

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION</b>					
(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.	<b><u>ASSETS</u></b>				
A.	<b><u>Current Assets:</u></b>				
1	Cash and Cash Equivalents	\$0	\$0	\$0	0%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$6,608,367	\$6,306,510	(\$301,857)	-5%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,134,838	\$1,140,534	\$5,696	1%
8	Prepaid Expenses	\$1,173,737	\$1,517,860	\$344,123	29%
9	Other Current Assets	\$1,198,005	\$1,707,366	\$509,361	43%
	<b>Total Current Assets</b>	<b>\$10,114,947</b>	<b>\$10,672,270</b>	<b>\$557,323</b>	<b>6%</b>
B.	<b><u>Noncurrent Assets Whose Use is Limited:</u></b>				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$4,908,223	\$8,911,918	\$4,003,695	82%
C.	<b><u>Net Fixed Assets:</u></b>				
1	Property, Plant and Equipment	\$56,160,839	\$56,490,008	\$329,169	1%
2	Less: Accumulated Depreciation	\$13,448,037	\$16,284,093	\$2,836,056	21%
	<b>Property, Plant and Equipment, Net</b>	<b>\$42,712,802</b>	<b>\$40,205,915</b>	<b>(\$2,506,887)</b>	<b>-6%</b>
3	Construction in Progress	\$162,764	\$235,793	\$73,029	45%
	<b>Total Net Fixed Assets</b>	<b>\$42,875,566</b>	<b>\$40,441,708</b>	<b>(\$2,433,858)</b>	<b>-6%</b>
	<b>Total Assets</b>	<b>\$57,898,736</b>	<b>\$60,025,896</b>	<b>\$2,127,160</b>	<b>4%</b>

ESSENT-SHARON HOSPITAL					
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FISCAL YEAR 2009					
REPORT 100 - 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>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$2,235,113	\$1,950,304	(\$284,809)	-13%
2	Salaries, Wages and Payroll Taxes	\$2,711,261	\$3,690,101	\$978,840	36%
3	Due To Third Party Payers	\$208,044	\$435,106	\$227,062	109%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$1,146,567	\$956,509	(\$190,058)	-17%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	<b>Total Current Liabilities</b>	<b>\$6,300,985</b>	<b>\$7,032,020</b>	<b>\$731,035</b>	<b>12%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$34,387,500	\$34,037,500	(\$350,000)	-1%
	<b>Total Long Term Debt</b>	<b>\$34,387,500</b>	<b>\$34,037,500</b>	<b>(\$350,000)</b>	<b>-1%</b>
3	Accrued Pension Liability	\$1,270,000	\$1,407,000	\$137,000	11%
4	Other Long Term Liabilities	\$2,846,183	\$2,095,785	(\$750,398)	-26%
	<b>Total Long Term Liabilities</b>	<b>\$38,503,683</b>	<b>\$37,540,285</b>	<b>(\$963,398)</b>	<b>-3%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$13,094,068	\$15,453,591	\$2,359,523	18%
2	Temporarily Restricted Net Assets	\$0	\$0	\$0	0%
3	Permanently Restricted Net Assets	\$0	\$0	\$0	0%
	<b>Total Net Assets</b>	<b>\$13,094,068</b>	<b>\$15,453,591</b>	<b>\$2,359,523</b>	<b>18%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$57,898,736</b>	<b>\$60,025,896</b>	<b>\$2,127,160</b>	<b>4%</b>

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2008 ACTUAL</b>	<b>FY 2009 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$113,306,383	\$114,452,317	\$1,145,934	1%
2	Less: Allowances	\$57,893,603	\$62,168,698	\$4,275,095	7%
3	Less: Charity Care	\$767,308	\$430,330	(\$336,978)	-44%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$54,645,472</b>	<b>\$51,853,289</b>	<b>(\$2,792,183)</b>	<b>-5%</b>
5	Other Operating Revenue	\$671,644	\$543,474	(\$128,170)	-19%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$55,317,116</b>	<b>\$52,396,763</b>	<b>(\$2,920,353)</b>	<b>-5%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$16,999,525	\$15,544,600	(\$1,454,925)	-9%
2	Fringe Benefits	\$4,025,084	\$3,358,585	(\$666,499)	-17%
3	Physicians Fees	\$1,170,401	\$1,137,397	(\$33,004)	-3%
4	Supplies and Drugs	\$6,230,431	\$6,036,261	(\$194,170)	-3%
5	Depreciation and Amortization	\$3,473,151	\$3,422,746	(\$50,405)	-1%
6	Bad Debts	\$3,536,277	\$2,953,540	(\$582,737)	-16%
7	Interest	\$2,918,034	\$2,032,328	(\$885,706)	-30%
8	Malpractice	\$946,848	\$687,844	(\$259,004)	-27%
9	Other Operating Expenses	\$14,344,248	\$14,510,060	\$165,812	1%
	<b>Total Operating Expenses</b>	<b>\$53,643,999</b>	<b>\$49,683,361</b>	<b>(\$3,960,638)</b>	<b>-7%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$1,673,117</b>	<b>\$2,713,402</b>	<b>\$1,040,285</b>	<b>62%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	<b>Total Non-Operating Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$1,673,117</b>	<b>\$2,713,402</b>	<b>\$1,040,285</b>	<b>62%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$1,673,117</b>	<b>\$2,713,402</b>	<b>\$1,040,285</b>	<b>62%</b>
	Principal Payments	\$0	\$350,000	\$350,000	0%

**ESSENT-SHARON 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
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$29,829,658	\$29,942,831	\$113,173	0%
2	MEDICARE MANAGED CARE	\$551,369	\$554,199	\$2,830	1%
3	MEDICAID	\$194,390	\$476,638	\$282,248	145%
4	MEDICAID MANAGED CARE	\$757,209	\$822,083	\$64,874	9%
5	CHAMPUS/TRICARE	\$127,666	\$93,627	(\$34,039)	-27%
6	COMMERCIAL INSURANCE	\$1,366,744	\$949,335	(\$417,409)	-31%
7	NON-GOVERNMENT MANAGED CARE	\$10,886,283	\$11,508,298	\$622,015	6%
8	WORKER'S COMPENSATION	\$1,551,279	\$1,442,633	(\$108,646)	-7%
9	SELF- PAY/UNINSURED	\$959,783	\$850,966	(\$108,817)	-11%
10	SAGA	\$209,165	\$149,482	(\$59,683)	-29%
11	OTHER	\$1,730,205	\$1,709,870	(\$20,335)	-1%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$48,163,751</b>	<b>\$48,499,962</b>	<b>\$336,211</b>	<b>1%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$24,243,139	\$24,223,574	(\$19,565)	0%
2	MEDICARE MANAGED CARE	\$364,243	\$641,501	\$277,258	76%
3	MEDICAID	\$668,444	\$383,767	(\$284,677)	-43%
4	MEDICAID MANAGED CARE	\$1,098,342	\$1,578,060	\$479,718	44%
5	CHAMPUS/TRICARE	\$65,947	\$64,791	(\$1,156)	-2%
6	COMMERCIAL INSURANCE	\$2,950,956	\$2,562,294	(\$388,662)	-13%
7	NON-GOVERNMENT MANAGED CARE	\$29,601,984	\$30,074,557	\$472,573	2%
8	WORKER'S COMPENSATION	\$1,643,871	\$1,716,346	\$72,475	4%
9	SELF- PAY/UNINSURED	\$2,307,276	\$1,991,028	(\$316,248)	-14%
10	SAGA	\$441,406	\$530,372	\$88,966	20%
11	OTHER	\$1,932,397	\$2,186,065	\$253,668	13%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$65,318,005</b>	<b>\$65,952,355</b>	<b>\$634,350</b>	<b>1%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$54,072,797	\$54,166,405	\$93,608	0%
2	MEDICARE MANAGED CARE	\$915,612	\$1,195,700	\$280,088	31%
3	MEDICAID	\$862,834	\$860,405	(\$2,429)	0%
4	MEDICAID MANAGED CARE	\$1,855,551	\$2,400,143	\$544,592	29%
5	CHAMPUS/TRICARE	\$193,613	\$158,418	(\$35,195)	-18%
6	COMMERCIAL INSURANCE	\$4,317,700	\$3,511,629	(\$806,071)	-19%
7	NON-GOVERNMENT MANAGED CARE	\$40,488,267	\$41,582,855	\$1,094,588	3%
8	WORKER'S COMPENSATION	\$3,195,150	\$3,158,979	(\$36,171)	-1%
9	SELF- PAY/UNINSURED	\$3,267,059	\$2,841,994	(\$425,065)	-13%
10	SAGA	\$650,571	\$679,854	\$29,283	5%
11	OTHER	\$3,662,602	\$3,895,935	\$233,333	6%
	<b>TOTAL GROSS REVENUE</b>	<b>\$113,481,756</b>	<b>\$114,452,317</b>	<b>\$970,561</b>	<b>1%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$15,791,995	\$14,678,400	(\$1,113,595)	-7%
2	MEDICARE MANAGED CARE	\$234,503	\$254,349	\$19,846	8%
3	MEDICAID	\$122,927	\$29,978	(\$92,949)	-76%
4	MEDICAID MANAGED CARE	\$339,060	\$332,914	(\$6,146)	-2%
5	CHAMPUS/TRICARE	\$122,063	\$93,215	(\$28,848)	-24%
6	COMMERCIAL INSURANCE	\$806,477	\$150,057	(\$656,420)	-81%
7	NON-GOVERNMENT MANAGED CARE	\$6,157,675	\$6,246,307	\$88,632	1%
8	WORKER'S COMPENSATION	\$461,069	\$444,090	(\$16,979)	-4%
9	SELF- PAY/UNINSURED	\$54,210	\$83,830	\$29,620	55%
10	SAGA	\$77,267	\$69,998	(\$7,269)	-9%

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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
11	OTHER	\$719,448	\$485,849	(\$233,599)	-32%
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$24,886,694</b>	<b>\$22,868,987</b>	<b>(\$2,017,707)</b>	<b>-8%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$6,458,350	\$6,226,483	(\$231,867)	-4%
2	MEDICARE MANAGED CARE	\$110,567	\$184,754	\$74,187	67%
3	MEDICAID	\$214,530	\$47,361	(\$167,169)	-78%
4	MEDICAID MANAGED CARE	\$267,684	\$411,273	\$143,589	54%
5	CHAMPUS/TRICARE	\$26,254	\$28,826	\$2,572	10%
6	COMMERCIAL INSURANCE	\$1,908,240	\$1,360,837	(\$547,403)	-29%
7	NON-GOVERNMENT MANAGED CARE	\$15,890,192	\$15,717,953	(\$172,239)	-1%
8	WORKER'S COMPENSATION	\$538,011	\$665,187	\$127,176	24%
9	SELF- PAY/UNINSURED	\$224,699	\$606,321	\$381,622	170%
10	SAGA	\$74,655	\$113,894	\$39,239	53%
11	OTHER	\$509,323	\$474,152	(\$35,171)	-7%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$26,222,505</b>	<b>\$25,837,041</b>	<b>(\$385,464)</b>	<b>-1%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$22,250,345	\$20,904,883	(\$1,345,462)	-6%
2	MEDICARE MANAGED CARE	\$345,070	\$439,103	\$94,033	27%
3	MEDICAID	\$337,457	\$77,339	(\$260,118)	-77%
4	MEDICAID MANAGED CARE	\$606,744	\$744,187	\$137,443	23%
5	CHAMPUS/TRICARE	\$148,317	\$122,041	(\$26,276)	-18%
6	COMMERCIAL INSURANCE	\$2,714,717	\$1,510,894	(\$1,203,823)	-44%
7	NON-GOVERNMENT MANAGED CARE	\$22,047,867	\$21,964,260	(\$83,607)	0%
8	WORKER'S COMPENSATION	\$999,080	\$1,109,277	\$110,197	11%
9	SELF- PAY/UNINSURED	\$278,909	\$690,151	\$411,242	147%
10	SAGA	\$151,922	\$183,892	\$31,970	21%
11	OTHER	\$1,228,771	\$960,001	(\$268,770)	-22%
	<b>TOTAL NET REVENUE</b>	<b>\$51,109,199</b>	<b>\$48,706,028</b>	<b>(\$2,403,171)</b>	<b>-5%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	1,548	1,456	(92)	-6%
2	MEDICARE MANAGED CARE	26	28	2	8%
3	MEDICAID	20	41	21	105%
4	MEDICAID MANAGED CARE	98	101	3	3%
5	CHAMPUS/TRICARE	11	2	(9)	-82%
6	COMMERCIAL INSURANCE	87	54	(33)	-38%
7	NON-GOVERNMENT MANAGED CARE	756	724	(32)	-4%
8	WORKER'S COMPENSATION	29	27	(2)	-7%
9	SELF- PAY/UNINSURED	79	72	(7)	-9%
10	SAGA	15	14	(1)	-7%
11	OTHER	165	139	(26)	-16%
	<b>TOTAL DISCHARGES</b>	<b>2,834</b>	<b>2,658</b>	<b>(176)</b>	<b>-6%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	8,103	7,860	(243)	-3%
2	MEDICARE MANAGED CARE	160	141	(19)	-12%
3	MEDICAID	72	118	46	64%
4	MEDICAID MANAGED CARE	231	242	11	5%
5	CHAMPUS/TRICARE	35	9	(26)	-74%
6	COMMERCIAL INSURANCE	288	209	(79)	-27%
7	NON-GOVERNMENT MANAGED CARE	2,039	2,122	83	4%
8	WORKER'S COMPENSATION	89	76	(13)	-15%
9	SELF- PAY/UNINSURED	210	205	(5)	-2%
10	SAGA	58	48	(10)	-17%
11	OTHER	521	436	(85)	-16%

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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
	<b>TOTAL PATIENT DAYS</b>	<b>11,806</b>	<b>11,466</b>	<b>(340)</b>	<b>-3%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	30,223	29,014	(1,209)	-4%
2	MEDICARE MANAGED CARE	786	885	99	13%
3	MEDICAID	639	516	(123)	-19%
4	MEDICAID MANAGED CARE	1,584	1,758	174	11%
5	CHAMPUS/TRICARE	116	89	(27)	-23%
6	COMMERCIAL INSURANCE	3,161	2,372	(789)	-25%
7	NON-GOVERNMENT MANAGED CARE	30,375	28,422	(1,953)	-6%
8	WORKER'S COMPENSATION	1,195	1,192	(3)	0%
9	SELF- PAY/UNINSURED	3,580	3,658	78	2%
10	SAGA	405	141	(264)	-65%
11	OTHER	2,917	859	(2,058)	-71%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>74,981</b>	<b>68,906</b>	<b>(6,075)</b>	<b>-8%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$2,633,053	\$3,174,738	\$541,685	21%
2	MEDICARE MANAGED CARE	\$39,163	\$85,253	\$46,090	118%
3	MEDICAID	\$160,212	\$97,073	(\$63,139)	-39%
4	MEDICAID MANAGED CARE	\$484,345	\$625,427	\$141,082	29%
5	CHAMPUS/TRICARE	\$29,174	\$25,001	(\$4,173)	-14%
6	COMMERCIAL INSURANCE	\$479,814	\$859,706	\$379,892	79%
7	NON-GOVERNMENT MANAGED CARE	\$5,675,734	\$5,331,290	(\$344,444)	-6%
8	WORKER'S COMPENSATION	\$345,896	\$365,898	\$20,002	6%
9	SELF- PAY/UNINSURED	\$1,453,227	\$1,418,308	(\$34,919)	-2%
10	SAGA	\$140,780	\$191,577	\$50,797	36%
11	OTHER	\$795,763	\$930,713	\$134,950	17%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$12,237,161</b>	<b>\$13,104,984</b>	<b>\$867,823</b>	<b>7%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$662,076	\$802,409	\$140,333	21%
2	MEDICARE MANAGED CARE	\$7,688	\$18,509	\$10,821	141%
3	MEDICAID	\$14,851	\$18,706	\$3,855	26%
4	MEDICAID MANAGED CARE	\$110,118	\$64,674	(\$45,444)	-41%
5	CHAMPUS/TRICARE	\$10,644	\$9,619	(\$1,025)	-10%
6	COMMERCIAL INSURANCE	\$162,370	\$81,221	(\$81,149)	-50%
7	NON-GOVERNMENT MANAGED CARE	\$2,577,718	\$2,178,449	(\$399,269)	-15%
8	WORKER'S COMPENSATION	\$59,728	\$21,737	(\$37,991)	-64%
9	SELF- PAY/UNINSURED	\$88,834	\$438,146	\$349,312	393%
10	SAGA	\$32,175	\$42,837	\$10,662	33%
11	OTHER	\$82,710	\$92,660	\$9,950	12%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$3,808,912</b>	<b>\$3,768,967</b>	<b>(\$39,945)</b>	<b>-1%</b>
<b>C.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	2,762	2,961	199	7%
2	MEDICARE MANAGED CARE	34	77	43	126%
3	MEDICAID	148	223	75	51%
4	MEDICAID MANAGED CARE	724	773	49	7%
5	CHAMPUS/TRICARE	48	34	(14)	-29%
6	COMMERCIAL INSURANCE	588	813	225	38%
7	NON-GOVERNMENT MANAGED CARE	6,959	6,428	(531)	-8%
8	WORKER'S COMPENSATION	594	528	(66)	-11%
9	SELF- PAY/UNINSURED	1,821	1,652	(169)	-9%
10	SAGA	151	141	(10)	-7%
11	OTHER	927	859	(68)	-7%

**ESSENT-SHARON 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
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	14,756	14,489	(267)	-2%

**ESSENT-SHARON 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>
<b>I. OPERATING EXPENSE BY CATEGORY</b>					
<b>A. Salaries &amp; Wages:</b>					
1	Nursing Salaries	\$7,074,932	\$6,533,428	(\$541,504)	-8%
2	Physician Salaries	\$557,887	\$0	(\$557,887)	-100%
3	Non-Nursing, Non-Physician Salaries	\$9,366,706	\$9,011,172	(\$355,534)	-4%
	<b>Total Salaries &amp; Wages</b>	<b>\$16,999,525</b>	<b>\$15,544,600</b>	<b>(\$1,454,925)</b>	<b>-9%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$1,675,642	\$1,425,678	(\$249,964)	-15%
2	Physician Fringe Benefits	\$132,023	\$0	(\$132,023)	-100%
3	Non-Nursing, Non-Physician Fringe Benefits	\$2,217,419	\$1,932,907	(\$284,512)	-13%
	<b>Total Fringe Benefits</b>	<b>\$4,025,084</b>	<b>\$3,358,585</b>	<b>(\$666,499)</b>	<b>-17%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$498,177	\$739,745	\$241,568	48%
2	Physician Fees	\$1,170,401	\$1,137,397	(\$33,004)	-3%
3	Non-Nursing, Non-Physician Fees	\$327,901	\$104,193	(\$223,708)	-68%
	<b>Total Contractual Labor Fees</b>	<b>\$1,996,479</b>	<b>\$1,981,335</b>	<b>(\$15,144)</b>	<b>-1%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$4,845,494	\$4,879,877	\$34,383	1%
2	Pharmaceutical Costs	\$1,384,937	\$1,156,384	(\$228,553)	-17%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$6,230,431</b>	<b>\$6,036,261</b>	<b>(\$194,170)</b>	<b>-3%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$1,548,381	\$1,575,185	\$26,804	2%
2	Depreciation-Equipment	\$1,641,905	\$1,847,561	\$205,656	13%
3	Amortization	\$282,865	\$0	(\$282,865)	-100%
	<b>Total Depreciation and Amortization</b>	<b>\$3,473,151</b>	<b>\$3,422,746</b>	<b>(\$50,405)</b>	<b>-1%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$3,536,277	\$2,953,540	(\$582,737)	-16%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$2,918,034	\$2,032,328	(\$885,706)	-30%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$946,848	\$687,844	(\$259,004)	-27%
<b>I. Utilities:</b>					
1	Water	\$125,051	\$115,488	(\$9,563)	-8%
2	Natural Gas	\$24,186	\$26,348	\$2,162	9%
3	Oil	\$614,482	\$483,152	(\$131,330)	-21%
4	Electricity	\$953,090	\$820,953	(\$132,137)	-14%
5	Telephone	\$78,342	\$94,380	\$16,038	20%
6	Other Utilities	\$38,043	\$38,745	\$702	2%
	<b>Total Utilities</b>	<b>\$1,833,194</b>	<b>\$1,579,066</b>	<b>(\$254,128)</b>	<b>-14%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$90,350	\$80,100	(\$10,250)	-11%
2	Legal Fees	\$365,312	\$178,031	(\$187,281)	-51%
3	Consulting Fees	\$166,932	\$149,024	(\$17,908)	-11%
4	Dues and Membership	\$0	\$0	\$0	0%
5	Equipment Leases	\$286,669	\$276,766	(\$9,903)	-3%
6	Building Leases	\$0	\$0	\$0	0%
7	Repairs and Maintenance	\$1,667,761	\$1,707,964	\$40,203	2%
8	Insurance	\$620,887	\$646,792	\$25,905	4%

**ESSENT-SHARON 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	\$74,413	\$28,506	(\$45,907)	-62%
10	Conferences	\$0	\$0	\$0	0%
11	Property Tax	\$300,210	\$344,486	\$44,276	15%
12	General Supplies	\$293,052	\$254,011	(\$39,041)	-13%
13	Licenses and Subscriptions	\$72,296	\$48,174	(\$24,122)	-33%
14	Postage and Shipping	\$51,263	\$42,283	(\$8,980)	-18%
15	Advertising	\$304,838	\$247,486	(\$57,352)	-19%
16	Other Business Expenses	\$7,390,993	\$8,083,433	\$692,440	9%
	<b>Total Business Expenses</b>	<b>\$11,684,976</b>	<b>\$12,087,056</b>	<b>\$402,080</b>	<b>3%</b>
<b>K.</b>	<b><u>Other Operating Expense:</u></b>				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$53,643,999</b>	<b>\$49,683,361</b>	<b>(\$3,960,638)</b>	<b>-7%</b>
	<b>*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				
<b>II.</b>	<b><u>OPERATING EXPENSE BY DEPARTMENT</u></b>				
<b>A.</b>	<b><u>General Services:</u></b>				
1	General Administration	\$7,344,995	\$6,593,062	(\$751,933)	-10%
2	General Accounting	\$0	\$0	\$0	0%
3	Patient Billing & Collection	\$0	\$0	\$0	0%
4	Admitting / Registration Office	\$0	\$0	\$0	0%
5	Data Processing	\$0	\$0	\$0	0%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$0	\$0	\$0	0%
8	Public Relations	\$521,281	\$448,808	(\$72,473)	-14%
9	Purchasing	\$0	\$0	\$0	0%
10	Dietary and Cafeteria	\$895,825	\$839,961	(\$55,864)	-6%
11	Housekeeping	\$573,854	\$484,917	(\$88,937)	-15%
12	Laundry & Linen	\$259,951	\$220,395	(\$39,556)	-15%
13	Operation of Plant	\$2,989,602	\$2,694,259	(\$295,343)	-10%
14	Security	\$0	\$0	\$0	0%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$0	\$0	\$0	0%
17	Pharmacy Department	\$2,162,034	\$1,976,130	(\$185,904)	-9%
18	Other General Services	\$16,971,583	\$15,263,842	(\$1,707,741)	-10%
	<b>Total General Services</b>	<b>\$31,719,125</b>	<b>\$28,521,374</b>	<b>(\$3,197,751)</b>	<b>-10%</b>
<b>B.</b>	<b><u>Professional Services:</u></b>				
1	Medical Care Administration	\$851,875	\$902,839	\$50,964	6%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$845,298	\$956,989	\$111,691	13%
4	Medical Records	\$0	\$0	\$0	0%
5	Social Service	\$325,115	\$222,915	(\$102,200)	-31%
6	Other Professional Services	\$0	\$0	\$0	0%
	<b>Total Professional Services</b>	<b>\$2,022,288</b>	<b>\$2,082,743</b>	<b>\$60,455</b>	<b>3%</b>
<b>C.</b>	<b><u>Special Services:</u></b>				
1	Operating Room	\$1,918,975	\$1,851,293	(\$67,682)	-4%
2	Recovery Room	\$207,445	\$195,456	(\$11,989)	-6%
3	Anesthesiology	\$36,172	\$37,148	\$976	3%
4	Delivery Room	\$366,013	\$285,056	(\$80,957)	-22%
5	Diagnostic Radiology	\$1,915,910	\$1,713,927	(\$201,983)	-11%
6	Diagnostic Ultrasound	\$0	\$0	\$0	0%
7	Radiation Therapy	\$0	\$0	\$0	0%

**ESSENT-SHARON 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	\$395,046	\$339,983	(\$55,063)	-14%
9	CT Scan	\$241,564	\$247,539	\$5,975	2%
10	Laboratory	\$2,867,695	\$2,770,169	(\$97,526)	-3%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$480,410	\$348,408	(\$132,002)	-27%
14	Electroencephalography	\$6,154	\$3,723	(\$2,431)	-40%
15	Occupational Therapy	\$88,799	\$79,109	(\$9,690)	-11%
16	Speech Pathology	\$71,570	\$75,875	\$4,305	6%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$432,196	\$364,244	(\$67,952)	-16%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$46,782	\$101,864	\$55,082	118%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$1,748,057	\$1,706,368	(\$41,689)	-2%
25	MRI	\$300,140	\$301,401	\$1,261	0%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$553,524	\$601,657	\$48,133	9%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,303,219	\$2,305,762	\$2,543	0%
	<b>Total Special Services</b>	<b>\$13,979,671</b>	<b>\$13,328,982</b>	<b>(\$650,689)</b>	<b>-5%</b>
<b>D.</b>	<b><u>Routine Services:</u></b>				
1	Medical & Surgical Units	\$2,687,281	\$2,567,682	(\$119,599)	-4%
2	Intensive Care Unit	\$1,081,956	\$1,092,334	\$10,378	1%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$1,834,027	\$1,839,351	\$5,324	0%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
7	Newborn Nursery Unit	\$319,651	\$250,895	(\$68,756)	-22%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
	<b>Total Routine Services</b>	<b>\$5,922,915</b>	<b>\$5,750,262</b>	<b>(\$172,653)</b>	<b>-3%</b>
<b>E.</b>	<b><u>Other Departments:</u></b>				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	<b>Total Operating Expenses - All Departments*</b>	<b>\$53,643,999</b>	<b>\$49,683,361</b>	<b>(\$3,960,638)</b>	<b>-7%</b>
	<b>*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				

ESSENT-SHARON 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
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$50,528,737	\$ 54,645,472	\$51,853,289
2	Other Operating Revenue	681,293	671,644	543,474
3	Total Operating Revenue	\$51,210,030	\$55,317,116	\$52,396,763
4	Total Operating Expenses	49,475,601	53,643,999	49,683,361
5	Income/(Loss) From Operations	\$1,734,429	\$1,673,117	\$2,713,402
6	Total Non-Operating Revenue	0	0	0
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,734,429	\$1,673,117	\$2,713,402
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	3.39%	3.02%	5.18%
2	Hospital Non Operating Margin	0.00%	0.00%	0.00%
3	Hospital Total Margin	3.39%	3.02%	5.18%
4	Income/(Loss) From Operations	\$1,734,429	\$1,673,117	\$2,713,402
5	Total Operating Revenue	\$51,210,030	\$55,317,116	\$52,396,763
6	Total Non-Operating Revenue	\$0	\$0	\$0
7	Total Revenue	\$51,210,030	\$55,317,116	\$52,396,763
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,734,429	\$1,673,117	\$2,713,402
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$11,400,566	\$13,094,068	\$15,453,591
2	Hospital Total Net Assets	\$11,400,566	\$13,094,068	\$15,453,591
3	Hospital Change in Total Net Assets	\$11,400,566	\$1,693,502	\$2,359,523
4	Hospital Change in Total Net Assets %	0.0%	14.9%	18.0%
<b>D. <u>Cost Data Summary</u></b>				
1	<b><u>Ratio of Cost to Charges</u></b>	<b>0.46</b>	<b>0.47</b>	<b>0.43</b>
2	Total Operating Expenses	\$49,475,601	\$54,135,451	\$49,683,361
3	Total Gross Revenue	\$106,264,639	\$113,481,757	\$114,452,317
4	Total Other Operating Revenue	\$681,293	\$496,271	\$543,474
5	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.16</b>	<b>1.13</b>	<b>1.18</b>
6	Total Non-Government Payments	\$24,460,714	\$26,040,573	\$25,274,582

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
7	Total Uninsured Payments	\$589,716	\$278,909	\$690,151
8	Total Non-Government Charges	\$47,707,723	\$51,268,176	\$51,095,457
9	Total Uninsured Charges	\$3,053,966	\$3,267,059	\$2,841,994
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.87</b>	<b>0.87</b>	<b>0.89</b>
11	Total Medicare Payments	\$20,790,988	\$22,595,415	\$21,343,986
12	Total Medicare Charges	\$51,492,379	\$54,988,409	\$55,362,105
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.76</b>	<b>0.73</b>	<b>0.58</b>
14	Total Medicaid Payments	\$790,876	\$944,201	\$821,526
15	Total Medicaid Charges	\$2,248,070	\$2,718,385	\$3,260,548
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$1,357,809</b>	<b>\$2,044,048</b>	<b>\$1,461,984</b>
17	Charity Care	\$438,669	\$767,308	\$430,330
18	Bad Debts	\$2,496,357	\$3,536,277	\$2,953,540
19	Total Uncompensated Care	\$2,935,026	\$4,303,585	\$3,383,870
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>2.7%</b>	<b>3.8%</b>	<b>2.9%</b>
21	Total Operating Expenses	\$49,475,601	\$54,135,451	\$49,683,361
<b>E. <u>Liquidity Measures Summary</u></b>				
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1.85</b>	<b>1.61</b>	<b>1.52</b>
2	Total Current Assets	\$12,179,151	\$10,114,947	\$10,672,270
3	Total Current Liabilities	\$6,597,855	\$6,300,985	\$7,032,020
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>0</b>	<b>0</b>	<b>0</b>
5	Cash and Cash Equivalents	\$0	\$0	\$0
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$0	\$0	\$0
8	Total Operating Expenses	\$49,475,601	\$53,643,999	\$49,683,361
9	Depreciation Expense	\$2,751,597	\$3,473,151	\$3,422,746
10	Operating Expenses less Depreciation Expense	\$46,724,004	\$50,170,848	\$46,260,615
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>42.96</b>	<b>42.75</b>	<b>41.33</b>

ESSENT-SHARON 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	\$ 5,961,568	\$ 6,608,367	\$ 6,306,510
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$15,025	\$208,044	\$435,106
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 5,946,543	\$ 6,400,323	\$ 5,871,404
16	Total Net Patient Revenue	\$50,528,737	\$ 54,645,472	\$ 51,853,289
17	<b>Average Payment Period</b>	<b>51.54</b>	<b>45.84</b>	<b>55.48</b>
18	Total Current Liabilities	\$6,597,855	\$6,300,985	\$7,032,020
19	Total Operating Expenses	\$49,475,601	\$53,643,999	\$49,683,361
20	Depreciation Expense	\$2,751,597	\$3,473,151	\$3,422,746
21	Total Operating Expenses less Depreciation Expense	\$46,724,004	\$50,170,848	\$46,260,615
<b>F. Solvency Measures Summary</b>				
1	<b>Equity Financing Ratio</b>	<b>20.2</b>	<b>22.6</b>	<b>25.7</b>
2	Total Net Assets	\$11,400,566	\$13,094,068	\$15,453,591
3	Total Assets	\$56,418,546	\$57,898,736	\$60,025,896
4	<b>Cash Flow to Total Debt Ratio</b>	<b>10.9</b>	<b>12.6</b>	<b>14.9</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,734,429	\$1,673,117	\$2,713,402
6	Depreciation Expense	\$2,751,597	\$3,473,151	\$3,422,746
7	Excess of Revenues Over Expenses and Depreciation Expense	\$4,486,026	\$5,146,268	\$6,136,148
8	Total Current Liabilities	\$6,597,855	\$6,300,985	\$7,032,020
9	Total Long Term Debt	\$34,408,057	\$34,387,500	\$34,037,500
10	Total Current Liabilities and Total Long Term Debt	\$41,005,912	\$40,688,485	\$41,069,520
11	<b>Long Term Debt to Capitalization Ratio</b>	<b>75.1</b>	<b>72.4</b>	<b>68.8</b>
12	Total Long Term Debt	\$34,408,057	\$34,387,500	\$34,037,500
13	Total Net Assets	\$11,400,566	\$13,094,068	\$15,453,591
14	Total Long Term Debt and Total Net Assets	\$45,808,623	\$47,481,568	\$49,491,091
15	<b>Debt Service Coverage Ratio</b>	<b>3.6</b>	<b>2.8</b>	<b>3.4</b>
16	Excess Revenues over Expenses	\$1,734,429	\$1,673,117	\$2,713,402
17	Interest Expense	\$1,729,608	\$2,918,034	\$2,032,328
18	Depreciation and Amortization Expense	\$2,751,597	\$3,473,151	\$3,422,746

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
19	Principal Payments	\$0	\$0	\$350,000
<b>G. <u>Other Financial Ratios</u></b>				
20	<b><u>Average Age of Plant</u></b>	<b>3.7</b>	<b>3.9</b>	<b>4.8</b>
21	Accumulated Depreciation	\$10,264,761	\$13,448,037	\$16,284,093
22	Depreciation and Amortization Expense	\$2,751,597	\$3,473,151	\$3,422,746
<b>H. <u>Utilization Measures Summary</u></b>				
1	Patient Days	11,470	11,806	11,466
2	Discharges	2,837	2,834	2,658
3	ALOS	4.0	4.2	4.3
4	Staffed Beds	47	47	47
5	Available Beds	-	-	94
6	Licensed Beds	94	94	94
6	Occupancy of Staffed Beds	66.9%	68.8%	66.8%
7	Occupancy of Available Beds	33.4%	34.4%	33.4%
8	Full Time Equivalent Employees	290.1	283.0	255.3
<b>I. <u>Hospital Gross Revenue Payer Mix Percentage</u></b>				
1	Non-Government Gross Revenue Payer Mix Percentage	42.0%	42.3%	42.2%
2	Medicare Gross Revenue Payer Mix Percentage	48.5%	48.5%	48.4%
3	Medicaid Gross Revenue Payer Mix Percentage	2.1%	2.4%	2.8%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	4.5%	3.8%	4.0%
5	Uninsured Gross Revenue Payer Mix Percentage	2.9%	2.9%	2.5%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.1%	0.2%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$44,653,757	\$48,001,117	\$48,253,463
9	Medicare Gross Revenue (Charges)	\$51,492,379	\$54,988,409	\$55,362,105
10	Medicaid Gross Revenue (Charges)	\$2,248,070	\$2,718,385	\$3,260,548
11	Other Medical Assistance Gross Revenue (Charges)	\$4,761,544	\$4,313,174	\$4,575,789
12	Uninsured Gross Revenue (Charges)	\$3,053,966	\$3,267,059	\$2,841,994
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$54,923	\$193,613	\$158,418
14	Total Gross Revenue (Charges)	\$106,264,639	\$113,481,757	\$114,452,317
<b>J. <u>Hospital Net Revenue Payer Mix Percentage</u></b>				
1	Non-Government Net Revenue Payer Mix Percentage	50.0%	50.4%	50.5%

ESSENT-SHARON 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
2	Medicare Net Revenue Payer Mix Percentage	43.5%	44.2%	43.8%
3	Medicaid Net Revenue Payer Mix Percentage	1.7%	1.8%	1.7%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	3.6%	2.7%	2.3%
5	Uninsured Net Revenue Payer Mix Percentage	1.2%	0.5%	1.4%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.0%	0.3%	0.3%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$23,870,998	\$25,761,664	\$24,584,431
9	Medicare Net Revenue (Payments)	\$20,790,988	\$22,595,415	\$21,343,986
10	Medicaid Net Revenue (Payments)	\$790,876	\$944,201	\$821,526
11	Other Medical Assistance Net Revenue (Payments)	\$1,696,283	\$1,380,693	\$1,143,893
12	Uninsured Net Revenue (Payments)	\$589,716	\$278,909	\$690,151
13	CHAMPUS / TRICARE Net Revenue Payments)	\$23,255	\$148,317	\$122,041
14	Total Net Revenue (Payments)	\$47,762,116	\$51,109,199	\$48,706,028
<b>K. Discharges</b>				
1	Non-Government (Including Self Pay / Uninsured)	924	951	877
2	Medicare	1,581	1,574	1,484
3	Medical Assistance	332	298	295
4	Medicaid	123	118	142
5	Other Medical Assistance	209	180	153
6	CHAMPUS / TRICARE	-	11	2
7	Uninsured (Included In Non-Government)	78	79	72
8	Total	2,837	2,834	2,658
<b>L. Case Mix Index</b>				
1	Non-Government (Including Self Pay / Uninsured)	1.106100	0.974900	1.029900
2	Medicare	1.153400	1.159100	1.132200
3	Medical Assistance	0.959067	0.856986	0.934078
4	Medicaid	1.048900	0.934000	0.778900
5	Other Medical Assistance	0.906200	0.806500	1.078100
6	CHAMPUS / TRICARE	0.000000	0.529200	2.097100
7	Uninsured (Included In Non-Government)	1.079200	0.946700	0.834800
8	Total Case Mix Index	1.115252	1.063075	1.077183
<b>M. Emergency Department Visits</b>				
1	Emergency Room - Treated and Admitted	1,618	1,607	1,524
2	Emergency Room - Treated and Discharged	14,386	14,756	14,489
3	Total Emergency Room Visits	16,004	16,363	16,013

**ESSENT-SHARON 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
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$1,832	\$1,832	0%
4	Outpatient Payments	\$0	\$422	\$422	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	1	1	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$1,832</b>	<b>\$1,832</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$422</b>	<b>\$422</b>	<b>0%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$18,376	\$129,512	\$111,136	605%
4	Outpatient Payments	\$5,477	\$26,603	\$21,126	386%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	4	105	101	2525%
8	Emergency Department Outpatient Visits	4	2	(2)	-50%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$18,376</b>	<b>\$129,512</b>	<b>\$111,136</b>	<b>605%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$5,477</b>	<b>\$26,603</b>	<b>\$21,126</b>	<b>386%</b>

**ESSENT-SHARON 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
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$11,144	\$11,144	0%
2	Inpatient Payments	\$0	\$5,734	\$5,734	0%
3	Outpatient Charges	\$36	\$47,234	\$47,198	131106%
4	Outpatient Payments	\$0	\$9,791	\$9,791	0%
5	Discharges	0	1	1	0%
6	Patient Days	0	4	4	0%
7	Outpatient Visits (Excludes ED Visits)	1	30	29	2900%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$36</b>	<b>\$58,378</b>	<b>\$58,342</b>	<b>162061%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$15,525</b>	<b>\$15,525</b>	<b>0%</b>
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$175,939	\$302,891	\$126,952	72%
2	Inpatient Payments	\$88,917	\$137,142	\$48,225	54%
3	Outpatient Charges	\$119,776	\$169,790	\$50,014	42%
4	Outpatient Payments	\$31,325	\$45,069	\$13,744	44%
5	Discharges	10	12	2	20%
6	Patient Days	50	78	28	56%
7	Outpatient Visits (Excludes ED Visits)	107	133	26	24%
8	Emergency Department Outpatient Visits	18	32	14	78%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$295,715</b>	<b>\$472,681</b>	<b>\$176,966</b>	<b>60%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$120,242</b>	<b>\$182,211</b>	<b>\$61,969</b>	<b>52%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$0	\$58,336	\$58,336	0%
2	Inpatient Payments	\$0	\$2,604	\$2,604	0%
3	Outpatient Charges	\$1,838	\$5,133	\$3,295	179%
4	Outpatient Payments	\$776	\$910	\$134	17%
5	Discharges	0	2	2	0%
6	Patient Days	0	13	13	0%
7	Outpatient Visits (Excludes ED Visits)	2	7	5	250%
8	Emergency Department Outpatient Visits	3	0	(3)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,838</b>	<b>\$63,469</b>	<b>\$61,631</b>	<b>3353%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$776</b>	<b>\$3,514</b>	<b>\$2,738</b>	<b>353%</b>

**ESSENT-SHARON 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
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$71,286	\$15,133	(\$56,153)	-79%
2	Inpatient Payments	\$25,805	\$5,889	(\$19,916)	-77%
3	Outpatient Charges	\$14,847	\$11,341	(\$3,506)	-24%
4	Outpatient Payments	\$1,010	\$4,250	\$3,240	321%
5	Discharges	3	1	(2)	-67%
6	Patient Days	34	3	(31)	-91%
7	Outpatient Visits (Excludes ED Visits)	9	4	(5)	-56%
8	Emergency Department Outpatient Visits	1	6	5	500%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$86,133</b>	<b>\$26,474</b>	<b>(\$59,659)</b>	<b>-69%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$26,815</b>	<b>\$10,139</b>	<b>(\$16,676)</b>	<b>-62%</b>
<b>I. AETNA</b>					
1	Inpatient Charges	\$0	\$61,611	\$61,611	0%
2	Inpatient Payments	\$0	\$35,780	\$35,780	0%
3	Outpatient Charges	\$58,756	\$71,085	\$12,329	21%
4	Outpatient Payments	\$31,122	\$20,043	(\$11,079)	-36%
5	Discharges	0	5	5	0%
6	Patient Days	0	20	20	0%
7	Outpatient Visits (Excludes ED Visits)	48	52	4	8%
8	Emergency Department Outpatient Visits	0	9	9	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$58,756</b>	<b>\$132,696</b>	<b>\$73,940</b>	<b>126%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$31,122</b>	<b>\$55,823</b>	<b>\$24,701</b>	<b>79%</b>

**ESSENT-SHARON 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
<b>J. HUMANA</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$20,765	\$20,765	0%
4	Outpatient Payments	\$0	\$4,986	\$4,986	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	14	14	0%
8	Emergency Department Outpatient Visits	0	6	6	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$20,765</b>	<b>\$20,765</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$4,986</b>	<b>\$4,986</b>	<b>0%</b>
<b>K. SECURE HORIZONS</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**ESSENT-SHARON 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
<b>M. UNIVERSAL AMERICAN</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N. EVERCARE</b>					
1	Inpatient Charges	\$304,144	\$105,084	(\$199,060)	-65%
2	Inpatient Payments	\$119,781	\$67,200	(\$52,581)	-44%
3	Outpatient Charges	\$150,614	\$184,809	\$34,195	23%
4	Outpatient Payments	\$40,857	\$72,680	\$31,823	78%
5	Discharges	13	7	(6)	-46%
6	Patient Days	76	23	(53)	-70%
7	Outpatient Visits (Excludes ED Visits)	581	462	(119)	-20%
8	Emergency Department Outpatient Visits	8	22	14	175%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$454,758</b>	<b>\$289,893</b>	<b>(\$164,865)</b>	<b>-36%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$160,638</b>	<b>\$139,880</b>	<b>(\$20,758)</b>	<b>-13%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$551,369</b>	<b>\$554,199</b>	<b>\$2,830</b>	<b>1%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$234,503</b>	<b>\$254,349</b>	<b>\$19,846</b>	<b>8%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$364,243</b>	<b>\$641,501</b>	<b>\$277,258</b>	<b>76%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$110,567</b>	<b>\$184,754</b>	<b>\$74,187</b>	<b>67%</b>
	<b>TOTAL DISCHARGES</b>	<b>26</b>	<b>28</b>	<b>2</b>	<b>8%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>160</b>	<b>141</b>	<b>(19)</b>	<b>-12%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>752</b>	<b>808</b>	<b>56</b>	<b>7%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>34</b>	<b>77</b>	<b>43</b>	<b>126%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$915,612</b>	<b>\$1,195,700</b>	<b>\$280,088</b>	<b>31%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$345,070</b>	<b>\$439,103</b>	<b>\$94,033</b>	<b>27%</b>

**ESSENT-SHARON 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
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$478,979	\$53,998	(\$424,981)	-89%
2	Inpatient Payments	\$206,629	\$23,550	(\$183,079)	-89%
3	Outpatient Charges	\$673,798	\$250,275	(\$423,523)	-63%
4	Outpatient Payments	\$164,216	\$65,098	(\$99,118)	-60%
5	Discharges	62	9	(53)	-85%
6	Patient Days	150	16	(134)	-89%
7	Outpatient Visits (Excludes ED Visits)	633	146	(487)	-77%
8	Emergency Department Outpatient Visits	405	126	(279)	-69%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,152,777</b>	<b>\$304,273</b>	<b>(\$848,504)</b>	<b>-74%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$370,845</b>	<b>\$88,648</b>	<b>(\$282,197)</b>	<b>-76%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$75,923	\$347,367	\$271,444	358%
2	Inpatient Payments	\$55,923	\$143,757	\$87,834	157%
3	Outpatient Charges	\$93,095	\$824,721	\$731,626	786%
4	Outpatient Payments	\$22,689	\$212,935	\$190,246	838%
5	Discharges	10	44	34	340%
6	Patient Days	28	109	81	289%
7	Outpatient Visits (Excludes ED Visits)	32	558	526	1644%
8	Emergency Department Outpatient Visits	67	350	283	422%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$169,018</b>	<b>\$1,172,088</b>	<b>\$1,003,070</b>	<b>593%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$78,612</b>	<b>\$356,692</b>	<b>\$278,080</b>	<b>354%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$116,191	\$0	(\$116,191)	-100%
2	Inpatient Payments	\$30,361	\$0	(\$30,361)	-100%
3	Outpatient Charges	\$223,605	\$16,898	(\$206,707)	-92%
4	Outpatient Payments	\$54,496	\$6,537	(\$47,959)	-88%
5	Discharges	13	0	(13)	-100%
6	Patient Days	27	0	(27)	-100%
7	Outpatient Visits (Excludes ED Visits)	132	27	(105)	-80%
8	Emergency Department Outpatient Visits	108	5	(103)	-95%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$339,796</b>	<b>\$16,898</b>	<b>(\$322,898)</b>	<b>-95%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$84,857</b>	<b>\$6,537</b>	<b>(\$78,320)</b>	<b>-92%</b>

**ESSENT-SHARON 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
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$59,550	\$208,705	\$149,155	250%
2	Inpatient Payments	\$29,591	\$91,869	\$62,278	210%
3	Outpatient Charges	\$99,674	\$346,290	\$246,616	247%
4	Outpatient Payments	\$24,292	\$86,149	\$61,857	255%
5	Discharges	10	25	15	150%
6	Patient Days	21	63	42	200%
7	Outpatient Visits (Excludes ED Visits)	48	166	118	246%
8	Emergency Department Outpatient Visits	138	237	99	72%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$159,224</b>	<b>\$554,995</b>	<b>\$395,771</b>	<b>249%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$53,883</b>	<b>\$178,018</b>	<b>\$124,135</b>	<b>230%</b>
<b>E. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$503	\$503	0%
4	Outpatient Payments	\$0	\$377	\$377	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	1	1	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$503</b>	<b>\$503</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$377</b>	<b>\$377</b>	<b>0%</b>
<b>F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>					
1	Inpatient Charges	\$26,566	\$0	(\$26,566)	-100%
2	Inpatient Payments	\$16,556	\$0	(\$16,556)	-100%
3	Outpatient Charges	\$8,170	\$0	(\$8,170)	-100%
4	Outpatient Payments	\$1,991	\$0	(\$1,991)	-100%
5	Discharges	3	0	(3)	-100%
6	Patient Days	5	0	(5)	-100%
7	Outpatient Visits (Excludes ED Visits)	15	0	(15)	-100%
8	Emergency Department Outpatient Visits	6	0	(6)	-100%

**ESSENT-SHARON 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	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$34,736</b>	<b>\$0</b>	<b>(\$34,736)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$18,547</b>	<b>\$0</b>	<b>(\$18,547)</b>	<b>-100%</b>
<b>G.</b>	<b>UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$1,335	\$1,335	0%
4	Outpatient Payments	\$0	\$375	\$375	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	3	3	0%
8	Emergency Department Outpatient Visits	0	1	1	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$1,335</b>	<b>\$1,335</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$375</b>	<b>\$375</b>	<b>0%</b>
<b>H.</b>	<b>AETNA</b>				
1	Inpatient Charges	\$0	\$212,013	\$212,013	0%
2	Inpatient Payments	\$0	\$73,738	\$73,738	0%
3	Outpatient Charges	\$0	\$138,038	\$138,038	0%
4	Outpatient Payments	\$0	\$39,802	\$39,802	0%
5	Discharges	0	23	23	0%
6	Patient Days	0	54	54	0%
7	Outpatient Visits (Excludes ED Visits)	0	84	84	0%
8	Emergency Department Outpatient Visits	0	54	54	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$350,051</b>	<b>\$350,051</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$113,540</b>	<b>\$113,540</b>	<b>0%</b>
<b>II.</b>	<b>TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$757,209</b>	<b>\$822,083</b>	<b>\$64,874</b>	<b>9%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$339,060</b>	<b>\$332,914</b>	<b>(\$6,146)</b>	<b>-2%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$1,098,342</b>	<b>\$1,578,060</b>	<b>\$479,718</b>	<b>44%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$267,684</b>	<b>\$411,273</b>	<b>\$143,589</b>	<b>54%</b>
	<b>TOTAL DISCHARGES</b>	<b>98</b>	<b>101</b>	<b>3</b>	<b>3%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>231</b>	<b>242</b>	<b>11</b>	<b>5%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>860</b>	<b>985</b>	<b>125</b>	<b>15%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>724</b>	<b>773</b>	<b>49</b>	<b>7%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,855,551</b>	<b>\$2,400,143</b>	<b>\$544,592</b>	<b>29%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$606,744</b>	<b>\$744,187</b>	<b>\$137,443</b>	<b>23%</b>

**ESSENT-SHARON 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

SHARON HOSPITAL HOLDING CO, INC.					
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
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$0	\$0	\$0	0%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$6,656,193	\$6,542,170	(\$114,023)	-2%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,134,838	\$1,140,534	\$5,696	1%
8	Prepaid Expenses	\$1,173,737	\$1,526,863	\$353,126	30%
9	Other Current Assets	\$1,198,005	\$1,707,366	\$509,361	43%
	<b>Total Current Assets</b>	<b>\$10,162,773</b>	<b>\$10,916,933</b>	<b>\$754,160</b>	<b>7%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$2,805,449	\$5,731,597	\$2,926,148	104%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$56,810,980	\$57,287,531	\$476,551	1%
2	Less: Accumulated Depreciation	\$13,550,284	\$16,518,636	\$2,968,352	\$0
	<b>Property, Plant and Equipment, Net</b>	<b>\$43,260,696</b>	<b>\$40,768,895</b>	<b>(\$2,491,801)</b>	<b>-6%</b>
3	Construction in Progress	\$162,764	\$235,793	\$73,029	45%
	<b>Total Net Fixed Assets</b>	<b>\$43,423,460</b>	<b>\$41,004,688</b>	<b>(\$2,418,772)</b>	<b>-6%</b>
	<b>Total Assets</b>	<b>\$56,391,682</b>	<b>\$57,653,218</b>	<b>\$1,261,536</b>	<b>2%</b>

SHARON HOSPITAL HOLDING CO, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 300 - 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>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$2,293,783	\$1,983,168	(\$310,615)	-14%
2	Salaries, Wages and Payroll Taxes	\$2,711,261	\$3,690,101	\$978,840	36%
3	Due To Third Party Payers	\$208,044	\$435,106	\$227,062	109%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$1,146,567	\$956,509	(\$190,058)	-17%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	<b>Total Current Liabilities</b>	<b>\$6,359,655</b>	<b>\$7,064,884</b>	<b>\$705,229</b>	<b>11%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$34,387,500	\$34,037,500	(\$350,000)	-1%
	<b>Total Long Term Debt</b>	<b>\$34,387,500</b>	<b>\$34,037,500</b>	<b>(\$350,000)</b>	<b>-1%</b>
3	Accrued Pension Liability	\$1,270,000	\$1,407,000	\$137,000	11%
4	Other Long Term Liabilities	\$2,845,183	\$2,094,785	(\$750,398)	-26%
	<b>Total Long Term Liabilities</b>	<b>\$38,502,683</b>	<b>\$37,539,285</b>	<b>(\$963,398)</b>	<b>-3%</b>
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$11,529,344	\$13,049,049	\$1,519,705	13%
2	Temporarily Restricted Net Assets	\$0	\$0	\$0	0%
3	Permanently Restricted Net Assets	\$0	\$0	\$0	0%
	<b>Total Net Assets</b>	<b>\$11,529,344</b>	<b>\$13,049,049</b>	<b>\$1,519,705</b>	<b>13%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$56,391,682</b>	<b>\$57,653,218</b>	<b>\$1,261,536</b>	<b>2%</b>

SHARON HOSPITAL HOLDING CO., INC.					
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
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$114,704,910	\$119,040,764	\$4,335,854	4%
2	Less: Allowances	\$58,413,494	\$64,299,694	\$5,886,200	10%
3	Less: Charity Care	\$767,308	\$430,330	(\$336,978)	-44%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$55,524,108</b>	<b>\$54,310,740</b>	<b>(\$1,213,368)</b>	<b>-2%</b>
5	Other Operating Revenue	\$671,644	\$543,474	(\$128,170)	-19%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$56,195,752</b>	<b>\$54,854,214</b>	<b>(\$1,341,538)</b>	<b>-2%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$17,824,032	\$17,820,772	(\$3,260)	0%
2	Fringe Benefits	\$4,066,438	\$3,452,342	(\$614,096)	-15%
3	Physicians Fees	\$1,323,821	\$1,276,543	(\$47,278)	-4%
4	Supplies and Drugs	\$6,339,785	\$6,139,169	(\$200,616)	-3%
5	Depreciation and Amortization	\$3,568,388	\$3,555,043	(\$13,345)	0%
6	Bad Debts	\$3,827,007	\$2,882,152	(\$944,855)	-25%
7	Interest	\$2,918,034	\$2,032,328	(\$885,706)	-30%
8	Malpractice	\$946,848	\$687,844	(\$259,004)	-27%
9	Other Operating Expenses	\$15,128,465	\$15,134,438	\$5,973	0%
	<b>Total Operating Expenses</b>	<b>\$55,942,818</b>	<b>\$52,980,631</b>	<b>(\$2,962,187)</b>	<b>-5%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$252,934</b>	<b>\$1,873,583</b>	<b>\$1,620,649</b>	<b>641%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	<b>Total Non-Operating Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$252,934</b>	<b>\$1,873,583</b>	<b>\$1,620,649</b>	<b>641%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$252,934</b>	<b>\$1,873,583</b>	<b>\$1,620,649</b>	<b>641%</b>

<b>SHARON HOSPITAL HOLDING CO, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b><u>FY 2007</u></b>	<b><u>FY 2008</u></b>	<b><u>FY 2009</u></b>
<b>A. <u>Parent Corporation Statement of Operations Summary</u></b>				
1	Net Patient Revenue	\$50,528,737	\$55,524,108	\$54,310,740
2	Other Operating Revenue	681,293	671,644	543,474
3	Total Operating Revenue	\$51,210,030	\$56,195,752	\$54,854,214
4	Total Operating Expenses	49,475,601	55,942,818	52,980,631
5	Income/(Loss) From Operations	\$1,734,429	\$252,934	\$1,873,583
6	Total Non-Operating Revenue	0	0	0
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,734,429	\$252,934	\$1,873,583
<b>B. <u>Parent Corporation Profitability Summary</u></b>				
1	Parent Corporation Operating Margin	3.39%	0.45%	3.42%
2	Parent Corporation Non-Operating Margin	0.00%	0.00%	0.00%
3	Parent Corporation Total Margin	3.39%	0.45%	3.42%
4	Income/(Loss) From Operations	\$1,734,429	\$252,934	\$1,873,583
5	Total Operating Revenue	\$51,210,030	\$56,195,752	\$54,854,214
6	Total Non-Operating Revenue	\$0	\$0	\$0
7	Total Revenue	\$51,210,030	\$56,195,752	\$54,854,214
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,734,429	\$252,934	\$1,873,583
<b>C. <u>Parent Corporation Net Assets Summary</u></b>				
1	Parent Corporation Unrestricted Net Assets	\$11,400,566	\$11,529,344	\$13,049,049
2	Parent Corporation Total Net Assets	\$11,400,566	\$11,529,344	\$13,049,049
3	Parent Corporation Change in Total Net Assets	\$11,400,566	\$128,778	\$1,519,705
4	Parent Corporation Change in Total Net Assets %	0.0%	1.1%	13.2%

<b>SHARON HOSPITAL HOLDING CO, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2007</b>	<b>FY 2008</b>	<b>FY 2009</b>
<b>D.</b>	<b><u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1.85</b>	<b>1.60</b>	<b>1.55</b>
2	Total Current Assets	\$12,179,151	\$10,162,773	\$10,916,933
3	Total Current Liabilities	\$6,597,855	\$6,359,655	\$7,064,884
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>0</b>	<b>0</b>	<b>0</b>
5	Cash and Cash Equivalents	\$0	\$0	\$0
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$0	\$0	\$0
8	Total Operating Expenses	\$49,475,601	\$55,942,818	\$52,980,631
9	Depreciation Expense	\$2,751,597	\$3,568,388	\$3,555,043
10	Operating Expenses less Depreciation Expense	\$46,724,004	\$52,374,430	\$49,425,588
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>43</b>	<b>42</b>	<b>41</b>
12	Net Patient Accounts Receivable	\$ 5,961,568	\$ 6,656,193	\$ 6,542,170
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$15,025	\$208,044	\$435,106
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 5,946,543	\$ 6,448,149	\$ 6,107,064
16	Total Net Patient Revenue	\$50,528,737	\$55,524,108	\$54,310,740
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>52</b>	<b>44</b>	<b>52</b>
18	Total Current Liabilities	\$6,597,855	\$6,359,655	\$7,064,884
19	Total Operating Expenses	\$49,475,601	\$55,942,818	\$52,980,631
20	Depreciation Expense	\$2,751,597	\$3,568,388	\$3,555,043
21	Total Operating Expenses less Depreciation Expense	\$46,724,004	\$52,374,430	\$49,425,588

<b>SHARON HOSPITAL HOLDING CO, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2007</b>	<b>FY 2008</b>	<b>FY 2009</b>
<b>E.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>20.2</b>	<b>20.4</b>	<b>22.6</b>
2	Total Net Assets	\$11,400,566	\$11,529,344	\$13,049,049
3	Total Assets	\$56,418,546	\$56,391,682	\$57,653,218
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>10.9</b>	<b>9.4</b>	<b>13.2</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,734,429	\$252,934	\$1,873,583
6	Depreciation Expense	\$2,751,597	\$3,568,388	\$3,555,043
7	Excess of Revenues Over Expenses and Depreciation Expense	\$4,486,026	\$3,821,322	\$5,428,626
8	Total Current Liabilities	\$6,597,855	\$6,359,655	\$7,064,884
9	Total Long Term Debt	\$34,408,057	\$34,387,500	\$34,037,500
10	Total Current Liabilities and Total Long Term Debt	\$41,005,912	\$40,747,155	\$41,102,384
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>75.1</b>	<b>74.9</b>	<b>72.3</b>
12	Total Long Term Debt	\$34,408,057	\$34,387,500	\$34,037,500
13	Total Net Assets	\$11,400,566	\$11,529,344	\$13,049,049
14	Total Long Term Debt and Total Net Assets	\$45,808,623	\$45,916,844	\$47,086,549

ESSENT-SHARON 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	5,572	22	47	69.4%	32.5%
2	ICU/CCU (Excludes Neonatal ICU)	1,726	5	11	94.6%	43.0%
3	Psychiatric: Ages 0 to 17	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	2,987	12	12	68.2%	68.2%
	<b>TOTAL PSYCHIATRIC</b>	<b>2,987</b>	<b>12</b>	<b>12</b>	<b>68.2%</b>	<b>68.2%</b>
5	Rehabilitation	0	0	0	0.0%	0.0%
6	Maternity	672	4	8	46.0%	23.0%
7	Newborn	509	4	16	34.9%	8.7%
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%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>10,957</b>	<b>43</b>	<b>78</b>	<b>69.8%</b>	<b>38.5%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>11,466</b>	<b>47</b>	<b>94</b>	<b>66.8%</b>	<b>33.4%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>11,466</b>	<b>47</b>	<b>94</b>	<b>66.8%</b>	<b>33.4%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>11,806</b>	<b>47</b>	<b>94</b>	<b>68.8%</b>	<b>34.4%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-340</b>	<b>0</b>	<b>0</b>	<b>-2.0%</b>	<b>-1.0%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-3%</b>	<b>0%</b>	<b>0%</b>	<b>-3%</b>	<b>-3%</b>
	Total Licensed Beds and Bassinets	94				
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>						

ESSENT-SHARON 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
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	607	571	-36	-6%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,165	2,289	-876	-28%
3	Emergency Department Scans	1,601	2,993	1,392	87%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>5,373</b>	<b>5,853</b>	<b>480</b>	<b>9%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	289	303	14	5%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,999	1,710	-289	-14%
3	Emergency Department Scans	30	48	18	60%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>2,318</b>	<b>2,061</b>	<b>-257</b>	<b>-11%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Linear Accelerator Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Cardiac Catheterization Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	547	507	-40	-7%
2	Outpatient Surgical Procedures	1,508	1,522	14	1%
	<b>Total Surgical Procedures</b>	<b>2,055</b>	<b>2,029</b>	<b>-26</b>	<b>-1%</b>

ESSENT-SHARON 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
<b>J.</b>	<b><u>Endoscopy Procedures</u></b>				
1	Inpatient Endoscopy Procedures	100	127	27	27%
2	Outpatient Endoscopy Procedures	1,151	1,040	-111	-10%
	<b>Total Endoscopy Procedures</b>	<b>1,251</b>	<b>1,167</b>	<b>-84</b>	<b>-7%</b>
<b>K.</b>	<b><u>Hospital Emergency Room Visits</u></b>				
1	Emergency Room Visits: Treated and Admitted	1,607	1,524	-83	-5%
2	Emergency Room Visits: Treated and Discharged	14,756	14,489	-267	-2%
	<b>Total Emergency Room Visits</b>	<b>16,363</b>	<b>16,013</b>	<b>-350</b>	<b>-2%</b>
<b>L.</b>	<b><u>Hospital Clinic Visits</u></b>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	0	0	0	0%
	<b>Total Hospital Clinic Visits</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>M.</b>	<b><u>Other Hospital Outpatient Visits</u></b>				
1	Rehabilitation (PT/OT/ST)	9,240	10,243	1,003	11%
2	Cardiology	3,068	5,532	2,464	80%
3	Chemotherapy	704	721	17	2%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	47,084	49,232	2,148	5%
	<b>Total Other Hospital Outpatient Visits</b>	<b>60,096</b>	<b>65,728</b>	<b>5,632</b>	<b>9%</b>
<b>N.</b>	<b><u>Hospital Full Time Equivalent Employees</u></b>				
1	Total Nursing FTEs	90.0	81.3	-8.7	-10%
2	Total Physician FTEs	0.0	0.0	0.0	0%
3	Total Non-Nursing and Non-Physician FTEs	193.0	174.0	-19.0	-10%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>283.0</b>	<b>255.3</b>	<b>-27.7</b>	<b>-10%</b>

ESSENT-SHARON 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
<b>A. Outpatient Surgical Procedures</b>					
1	Sharon Hospital	1,508	1,522	14	1%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>1,508</b>	<b>1,522</b>	<b>14</b>	<b>1%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	Sharon Hospital	1,151	1,040	-111	-10%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>1,151</b>	<b>1,040</b>	<b>-111</b>	<b>-10%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	Sharon Hospital	14,756	14,489	-267	-2%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>14,756</b>	<b>14,489</b>	<b>-267</b>	<b>-2%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

ESSENT-SHARON HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 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>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$30,381,027	\$30,497,030	\$116,003	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$16,026,498	\$14,932,749	(\$1,093,749)	-7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	52.75%	48.96%	-3.79%	-7%
4	DISCHARGES	1,574	1,484	(90)	-6%
5	CASE MIX INDEX (CMI)	1.15910	1.13220	(0.02690)	-2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,824.42340	1,680.18480	(144.23860)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,784.42	\$8,887.56	\$103.15	1%
8	PATIENT DAYS	8,263	8,001	(262)	-3%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,939.55	\$1,866.36	(\$73.19)	-4%
10	AVERAGE LENGTH OF STAY	5.2	5.4	0.1	3%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$24,607,382	\$24,865,075	\$257,693	1%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$6,568,917	\$6,411,237	(\$157,680)	-2%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.69%	25.78%	-0.91%	-3%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	81.00%	81.53%	0.54%	1%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,274.87525	1,209.94639	(64.92886)	-5%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,152.60	\$5,298.78	\$146.18	3%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$54,988,409	\$55,362,105	\$373,696	1%
18	TOTAL ACCRUED PAYMENTS	\$22,595,415	\$21,343,986	(\$1,251,429)	-6%
19	TOTAL ALLOWANCES	\$32,392,994	\$34,018,119	\$1,625,125	5%

ESSENT-SHARON 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
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b>NON-GOVERNMENT INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$14,764,089	\$14,751,232	(\$12,857)	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$7,479,431	\$6,924,284	(\$555,147)	-7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	50.66%	46.94%	-3.72%	-7%
4	DISCHARGES	951	877	(74)	-8%
5	CASE MIX INDEX (CMI)	0.97490	1.02990	0.05500	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	927.12990	903.22230	(23.90760)	-3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,067.30	\$7,666.20	(\$401.09)	-5%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	\$717.12	\$1,221.36	\$504.24	70%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$664,866	\$1,103,161	\$438,296	66%
10	PATIENT DAYS	2,626	2,612	(14)	-1%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,848.22	\$2,650.95	(\$197.27)	-7%
12	AVERAGE LENGTH OF STAY	2.8	3.0	0.2	8%
<b>NON-GOVERNMENT OUTPATIENT</b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$36,504,087	\$36,344,225	(\$159,862)	0%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$18,561,142	\$18,350,298	(\$210,844)	-1%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	50.85%	50.49%	-0.36%	-1%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	247.25%	246.38%	-0.87%	0%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,351.33957	2,160.76090	(190.57867)	-8%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,893.86	\$8,492.52	\$598.66	8%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$2,741.26)	(\$3,193.74)	(\$452.48)	17%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$6,445,639)	(\$6,900,906)	(\$455,267)	7%
<b>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</b>					
21	TOTAL ACCRUED CHARGES	\$51,268,176	\$51,095,457	(\$172,719)	0%
22	TOTAL ACCRUED PAYMENTS	\$26,040,573	\$25,274,582	(\$765,991)	-3%
23	TOTAL ALLOWANCES	\$25,227,603	\$25,820,875	\$593,272	2%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$5,780,774)	(\$5,797,745)	(\$16,971)	0%
<b>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$51,268,176	\$51,095,456	(\$172,720)	0%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$31,211,776	\$29,524,736	(\$1,687,040)	-5%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$20,056,400	\$21,570,720	\$1,514,320	8%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	39.12%	42.22%	3.10%	

ESSENT-SHARON 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
<b>C. UNINSURED</b>					
<b>UNINSURED INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$959,783	\$850,966	(\$108,817)	-11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$54,210	\$83,830	\$29,620	55%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	5.65%	9.85%	4.20%	74%
4	DISCHARGES	79	72	(7)	-9%
5	CASE MIX INDEX (CMI)	0.94670	0.83480	(0.11190)	-12%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	74.78930	60.10560	(14.68370)	-20%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$724.84	\$1,394.71	\$669.88	92%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$7,342.46	\$6,271.49	(\$1,070.97)	-15%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$8,059.58	\$7,492.85	(\$566.73)	-7%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$602,770	\$450,362	(\$152,408)	-25%
11	PATIENT DAYS	210	205	(5)	-2%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$258.14	\$408.93	\$150.78	58%
13	AVERAGE LENGTH OF STAY	2.7	2.8	0.2	7%
<b>UNINSURED OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,307,276	\$1,991,028	(\$316,248)	-14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$224,699	\$606,321	\$381,622	170%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	9.74%	30.45%	20.71%	213%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	240.40%	233.97%	-6.42%	-3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	189.91252	168.46033	(21.45218)	-11%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,183.17	\$3,599.19	\$2,416.02	204%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$6,710.69	\$4,893.33	(\$1,817.36)	-27%
21	MEDICARE - UNINSURED OP PMT / OPED	\$3,969.42	\$1,699.59	(\$2,269.84)	-57%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$753,843	\$286,313	(\$467,531)	-62%
<b>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$3,267,059	\$2,841,994	(\$425,065)	-13%
24	TOTAL ACCRUED PAYMENTS	\$278,909	\$690,151	\$411,242	147%
25	TOTAL ALLOWANCES	\$2,988,150	\$2,151,843	(\$836,307)	-28%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,356,614	\$736,675	(\$619,939)	-46%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$951,599	\$1,298,721	\$347,122	36%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$461,987	\$362,892	(\$99,095)	-21%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	48.55%	27.94%	-20.61%	-42%
4	DISCHARGES	118	142	24	20%
5	CASE MIX INDEX (CMI)	0.93400	0.77890	(0.15510)	-17%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	110.21200	110.60380	0.39180	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,191.80	\$3,281.01	(\$910.79)	-22%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,875.49	\$4,385.19	\$509.70	13%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$4,592.62	\$5,606.56	\$1,013.94	22%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$506,161	\$620,106	\$113,945	23%
11	PATIENT DAYS	303	360	57	19%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,524.71	\$1,008.03	(\$516.68)	-34%
13	AVERAGE LENGTH OF STAY	2.6	2.5	(0.0)	-1%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,766,786	\$1,961,827	\$195,041	11%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$482,214	\$458,634	(\$23,580)	-5%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.29%	23.38%	-3.92%	-14%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	185.66%	151.06%	-34.61%	-19%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	219.08466	214.50291	(4.58175)	-2%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,201.04	\$2,138.12	(\$62.91)	-3%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$5,692.82	\$6,354.39	\$661.57	12%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,951.56	\$3,160.65	\$209.10	7%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$646,641	\$677,969	\$31,328	5%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$2,718,385	\$3,260,548	\$542,163	20%
24	TOTAL ACCRUED PAYMENTS	\$944,201	\$821,526	(\$122,675)	-13%
25	TOTAL ALLOWANCES	\$1,774,184	\$2,439,022	\$664,838	37%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,152,802	\$1,298,076	\$145,273	13%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>E.</b>	<b>OTHER MEDICAL ASSISTANCE (O.M.A.)</b>				
	<b>OTHER MEDICAL ASSISTANCE INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$1,939,370	\$1,859,352	(\$80,018)	-4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$796,715	\$555,847	(\$240,868)	-30%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.08%	29.89%	-11.19%	-27%
4	DISCHARGES	180	153	(27)	-15%
5	CASE MIX INDEX (CMI)	0.80650	1.07810	0.27160	34%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	145.17000	164.94930	19.77930	14%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,488.15	\$3,369.81	(\$2,118.35)	-39%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$2,579.14	\$4,296.40	\$1,717.25	67%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$3,296.27	\$5,517.76	\$2,221.49	67%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$478,519	\$910,150	\$431,631	90%
11	PATIENT DAYS	579	484	(95)	-16%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,376.02	\$1,148.44	(\$227.57)	-17%
13	AVERAGE LENGTH OF STAY	3.2	3.2	(0.1)	-2%
	<b>OTHER MEDICAL ASSISTANCE OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,373,804	\$2,716,437	\$342,633	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$583,978	\$588,046	\$4,068	1%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.60%	21.65%	-2.95%	-12%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	122.40%	146.10%	23.70%	19%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	220.32140	223.52672	3.20532	1%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,650.57	\$2,630.76	(\$19.81)	-1%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$5,243.29	\$5,861.75	\$618.47	12%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$2,502.02	\$2,668.01	\$165.99	7%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$551,249	\$596,372	\$45,123	8%
	<b>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$4,313,174	\$4,575,789	\$262,615	6%
24	TOTAL ACCRUED PAYMENTS	\$1,380,693	\$1,143,893	(\$236,800)	-17%
25	TOTAL ALLOWANCES	\$2,932,481	\$3,431,896	\$499,415	17%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$1,029,768	\$1,506,523	\$476,755	46%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>F.</b>	<b>TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>				
	<b>TOTAL MEDICAL ASSISTANCE INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$2,890,969	\$3,158,073	\$267,104	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,258,702	\$918,739	(\$339,963)	-27%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	43.54%	29.09%	-14.45%	-33%
4	DISCHARGES	298	295	(3)	-1%
5	CASE MIX INDEX (CMI)	0.85699	0.93408	0.07709	9%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	255.38200	275.55310	20.17110	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,928.70	\$3,334.16	(\$1,594.54)	-32%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,138.59	\$4,332.04	\$1,193.45	38%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,855.72	\$5,553.40	\$1,697.69	44%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$984,680	\$1,530,257	\$545,576	55%
11	PATIENT DAYS	882	844	(38)	-4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,427.10	\$1,088.55	(\$338.55)	-24%
13	AVERAGE LENGTH OF STAY	3.0	2.9	(0.1)	-3%
	<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$4,140,590	\$4,678,264	\$537,674	13%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,066,192	\$1,046,680	(\$19,512)	-2%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.75%	22.37%	-3.38%	-13%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	143.22%	148.14%	4.91%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	439.40607	438.02963	(1.37643)	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,426.44	\$2,389.52	(\$36.92)	-2%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,467.42	\$6,103.00	\$635.58	12%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,726.16	\$2,909.26	\$183.10	7%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,197,890	\$1,274,342	\$76,452	6%
	<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$7,031,559	\$7,836,337	\$804,778	11%
24	TOTAL ACCRUED PAYMENTS	\$2,324,894	\$1,965,419	(\$359,475)	-15%
25	TOTAL ALLOWANCES	\$4,706,665	\$5,870,918	\$1,164,253	25%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$127,666	\$93,627	(\$34,039)	-27%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$122,063	\$93,215	(\$28,848)	-24%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	95.61%	99.56%	3.95%	4%
4	DISCHARGES	11	2	(9)	-82%
5	CASE MIX INDEX (CMI)	0.52920	2.09710	1.56790	296%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5.82120	4.19420	(1.62700)	-28%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$20,968.70	\$22,224.74	\$1,256.04	6%
8	PATIENT DAYS	35	9	(26)	-74%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,487.51	\$10,357.22	\$6,869.71	197%
10	AVERAGE LENGTH OF STAY	3.2	4.5	1.3	41%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$65,947	\$64,791	(\$1,156)	-2%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$26,254	\$28,826	\$2,572	10%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$193,613	\$158,418	(\$35,195)	-18%
14	TOTAL ACCRUED PAYMENTS	\$148,317	\$122,041	(\$26,276)	-18%
15	TOTAL ALLOWANCES	\$45,296	\$36,377	(\$8,919)	-20%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$496,271	\$543,474	\$47,203	10%
2	TOTAL OPERATING EXPENSES	\$54,135,451	\$49,683,361	(\$4,452,090)	-8%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$175,373	\$185,269	\$9,896	6%
<b>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</b>					
4	CHARITY CARE (CHARGES)	\$767,308	\$430,330	(\$336,978)	-44%
5	BAD DEBTS (CHARGES)	\$3,536,277	\$2,953,540	(\$582,737)	-16%
6	UNCOMPENSATED CARE (CHARGES)	\$4,303,585	\$3,383,870	(\$919,715)	-21%
7	COST OF UNCOMPENSATED CARE	\$1,944,872	\$1,445,509	(\$499,364)	-26%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$7,031,559	\$7,836,337	\$804,778	11%
9	TOTAL ACCRUED PAYMENTS	\$2,324,894	\$1,965,419	(\$359,475)	-15%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$3,177,696	\$3,347,496	\$169,800	5%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$852,802	\$1,382,077	\$529,275	62%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$48,163,751	\$48,499,962	\$336,211	1%
2	TOTAL INPATIENT PAYMENTS	\$24,886,694	\$22,868,987	(\$2,017,707)	-8%
3	TOTAL INPATIENT PAYMENTS / CHARGES	51.67%	47.15%	-4.52%	-9%
4	TOTAL DISCHARGES	2,834	2,658	(176)	-6%
5	TOTAL CASE MIX INDEX	1.06308	1.07718	0.01411	1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	3,012.75650	2,863.15440	(149.60210)	-5%
7	TOTAL OUTPATIENT CHARGES	\$65,318,006	\$65,952,355	\$634,349	1%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	135.62%	135.98%	0.37%	0%
9	TOTAL OUTPATIENT PAYMENTS	\$26,222,505	\$25,837,041	(\$385,464)	-1%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	40.15%	39.18%	-0.97%	-2%
11	TOTAL CHARGES	\$113,481,757	\$114,452,317	\$970,560	1%
12	TOTAL PAYMENTS	\$51,109,199	\$48,706,028	(\$2,403,171)	-5%
13	TOTAL PAYMENTS / TOTAL CHARGES	45.04%	42.56%	-2.48%	-6%
14	PATIENT DAYS	11,806	11,466	(340)	-3%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$33,399,662	\$33,748,730	\$349,068	1%
2	INPATIENT PAYMENTS	\$17,407,263	\$15,944,703	(\$1,462,560)	-8%
3	GOVT. INPATIENT PAYMENTS / CHARGES	52.12%	47.25%	-4.87%	-9%
4	DISCHARGES	1,883	1,781	(102)	-5%
5	CASE MIX INDEX	1.10761	1.10047	(0.00714)	-1%
6	CASE MIX ADJUSTED DISCHARGES	2,085.62660	1,959.93210	(125.69450)	-6%
7	OUTPATIENT CHARGES	\$28,813,919	\$29,608,130	\$794,211	3%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	86.27%	87.73%	1.46%	2%
9	OUTPATIENT PAYMENTS	\$7,661,363	\$7,486,743	(\$174,620)	-2%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.59%	25.29%	-1.30%	-5%
11	TOTAL CHARGES	\$62,213,581	\$63,356,860	\$1,143,279	2%
12	TOTAL PAYMENTS	\$25,068,626	\$23,431,446	(\$1,637,180)	-7%
13	TOTAL PAYMENTS / CHARGES	40.29%	36.98%	-3.31%	-8%
14	PATIENT DAYS	9,180	8,854	(326)	-4%
15	TOTAL GOVERNMENT DEDUCTIONS	\$37,144,955	\$39,925,414	\$2,780,459	7%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	5.2	5.4	0.1	3%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2.8	3.0	0.2	8%
3	UNINSURED	2.7	2.8	0.2	7%
4	MEDICAID	2.6	2.5	(0.0)	-1%
5	OTHER MEDICAL ASSISTANCE	3.2	3.2	(0.1)	-2%
6	CHAMPUS / TRICARE	3.2	4.5	1.3	41%
7	TOTAL AVERAGE LENGTH OF STAY	4.2	4.3	0.1	4%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$113,481,757	\$114,452,317	\$970,560	1%
2	TOTAL GOVERNMENT DEDUCTIONS	\$37,144,955	\$39,925,414	\$2,780,459	7%
3	UNCOMPENSATED CARE	\$4,303,585	\$3,383,870	(\$919,715)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$20,056,400	\$21,570,720	\$1,514,320	8%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$867,617	\$866,283	(\$1,334)	0%
6	TOTAL ADJUSTMENTS	\$62,372,557	\$65,746,287	\$3,373,730	5%
7	TOTAL ACCRUED PAYMENTS	\$51,109,200	\$48,706,030	(\$2,403,170)	-5%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$175,373	\$185,269	\$9,896	6%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$51,284,573	\$48,891,299	(\$2,393,274)	-5%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4519190957	0.4271761401	(0.0247429556)	-5%
11	COST OF UNCOMPENSATED CARE	\$1,944,872	\$1,445,509	(\$499,364)	-26%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$852,802	\$1,382,077	\$529,275	62%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$2,797,674	\$2,827,586	\$29,912	1%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$646,641	\$677,969	\$31,328	5%
2	OTHER MEDICAL ASSISTANCE	\$1,029,768	\$1,506,523	\$476,755	46%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,356,614	\$736,675	(\$619,939)	-46%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,033,023	\$2,921,167	(\$111,856)	-4%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,614,539	\$1,649,950	\$35,411	2.19%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$3,536,277	\$2,961,992	(\$574,285)	-16.24%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$54,820,846	\$51,853,289	(\$2,967,557)	-5.41%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$113,481,756	\$114,452,317	\$970,561	0.86%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$4,303,585	\$3,383,870	(\$919,715)	-21.37%

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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
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,764,089	\$14,751,232	(\$12,857)
2	MEDICARE	\$30,381,027	30,497,030	\$116,003
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,890,969	3,158,073	\$267,104
4	MEDICAID	\$951,599	1,298,721	\$347,122
5	OTHER MEDICAL ASSISTANCE	\$1,939,370	1,859,352	(\$80,018)
6	CHAMPUS / TRICARE	\$127,666	93,627	(\$34,039)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$959,783	850,966	(\$108,817)
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$33,399,662</b>	<b>\$33,748,730</b>	<b>\$349,068</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$48,163,751</b>	<b>\$48,499,962</b>	<b>\$336,211</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$36,504,087	\$36,344,225	(\$159,862)
2	MEDICARE	\$24,607,382	24,865,075	\$257,693
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,140,590	4,678,264	\$537,674
4	MEDICAID	\$1,766,786	1,961,827	\$195,041
5	OTHER MEDICAL ASSISTANCE	\$2,373,804	2,716,437	\$342,633
6	CHAMPUS / TRICARE	\$65,947	64,791	(\$1,156)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,307,276	1,991,028	(\$316,248)
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$28,813,919</b>	<b>\$29,608,130</b>	<b>\$794,211</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$65,318,006</b>	<b>\$65,952,355</b>	<b>\$634,349</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$51,268,176	\$51,095,457	(\$172,719)
2	TOTAL MEDICARE	\$54,988,409	\$55,362,105	\$373,696
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,031,559	\$7,836,337	\$804,778
4	TOTAL MEDICAID	\$2,718,385	\$3,260,548	\$542,163
5	TOTAL OTHER MEDICAL ASSISTANCE	\$4,313,174	\$4,575,789	\$262,615
6	TOTAL CHAMPUS / TRICARE	\$193,613	\$158,418	(\$35,195)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,267,059	\$2,841,994	(\$425,065)
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$62,213,581</b>	<b>\$63,356,860</b>	<b>\$1,143,279</b>
	<b>TOTAL CHARGES</b>	<b>\$113,481,757</b>	<b>\$114,452,317</b>	<b>\$970,560</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,479,431	\$6,924,284	(\$555,147)
2	MEDICARE	\$16,026,498	14,932,749	(\$1,093,749)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$1,258,702	918,739	(\$339,963)
4	MEDICAID	\$461,987	362,892	(\$99,095)
5	OTHER MEDICAL ASSISTANCE	\$796,715	555,847	(\$240,868)
6	CHAMPUS / TRICARE	\$122,063	93,215	(\$28,848)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$54,210	83,830	\$29,620
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$17,407,263</b>	<b>\$15,944,703</b>	<b>(\$1,462,560)</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$24,886,694</b>	<b>\$22,868,987</b>	<b>(\$2,017,707)</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$18,561,142	\$18,350,298	(\$210,844)
2	MEDICARE	\$6,568,917	6,411,237	(\$157,680)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$1,066,192	1,046,680	(\$19,512)
4	MEDICAID	\$482,214	458,634	(\$23,580)
5	OTHER MEDICAL ASSISTANCE	\$583,978	588,046	\$4,068
6	CHAMPUS / TRICARE	\$26,254	28,826	\$2,572
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$224,699	606,321	\$381,622
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$7,661,363</b>	<b>\$7,486,743</b>	<b>(\$174,620)</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$26,222,505</b>	<b>\$25,837,041</b>	<b>(\$385,464)</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$26,040,573	\$25,274,582	(\$765,991)
2	TOTAL MEDICARE	\$22,595,415	\$21,343,986	(\$1,251,429)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,324,894	\$1,965,419	(\$359,475)
4	TOTAL MEDICAID	\$944,201	\$821,526	(\$122,675)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$1,380,693	\$1,143,893	(\$236,800)
6	TOTAL CHAMPUS / TRICARE	\$148,317	\$122,041	(\$26,276)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$278,909	\$690,151	\$411,242
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$25,068,626</b>	<b>\$23,431,446</b>	<b>(\$1,637,180)</b>
	<b>TOTAL PAYMENTS</b>	<b>\$51,109,199</b>	<b>\$48,706,028</b>	<b>(\$2,403,171)</b>

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<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13.01%	12.89%	-0.12%
2	MEDICARE	26.77%	26.65%	-0.13%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.55%	2.76%	0.21%
4	MEDICAID	0.84%	1.13%	0.30%
5	OTHER MEDICAL ASSISTANCE	1.71%	1.62%	-0.08%
6	CHAMPUS / TRICARE	0.11%	0.08%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.85%	0.74%	-0.10%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>29.43%</b>	<b>29.49%</b>	<b>0.06%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>42.44%</b>	<b>42.38%</b>	<b>-0.07%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	32.17%	31.75%	-0.41%
2	MEDICARE	21.68%	21.73%	0.04%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.65%	4.09%	0.44%
4	MEDICAID	1.56%	1.71%	0.16%
5	OTHER MEDICAL ASSISTANCE	2.09%	2.37%	0.28%
6	CHAMPUS / TRICARE	0.06%	0.06%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.03%	1.74%	-0.29%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>25.39%</b>	<b>25.87%</b>	<b>0.48%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>57.56%</b>	<b>57.62%</b>	<b>0.07%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14.63%	14.22%	-0.42%
2	MEDICARE	31.36%	30.66%	-0.70%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.46%	1.89%	-0.58%
4	MEDICAID	0.90%	0.75%	-0.16%
5	OTHER MEDICAL ASSISTANCE	1.56%	1.14%	-0.42%
6	CHAMPUS / TRICARE	0.24%	0.19%	-0.05%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.11%	0.17%	0.07%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>34.06%</b>	<b>32.74%</b>	<b>-1.32%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>48.69%</b>	<b>46.95%</b>	<b>-1.74%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	36.32%	37.68%	1.36%
2	MEDICARE	12.85%	13.16%	0.31%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.09%	2.15%	0.06%
4	MEDICAID	0.94%	0.94%	0.00%
5	OTHER MEDICAL ASSISTANCE	1.14%	1.21%	0.06%
6	CHAMPUS / TRICARE	0.05%	0.06%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.44%	1.24%	0.81%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>14.99%</b>	<b>15.37%</b>	<b>0.38%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>51.31%</b>	<b>53.05%</b>	<b>1.74%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>

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LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	951	877	(74)
2	MEDICARE	1,574	1,484	(90)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	298	295	(3)
4	MEDICAID	118	142	24
5	OTHER MEDICAL ASSISTANCE	180	153	(27)
6	CHAMPUS / TRICARE	11	2	(9)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	79	72	(7)
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>1,883</b>	<b>1,781</b>	<b>(102)</b>
	<b>TOTAL DISCHARGES</b>	<b>2,834</b>	<b>2,658</b>	<b>(176)</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,626	2,612	(14)
2	MEDICARE	8,263	8,001	(262)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	882	844	(38)
4	MEDICAID	303	360	57
5	OTHER MEDICAL ASSISTANCE	579	484	(95)
6	CHAMPUS / TRICARE	35	9	(26)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	210	205	(5)
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>9,180</b>	<b>8,854</b>	<b>(326)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>11,806</b>	<b>11,466</b>	<b>(340)</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2.8	3.0	0.2
2	MEDICARE	5.2	5.4	0.1
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.0	2.9	(0.1)
4	MEDICAID	2.6	2.5	(0.0)
5	OTHER MEDICAL ASSISTANCE	3.2	3.2	(0.1)
6	CHAMPUS / TRICARE	3.2	4.5	1.3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.7	2.8	0.2
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>4.9</b>	<b>5.0</b>	<b>0.1</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.2</b>	<b>4.3</b>	<b>0.1</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.97490	1.02990	0.05500
2	MEDICARE	1.15910	1.13220	(0.02690)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.85699	0.93408	0.07709
4	MEDICAID	0.93400	0.77890	(0.15510)
5	OTHER MEDICAL ASSISTANCE	0.80650	1.07810	0.27160
6	CHAMPUS / TRICARE	0.52920	2.09710	1.56790
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.94670	0.83480	(0.11190)
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.10761</b>	<b>1.10047</b>	<b>(0.00714)</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.06308</b>	<b>1.07718</b>	<b>0.01411</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$51,268,176	\$51,095,456	(\$172,720)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$31,211,776	\$29,524,736	(\$1,687,040)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$20,056,400	\$21,570,720	\$1,514,320
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	39.12%	42.22%	3.10%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,614,539	\$1,649,950	\$35,411
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$867,617	\$866,283	(\$1,334)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT OHCA INPUT)	\$175,373	\$185,269	\$9,896
8	CHARITY CARE	\$767,308	\$430,330	(\$336,978)
9	BAD DEBTS	\$3,536,277	\$2,953,540	(\$582,737)
10	TOTAL UNCOMPENSATED CARE	\$4,303,585	\$3,383,870	(\$919,715)
11	TOTAL OTHER OPERATING REVENUE	\$51,268,176	\$51,095,456	(\$172,720)
12	TOTAL OPERATING EXPENSES	\$54,135,451	\$49,683,361	(\$4,452,090)

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<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2008</u>	<u>ACTUAL FY 2009</u>	<u>AMOUNT DIFFERENCE</u>

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BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
<b>IV. DSH UPPER PAYMENT LIMIT CALCULATIONS</b>				
<b>A. CASE MIX ADJUSTED DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	927.12990	903.22230	(23.90760)
2	MEDICARE	1,824.42340	1,680.18480	(144.23860)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	255.38200	275.55310	20.17110
4	MEDICAID	110.21200	110.60380	0.39180
5	OTHER MEDICAL ASSISTANCE	145.17000	164.94930	19.77930
6	CHAMPUS / TRICARE	5.82120	4.19420	(1.62700)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	74.78930	60.10560	(14.68370)
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>2,085.62660</b>	<b>1,959.93210</b>	<b>(125.69450)</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>3,012.75650</b>	<b>2,863.15440</b>	<b>(149.60210)</b>
<b>B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,351.33957	2,160.76090	-190.57867
2	MEDICARE	1,274.87525	1,209.94639	-64.92886
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	439.40607	438.02963	-1.37643
4	MEDICAID	219.08466	214.50291	-4.58175
5	OTHER MEDICAL ASSISTANCE	220.32140	223.52672	3.20532
6	CHAMPUS / TRICARE	5.68215	1,38402	-4.29812
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	189.91252	168.46033	-21.45218
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>1,719.96346</b>	<b>1,649.36005</b>	<b>-70.60342</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>4,071.30304</b>	<b>3,810.12095</b>	<b>-261.18209</b>
<b>C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,067.30	\$7,666.20	(\$401.09)
2	MEDICARE	\$8,784.42	\$8,887.56	\$103.15
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,928.70	\$3,334.16	(\$1,594.54)
4	MEDICAID	\$4,191.80	\$3,281.01	(\$910.79)
5	OTHER MEDICAL ASSISTANCE	\$5,488.15	\$3,369.81	(\$2,118.35)
6	CHAMPUS / TRICARE	\$20,968.70	\$22,224.74	\$1,256.04
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$724.84	\$1,394.71	\$669.88
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$8,346.30</b>	<b>\$8,135.33</b>	<b>(\$210.96)</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$8,260.44</b>	<b>\$7,987.34</b>	<b>(\$273.10)</b>
<b>D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,893.86	\$8,492.52	\$598.66
2	MEDICARE	\$5,152.60	\$5,298.78	\$146.18
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,426.44	\$2,389.52	(\$36.92)
4	MEDICAID	\$2,201.04	\$2,138.12	(\$62.91)
5	OTHER MEDICAL ASSISTANCE	\$2,650.57	\$2,630.76	(\$19.81)
6	CHAMPUS / TRICARE	\$4,620.44	\$20,827.68	\$16,207.24
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,183.17	\$3,599.19	\$2,416.02
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$4,454.38</b>	<b>\$4,539.18</b>	<b>\$84.81</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$6,440.81</b>	<b>\$6,781.16</b>	<b>\$340.35</b>

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(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$646,641	\$677,969	\$31,328
2	OTHER MEDICAL ASSISTANCE	\$1,029,768	\$1,506,523	\$476,755
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,356,614	\$736,675	(\$619,939)
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$3,033,023</b>	<b>\$2,921,167</b>	<b>(\$111,856)</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$113,481,757	\$114,452,317	\$970,560
2	TOTAL GOVERNMENT DEDUCTIONS	\$37,144,955	\$39,925,414	\$2,780,459
3	UNCOMPENSATED CARE	\$4,303,585	\$3,383,870	(\$919,715)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$20,056,400	\$21,570,720	\$1,514,320
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$867,617	\$866,283	(\$1,334)
6	TOTAL ADJUSTMENTS	\$62,372,557	\$65,746,287	\$3,373,730
7	TOTAL ACCRUED PAYMENTS	\$51,109,200	\$48,706,030	(\$2,403,170)
8	UCP DSH PAYMENTS (OHCA INPUT)	\$175,373	\$185,269	\$9,896
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$51,284,573	\$48,891,299	(\$2,393,274)
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4519190957	0.4271761401	(0.0247429556)
11	COST OF UNCOMPENSATED CARE	\$1,944,872	\$1,445,509	(\$499,364)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$852,802	\$1,382,077	\$529,275
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$2,797,674	\$2,827,586	\$29,912
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	50.66%	46.94%	-3.72%
2	MEDICARE	52.75%	48.96%	-3.79%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	43.54%	29.09%	-14.45%
4	MEDICAID	48.55%	27.94%	-20.61%
5	OTHER MEDICAL ASSISTANCE	41.08%	29.89%	-11.19%
6	CHAMPUS / TRICARE	95.61%	99.56%	3.95%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5.65%	9.85%	4.20%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>52.12%</b>	<b>47.25%</b>	<b>-4.87%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>51.67%</b>	<b>47.15%</b>	<b>-4.52%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	50.85%	50.49%	-0.36%
2	MEDICARE	26.69%	25.78%	-0.91%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	25.75%	22.37%	-3.38%
4	MEDICAID	27.29%	23.38%	-3.92%
5	OTHER MEDICAL ASSISTANCE	24.60%	21.65%	-2.95%
6	CHAMPUS / TRICARE	39.81%	44.49%	4.68%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	9.74%	30.45%	20.71%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>26.59%</b>	<b>25.29%</b>	<b>-1.30%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>40.15%</b>	<b>39.18%</b>	<b>-0.97%</b>

<b>ESSENT-SHARON HOSPITAL                      TWELVE MONTHS ACTUAL FILING                      FISCAL YEAR 2009                      REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND                      BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$51,109,199	\$48,706,028	(\$2,403,171)
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$175,373	\$185,269	\$9,896
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$51,284,572</b>	<b>\$48,891,297</b>	<b>(\$2,393,275)</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,536,277	\$2,961,992	(\$574,285)
4	<b>CALCULATED NET REVENUE</b>	<b>\$59,104,048</b>	<b>\$51,853,289</b>	<b>(\$7,250,759)</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$54,820,846	\$51,853,289	(\$2,967,557)
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$4,283,202</b>	<b>\$0</b>	<b>(\$4,283,202)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$113,481,757	\$114,452,317	\$970,560
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$113,481,757</b>	<b>\$114,452,317</b>	<b>\$970,560</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$113,481,756	\$114,452,317	\$970,561
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$1</b>	<b>\$0</b>	<b>(\$1)</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$4,303,585	\$3,383,870	(\$919,715)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$4,303,585</b>	<b>\$3,383,870</b>	<b>(\$919,715)</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$4,303,585	\$3,383,870	(\$919,715)
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,751,232
2	MEDICARE	30,497,030
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,158,073
4	MEDICAID	1,298,721
5	OTHER MEDICAL ASSISTANCE	1,859,352
6	CHAMPUS / TRICARE	93,627
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	850,966
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$33,748,730</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$48,499,962</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$36,344,225
2	MEDICARE	24,865,075
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,678,264
4	MEDICAID	1,961,827
5	OTHER MEDICAL ASSISTANCE	2,716,437
6	CHAMPUS / TRICARE	64,791
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,991,028
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$29,608,130</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$65,952,355</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$51,095,457
2	TOTAL GOVERNMENT ACCRUED CHARGES	63,356,860
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$114,452,317</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$6,924,284
2	MEDICARE	14,932,749
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	918,739
4	MEDICAID	362,892
5	OTHER MEDICAL ASSISTANCE	555,847
6	CHAMPUS / TRICARE	93,215
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	83,830
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$15,944,703</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$22,868,987</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$18,350,298
2	MEDICARE	6,411,237
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,046,680
4	MEDICAID	458,634
5	OTHER MEDICAL ASSISTANCE	588,046
6	CHAMPUS / TRICARE	28,826
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	606,321
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$7,486,743</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$25,837,041</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$25,274,582
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	23,431,446
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$48,706,028</b>

<b>ESSENT-SHARON HOSPITAL            TWELVE MONTHS ACTUAL FILING            FISCAL YEAR 2009            REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND            BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2009</u>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	877
2	MEDICARE	1,484
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	295
4	MEDICAID	142
5	OTHER MEDICAL ASSISTANCE	153
6	CHAMPUS / TRICARE	2
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	72
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>1,781</b>
	<b>TOTAL DISCHARGES</b>	<b>2,658</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.02990
2	MEDICARE	1.13220
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.93408
4	MEDICAID	0.77890
5	OTHER MEDICAL ASSISTANCE	1.07810
6	CHAMPUS / TRICARE	2.09710
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.83480
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.10047</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.07718</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$51,095,456
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$29,524,736
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$21,570,720
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	42.22%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,649,950
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$866,283
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$185,269
8	CHARITY CARE	\$430,330
9	BAD DEBTS	\$2,953,540
10	TOTAL UNCOMPENSATED CARE	\$3,383,870
11	TOTAL OTHER OPERATING REVENUE	\$543,474
12	TOTAL OPERATING EXPENSES	\$49,683,361

<b>ESSENT-SHARON HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2009</u>
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$48,706,028
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$185,269
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$48,891,297</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$2,961,992
	<b>CALCULATED NET REVENUE</b>	<b>\$51,853,289</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$51,853,289
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$114,452,317
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$114,452,317</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$114,452,317
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,383,870
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$3,383,870</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$3,383,870
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

<b>ESSENT-SHARON HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT 650 - HOSPITAL UNCOMPENSATED CARE</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. Hospital Charity Care (from HRS Report 500)</b>					
1	Number of Applicants	89	70	(19)	-21%
2	Number of Approved Applicants	87	61	(26)	-30%
3	<b>Total Charges (A)</b>	\$767,308	\$430,330	(\$336,978)	-44%
4	<b>Average Charges</b>	<b>\$8,820</b>	<b>\$7,055</b>	<b>(\$1,765)</b>	<b>-20%</b>
5	Ratio of Cost to Charges (RCC)	0.462623	0.474964	0.012341	3%
6	<b>Total Cost</b>	<b>\$354,974</b>	<b>\$204,391</b>	<b>(\$150,583)</b>	<b>-42%</b>
7	<b>Average Cost</b>	<b>\$4,080</b>	<b>\$3,351</b>	<b>(\$729)</b>	<b>-18%</b>
8	Charity Care - Inpatient Charges	\$442,157	\$195,295	(\$246,862)	-56%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	236,116	177,460	(58,656)	-25%
10	Charity Care - Emergency Department Charges	89,035	57,575	(31,460)	-35%
11	<b>Total Charges (A)</b>	<b>\$767,308</b>	<b>\$430,330</b>	<b>(\$336,978)</b>	<b>-44%</b>
12	Charity Care - Number of Patient Days	181	58	(123)	-68%
13	Charity Care - Number of Discharges	43	23	(20)	-47%
14	Charity Care - Number of Outpatient ED Visits	126	147	21	17%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	284	199	(85)	-30%
<b>B. Hospital Bad Debts (from HRS Report 500)</b>					
1	Bad Debts - Inpatient Services	\$797,180	\$800,628	\$3,448	0%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,387,508	1,073,676	(313,832)	-23%
3	Bad Debts - Emergency Department	1,351,589	1,079,236	(272,353)	-20%
4	<b>Total Bad Debts (A)</b>	<b>\$3,536,277</b>	<b>\$2,953,540</b>	<b>(\$582,737)</b>	<b>-16%</b>
<b>C. Hospital Uncompensated Care (from HRS Report 500)</b>					
1	Charity Care (A)	\$767,308	\$430,330	(\$336,978)	-44%
2	Bad Debts (A)	3,536,277	2,953,540	(582,737)	-16%
3	<b>Total Uncompensated Care (A)</b>	<b>\$4,303,585</b>	<b>\$3,383,870</b>	<b>(\$919,715)</b>	<b>-21%</b>
4	Uncompensated Care - Inpatient Services	\$1,239,337	\$995,923	(\$243,414)	-20%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	1,623,624	1,251,136	(372,488)	-23%
6	Uncompensated Care - Emergency Department	1,440,624	1,136,811	(303,813)	-21%
7	<b>Total Uncompensated Care (A)</b>	<b>\$4,303,585</b>	<b>\$3,383,870</b>	<b>(\$919,715)</b>	<b>-21%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					



<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
<b>A. <u>Gross and Net Revenue</u></b>				
1	Inpatient Gross Revenue	\$45,208,272	\$48,163,751	\$48,499,962
2	Outpatient Gross Revenue	\$61,056,367	\$65,318,006	\$65,952,355
3	Total Gross Patient Revenue	\$106,264,639	\$113,481,757	\$114,452,317
4	Net Patient Revenue	\$50,528,737	\$54,645,472	\$51,853,289
<b>B. <u>Total Operating Expenses</u></b>				
1	Total Operating Expense	\$49,475,601	\$53,643,999	\$49,683,361
<b>C. <u>Utilization Statistics</u></b>				
1	Patient Days	11,470	11,806	11,466
2	Discharges	2,837	2,834	2,658
3	Average Length of Stay	4.0	4.2	4.3
4	Equivalent (Adjusted) Patient Days (EPD)	26,961	27,817	27,058
0	Equivalent (Adjusted) Discharges (ED)	6,669	6,677	6,272
<b>D. <u>Case Mix Statistics</u></b>				
1	Case Mix Index	1.11525	1.06308	1.07718
2	Case Mix Adjusted Patient Days (CMAPD)	12,792	12,551	12,351
3	Case Mix Adjusted Discharges (CMAD)	3,164	3,013	2,863
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	30,068	29,571	29,146
5	Case Mix Adjusted Equivalent Discharges (CMAED)	7,437	7,099	6,757
<b>E. <u>Gross Revenue Per Statistic</u></b>				
1	Total Gross Revenue per Patient Day	\$9,265	\$9,612	\$9,982
2	Total Gross Revenue per Discharge	\$37,457	\$40,043	\$43,060
3	Total Gross Revenue per EPD	\$3,941	\$4,080	\$4,230
4	Total Gross Revenue per ED	\$15,935	\$16,995	\$18,247
5	Total Gross Revenue per CMAEPD	\$3,534	\$3,838	\$3,927
6	Total Gross Revenue per CMAED	\$14,288	\$15,987	\$16,939
7	Inpatient Gross Revenue per EPD	\$1,677	\$1,731	\$1,792
8	Inpatient Gross Revenue per ED	\$6,779	\$7,213	\$7,732

<b>ESSENT-SHARON HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
<b>F. <u>Net Revenue Per Statistic</u></b>				
1	Net Patient Revenue per Patient Day	\$4,405	\$4,629	\$4,522
2	Net Patient Revenue per Discharge	\$17,811	\$19,282	\$19,508
3	Net Patient Revenue per EPD	\$1,874	\$1,964	\$1,916
4	Net Patient Revenue per ED	\$7,577	\$8,184	\$8,267
5	Net Patient Revenue per CMAEPD	\$1,680	\$1,848	\$1,779
6	Net Patient Revenue per CMAED	\$6,794	\$7,698	\$7,674
<b>G. <u>Operating Expense Per Statistic</u></b>				
1	Total Operating Expense per Patient Day	\$4,313	\$4,544	\$4,333
2	Total Operating Expense per Discharge	\$17,439	\$18,929	\$18,692
3	Total Operating Expense per EPD	\$1,835	\$1,928	\$1,836
4	Total Operating Expense per ED	\$7,419	\$8,034	\$7,921
5	Total Operating Expense per CMAEPD	\$1,645	\$1,814	\$1,705
6	Total Operating Expense per CMAED	\$6,653	\$7,557	\$7,353
<b>H. <u>Nursing Salary and Fringe Benefits Expense</u></b>				
1	Nursing Salary Expense	\$6,711,083	\$7,074,932	\$6,533,428
2	Nursing Fringe Benefits Expense	\$1,482,163	\$1,675,642	\$1,425,678
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$8,193,246</b>	<b>\$8,750,574</b>	<b>\$7,959,106</b>
<b>I. <u>Physician Salary and Fringe Expense</u></b>				
1	Physician Salary Expense	\$666,167	\$557,887	\$0
2	Physician Fringe Benefits Expense	\$147,125	\$132,023	\$0
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$813,292</b>	<b>\$689,910</b>	<b>\$0</b>
<b>J. <u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u></b>				
1	Non-Nursing, Non-Physician Salary Expense	\$9,164,545	\$9,366,706	\$9,011,172
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$2,024,018	\$2,217,419	\$1,932,907
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$11,188,563</b>	<b>\$11,584,125</b>	<b>\$10,944,079</b>
<b>K. <u>Total Salary and Fringe Benefits Expense</u></b>				
1	Total Salary Expense	\$16,541,795	\$16,999,525	\$15,544,600
2	Total Fringe Benefits Expense	\$3,653,306	\$4,025,084	\$3,358,585
3	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$20,195,101</b>	<b>\$21,024,609</b>	<b>\$18,903,185</b>

ESSENT-SHARON 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
<b>L.</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>			
1	Total Nursing FTEs	96.0	90.0	81.3
2	Total Physician FTEs	3.0	0.0	0.0
3	Total Non-Nursing, Non-Physician FTEs	191.1	193.0	174.0
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>290.1</b>	<b>283.0</b>	<b>255.3</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$69,907	\$78,610	\$80,362
2	Nursing Fringe Benefits Expense per FTE	\$15,439	\$18,618	\$17,536
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$85,346</b>	<b>\$97,229</b>	<b>\$97,898</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$222,056	\$0	\$0
2	Physician Fringe Benefits Expense per FTE	\$49,042	\$0	\$0
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$271,097</b>	<b>\$0</b>	<b>\$0</b>
<b>O.</b>	<b>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$47,957	\$48,532	\$51,788
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$10,591	\$11,489	\$11,109
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$58,548</b>	<b>\$60,021</b>	<b>\$62,897</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$57,021	\$60,069	\$60,888
2	Total Fringe Benefits Expense per FTE	\$12,593	\$14,223	\$13,155
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$69,614</b>	<b>\$74,292</b>	<b>\$74,043</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,761	\$1,781	\$1,649
2	Total Salary and Fringe Benefits Expense per Discharge	\$7,118	\$7,419	\$7,112
3	Total Salary and Fringe Benefits Expense per EPD	\$749	\$756	\$699
4	Total Salary and Fringe Benefits Expense per ED	\$3,028	\$3,149	\$3,014
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$672	\$711	\$649
6	Total Salary and Fringe Benefits Expense per CMAED	\$2,715	\$2,962	\$2,798