,937	3%
3	Non-Nursing, Non-Physician Salaries	\$52,710,981	\$60,399,069	\$7,688,088	15%
	Total Salaries & Wages	\$99,956,497	\$109,597,557	\$9,641,060	10%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$7,115,330	\$7,644,307	\$528,977	7%
2	Physician Fringe Benefits	\$1,767,737	\$1,600,541	(\$167,196)	-9%
3	Non-Nursing, Non-Physician Fringe Benefits	\$14,812,729	\$18,181,054	\$3,368,325	23%
	Total Fringe Benefits	\$23,695,796	\$27,425,902	\$3,730,106	16%
C. Contractual Labor Fees:					
1	Nursing Fees	\$904,173	\$40,515	(\$863,658)	-96%
2	Physician Fees	\$2,299,851	\$2,586,476	\$286,625	12%
3	Non-Nursing, Non-Physician Fees	\$3,766,422	\$3,743,789	(\$22,633)	-1%
	Total Contractual Labor Fees	\$6,970,446	\$6,370,780	(\$599,666)	-9%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$30,409,963	\$30,623,661	\$213,698	1%
2	Pharmaceutical Costs	\$9,399,593	\$9,916,129	\$516,536	5%
	Total Medical Supplies and Pharmaceutical Cost	\$39,809,556	\$40,539,790	\$730,234	2%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$8,460,217	\$8,009,297	(\$450,920)	-5%
2	Depreciation-Equipment	\$7,553,349	\$7,710,400	\$157,051	2%
3	Amortization	\$439,571	\$1,219,672	\$780,101	177%
	Total Depreciation and Amortization	\$16,453,137	\$16,939,369	\$486,232	3%
F. Bad Debts:					
1	Bad Debts	\$14,162,003	\$16,898,318	\$2,736,315	19%
G. Interest Expense:					
1	Interest Expense	\$3,003,005	\$3,091,298	\$88,293	3%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$5,820,329	\$119,872	(\$5,700,457)	-98%
I. Utilities:					
1	Water	\$180,240	\$200,940	\$20,700	11%
2	Natural Gas	\$1,769,474	\$1,491,198	(\$278,276)	-16%
3	Oil	\$5,806	\$50,987	\$45,181	778%
4	Electricity	\$2,054,233	\$2,329,898	\$275,665	13%
5	Telephone	\$470,516	\$376,799	(\$93,717)	-20%
6	Other Utilities	\$44,587	\$39,603	(\$4,984)	-11%
	Total Utilities	\$4,524,856	\$4,489,425	(\$35,431)	-1%
J. Business Expenses:					
1	Accounting Fees	\$166,873	\$237,772	\$70,899	42%
2	Legal Fees	\$459,397	\$1,150,211	\$690,814	150%
3	Consulting Fees	\$871,432	\$1,342,429	\$470,997	54%
4	Dues and Membership	\$823,643	\$1,059,445	\$235,802	29%
5	Equipment Leases	\$952,740	\$492,701	(\$460,039)	-48%
6	Building Leases	\$1,489,576	\$1,532,397	\$42,821	3%
7	Repairs and Maintenance	\$974,989	\$889,450	(\$85,539)	-9%
8	Insurance	\$517,579	\$627,910	\$110,331	21%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$79,626	\$90,821	\$11,195	14%
10	Conferences	\$610,973	\$652,953	\$41,980	7%
11	Property Tax	\$99,074	\$54,419	(\$44,655)	-45%
12	General Supplies	\$2,254,856	\$2,224,916	(\$29,940)	-1%
13	Licenses and Subscriptions	\$50,663	\$67,994	\$17,331	34%
14	Postage and Shipping	\$592,036	\$606,425	\$14,389	2%
15	Advertising	\$232,085	\$137,509	(\$94,576)	-41%
16	Other Business Expenses	\$13,361,990	\$14,006,908	\$644,918	5%
	Total Business Expenses	\$23,537,532	\$25,174,260	\$1,636,728	7%
K.	<u>Other Operating Expense:</u>				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$237,933,157	\$250,646,571	\$12,713,414	5%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				
II.	<u>OPERATING EXPENSE BY DEPARTMENT</u>				
A.	<u>General Services:</u>				
1	General Administration	\$49,094,645	\$49,810,195	\$715,550	1%
2	General Accounting	\$1,169,892	\$1,257,974	\$88,082	8%
3	Patient Billing & Collection	\$2,455,068	\$2,571,477	\$116,409	5%
4	Admitting / Registration Office	\$2,171,812	\$2,379,328	\$207,516	10%
5	Data Processing	\$4,594,571	\$7,248,520	\$2,653,949	58%
6	Communications	\$1,231,469	\$768,445	(\$463,024)	-38%
7	Personnel	\$27,330,821	\$30,715,019	\$3,384,198	12%
8	Public Relations	\$333,499	\$276,992	(\$56,507)	-17%
9	Purchasing	\$1,157,472	\$1,295,787	\$138,315	12%
10	Dietary and Cafeteria	\$3,170,553	\$3,454,217	\$283,664	9%
11	Housekeeping	\$2,418,150	\$2,599,711	\$181,561	8%
12	Laundry & Linen	\$162,670	\$135,725	(\$26,945)	-17%
13	Operation of Plant	\$5,452,204	\$5,455,920	\$3,716	0%
14	Security	\$1,163,434	\$1,161,742	(\$1,692)	0%
15	Repairs and Maintenance	\$2,484,059	\$2,573,335	\$89,276	4%
16	Central Sterile Supply	\$1,544,140	\$1,646,474	\$102,334	7%
17	Pharmacy Department	\$11,294,804	\$12,080,252	\$785,448	7%
18	Other General Services	\$0	\$0	\$0	0%
	Total General Services	\$117,229,263	\$125,431,113	\$8,201,850	7%
B.	<u>Professional Services:</u>				
1	Medical Care Administration	\$311,429	\$348,882	\$37,453	12%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$980,557	\$1,322,766	\$342,209	35%
4	Medical Records	\$2,461,060	\$2,856,372	\$395,312	16%
5	Social Service	\$1,190,430	\$1,246,746	\$56,316	5%
6	Other Professional Services	\$737,235	\$1,375,087	\$637,852	87%
	Total Professional Services	\$5,680,711	\$7,149,853	\$1,469,142	26%
C.	<u>Special Services:</u>				
1	Operating Room	\$9,580,156	\$10,342,457	\$762,301	8%
2	Recovery Room	\$2,256,341	\$2,220,414	(\$35,927)	-2%
3	Anesthesiology	\$1,604,616	\$1,630,321	\$25,705	2%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$7,382,924	\$7,288,013	(\$94,911)	-1%
6	Diagnostic Ultrasound	\$1,300,898	\$1,249,134	(\$51,764)	-4%
7	Radiation Therapy	\$2,905,320	\$3,058,438	\$153,118	5%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
8	Radioisotopes	\$1,232,722	\$1,176,242	(\$56,480)	-5%
9	CT Scan	\$2,223,910	\$2,110,470	(\$113,440)	-5%
10	Laboratory	\$10,306,046	\$11,171,388	\$865,342	8%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$1,305,775	\$1,342,514	\$36,739	3%
13	Electrocardiology	\$223,035	\$239,542	\$16,507	7%
14	Electroencephalography	\$212,476	\$184,794	(\$27,682)	-13%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$2,042,749	\$2,124,335	\$81,586	4%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$1,057,698	\$1,090,231	\$32,533	3%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,494,287	\$1,528,362	\$34,075	2%
23	Renal Dialysis	\$557,480	\$633,212	\$75,732	14%
24	Emergency Room	\$14,545,793	\$15,025,144	\$479,351	3%
25	MRI	\$2,368,848	\$2,524,317	\$155,469	7%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$829,250	\$718,596	(\$110,654)	-13%
28	Endoscopy	\$1,353,922	\$1,444,707	\$90,785	7%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$241,700	\$195,950	(\$45,750)	-19%
31	Cardiac Catheterization/Rehabilitation	\$1,288,304	\$1,233,112	(\$55,192)	-4%
32	Occupational Therapy / Physical Therapy	\$1,566,746	\$1,705,291	\$138,545	9%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$15,285,661	\$14,942,378	(\$343,283)	-2%
	Total Special Services	\$83,166,657	\$85,179,362	\$2,012,705	2%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$18,480,629	\$18,923,009	\$442,380	2%
2	Intensive Care Unit	\$3,067,844	\$3,212,840	\$144,996	5%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,102,739	\$2,337,598	\$234,859	11%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,164,067	\$4,215,408	\$51,341	1%
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	\$3,600,269	\$3,758,441	\$158,172	4%
13	Other Routine Services	\$440,978	\$438,947	(\$2,031)	0%
	Total Routine Services	\$31,856,526	\$32,886,243	\$1,029,717	3%
E.	<u>Other Departments:</u>				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses - All Departments*	\$237,933,157	\$250,646,571	\$12,713,414	5%
	*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$217,893,336	\$ 242,131,827	\$259,652,271
2	Other Operating Revenue	4,887,481	4,421,056	3,773,294
3	Total Operating Revenue	\$222,780,817	\$246,552,883	\$263,425,565
4	Total Operating Expenses	213,708,355	237,933,157	250,646,571
5	Income/(Loss) From Operations	\$9,072,462	\$8,619,726	\$12,778,994
6	Total Non-Operating Revenue	10,953,916	(5,612,420)	(1,302,635)
7	Excess/(Deficiency) of Revenue Over Expenses	\$20,026,378	\$3,007,306	\$11,476,359
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	3.88%	3.58%	4.88%
2	Hospital Non Operating Margin	4.69%	-2.33%	-0.50%
3	Hospital Total Margin	8.57%	1.25%	4.38%
4	Income/(Loss) From Operations	\$9,072,462	\$8,619,726	\$12,778,994
5	Total Operating Revenue	\$222,780,817	\$246,552,883	\$263,425,565
6	Total Non-Operating Revenue	\$10,953,916	(\$5,612,420)	(\$1,302,635)
7	Total Revenue	\$233,734,733	\$240,940,463	\$262,122,930
8	Excess/(Deficiency) of Revenue Over Expenses	\$20,026,378	\$3,007,306	\$11,476,359
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$154,440,321	\$132,391,851	\$102,294,307
2	Hospital Total Net Assets	\$163,714,994	\$140,788,086	\$112,603,569
3	Hospital Change in Total Net Assets	\$163,714,994	(\$22,926,908)	(\$28,184,517)
4	Hospital Change in Total Net Assets %	0.0%	-14.0%	-20.0%
D. <u>Cost Data Summary</u>				
1	<u>Ratio of Cost to Charges</u>	0.46	0.44	0.44
2	Total Operating Expenses	\$202,287,655	\$225,599,529	\$250,646,571
3	Total Gross Revenue	\$440,691,519	\$512,314,358	\$560,641,054
4	Total Other Operating Revenue	\$2,083,714	\$1,746,162	\$3,773,294
5	<u>Private Payment to Cost Ratio</u>	1.40	1.42	1.41
6	Total Non-Government Payments	\$125,964,094	\$138,717,900	\$150,719,597

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
7	Total Uninsured Payments	\$2,308,540	\$3,253,424	\$3,277,704
8	Total Non-Government Charges	\$204,878,105	\$232,714,541	\$251,836,372
9	Total Uninsured Charges	\$11,501,204	\$15,155,191	\$16,187,524
10	<u>Medicare Payment to Cost Ratio</u>	0.84	0.81	0.73
11	Total Medicare Payments	\$64,879,759	\$72,052,748	\$71,175,892
12	Total Medicare Charges	\$169,767,961	\$201,661,128	\$218,476,625
13	<u>Medicaid Payment to Cost Ratio</u>	0.56	0.60	0.62
14	Total Medicaid Payments	\$10,426,597	\$13,094,763	\$16,337,157
15	Total Medicaid Charges	\$40,888,696	\$49,808,687	\$59,096,666
16	<u>Uncompensated Care Cost</u>	\$7,260,956	\$9,061,214	\$10,540,405
17	Charity Care	\$3,473,395	\$6,296,582	\$6,641,717
18	Bad Debts	\$12,419,674	\$14,350,680	\$17,093,520
19	Total Uncompensated Care	\$15,893,069	\$20,647,262	\$23,735,237
20	<u>Uncompensated Care % of Total Expenses</u>	3.6%	4.0%	4.2%
21	Total Operating Expenses	\$202,287,655	\$225,599,529	\$250,646,571
E. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	3.09	3.55	3.69
2	Total Current Assets	\$85,247,440	\$94,120,472	\$108,982,983
3	Total Current Liabilities	\$27,605,111	\$26,530,147	\$29,558,387
4	<u>Days Cash on Hand</u>	82	77	90
5	Cash and Cash Equivalents	\$45,270,042	\$46,717,416	\$57,570,735
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$45,270,042	\$46,717,416	\$57,570,735
8	Total Operating Expenses	\$213,708,355	\$237,933,157	\$250,646,571
9	Depreciation Expense	\$12,497,557	\$16,453,137	\$16,939,369
10	Operating Expenses less Depreciation Expense	\$201,210,798	\$221,480,020	\$233,707,202
11	<u>Days Revenue in Patient Accounts Receivable</u>	49.27	48.86	48.19

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
12	Net Patient Accounts Receivable	\$ 30,841,964	\$ 33,683,248	\$ 36,111,295
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,428,540	\$1,270,638	\$1,831,013
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 29,413,424	\$ 32,412,610	\$ 34,280,282
16	Total Net Patient Revenue	\$217,893,336	\$ 242,131,827	\$ 259,652,271
17	<u>Average Payment Period</u>	50.08	43.72	46.16
18	Total Current Liabilities	\$27,605,111	\$26,530,147	\$29,558,387
19	Total Operating Expenses	\$213,708,355	\$237,933,157	\$250,646,571
20	Depreciation Expense	\$12,497,557	\$16,453,137	\$16,939,369
21	Total Operating Expenses less Depreciation Expense	\$201,210,798	\$221,480,020	\$233,707,202
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	55.1	48.8	36.1
2	Total Net Assets	\$163,714,994	\$140,788,086	\$112,603,569
3	Total Assets	\$296,902,124	\$288,701,998	\$312,091,820
4	<u>Cash Flow to Total Debt Ratio</u>	34.2	21.1	30.4
5	Excess/(Deficiency) of Revenues Over Expenses	\$20,026,378	\$3,007,306	\$11,476,359
6	Depreciation Expense	\$12,497,557	\$16,453,137	\$16,939,369
7	Excess of Revenues Over Expenses and Depreciation Expense	\$32,523,935	\$19,460,443	\$28,415,728
8	Total Current Liabilities	\$27,605,111	\$26,530,147	\$29,558,387
9	Total Long Term Debt	\$67,544,893	\$65,808,169	\$63,931,536
10	Total Current Liabilities and Total Long Term Debt	\$95,150,004	\$92,338,316	\$93,489,923
11	<u>Long Term Debt to Capitalization Ratio</u>	29.2	31.9	36.2
12	Total Long Term Debt	\$67,544,893	\$65,808,169	\$63,931,536
13	Total Net Assets	\$163,714,994	\$140,788,086	\$112,603,569
14	Total Long Term Debt and Total Net Assets	\$231,259,887	\$206,596,255	\$176,535,105
15	<u>Debt Service Coverage Ratio</u>	25.7	7.5	6.5
16	Excess Revenues over Expenses	\$20,026,378	\$3,007,306	\$11,476,359
17	Interest Expense	\$1,318,455	\$3,003,005	\$3,091,298
18	Depreciation and Amortization Expense	\$12,497,557	\$16,453,137	\$16,939,369

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
19	Principal Payments	\$0	\$0	\$1,755,000
G. <u>Other Financial Ratios</u>				
20	<u>Average Age of Plant</u>	7.0	6.1	6.8
21	Accumulated Depreciation	\$87,279,004	\$100,305,907	\$114,398,504
22	Depreciation and Amortization Expense	\$12,497,557	\$16,453,137	\$16,939,369
H. <u>Utilization Measures Summary</u>				
1	Patient Days	50,286	50,512	50,032
2	Discharges	12,076	11,940	11,885
3	ALOS	4.2	4.2	4.2
4	Staffed Beds	199	202	202
5	Available Beds	-	-	233
6	Licensed Beds	233	233	233
6	Occupancy of Staffed Beds	69.2%	68.5%	67.9%
7	Occupancy of Available Beds	59.1%	59.4%	58.8%
8	Full Time Equivalent Employees	1,429.8	1,503.2	1,583.5
I. <u>Hospital Gross Revenue Payer Mix Percentage</u>				
1	Non-Government Gross Revenue Payer Mix Percentage	43.9%	42.5%	42.0%
2	Medicare Gross Revenue Payer Mix Percentage	38.5%	39.4%	39.0%
3	Medicaid Gross Revenue Payer Mix Percentage	9.3%	9.7%	10.5%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	3.6%	3.5%	3.9%
5	Uninsured Gross Revenue Payer Mix Percentage	2.6%	3.0%	2.9%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	2.1%	2.0%	1.7%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$193,376,901	\$217,559,350	\$235,648,848
9	Medicare Gross Revenue (Charges)	\$169,767,961	\$201,661,128	\$218,476,625
10	Medicaid Gross Revenue (Charges)	\$40,888,696	\$49,808,687	\$59,096,666
11	Other Medical Assistance Gross Revenue (Charges)	\$16,009,800	\$18,025,414	\$21,859,421
12	Uninsured Gross Revenue (Charges)	\$11,501,204	\$15,155,191	\$16,187,524
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$9,146,957	\$10,104,588	\$9,371,970
14	Total Gross Revenue (Charges)	\$440,691,519	\$512,314,358	\$560,641,054
J. <u>Hospital Net Revenue Payer Mix Percentage</u>				
1	Non-Government Net Revenue Payer Mix Percentage	59.4%	58.8%	60.0%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2007	ACTUAL FY 2008	ACTUAL FY 2009
2	Medicare Net Revenue Payer Mix Percentage	31.2%	31.3%	29.0%
3	Medicaid Net Revenue Payer Mix Percentage	5.0%	5.7%	6.7%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.5%	1.3%	1.5%
5	Uninsured Net Revenue Payer Mix Percentage	1.1%	1.4%	1.3%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	1.7%	1.6%	1.5%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$123,655,554	\$135,464,476	\$147,441,893
9	Medicare Net Revenue (Payments)	\$64,879,759	\$72,052,748	\$71,175,892
10	Medicaid Net Revenue (Payments)	\$10,426,597	\$13,094,763	\$16,337,157
11	Other Medical Assistance Net Revenue (Payments)	\$3,167,556	\$2,991,669	\$3,702,257
12	Uninsured Net Revenue (Payments)	\$2,308,540	\$3,253,424	\$3,277,704
13	CHAMPUS / TRICARE Net Revenue Payments)	\$3,608,487	\$3,673,879	\$3,695,292
14	Total Net Revenue (Payments)	\$208,046,493	\$230,530,959	\$245,630,195
K.	<u>Discharges</u>			
1	Non-Government (Including Self Pay / Uninsured)	4,948	4,720	4,461
2	Medicare	5,033	5,048	5,039
3	Medical Assistance	1,830	1,908	2,148
4	Medicaid	1,497	1,459	1,764
5	Other Medical Assistance	333	449	384
6	CHAMPUS / TRICARE	265	264	237
7	Uninsured (Included In Non-Government)	351	350	265
8	Total	12,076	11,940	11,885
L.	<u>Case Mix Index</u>			
1	Non-Government (Including Self Pay / Uninsured)	1.163800	1.363700	1.315100
2	Medicare	1.313100	1.405400	1.459000
3	Medical Assistance	0.843486	1.055628	0.961921
4	Medicaid	0.793300	1.018400	0.894400
5	Other Medical Assistance	1.069100	1.176600	1.272100
6	CHAMPUS / TRICARE	0.736500	1.044000	0.940800
7	Uninsured (Included In Non-Government)	1.125000	1.135000	1.184800
8	Total Case Mix Index	1.168107	1.325031	1.304816
M.	<u>Emergency Department Visits</u>			
1	Emergency Room - Treated and Admitted	7,031	6,561	6,343
2	Emergency Room - Treated and Discharged	47,967	52,432	57,305
3	Total Emergency Room Visits	54,998	58,993	63,648

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$607,657	\$1,079,457	\$471,800	78%
2	Inpatient Payments	\$231,669	\$474,576	\$242,907	105%
3	Outpatient Charges	\$524,396	\$725,182	\$200,786	38%
4	Outpatient Payments	\$128,242	\$180,461	\$52,219	41%
5	Discharges	24	33	9	38%
6	Patient Days	124	208	84	68%
7	Outpatient Visits (Excludes ED Visits)	408	577	169	41%
8	Emergency Department Outpatient Visits	22	55	33	150%
9	Emergency Department Inpatient Admissions	16	23	7	44%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,132,053	\$1,804,639	\$672,586	59%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$359,911	\$655,037	\$295,126	82%
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	\$221,020	\$2,583,465	\$2,362,445	1069%
2	Inpatient Payments	\$81,412	\$985,800	\$904,388	1111%
3	Outpatient Charges	\$211,805	\$2,333,755	\$2,121,950	1002%
4	Outpatient Payments	\$75,110	\$559,534	\$484,424	645%
5	Discharges	10	88	78	780%
6	Patient Days	46	558	512	1113%
7	Outpatient Visits (Excludes ED Visits)	184	1,773	1,589	864%
8	Emergency Department Outpatient Visits	17	112	95	559%
9	Emergency Department Inpatient Admissions	6	59	53	883%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$432,825	\$4,917,220	\$4,484,395	1036%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$156,522	\$1,545,334	\$1,388,812	887%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$4,875,378	\$6,333,429	\$1,458,051	30%
2	Inpatient Payments	\$2,237,909	\$2,820,362	\$582,453	26%
3	Outpatient Charges	\$4,901,592	\$6,817,225	\$1,915,633	39%
4	Outpatient Payments	\$1,203,161	\$1,596,001	\$392,840	33%
5	Discharges	234	297	63	27%
6	Patient Days	1,099	1,356	257	23%
7	Outpatient Visits (Excludes ED Visits)	4,845	5,924	1,079	22%
8	Emergency Department Outpatient Visits	286	374	88	31%
9	Emergency Department Inpatient Admissions	164	213	49	30%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$9,776,970	\$13,150,654	\$3,373,684	35%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,441,070	\$4,416,363	\$975,293	28%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$981,866	\$2,020,462	\$1,038,596	106%
2	Inpatient Payments	\$422,443	\$806,330	\$383,887	91%
3	Outpatient Charges	\$522,213	\$1,188,857	\$666,644	128%
4	Outpatient Payments	\$146,438	\$318,050	\$171,612	117%
5	Discharges	46	76	30	65%
6	Patient Days	218	570	352	161%
7	Outpatient Visits (Excludes ED Visits)	324	1,835	1,511	466%
8	Emergency Department Outpatient Visits	96	134	38	40%
9	Emergency Department Inpatient Admissions	31	70	39	126%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,504,079	\$3,209,319	\$1,705,240	113%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$568,881	\$1,124,380	\$555,499	98%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$359,570	\$29,093	(\$330,477)	-92%
2	Inpatient Payments	\$159,396	\$5,589	(\$153,807)	-96%
3	Outpatient Charges	\$28,361	\$33,334	\$4,973	18%
4	Outpatient Payments	\$6,404	\$6,990	\$586	9%
5	Discharges	3	1	(2)	-67%
6	Patient Days	81	14	(67)	-83%
7	Outpatient Visits (Excludes ED Visits)	1	3	2	200%
8	Emergency Department Outpatient Visits	7	5	(2)	-29%
9	Emergency Department Inpatient Admissions	3	1	(2)	-67%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$387,931	\$62,427	(\$325,504)	-84%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$165,800	\$12,579	(\$153,221)	-92%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 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	\$39,142	\$39,142	0%
4	Outpatient Payments	\$0	\$12,472	\$12,472	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	21	21	0%
8	Emergency Department Outpatient Visits	0	6	6	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$39,142	\$39,142	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$12,472	\$12,472	0%
H. 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%
I. AETNA					
1	Inpatient Charges	\$87,547	\$76,791	(\$10,756)	-12%
2	Inpatient Payments	\$77,191	\$31,095	(\$46,096)	-60%
3	Outpatient Charges	\$48,418	\$114,223	\$65,805	136%
4	Outpatient Payments	\$11,756	\$26,989	\$15,233	130%
5	Discharges	4	4	0	0%
6	Patient Days	18	14	(4)	-22%
7	Outpatient Visits (Excludes ED Visits)	104	102	(2)	-2%
8	Emergency Department Outpatient Visits	6	8	2	33%
9	Emergency Department Inpatient Admissions	4	4	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$135,965	\$191,014	\$55,049	40%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$88,947	\$58,084	(\$30,863)	-35%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 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%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 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	\$0	\$51,396	\$51,396	0%
2	Inpatient Payments	\$0	\$38,507	\$38,507	0%
3	Outpatient Charges	\$0	\$40,779	\$40,779	0%
4	Outpatient Payments	\$0	\$15,397	\$15,397	0%
5	Discharges	0	3	3	0%
6	Patient Days	0	8	8	0%
7	Outpatient Visits (Excludes ED Visits)	0	22	22	0%
8	Emergency Department Outpatient Visits	0	2	2	0%
9	Emergency Department Inpatient Admissions	0	2	2	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$92,175	\$92,175	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$53,904	\$53,904	0%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$7,133,038	\$12,174,093	\$5,041,055	71%
	TOTAL INPATIENT PAYMENTS	\$3,210,020	\$5,162,259	\$1,952,239	61%
	TOTAL OUTPATIENT CHARGES	\$6,236,785	\$11,292,497	\$5,055,712	81%
	TOTAL OUTPATIENT PAYMENTS	\$1,571,111	\$2,715,894	\$1,144,783	73%
	TOTAL DISCHARGES	321	502	181	56%
	TOTAL PATIENT DAYS	1,586	2,728	1,142	72%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	5,866	10,257	4,391	75%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	434	696	262	60%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	224	372	148	66%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,369,823	\$23,466,590	\$10,096,767	76%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,781,131	\$7,878,153	\$3,097,022	65%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$3,447,313	\$1,326,782	(\$2,120,531)	-62%
2	Inpatient Payments	\$923,705	\$331,575	(\$592,130)	-64%
3	Outpatient Charges	\$9,554,012	\$3,237,756	(\$6,316,256)	-66%
4	Outpatient Payments	\$2,788,169	\$936,071	(\$1,852,098)	-66%
5	Discharges	423	147	(276)	-65%
6	Patient Days	1,035	364	(671)	-65%
7	Outpatient Visits (Excludes ED Visits)	5,699	3,871	(1,828)	-32%
8	Emergency Department Outpatient Visits	4,593	1,419	(3,174)	-69%
9	Emergency Department Inpatient Admissions	82	36	(46)	-56%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,001,325	\$4,564,538	(\$8,436,787)	-65%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,711,874	\$1,267,646	(\$2,444,228)	-66%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$1,854,657	\$6,592,104	\$4,737,447	255%
2	Inpatient Payments	\$507,548	\$1,983,512	\$1,475,964	291%
3	Outpatient Charges	\$3,765,754	\$14,919,551	\$11,153,797	296%
4	Outpatient Payments	\$985,614	\$4,852,981	\$3,867,367	392%
5	Discharges	280	833	553	198%
6	Patient Days	628	2,451	1,823	290%
7	Outpatient Visits (Excludes ED Visits)	2,761	11,762	9,001	326%
8	Emergency Department Outpatient Visits	1,705	7,943	6,238	366%
9	Emergency Department Inpatient Admissions	23	164	141	613%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,620,411	\$21,511,655	\$15,891,244	283%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,493,162	\$6,836,493	\$5,343,331	358%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$1,441,109	\$0	(\$1,441,109)	-100%
2	Inpatient Payments	\$386,050	\$0	(\$386,050)	-100%
3	Outpatient Charges	\$3,520,924	\$0	(\$3,520,924)	-100%
4	Outpatient Payments	\$1,029,602	\$0	(\$1,029,602)	-100%
5	Discharges	180	0	(180)	-100%
6	Patient Days	405	0	(405)	-100%
7	Outpatient Visits (Excludes ED Visits)	2,150	0	(2,150)	-100%
8	Emergency Department Outpatient Visits	1,741	0	(1,741)	-100%
9	Emergency Department Inpatient Admissions	44	0	(44)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,962,033	\$0	(\$4,962,033)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,415,652	\$0	(\$1,415,652)	-100%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$644,994	\$0	(\$644,994)	-100%
2	Inpatient Payments	\$186,539	\$0	(\$186,539)	-100%
3	Outpatient Charges	\$294,704	\$0	(\$294,704)	-100%
4	Outpatient Payments	\$93,885	\$0	(\$93,885)	-100%
5	Discharges	44	0	(44)	-100%
6	Patient Days	300	0	(300)	-100%
7	Outpatient Visits (Excludes ED Visits)	90	0	(90)	-100%
8	Emergency Department Outpatient Visits	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	36	0	(36)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$939,698	\$0	(\$939,698)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$280,424	\$0	(\$280,424)	-100%
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	\$22,438	\$0	(\$22,438)	-100%
2	Inpatient Payments	\$8,022	\$0	(\$8,022)	-100%
3	Outpatient Charges	\$220,886	\$0	(\$220,886)	-100%
4	Outpatient Payments	\$59,520	\$0	(\$59,520)	-100%
5	Discharges	6	0	(6)	-100%
6	Patient Days	9	0	(9)	-100%
7	Outpatient Visits (Excludes ED Visits)	99	0	(99)	-100%
8	Emergency Department Outpatient Visits	138	0	(138)	-100%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2009
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	3	0	(3)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$243,324	\$0	(\$243,324)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$67,542	\$0	(\$67,542)	-100%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$357,762	\$357,762	0%
2	Inpatient Payments	\$0	\$109,513	\$109,513	0%
3	Outpatient Charges	\$0	\$1,732,678	\$1,732,678	0%
4	Outpatient Payments	\$0	\$503,323	\$503,323	0%
5	Discharges	0	37	37	0%
6	Patient Days	0	109	109	0%
7	Outpatient Visits (Excludes ED Visits)	0	1,760	1,760	0%
8	Emergency Department Outpatient Visits	0	990	990	0%
9	Emergency Department Inpatient Admissions	0	12	12	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$2,090,440	\$2,090,440	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$612,836	\$612,836	0%
H.	AETNA				
1	Inpatient Charges	\$0	\$904,164	\$904,164	0%
2	Inpatient Payments	\$0	\$174,114	\$174,114	0%
3	Outpatient Charges	\$0	\$2,994,235	\$2,994,235	0%
4	Outpatient Payments	\$0	\$928,283	\$928,283	0%
5	Discharges	0	74	74	0%
6	Patient Days	0	193	193	0%
7	Outpatient Visits (Excludes ED Visits)	0	2,200	2,200	0%
8	Emergency Department Outpatient Visits	0	1,623	1,623	0%
9	Emergency Department Inpatient Admissions	0	37	37	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$3,898,399	\$3,898,399	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$1,102,397	\$1,102,397	0%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$7,410,511	\$9,180,812	\$1,770,301	24%
	TOTAL INPATIENT PAYMENTS	\$2,011,864	\$2,598,714	\$586,850	29%
	TOTAL OUTPATIENT CHARGES	\$17,356,280	\$22,884,220	\$5,527,940	32%
	TOTAL OUTPATIENT PAYMENTS	\$4,956,790	\$7,220,658	\$2,263,868	46%
	TOTAL DISCHARGES	933	1,091	158	17%
	TOTAL PATIENT DAYS	2,377	3,117	740	31%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	10,799	19,593	8,794	81%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	8,178	11,975	3,797	46%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	188	249	61	32%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$24,766,791	\$32,065,032	\$7,298,241	29%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,968,654	\$9,819,372	\$2,850,718	41%

**WILLIAM W. BACKUS HOSPITAL
 TWELVE MONTHS ACTUAL FILING
 FISCAL YEAR 2009
 REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$50,429,864	\$62,155,067	\$11,725,203	23%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$35,783,224	\$38,032,269	\$2,249,045	6%
4	Current Assets Whose Use is Limited for Current Liabilities	\$6,648,187	\$7,240,812	\$592,625	9%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$2,004,317	\$3,367,607	\$1,363,290	68%
8	Prepaid Expenses	\$1,871,894	\$1,023,236	(\$848,658)	-45%
9	Other Current Assets	\$1,103,017	\$533,993	(\$569,024)	-52%
	Total Current Assets	\$97,840,503	\$112,352,984	\$14,512,481	15%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$20,554,290	\$25,070,975	\$4,516,685	22%
2	Board Designated for Capital Acquisition	\$70,892,002	\$73,772,025	\$2,880,023	4%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$91,446,292	\$98,843,000	\$7,396,708	8%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$6,443,725	\$4,863,225	(\$1,580,500)	-25%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$199,673,069	\$217,477,989	\$17,804,920	9%
2	Less: Accumulated Depreciation	\$103,421,093	\$117,890,582	\$14,469,489	\$0
	Property, Plant and Equipment, Net	\$96,251,976	\$99,587,407	\$3,335,431	3%
3	Construction in Progress	\$4,438,532	\$4,251,661	(\$186,871)	-4%
	Total Net Fixed Assets	\$100,690,508	\$103,839,068	\$3,148,560	3%
	Total Assets	\$296,421,028	\$319,898,277	\$23,477,249	8%

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$10,146,787	\$11,143,511	\$996,724	10%
2	Salaries, Wages and Payroll Taxes	\$7,358,943	\$8,955,228	\$1,596,285	22%
3	Due To Third Party Payers	\$1,750,429	\$2,310,804	\$560,375	32%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,755,000	\$1,825,000	\$70,000	4%
6	Current Portion of Notes Payable	\$55,232	\$8,475	(\$46,757)	-85%
7	Other Current Liabilities	\$7,548,447	\$9,568,027	\$2,019,580	27%
	Total Current Liabilities	\$28,614,838	\$33,811,045	\$5,196,207	18%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$65,808,330	\$63,931,536	(\$1,876,794)	-3%
2	Notes Payable (Net of Current Portion)	\$1,313,188	\$1,064,144	(\$249,044)	-19%
	Total Long Term Debt	\$67,121,518	\$64,995,680	(\$2,125,838)	-3%
3	Accrued Pension Liability	\$35,623,338	\$75,300,446	\$39,677,108	111%
4	Other Long Term Liabilities	\$19,959,733	\$30,705,381	\$10,745,648	54%
	Total Long Term Liabilities	\$122,704,589	\$171,001,507	\$48,296,918	39%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$136,705,366	\$104,776,463	(\$31,928,903)	-23%
2	Temporarily Restricted Net Assets	\$2,475,427	\$3,447,432	\$972,005	39%
3	Permanently Restricted Net Assets	\$5,920,808	\$6,861,830	\$941,022	16%
	Total Net Assets	\$145,101,601	\$115,085,725	(\$30,015,876)	-21%
	Total Liabilities and Net Assets	\$296,421,028	\$319,898,277	\$23,477,249	8%

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$524,204,277	\$578,445,014	\$54,240,737	10%
2	Less: Allowances	\$265,835,156	\$299,764,222	\$33,929,066	13%
3	Less: Charity Care	\$6,601,828	\$6,915,404	\$313,576	5%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$251,767,293	\$271,765,388	\$19,998,095	8%
5	Other Operating Revenue	\$4,930,976	\$4,412,193	(\$518,783)	-11%
6	Net Assets Released from Restrictions	\$72,396	\$86,494	\$14,098	19%
	Total Operating Revenue	\$256,770,665	\$276,264,075	\$19,493,410	8%
B. Operating Expenses:					
1	Salaries and Wages	\$106,920,198	\$118,474,684	\$11,554,486	11%
2	Fringe Benefits	\$25,284,879	\$29,445,026	\$4,160,147	16%
3	Physicians Fees	\$2,299,851	\$2,433,128	\$133,277	6%
4	Supplies and Drugs	\$76,810,110	\$77,395,962	\$585,852	1%
5	Depreciation and Amortization	\$16,814,826	\$17,335,024	\$520,198	3%
6	Bad Debts	\$14,689,011	\$17,106,501	\$2,417,490	16%
7	Interest	\$3,277,607	\$3,361,670	\$84,063	3%
8	Malpractice	\$5,820,329	\$2,735,936	(\$3,084,393)	-53%
9	Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses	\$251,916,811	\$268,287,931	\$16,371,120	6%
	Income/(Loss) From Operations	\$4,853,854	\$7,976,144	\$3,122,290	64%
C. Non-Operating Revenue:					
1	Income from Investments	(\$12,123,962)	\$5,543,913	\$17,667,875	-146%
2	Gifts, Contributions and Donations	\$384,478	\$429,646	\$45,168	12%
3	Other Non-Operating Gains/(Losses)	(\$642,331)	(\$366,280)	\$276,051	-43%
	Total Non-Operating Revenue	(\$12,381,815)	\$5,607,279	\$17,989,094	-145%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$7,527,961)	\$13,583,423	\$21,111,384	-280%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	(\$7,527,961)	\$13,583,423	\$21,111,384	-280%

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>
A. <u>Parent Corporation Statement of Operations Summary</u>				
1	Net Patient Revenue	\$221,834,947	\$251,767,293	\$271,765,388
2	Other Operating Revenue	7,969,204	5,003,372	4,498,687
3	Total Operating Revenue	\$229,804,151	\$256,770,665	\$276,264,075
4	Total Operating Expenses	220,221,850	251,916,811	268,287,931
5	Income/(Loss) From Operations	\$9,582,301	\$4,853,854	\$7,976,144
6	Total Non-Operating Revenue	10,814,964	(12,381,815)	5,607,279
7	Excess/(Deficiency) of Revenue Over Expenses	\$20,397,265	(\$7,527,961)	\$13,583,423
B. <u>Parent Corporation Profitability Summary</u>				
1	Parent Corporation Operating Margin	3.98%	1.99%	2.83%
2	Parent Corporation Non-Operating Margin	4.49%	-5.07%	1.99%
3	Parent Corporation Total Margin	8.48%	-3.08%	4.82%
4	Income/(Loss) From Operations	\$9,582,301	\$4,853,854	\$7,976,144
5	Total Operating Revenue	\$229,804,151	\$256,770,665	\$276,264,075
6	Total Non-Operating Revenue	\$10,814,964	(\$12,381,815)	\$5,607,279
7	Total Revenue	\$240,619,115	\$244,388,850	\$281,871,354
8	Excess/(Deficiency) of Revenue Over Expenses	\$20,397,265	(\$7,527,961)	\$13,583,423
C. <u>Parent Corporation Net Assets Summary</u>				
1	Parent Corporation Unrestricted Net Assets	\$159,117,857	\$136,705,366	\$104,776,463
2	Parent Corporation Total Net Assets	\$168,392,530	\$145,101,601	\$115,085,725
3	Parent Corporation Change in Total Net Assets	\$168,392,530	(\$23,290,929)	(\$30,015,876)
4	Parent Corporation Change in Total Net Assets %	0.0%	-13.8%	-20.7%

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
	D. <u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	3.09	3.42	3.32
2	Total Current Assets	\$87,543,476	\$97,840,503	\$112,352,984
3	Total Current Liabilities	\$28,348,470	\$28,614,838	\$33,811,045
4	<u>Days Cash on Hand</u>	83	78	90
5	Cash and Cash Equivalents	\$47,187,854	\$50,429,864	\$62,155,067
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$47,187,854	\$50,429,864	\$62,155,067
8	Total Operating Expenses	\$220,221,850	\$251,916,811	\$268,287,931
9	Depreciation Expense	\$12,851,940	\$16,814,826	\$17,335,024
10	Operating Expenses less Depreciation Expense	\$207,369,910	\$235,101,985	\$250,952,907
11	<u>Days Revenue in Patient Accounts Receivable</u>	50	49	48
12	Net Patient Accounts Receivable	\$ 31,517,555	\$ 35,783,224	\$ 38,032,269
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,428,540	\$1,750,429	\$2,310,804
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 30,089,015	\$ 34,032,795	\$ 35,721,465
16	Total Net Patient Revenue	\$221,834,947	\$251,767,293	\$271,765,388
17	<u>Average Payment Period</u>	50	44	49
18	Total Current Liabilities	\$28,348,470	\$28,614,838	\$33,811,045
19	Total Operating Expenses	\$220,221,850	\$251,916,811	\$268,287,931
20	Depreciation Expense	\$12,851,940	\$16,814,826	\$17,335,024
21	Total Operating Expenses less Depreciation Expense	\$207,369,910	\$235,101,985	\$250,952,907

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	55.4	49.0	36.0
2	Total Net Assets	\$168,392,530	\$145,101,601	\$115,085,725
3	Total Assets	\$303,699,047	\$296,421,028	\$319,898,277
4	<u>Cash Flow to Total Debt Ratio</u>	34.2	9.7	31.3
5	Excess/(Deficiency) of Revenues Over Expenses	\$20,397,265	(\$7,527,961)	\$13,583,423
6	Depreciation Expense	\$12,851,940	\$16,814,826	\$17,335,024
7	Excess of Revenues Over Expenses and Depreciation Expense	\$33,249,205	\$9,286,865	\$30,918,447
8	Total Current Liabilities	\$28,348,470	\$28,614,838	\$33,811,045
9	Total Long Term Debt	\$68,913,446	\$67,121,518	\$64,995,680
10	Total Current Liabilities and Total Long Term Debt	\$97,261,916	\$95,736,356	\$98,806,725
11	<u>Long Term Debt to Capitalization Ratio</u>	29.0	31.6	36.1
12	Total Long Term Debt	\$68,913,446	\$67,121,518	\$64,995,680
13	Total Net Assets	\$168,392,530	\$145,101,601	\$115,085,725
14	Total Long Term Debt and Total Net Assets	\$237,305,976	\$212,223,119	\$180,081,405

WILLIAM W. BACKUS HOSPITAL						
TWELVE MONTHS ACTUAL FILING						
FISCAL YEAR 2009						
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
		PATIENT	STAFFED	AVAILABLE	OCCUPANCY	OCCUPANCY
LINE	DESCRIPTION	DAYS	BEDS (A)	BEDS	OF STAFFED	OF AVAILABLE
					BEDS (A)	BEDS
1	Adult Medical/Surgical	37,390	139	166	73.7%	61.7%
2	ICU/CCU (Excludes Neonatal ICU)	3,246	12	12	74.1%	74.1%
3	Psychiatric: Ages 0 to 17	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	4,850	18	20	73.8%	66.4%
	TOTAL PSYCHIATRIC	4,850	18	20	73.8%	66.4%
5	Rehabilitation	0	0	0	0.0%	0.0%
6	Maternity	2,412	15	15	44.1%	44.1%
7	Newborn	2,134	18	20	32.5%	29.2%
8	Neonatal ICU	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0.0%	0.0%
10	Other	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	47,898	184	213	71.3%	61.6%
	TOTAL INPATIENT BED UTILIZATION	50,032	202	233	67.9%	58.8%
	TOTAL INPATIENT REPORTED YEAR	50,032	202	233	67.9%	58.8%
	TOTAL INPATIENT PRIOR YEAR	50,512	202	233	68.5%	59.4%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-480	0	0	-0.7%	-0.6%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-1%	0%	0%	-1%	-1%
	Total Licensed Beds and Bassinets	233				
(A) This number may not exceed the number of available beds for each department or in total.						

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	9,123	8,673	-450	-5%
2	Outpatient Scans (Excluding Emergency Department Scans)	14,515	15,183	668	5%
3	Emergency Department Scans	11,849	12,972	1,123	9%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	35,487	36,828	1,341	4%
B. MRI Scans (A)					
1	Inpatient Scans	1,153	1,160	7	1%
2	Outpatient Scans (Excluding Emergency Department Scans)	8,093	8,517	424	5%
3	Emergency Department Scans	185	277	92	50%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	9,431	9,954	523	6%
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	9	10	1	11%
2	Outpatient Scans (Excluding Emergency Department Scans)	738	722	-16	-2%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	747	732	-15	-2%
(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	442	573	131	30%
2	Outpatient Procedures	10,778	10,000	-778	-7%
	Total Linear Accelerator Procedures	11,220	10,573	-647	-6%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	102	127	25	25%
2	Outpatient Procedures	213	260	47	22%
	Total Cardiac Catheterization Procedures	315	387	72	23%
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	132	37	-95	-72%
2	Outpatient Studies	33	15	-18	-55%
	Total Electrophysiology Studies	165	52	-113	-68%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	3,536	3,477	-59	-2%
2	Outpatient Surgical Procedures	7,329	7,217	-112	-2%
	Total Surgical Procedures	10,865	10,694	-171	-2%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE	% DIFFERENCE
J.	<u>Endoscopy Procedures</u>				
1	Inpatient Endoscopy Procedures	589	600	11	2%
2	Outpatient Endoscopy Procedures	2,302	1,361	-941	-41%
	Total Endoscopy Procedures	2,891	1,961	-930	-32%
K.	<u>Hospital Emergency Room Visits</u>				
1	Emergency Room Visits: Treated and Admitted	6,561	6,343	-218	-3%
2	Emergency Room Visits: Treated and Discharged	52,432	57,305	4,873	9%
	Total Emergency Room Visits	58,993	63,648	4,655	8%
L.	<u>Hospital Clinic Visits</u>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	20,967	20,123	-844	-4%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	48,846	49,296	450	1%
	Total Hospital Clinic Visits	69,813	69,419	-394	-1%
M.	<u>Other Hospital Outpatient Visits</u>				
1	Rehabilitation (PT/OT/ST)	8,804	10,563	1,759	20%
2	Cardiology	7,145	7,280	135	2%
3	Chemotherapy	1,163	1,363	200	17%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	246,149	202,203	-43,946	-18%
	Total Other Hospital Outpatient Visits	263,261	221,409	-41,852	-16%
N.	<u>Hospital Full Time Equivalent Employees</u>				
1	Total Nursing FTEs	474.3	462.2	-12.1	-3%
2	Total Physician FTEs	41.5	34.2	-7.3	-18%
3	Total Non-Nursing and Non-Physician FTEs	987.4	1,087.1	99.7	10%
	Total Hospital Full Time Equivalent Employees	1,503.2	1,583.5	80.3	5%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
A. Outpatient Surgical Procedures					
1	BACKUS HOSPITAL	7,329	7,217	-112	-2%
	Total Outpatient Surgical Procedures(A)	7,329	7,217	-112	-2%
B. Outpatient Endoscopy Procedures					
1	BACKUS HOSPITAL	2,302	1,361	-941	-41%
	Total Outpatient Endoscopy Procedures(B)	2,302	1,361	-941	-41%
C. Outpatient Hospital Emergency Room Visits					
1	BACKUS HOSPITAL	52,432	57,305	4,873	9%
	Total Outpatient Hospital Emergency Room Visits(C)	52,432	57,305	4,873	9%
(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.					

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$111,648,145	\$115,948,483	\$4,300,338	4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$48,248,733	\$46,477,332	(\$1,771,401)	-4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	43.21%	40.08%	-3.13%	-7%
4	DISCHARGES	5,048	5,039	(9)	0%
5	CASE MIX INDEX (CMI)	1.40540	1.45900	0.05360	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,094.45920	7,351.90100	257.44180	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,800.90	\$6,321.81	(\$479.09)	-7%
8	PATIENT DAYS	26,502	26,007	(495)	-2%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,820.57	\$1,787.11	(\$33.46)	-2%
10	AVERAGE LENGTH OF STAY	5.3	5.2	(0.1)	-2%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$90,012,983	\$102,528,142	\$12,515,159	14%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$23,804,015	\$24,698,560	\$894,545	4%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.45%	24.09%	-2.36%	-9%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	80.62%	88.43%	7.80%	10%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,069.79926	4,455.76599	385.96673	9%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,848.94	\$5,543.06	(\$305.88)	-5%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$201,661,128	\$218,476,625	\$16,815,497	8%
18	TOTAL ACCRUED PAYMENTS	\$72,052,748	\$71,175,892	(\$876,856)	-1%
19	TOTAL ALLOWANCES	\$129,608,380	\$147,300,733	\$17,692,353	14%

WILLIAM W. BACKUS HOSPITAL					
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FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$73,872,061	\$76,065,517	\$2,193,456	3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$52,690,249	\$56,138,442	\$3,448,193	7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	71.33%	73.80%	2.48%	3%
4	DISCHARGES	4,720	4,461	(259)	-5%
5	CASE MIX INDEX (CMI)	1.36370	1.31510	(0.04860)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,436.66400	5,866.66110	(570.00290)	-9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,185.96	\$9,569.06	\$1,383.11	17%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,385.05)	(\$3,247.25)	(\$1,862.20)	134%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$8,915,118)	(\$19,050,517)	(\$10,135,399)	114%
10	PATIENT DAYS	15,493	15,280	(213)	-1%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,400.91	\$3,673.98	\$273.08	8%
12	AVERAGE LENGTH OF STAY	3.3	3.4	0.1	4%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$158,842,480	\$175,770,855	\$16,928,375	11%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$86,027,651	\$94,581,155	\$8,553,504	10%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	54.16%	53.81%	-0.35%	-1%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	215.02%	231.08%	16.05%	7%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	10,149.12127	10,308.40011	159.27884	2%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,476.36	\$9,175.15	\$698.79	8%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$2,627.42)	(\$3,632.10)	(\$1,004.67)	38%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$26,666,041)	(\$37,441,117)	(\$10,775,075)	40%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$232,714,541	\$251,836,372	\$19,121,831	8%
22	TOTAL ACCRUED PAYMENTS	\$138,717,900	\$150,719,597	\$12,001,697	9%
23	TOTAL ALLOWANCES	\$93,996,641	\$101,116,775	\$7,120,134	8%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$35,581,159)	(\$56,491,633)	(\$20,910,474)	59%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$202,370,905	\$217,279,782	\$14,908,877	7%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$134,214,632	\$145,881,679	\$11,667,047	9%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$68,156,273	\$71,398,103	\$3,241,830	5%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	33.68%	32.86%	-0.82%	

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$4,441,859	\$4,648,083	\$206,224	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,020,992	\$839,769	(\$181,223)	-18%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.99%	18.07%	-4.92%	-21%
4	DISCHARGES	350	265	(85)	-24%
5	CASE MIX INDEX (CMI)	1.13500	1.18480	0.04980	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	397.25000	313.97200	(83.27800)	-21%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,570.15	\$2,674.66	\$104.51	4%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$5,615.81	\$6,894.40	\$1,278.59	23%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$4,230.75	\$3,647.15	(\$583.60)	-14%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,680,667	\$1,145,103	(\$535,564)	-32%
11	PATIENT DAYS	1,016	1,101	85	8%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,004.91	\$762.73	(\$242.18)	-24%
13	AVERAGE LENGTH OF STAY	2.9	4.2	1.3	43%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$10,713,332	\$11,539,441	\$826,109	8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,232,432	\$2,437,935	\$205,503	9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.84%	21.13%	0.29%	1%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	241.19%	248.26%	7.07%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	844.16597	657.89528	(186.27069)	-22%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,644.54	\$3,705.66	\$1,061.12	40%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,831.82	\$5,469.50	(\$362.33)	-6%
21	MEDICARE - UNINSURED OP PMT / OPED	\$3,204.40	\$1,837.40	(\$1,367.00)	-43%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,705,045	\$1,208,815	(\$1,496,229)	-55%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$15,155,191	\$16,187,524	\$1,032,333	7%
24	TOTAL ACCRUED PAYMENTS	\$3,253,424	\$3,277,704	\$24,280	1%
25	TOTAL ALLOWANCES	\$11,901,767	\$12,909,820	\$1,008,053	8%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,385,712	\$2,353,918	(\$2,031,794)	-46%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$19,659,046	\$21,740,269	\$2,081,223	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,220,515	\$6,181,260	\$960,745	18%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.56%	28.43%	1.88%	7%
4	DISCHARGES	1,459	1,764	305	21%
5	CASE MIX INDEX (CMI)	1.01840	0.89440	(0.12400)	-12%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,485.84560	1,577.72160	91.87600	6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,513.50	\$3,917.84	\$404.34	12%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$4,672.46	\$5,651.22	\$978.76	21%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,287.41	\$2,403.97	(\$883.43)	-27%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,884,578	\$3,792,798	(\$1,091,779)	-22%
11	PATIENT DAYS	5,761	6,270	509	9%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$906.18	\$985.85	\$79.66	9%
13	AVERAGE LENGTH OF STAY	3.9	3.6	(0.4)	-10%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$30,149,641	\$37,356,397	\$7,206,756	24%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,874,248	\$10,155,897	\$2,281,649	29%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.12%	27.19%	1.07%	4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	153.36%	171.83%	18.47%	12%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,237.56159	3,031.08873	793.52714	35%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,519.12	\$3,350.58	(\$168.54)	-5%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$4,957.24	\$5,824.58	\$867.33	17%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,329.82	\$2,192.48	(\$137.34)	-6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,213,117	\$6,645,597	\$1,432,480	27%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$49,808,687	\$59,096,666	\$9,287,979	19%
24	TOTAL ACCRUED PAYMENTS	\$13,094,763	\$16,337,157	\$3,242,394	25%
25	TOTAL ALLOWANCES	\$36,713,924	\$42,759,509	\$6,045,585	16%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,097,695	\$10,438,396	\$340,701	3%

WILLIAM W. BACKUS HOSPITAL					
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$7,947,046	\$9,448,063	\$1,501,017	19%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,343,865	\$1,429,087	\$85,222	6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	16.91%	15.13%	-1.78%	-11%
4	DISCHARGES	449	384	(65)	-14%
5	CASE MIX INDEX (CMI)	1.17660	1.27210	0.09550	8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	528.29340	488.48640	(39.80700)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,543.79	\$2,925.54	\$381.76	15%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$5,642.17	\$6,643.52	\$1,001.35	18%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$4,257.12	\$3,396.27	(\$860.85)	-20%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,249,007	\$1,659,032	(\$589,976)	-26%
11	PATIENT DAYS	2,026	1,826	(200)	-10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$663.31	\$782.63	\$119.32	18%
13	AVERAGE LENGTH OF STAY	4.5	4.8	0.2	5%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$10,078,368	\$12,411,358	\$2,332,990	23%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,647,804	\$2,273,170	\$625,366	38%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.35%	18.32%	1.97%	12%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	126.82%	131.36%	4.55%	4%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	569.41752	504.43794	(64.97958)	-11%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,893.84	\$4,506.34	\$1,612.50	56%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$5,582.52	\$4,668.81	(\$913.71)	-16%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$2,955.10	\$1,036.71	(\$1,918.39)	-65%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,682,685	\$522,958	(\$1,159,728)	-69%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$18,025,414	\$21,859,421	\$3,834,007	21%
24	TOTAL ACCRUED PAYMENTS	\$2,991,669	\$3,702,257	\$710,588	24%
25	TOTAL ALLOWANCES	\$15,033,745	\$18,157,164	\$3,123,419	21%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$3,931,693	\$2,181,990	(\$1,749,703)	-45%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$27,606,092	\$31,188,332	\$3,582,240	13%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,564,380	\$7,610,347	\$1,045,967	16%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	23.78%	24.40%	0.62%	3%
4	DISCHARGES	1,908	2,148	240	13%
5	CASE MIX INDEX (CMI)	1.05563	0.96192	(0.09371)	-9%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,014.13900	2,066.20800	52.06900	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,259.15	\$3,683.24	\$424.09	13%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$4,926.81	\$5,885.82	\$959.01	19%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,541.75	\$2,638.57	(\$903.19)	-26%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,133,585	\$5,451,830	(\$1,681,755)	-24%
11	PATIENT DAYS	7,787	8,096	309	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$842.99	\$940.01	\$97.02	12%
13	AVERAGE LENGTH OF STAY	4.1	3.8	(0.3)	-8%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$40,228,009	\$49,767,755	\$9,539,746	24%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,522,052	\$12,429,067	\$2,907,015	31%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.67%	24.97%	1.30%	6%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	145.72%	159.57%	13.85%	10%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,806.97911	3,535.52667	728.54756	26%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,392.28	\$3,515.48	\$123.20	4%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,084.09	\$5,659.68	\$575.59	11%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,456.66	\$2,027.58	(\$429.09)	-17%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,895,803	\$7,168,555	\$272,752	4%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$67,834,101	\$80,956,087	\$13,121,986	19%
24	TOTAL ACCRUED PAYMENTS	\$16,086,432	\$20,039,414	\$3,952,982	25%
25	TOTAL ALLOWANCES	\$51,747,669	\$60,916,673	\$9,169,004	18%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$2,859,279	\$2,651,102	(\$208,177)	-7%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,152,336	\$1,174,297	\$21,961	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	40.30%	44.29%	3.99%	10%
4	DISCHARGES	264	237	(27)	-10%
5	CASE MIX INDEX (CMI)	1.04400	0.94080	(0.10320)	-10%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	275.61600	222.96960	(\$52,64640)	-19%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,180.95	\$5,266.62	\$1,085.68	26%
8	PATIENT DAYS	730	649	(81)	-11%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,578.54	\$1,809.39	\$230.85	15%
10	AVERAGE LENGTH OF STAY	2.8	2.7	(0.0)	-1%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,245,309	\$6,720,868	(\$524,441)	-7%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,521,543	\$2,520,995	(\$548)	0%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$10,104,588	\$9,371,970	(\$732,618)	-7%
14	TOTAL ACCRUED PAYMENTS	\$3,673,879	\$3,695,292	\$21,413	1%
15	TOTAL ALLOWANCES	\$6,430,709	\$5,676,678	(\$754,031)	-12%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$1,746,162	\$3,773,294	\$2,027,132	116%
2	TOTAL OPERATING EXPENSES	\$225,599,529	\$250,646,571	\$25,047,042	11%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$2,058,702	\$2,039,977	(\$18,725)	-1%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$6,296,582	\$6,641,717	\$345,135	5%
5	BAD DEBTS (CHARGES)	\$14,350,680	\$17,093,520	\$2,742,840	19%
6	UNCOMPENSATED CARE (CHARGES)	\$20,647,262	\$23,735,237	\$3,087,975	15%
7	COST OF UNCOMPENSATED CARE	\$9,373,814	\$10,485,337	\$1,111,522	12%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$67,834,101	\$80,956,087	\$13,121,986	19%
9	TOTAL ACCRUED PAYMENTS	\$16,086,432	\$20,039,414	\$3,952,982	25%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$30,796,542	\$35,763,360	\$4,966,818	16%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$14,710,110	\$15,723,946	\$1,013,836	7%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$215,985,577	\$225,853,434	\$9,867,857	5%
2	TOTAL INPATIENT PAYMENTS	\$108,655,698	\$111,400,418	\$2,744,720	3%
3	TOTAL INPATIENT PAYMENTS / CHARGES	50.31%	49.32%	-0.98%	-2%
4	TOTAL DISCHARGES	11,940	11,885	(55)	0%
5	TOTAL CASE MIX INDEX	1.32503	1.30482	(0.02022)	-2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	15,820.87820	15,507.73970	(313.13850)	-2%
7	TOTAL OUTPATIENT CHARGES	\$296,328,781	\$334,787,620	\$38,458,839	13%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	137.20%	148.23%	11.03%	8%
9	TOTAL OUTPATIENT PAYMENTS	\$121,875,261	\$134,229,777	\$12,354,516	10%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	41.13%	40.09%	-1.03%	-3%
11	TOTAL CHARGES	\$512,314,358	\$560,641,054	\$48,326,696	9%
12	TOTAL PAYMENTS	\$230,530,959	\$245,630,195	\$15,099,236	7%
13	TOTAL PAYMENTS / TOTAL CHARGES	45.00%	43.81%	-1.19%	-3%
14	PATIENT DAYS	50,512	50,032	(480)	-1%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$142,113,516	\$149,787,917	\$7,674,401	5%
2	INPATIENT PAYMENTS	\$55,965,449	\$55,261,976	(\$703,473)	-1%
3	GOVT. INPATIENT PAYMENTS / CHARGES	39.38%	36.89%	-2.49%	-6%
4	DISCHARGES	7,220	7,424	204	3%
5	CASE MIX INDEX	1.29975	1.29864	(0.00112)	0%
6	CASE MIX ADJUSTED DISCHARGES	9,384.21420	9,641.07860	256.86440	3%
7	OUTPATIENT CHARGES	\$137,486,301	\$159,016,765	\$21,530,464	16%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	96.74%	106.16%	9.42%	10%
9	OUTPATIENT PAYMENTS	\$35,847,610	\$39,648,622	\$3,801,012	11%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.07%	24.93%	-1.14%	-4%
11	TOTAL CHARGES	\$279,599,817	\$308,804,682	\$29,204,865	10%
12	TOTAL PAYMENTS	\$91,813,059	\$94,910,598	\$3,097,539	3%
13	TOTAL PAYMENTS / CHARGES	32.84%	30.73%	-2.10%	-6%
14	PATIENT DAYS	35,019	34,752	(267)	-1%
15	TOTAL GOVERNMENT DEDUCTIONS	\$187,786,758	\$213,894,084	\$26,107,326	14%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	5.3	5.2	(0.1)	-2%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.3	3.4	0.1	4%
3	UNINSURED	2.9	4.2	1.3	43%
4	MEDICAID	3.9	3.6	(0.4)	-10%
5	OTHER MEDICAL ASSISTANCE	4.5	4.8	0.2	5%
6	CHAMPUS / TRICARE	2.8	2.7	(0.0)	-1%
7	TOTAL AVERAGE LENGTH OF STAY	4.2	4.2	(0.0)	0%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$512,314,358	\$560,641,054	\$48,326,696	9%
2	TOTAL GOVERNMENT DEDUCTIONS	\$187,786,758	\$213,894,084	\$26,107,326	14%
3	UNCOMPENSATED CARE	\$20,647,262	\$23,735,237	\$3,087,975	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$68,156,273	\$71,398,103	\$3,241,830	5%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,193,106	\$5,983,436	\$790,330	15%
6	TOTAL ADJUSTMENTS	\$281,783,399	\$315,010,860	\$33,227,461	12%
7	TOTAL ACCRUED PAYMENTS	\$230,530,959	\$245,630,194	\$15,099,235	7%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$2,058,702	\$2,039,977	(\$18,725)	-1%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$232,589,661	\$247,670,171	\$15,080,510	6%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4539979358	0.4417624597	(0.0122354761)	-3%
11	COST OF UNCOMPENSATED CARE	\$9,373,814	\$10,485,337	\$1,111,522	12%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$14,710,110	\$15,723,946	\$1,013,836	7%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$24,083,924	\$26,209,283	\$2,125,359	9%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$5,213,117	\$6,645,597	\$1,432,480	27%
2	OTHER MEDICAL ASSISTANCE	\$3,931,693	\$2,181,990	(\$1,749,703)	-45%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,385,712	\$2,353,918	(\$2,031,794)	-46%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$13,530,522	\$11,181,505	(\$2,349,017)	-17%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$9,696,374	\$10,821,353	\$1,124,979	11.60%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$9,542,166	\$11,982,099	\$2,439,933	25.57%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$242,131,827	\$259,652,271	\$17,520,444	7.24%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$512,314,357	\$560,641,054	\$48,326,697	9.43%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$116,569	\$78,485	(\$38,084)	-32.67%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$20,763,831	\$23,813,722	\$3,049,891	14.69%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$73,872,061	\$76,065,517	\$2,193,456
2	MEDICARE	\$111,648,145	115,948,483	\$4,300,338
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$27,606,092	31,188,332	\$3,582,240
4	MEDICAID	\$19,659,046	21,740,269	\$2,081,223
5	OTHER MEDICAL ASSISTANCE	\$7,947,046	9,448,063	\$1,501,017
6	CHAMPUS / TRICARE	\$2,859,279	2,651,102	(\$208,177)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,441,859	4,648,083	\$206,224
	TOTAL INPATIENT GOVERNMENT CHARGES	\$142,113,516	\$149,787,917	\$7,674,401
	TOTAL INPATIENT CHARGES	\$215,985,577	\$225,853,434	\$9,867,857
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$158,842,480	\$175,770,855	\$16,928,375
2	MEDICARE	\$90,012,983	102,528,142	\$12,515,159
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$40,228,009	49,767,755	\$9,539,746
4	MEDICAID	\$30,149,641	37,356,397	\$7,206,756
5	OTHER MEDICAL ASSISTANCE	\$10,078,368	12,411,358	\$2,332,990
6	CHAMPUS / TRICARE	\$7,245,309	6,720,868	(\$524,441)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,713,332	11,539,441	\$826,109
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$137,486,301	\$159,016,765	\$21,530,464
	TOTAL OUTPATIENT CHARGES	\$296,328,781	\$334,787,620	\$38,458,839
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$232,714,541	\$251,836,372	\$19,121,831
2	TOTAL MEDICARE	\$201,661,128	\$218,476,625	\$16,815,497
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$67,834,101	\$80,956,087	\$13,121,986
4	TOTAL MEDICAID	\$49,808,687	\$59,096,666	\$9,287,979
5	TOTAL OTHER MEDICAL ASSISTANCE	\$18,025,414	\$21,859,421	\$3,834,007
6	TOTAL CHAMPUS / TRICARE	\$10,104,588	\$9,371,970	(\$732,618)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$15,155,191	\$16,187,524	\$1,032,333
	TOTAL GOVERNMENT CHARGES	\$279,599,817	\$308,804,682	\$29,204,865
	TOTAL CHARGES	\$512,314,358	\$560,641,054	\$48,326,696
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$52,690,249	\$56,138,442	\$3,448,193
2	MEDICARE	\$48,248,733	46,477,332	(\$1,771,401)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,564,380	7,610,347	\$1,045,967
4	MEDICAID	\$5,220,515	6,181,260	\$960,745
5	OTHER MEDICAL ASSISTANCE	\$1,343,865	1,429,087	\$85,222
6	CHAMPUS / TRICARE	\$1,152,336	1,174,297	\$21,961
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,020,992	839,769	(\$181,223)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$55,965,449	\$55,261,976	(\$703,473)
	TOTAL INPATIENT PAYMENTS	\$108,655,698	\$111,400,418	\$2,744,720
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$86,027,651	\$94,581,155	\$8,553,504
2	MEDICARE	\$23,804,015	24,698,560	\$894,545
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$9,522,052	12,429,067	\$2,907,015
4	MEDICAID	\$7,874,248	10,155,897	\$2,281,649
5	OTHER MEDICAL ASSISTANCE	\$1,647,804	2,273,170	\$625,366
6	CHAMPUS / TRICARE	\$2,521,543	2,520,995	(\$548)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,232,432	2,437,935	\$205,503
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$35,847,610	\$39,648,622	\$3,801,012
	TOTAL OUTPATIENT PAYMENTS	\$121,875,261	\$134,229,777	\$12,354,516
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$138,717,900	\$150,719,597	\$12,001,697
2	TOTAL MEDICARE	\$72,052,748	\$71,175,892	(\$876,856)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$16,086,432	\$20,039,414	\$3,952,982
4	TOTAL MEDICAID	\$13,094,763	\$16,337,157	\$3,242,394
5	TOTAL OTHER MEDICAL ASSISTANCE	\$2,991,669	\$3,702,257	\$710,588
6	TOTAL CHAMPUS / TRICARE	\$3,673,879	\$3,695,292	\$21,413
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,253,424	\$3,277,704	\$24,280
	TOTAL GOVERNMENT PAYMENTS	\$91,813,059	\$94,910,598	\$3,097,539
	TOTAL PAYMENTS	\$230,530,959	\$245,630,195	\$15,099,236

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14.42%	13.57%	-0.85%
2	MEDICARE	21.79%	20.68%	-1.11%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.39%	5.56%	0.17%
4	MEDICAID	3.84%	3.88%	0.04%
5	OTHER MEDICAL ASSISTANCE	1.55%	1.69%	0.13%
6	CHAMPUS / TRICARE	0.56%	0.47%	-0.09%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.87%	0.83%	-0.04%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	27.74%	26.72%	-1.02%
	TOTAL INPATIENT PAYER MIX	42.16%	40.28%	-1.87%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.00%	31.35%	0.35%
2	MEDICARE	17.57%	18.29%	0.72%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.85%	8.88%	1.02%
4	MEDICAID	5.88%	6.66%	0.78%
5	OTHER MEDICAL ASSISTANCE	1.97%	2.21%	0.25%
6	CHAMPUS / TRICARE	1.41%	1.20%	-0.22%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.09%	2.06%	-0.03%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	26.84%	28.36%	1.53%
	TOTAL OUTPATIENT PAYER MIX	57.84%	59.72%	1.87%
	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)	22.86%	22.85%	0.00%
2	MEDICARE	20.93%	18.92%	-2.01%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.85%	3.10%	0.25%
4	MEDICAID	2.26%	2.52%	0.25%
5	OTHER MEDICAL ASSISTANCE	0.58%	0.58%	0.00%
6	CHAMPUS / TRICARE	0.50%	0.48%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.44%	0.34%	-0.10%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	24.28%	22.50%	-1.78%
	TOTAL INPATIENT PAYER MIX	47.13%	45.35%	-1.78%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	37.32%	38.51%	1.19%
2	MEDICARE	10.33%	10.06%	-0.27%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.13%	5.06%	0.93%
4	MEDICAID	3.42%	4.13%	0.72%
5	OTHER MEDICAL ASSISTANCE	0.71%	0.93%	0.21%
6	CHAMPUS / TRICARE	1.09%	1.03%	-0.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.97%	0.99%	0.02%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	15.55%	16.14%	0.59%
	TOTAL OUTPATIENT PAYER MIX	52.87%	54.65%	1.78%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,720	4,461	(259)
2	MEDICARE	5,048	5,039	(9)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,908	2,148	240
4	MEDICAID	1,459	1,764	305
5	OTHER MEDICAL ASSISTANCE	449	384	(65)
6	CHAMPUS / TRICARE	264	237	(27)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	350	265	(85)
	TOTAL GOVERNMENT DISCHARGES	7,220	7,424	204
	TOTAL DISCHARGES	11,940	11,885	(55)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15,493	15,280	(213)
2	MEDICARE	26,502	26,007	(495)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7,787	8,096	309
4	MEDICAID	5,761	6,270	509
5	OTHER MEDICAL ASSISTANCE	2,026	1,826	(200)
6	CHAMPUS / TRICARE	730	649	(81)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,016	1,101	85
	TOTAL GOVERNMENT PATIENT DAYS	35,019	34,752	(267)
	TOTAL PATIENT DAYS	50,512	50,032	(480)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.3	3.4	0.1
2	MEDICARE	5.3	5.2	(0.1)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.1	3.8	(0.3)
4	MEDICAID	3.9	3.6	(0.4)
5	OTHER MEDICAL ASSISTANCE	4.5	4.8	0.2
6	CHAMPUS / TRICARE	2.8	2.7	(0.0)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.9	4.2	1.3
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.9	4.7	(0.2)
	TOTAL AVERAGE LENGTH OF STAY	4.2	4.2	(0.0)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.36370	1.31510	(0.04860)
2	MEDICARE	1.40540	1.45900	0.05360
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.05563	0.96192	(0.09371)
4	MEDICAID	1.01840	0.89440	(0.12400)
5	OTHER MEDICAL ASSISTANCE	1.17660	1.27210	0.09550
6	CHAMPUS / TRICARE	1.04400	0.94080	(0.10320)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.13500	1.18480	0.04980
	TOTAL GOVERNMENT CASE MIX INDEX	1.29975	1.29864	(0.00112)
	TOTAL CASE MIX INDEX	1.32503	1.30482	(0.02022)
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$202,370,905	\$217,279,782	\$14,908,877
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$134,214,632	\$145,881,679	\$11,667,047
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$68,156,273	\$71,398,103	\$3,241,830
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	33.68%	32.86%	-0.82%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$9,696,374	\$10,821,353	\$1,124,979
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,193,106	\$5,983,436	\$790,330
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT OHCA INPUT)	\$2,058,702	\$2,039,977	(\$18,725)
8	CHARITY CARE	\$6,296,582	\$6,641,717	\$345,135
9	BAD DEBTS	\$14,350,680	\$17,093,520	\$2,742,840
10	TOTAL UNCOMPENSATED CARE	\$20,647,262	\$23,735,237	\$3,087,975
11	TOTAL OTHER OPERATING REVENUE	\$202,370,905	\$217,279,782	\$14,908,877
12	TOTAL OPERATING EXPENSES	\$225,599,529	\$250,646,571	\$25,047,042

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u> <u>FY 2008</u>	<u>ACTUAL</u> <u>FY 2009</u>	<u>AMOUNT</u> <u>DIFFERENCE</u>

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,436.66400	5,866.66110	(570.00290)
2	MEDICARE	7,094.45920	7,351.90100	257.44180
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,014.13900	2,066.20800	52.06900
4	MEDICAID	1,485.84560	1,577.72160	91.87600
5	OTHER MEDICAL ASSISTANCE	528.29340	488.48640	(39.80700)
6	CHAMPUS / TRICARE	275.61600	222.96960	(52.64640)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	397.25000	313.97200	(83.27800)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	9,384.21420	9,641.07860	256.86440
	TOTAL CASE MIX ADJUSTED DISCHARGES	15,820.87820	15,507.73970	(313.13850)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,149.12127	10,308.40011	159.27884
2	MEDICARE	4,069.79926	4,455.76599	385.96673
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,806.97911	3,535.52667	728.54756
4	MEDICAID	2,237.56159	3,031.08873	793.52714
5	OTHER MEDICAL ASSISTANCE	569.41752	504.43794	-64.97958
6	CHAMPUS / TRICARE	668.96640	600.82400	-68.14240
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	844.16597	657.89528	-186.27069
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	7,545.74477	8,592.11667	1,046.37190
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	17,694.86604	18,900.51678	1,205.65074
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,185.96	\$9,569.06	\$1,383.11
2	MEDICARE	\$6,800.90	\$6,321.81	(\$479.09)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,259.15	\$3,683.24	\$424.09
4	MEDICAID	\$3,513.50	\$3,917.84	\$404.34
5	OTHER MEDICAL ASSISTANCE	\$2,543.79	\$2,925.54	\$381.76
6	CHAMPUS / TRICARE	\$4,180.95	\$5,266.62	\$1,085.68
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,570.15	\$2,674.66	\$104.51
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$5,963.79	\$5,731.93	(\$231.86)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,867.87	\$7,183.54	\$315.67
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,476.36	\$9,175.15	\$698.79
2	MEDICARE	\$5,848.94	\$5,543.06	(\$305.88)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,392.28	\$3,515.48	\$123.20
4	MEDICAID	\$3,519.12	\$3,350.58	(\$168.54)
5	OTHER MEDICAL ASSISTANCE	\$2,893.84	\$4,506.34	\$1,612.50
6	CHAMPUS / TRICARE	\$3,769.31	\$4,195.90	\$426.58
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,644.54	\$3,705.66	\$1,061.12
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,750.71	\$4,614.53	(\$136.17)
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,887.61	\$7,101.91	\$214.30

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$5,213,117	\$6,645,597	\$1,432,480
2	OTHER MEDICAL ASSISTANCE	\$3,931,693	\$2,181,990	(\$1,749,703)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,385,712	\$2,353,918	(\$2,031,794)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$13,530,522	\$11,181,505	(\$2,349,017)
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$512,314,358	\$560,641,054	\$48,326,696
2	TOTAL GOVERNMENT DEDUCTIONS	\$187,786,758	\$213,894,084	\$26,107,326
3	UNCOMPENSATED CARE	\$20,647,262	\$23,735,237	\$3,087,975
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$68,156,273	\$71,398,103	\$3,241,830
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,193,106	\$5,983,436	\$790,330
6	TOTAL ADJUSTMENTS	\$281,783,399	\$315,010,860	\$33,227,461
7	TOTAL ACCRUED PAYMENTS	\$230,530,959	\$245,630,194	\$15,099,235
8	UCP DSH PAYMENTS (OHCA INPUT)	\$2,058,702	\$2,039,977	(\$18,725)
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$232,589,661	\$247,670,171	\$15,080,510
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4539979358	0.4417624597	(0.0122354761)
11	COST OF UNCOMPENSATED CARE	\$9,373,814	\$10,485,337	\$1,111,522
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$14,710,110	\$15,723,946	\$1,013,836
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$24,083,924	\$26,209,283	\$2,125,359
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	71.33%	73.80%	2.48%
2	MEDICARE	43.21%	40.08%	-3.13%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.78%	24.40%	0.62%
4	MEDICAID	26.56%	28.43%	1.88%
5	OTHER MEDICAL ASSISTANCE	16.91%	15.13%	-1.78%
6	CHAMPUS / TRICARE	40.30%	44.29%	3.99%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	22.99%	18.07%	-4.92%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	39.38%	36.89%	-2.49%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	50.31%	49.32%	-0.98%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	54.16%	53.81%	-0.35%
2	MEDICARE	26.45%	24.09%	-2.36%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.67%	24.97%	1.30%
4	MEDICAID	26.12%	27.19%	1.07%
5	OTHER MEDICAL ASSISTANCE	16.35%	18.32%	1.97%
6	CHAMPUS / TRICARE	34.80%	37.51%	2.71%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	20.84%	21.13%	0.29%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	26.07%	24.93%	-1.14%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	41.13%	40.09%	-1.03%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	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	\$230,530,959	\$245,630,195	\$15,099,236
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$2,058,702	\$2,039,977	(\$18,725)
	OHCA DEFINED NET REVENUE	\$232,589,661	\$247,670,172	\$15,080,511
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$9,542,166	\$11,982,099	\$2,439,933
4	CALCULATED NET REVENUE	\$260,985,775	\$259,652,271	(\$1,333,504)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$242,131,827	\$259,652,271	\$17,520,444
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$18,853,948	\$0	(\$18,853,948)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$512,314,358	\$560,641,054	\$48,326,696
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$512,314,358	\$560,641,054	\$48,326,696
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$512,314,357	\$560,641,054	\$48,326,697
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1	\$0	(\$1)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$20,647,262	\$23,735,237	\$3,087,975
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$116,569	\$78,485	(\$38,084)
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$20,763,831	\$23,813,722	\$3,049,891
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$20,763,831	\$23,813,722	\$3,049,891
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2009
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$76,065,517
2	MEDICARE	115,948,483
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	31,188,332
4	MEDICAID	21,740,269
5	OTHER MEDICAL ASSISTANCE	9,448,063
6	CHAMPUS / TRICARE	2,651,102
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4,648,083
	TOTAL INPATIENT GOVERNMENT CHARGES	\$149,787,917
	TOTAL INPATIENT CHARGES	\$225,853,434
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$175,770,855
2	MEDICARE	102,528,142
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	49,767,755
4	MEDICAID	37,356,397
5	OTHER MEDICAL ASSISTANCE	12,411,358
6	CHAMPUS / TRICARE	6,720,868
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	11,539,441
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$159,016,765
	TOTAL OUTPATIENT CHARGES	\$334,787,620
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$251,836,372
2	TOTAL GOVERNMENT ACCRUED CHARGES	308,804,682
	TOTAL ACCRUED CHARGES	\$560,641,054
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$56,138,442
2	MEDICARE	46,477,332
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7,610,347
4	MEDICAID	6,181,260
5	OTHER MEDICAL ASSISTANCE	1,429,087
6	CHAMPUS / TRICARE	1,174,297
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	839,769
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$55,261,976
	TOTAL INPATIENT PAYMENTS	\$111,400,418
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$94,581,155
2	MEDICARE	24,698,560
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12,429,067
4	MEDICAID	10,155,897
5	OTHER MEDICAL ASSISTANCE	2,273,170
6	CHAMPUS / TRICARE	2,520,995
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,437,935
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$39,648,622
	TOTAL OUTPATIENT PAYMENTS	\$134,229,777
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$150,719,597
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	94,910,598
	TOTAL ACCRUED PAYMENTS	\$245,630,195

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2009</u>
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,461
2	MEDICARE	5,039
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,148
4	MEDICAID	1,764
5	OTHER MEDICAL ASSISTANCE	384
6	CHAMPUS / TRICARE	237
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	265
	TOTAL GOVERNMENT DISCHARGES	7,424
	TOTAL DISCHARGES	11,885
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,31510
2	MEDICARE	1,45900
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0,96192
4	MEDICAID	0,89440
5	OTHER MEDICAL ASSISTANCE	1,27210
6	CHAMPUS / TRICARE	0,94080
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,18480
	TOTAL GOVERNMENT CASE MIX INDEX	1,29864
	TOTAL CASE MIX INDEX	1,30482
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$217,279,782
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$145,881,679
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$71,398,103
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	32.86%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$10,821,353
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,983,436
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$2,039,977
8	CHARITY CARE	\$6,641,717
9	BAD DEBTS	\$17,093,520
10	TOTAL UNCOMPENSATED CARE	\$23,735,237
11	TOTAL OTHER OPERATING REVENUE	\$3,773,294
12	TOTAL OPERATING EXPENSES	\$250,646,571

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2009</u>
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	\$245,630,195
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$2,039,977
	OHCA DEFINED NET REVENUE	\$247,670,172
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$11,982,099
	CALCULATED NET REVENUE	\$259,652,271
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$259,652,271
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$560,641,054
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$560,641,054
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$560,641,054
	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)	\$23,735,237
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$78,485
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$23,813,722
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$23,813,722
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE	% DIFFERENCE
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	2,491	2,339	(152)	-6%
2	Number of Approved Applicants	1,997	2,198	201	10%
3	Total Charges (A)	\$6,296,582	\$6,641,717	\$345,135	5%
4	Average Charges	\$3,153	\$3,022	(\$131)	-4%
5	Ratio of Cost to Charges (RCC)	0.456863	0.438858	(0.018005)	-4%
6	Total Cost	\$2,876,675	\$2,914,771	\$38,095	1%
7	Average Cost	\$1,440	\$1,326	(\$114)	-8%
8	Charity Care - Inpatient Charges	\$2,397,319	\$2,291,821	(\$105,498)	-4%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,498,854	2,461,682	(37,172)	-1%
10	Charity Care - Emergency Department Charges	1,400,409	1,888,214	487,805	35%
11	Total Charges (A)	\$6,296,582	\$6,641,717	\$345,135	5%
12	Charity Care - Number of Patient Days	2,727	3,013	286	10%
13	Charity Care - Number of Discharges	606	597	(9)	-1%
14	Charity Care - Number of Outpatient ED Visits	1,907	2,617	710	37%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	5,318	6,700	1,382	26%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$4,014,465	\$3,125,269	(\$889,196)	-22%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	3,086,821	3,916,622	829,801	27%
3	Bad Debts - Emergency Department	7,249,394	10,051,629	2,802,235	39%
4	Total Bad Debts (A)	\$14,350,680	\$17,093,520	\$2,742,840	19%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$6,296,582	\$6,641,717	\$345,135	5%
2	Bad Debts (A)	14,350,680	17,093,520	2,742,840	19%
3	Total Uncompensated Care (A)	\$20,647,262	\$23,735,237	\$3,087,975	15%
4	Uncompensated Care - Inpatient Services	\$6,411,784	\$5,417,090	(\$994,694)	-16%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	5,585,675	6,378,304	792,629	14%
6	Uncompensated Care - Emergency Department	8,649,803	11,939,843	3,290,040	38%
7	Total Uncompensated Care (A)	\$20,647,262	\$23,735,237	\$3,087,975	15%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2007	ACTUAL FY 2008	ACTUAL FY 2009
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$195,149,449	\$215,985,577	\$225,853,434
2	Outpatient Gross Revenue	\$245,542,070	\$296,328,781	\$334,787,620
3	Total Gross Patient Revenue	\$440,691,519	\$512,314,358	\$560,641,054
4	Net Patient Revenue	\$217,893,336	\$242,131,827	\$259,652,271
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$213,708,355	\$237,933,157	\$250,646,571
C. <u>Utilization Statistics</u>				
1	Patient Days	50,286	50,512	50,032
2	Discharges	12,076	11,940	11,885
3	Average Length of Stay	4.2	4.2	4.2
4	Equivalent (Adjusted) Patient Days (EPD)	113,557	119,814	124,196
0	Equivalent (Adjusted) Discharges (ED)	27,270	28,321	29,502
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.16811	1.32503	1.30482
2	Case Mix Adjusted Patient Days (CMAPD)	58,739	66,930	65,283
3	Case Mix Adjusted Discharges (CMAD)	14,106	15,821	15,508
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	132,647	158,757	162,052
5	Case Mix Adjusted Equivalent Discharges (CMAED)	31,855	37,527	38,495
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$8,764	\$10,142	\$11,206
2	Total Gross Revenue per Discharge	\$36,493	\$42,907	\$47,172
3	Total Gross Revenue per EPD	\$3,881	\$4,276	\$4,514
4	Total Gross Revenue per ED	\$16,160	\$18,089	\$19,003
5	Total Gross Revenue per CMAEPD	\$3,322	\$3,227	\$3,460
6	Total Gross Revenue per CMAED	\$13,834	\$13,652	\$14,564
7	Inpatient Gross Revenue per EPD	\$1,719	\$1,803	\$1,819
8	Inpatient Gross Revenue per ED	\$7,156	\$7,626	\$7,655

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2007	ACTUAL FY 2008	ACTUAL FY 2009
F.	<u>Net Revenue Per Statistic</u>			
1	Net Patient Revenue per Patient Day	\$4,333	\$4,794	\$5,190
2	Net Patient Revenue per Discharge	\$18,044	\$20,279	\$21,847
3	Net Patient Revenue per EPD	\$1,919	\$2,021	\$2,091
4	Net Patient Revenue per ED	\$7,990	\$8,549	\$8,801
5	Net Patient Revenue per CMAEPD	\$1,643	\$1,525	\$1,602
6	Net Patient Revenue per CMAED	\$6,840	\$6,452	\$6,745
G.	<u>Operating Expense Per Statistic</u>			
1	Total Operating Expense per Patient Day	\$4,250	\$4,710	\$5,010
2	Total Operating Expense per Discharge	\$17,697	\$19,927	\$21,089
3	Total Operating Expense per EPD	\$1,882	\$1,986	\$2,018
4	Total Operating Expense per ED	\$7,837	\$8,401	\$8,496
5	Total Operating Expense per CMAEPD	\$1,611	\$1,499	\$1,547
6	Total Operating Expense per CMAED	\$6,709	\$6,340	\$6,511
H.	<u>Nursing Salary and Fringe Benefits Expense</u>			
1	Nursing Salary Expense	\$33,363,309	\$38,205,041	\$39,916,076
2	Nursing Fringe Benefits Expense	\$6,972,442	\$7,115,330	\$7,644,307
3	Total Nursing Salary and Fringe Benefits Expense	\$40,335,751	\$45,320,371	\$47,560,383
I.	<u>Physician Salary and Fringe Expense</u>			
1	Physician Salary Expense	\$7,856,994	\$9,040,475	\$9,282,412
2	Physician Fringe Benefits Expense	\$1,798,580	\$1,767,737	\$1,600,541
3	Total Physician Salary and Fringe Benefits Expense	\$9,655,574	\$10,808,212	\$10,882,953
J.	<u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u>			
1	Non-Nursing, Non-Physician Salary Expense	\$46,220,760	\$52,710,981	\$60,399,069
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$15,303,731	\$14,812,729	\$18,181,054
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$61,524,491	\$67,523,710	\$78,580,123
K.	<u>Total Salary and Fringe Benefits Expense</u>			
1	Total Salary Expense	\$87,441,063	\$99,956,497	\$109,597,557
2	Total Fringe Benefits Expense	\$24,074,753	\$23,695,796	\$27,425,902
3	Total Salary and Fringe Benefits Expense	\$111,515,816	\$123,652,293	\$137,023,459