

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$93,136,217	\$107,428,365	\$14,292,148	15%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$32,373,122	\$32,015,340	(\$357,782)	-1%
4	Current Assets Whose Use is Limited for Current Liabilities	\$5,885,482	\$7,433,046	\$1,547,564	26%
5	Due From Affiliates	\$161,210	\$564,613	\$403,403	250%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$3,704,067	\$3,548,865	(\$155,202)	-4%
8	Prepaid Expenses	\$1,608,996	\$3,309,657	\$1,700,661	106%
9	Other Current Assets	\$101,211	\$31,723	(\$69,488)	-69%
	Total Current Assets	\$136,970,305	\$154,331,609	\$17,361,304	13%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$28,078,427	\$30,175,064	\$2,096,637	7%
2	Board Designated for Capital Acquisition	\$99,552,920	\$109,435,719	\$9,882,799	10%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$127,631,347	\$139,610,783	\$11,979,436	9%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$3,384,622	\$7,636,146	\$4,251,524	126%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$229,404,094	\$238,564,796	\$9,160,702	4%
2	Less: Accumulated Depreciation	\$140,786,203	\$148,957,964	\$8,171,761	6%
	Property, Plant and Equipment, Net	\$88,617,891	\$89,606,832	\$988,941	1%
3	Construction in Progress	\$1,365,773	\$1,747,654	\$381,881	28%
	Total Net Fixed Assets	\$89,983,664	\$91,354,486	\$1,370,822	2%
	Total Assets	\$357,969,938	\$392,933,024	\$34,963,086	10%

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		FY 2011	FY 2012	AMOUNT	%
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II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$9,918,459	\$9,176,344	(\$742,115)	-7%
2	Salaries, Wages and Payroll Taxes	\$6,666,138	\$6,802,151	\$136,013	2%
3	Due To Third Party Payers	\$4,683,178	\$1,193,235	(\$3,489,943)	-75%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,965,000	\$2,045,000	\$80,000	4%
6	Current Portion of Notes Payable	\$150,360	\$301,210	\$150,850	100%
7	Other Current Liabilities	\$9,676,707	\$11,440,075	\$1,763,368	18%
	Total Current Liabilities	\$33,059,842	\$30,958,015	(\$2,101,827)	-6%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$59,976,971	\$57,887,276	(\$2,089,695)	-3%
2	Notes Payable (Net of Current Portion)	\$2,412,742	\$7,169,714	\$4,756,972	197%
	Total Long Term Debt	\$62,389,713	\$65,056,990	\$2,667,277	4%
3	Accrued Pension Liability	\$62,916,776	\$62,941,096	\$24,320	0%
4	Other Long Term Liabilities	\$37,427,574	\$36,132,879	(\$1,294,695)	-3%
	Total Long Term Liabilities	\$162,734,063	\$164,130,965	\$1,396,902	1%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$153,327,362	\$187,197,385	\$33,870,023	22%
2	Temporarily Restricted Net Assets	\$1,399,547	\$2,890,743	\$1,491,196	107%
3	Permanently Restricted Net Assets	\$7,449,124	\$7,755,916	\$306,792	4%
	Total Net Assets	\$162,176,033	\$197,844,044	\$35,668,011	22%
	Total Liabilities and Net Assets	\$357,969,938	\$392,933,024	\$34,963,086	10%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$604,060,585	\$615,524,464	\$11,463,879	2%
2	Less: Allowances	\$327,123,232	\$326,751,789	(\$371,443)	0%
3	Less: Charity Care	\$5,004,135	\$5,552,920	\$548,785	11%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$271,933,218	\$283,219,755	\$11,286,537	4%
5	Other Operating Revenue	\$4,436,092	\$7,282,140	\$2,846,048	64%
6	Net Assets Released from Restrictions	\$673,194	\$174,552	(\$498,642)	-74%
	Total Operating Revenue	\$277,042,504	\$290,676,447	\$13,633,943	5%
B. Operating Expenses:					
1	Salaries and Wages	\$108,402,879	\$112,366,813	\$3,963,934	4%
2	Fringe Benefits	\$25,655,346	\$32,008,290	\$6,352,944	25%
3	Physicians Fees	\$1,766,978	\$1,773,524	\$6,546	0%
4	Supplies and Drugs	\$41,588,424	\$36,906,258	(\$4,682,166)	-11%
5	Depreciation and Amortization	\$16,971,187	\$18,006,195	\$1,035,008	6%
6	Bad Debts	\$12,522,978	\$7,949,694	(\$4,573,284)	-37%
7	Interest	\$3,247,715	\$3,276,169	\$28,454	1%
8	Malpractice	\$1,344,246	\$1,295,901	(\$48,345)	-4%
9	Other Operating Expenses	\$40,573,982	\$50,528,887	\$9,954,905	25%
	Total Operating Expenses	\$252,073,735	\$264,111,731	\$12,037,996	5%
	Income/(Loss) From Operations	\$24,968,769	\$26,564,716	\$1,595,947	6%
C. Non-Operating Revenue:					
1	Income from Investments	\$6,395,778	\$2,634,485	(\$3,761,293)	-59%
2	Gifts, Contributions and Donations	\$158,300	\$147,058	(\$11,242)	-7%
3	Other Non-Operating Gains/(Losses)	(\$565,873)	(\$29,536)	\$536,337	-95%
	Total Non-Operating Revenue	\$5,988,205	\$2,752,007	(\$3,236,198)	-54%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$30,956,974	\$29,316,723	(\$1,640,251)	-5%
Other Adjustments:					
	Unrealized Gains/(Losses)	(\$5,813,831)	\$10,067,106	\$15,880,937	-273%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	(\$5,813,831)	\$10,067,106	\$15,880,937	-273%
	Excess/(Deficiency) of Revenue Over Expenses	\$25,143,143	\$39,383,829	\$14,240,686	57%
	Principal Payments	\$1,948,410	\$2,021,619	\$73,209	4%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$108,699,152	\$108,856,037	\$156,885	0%
2	MEDICARE MANAGED CARE	\$13,962,365	\$16,276,648	\$2,314,283	17%
3	MEDICAID	\$24,905,056	\$33,700,260	\$8,795,204	35%
4	MEDICAID MANAGED CARE	\$12,299,595	\$3,160,099	(\$9,139,496)	-74%
5	CHAMPUS/TRICARE	\$2,882,913	\$3,124,142	\$241,229	8%
6	COMMERCIAL INSURANCE	\$3,189,114	\$3,505,495	\$316,381	10%
7	NON-GOVERNMENT MANAGED CARE	\$69,645,010	\$61,675,987	(\$7,969,023)	-11%
8	WORKER'S COMPENSATION	\$4,002,610	\$3,086,174	(\$916,436)	-23%
9	SELF- PAY/UNINSURED	\$3,268,265	\$2,711,434	(\$556,831)	-17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,325,716	\$1,256,504	(\$69,212)	-5%
	TOTAL INPATIENT GROSS REVENUE	\$244,179,796	\$237,352,780	(\$6,827,016)	-3%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$93,652,314	\$102,335,050	\$8,682,736	9%
2	MEDICARE MANAGED CARE	\$14,343,367	\$18,976,421	\$4,633,054	32%
3	MEDICAID	\$35,205,445	\$62,823,444	\$27,617,999	78%
4	MEDICAID MANAGED CARE	\$29,955,194	\$7,862,902	(\$22,092,292)	-74%
5	CHAMPUS/TRICARE	\$6,860,374	\$7,191,710	\$331,336	5%
6	COMMERCIAL INSURANCE	\$8,165,337	\$9,152,850	\$987,513	12%
7	NON-GOVERNMENT MANAGED CARE	\$153,689,229	\$152,482,603	(\$1,206,626)	-1%
8	WORKER'S COMPENSATION	\$6,894,331	\$5,755,854	(\$1,138,477)	-17%
9	SELF- PAY/UNINSURED	\$10,017,380	\$10,411,627	\$394,247	4%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,097,818	\$1,179,222	\$81,404	7%
	TOTAL OUTPATIENT GROSS REVENUE	\$359,880,789	\$378,171,683	\$18,290,894	5%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$202,351,466	\$211,191,087	\$8,839,621	4%
2	MEDICARE MANAGED CARE	\$28,305,732	\$35,253,069	\$6,947,337	25%
3	MEDICAID	\$60,110,501	\$96,523,704	\$36,413,203	61%
4	MEDICAID MANAGED CARE	\$42,254,789	\$11,023,001	(\$31,231,788)	-74%
5	CHAMPUS/TRICARE	\$9,743,287	\$10,315,852	\$572,565	6%
6	COMMERCIAL INSURANCE	\$11,354,451	\$12,658,345	\$1,303,894	11%
7	NON-GOVERNMENT MANAGED CARE	\$223,334,239	\$214,158,590	(\$9,175,649)	-4%
8	WORKER'S COMPENSATION	\$10,896,941	\$8,842,028	(\$2,054,913)	-19%
9	SELF- PAY/UNINSURED	\$13,285,645	\$13,123,061	(\$162,584)	-1%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$2,423,534	\$2,435,726	\$12,192	1%
	TOTAL GROSS REVENUE	\$604,060,585	\$615,524,463	\$11,463,878	2%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$45,743,280	\$55,423,560	\$9,680,280	21%
2	MEDICARE MANAGED CARE	\$5,790,541	\$6,684,346	\$893,805	15%
3	MEDICAID	\$7,327,731	\$9,406,928	\$2,079,197	28%
4	MEDICAID MANAGED CARE	\$3,598,585	\$860,977	(\$2,737,608)	-76%
5	CHAMPUS/TRICARE	\$1,160,549	\$1,364,747	\$204,198	18%
6	COMMERCIAL INSURANCE	\$2,824,803	\$3,176,899	\$352,096	12%
7	NON-GOVERNMENT MANAGED CARE	\$53,889,334	\$50,064,203	(\$3,825,131)	-7%
8	WORKER'S COMPENSATION	\$3,003,982	\$2,407,196	(\$596,786)	-20%
9	SELF- PAY/UNINSURED	\$702,521	\$706,485	\$3,964	1%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$284,954	\$362,821	\$77,867	27%

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FISCAL YEAR 2012
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$124,326,280	\$130,458,162	\$6,131,882	5%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$23,798,621	\$25,193,532	\$1,394,911	6%
2	MEDICARE MANAGED CARE	\$3,294,352	\$4,556,262	\$1,261,910	38%
3	MEDICAID	\$7,120,642	\$13,642,669	\$6,522,027	92%
4	MEDICAID MANAGED CARE	\$8,411,984	\$2,157,866	(\$6,254,118)	-74%
5	CHAMPUS/TRICARE	\$1,906,524	\$1,957,670	\$51,146	3%
6	COMMERCIAL INSURANCE	\$6,778,292	\$7,704,302	\$926,010	14%
7	NON-GOVERNMENT MANAGED CARE	\$84,378,495	\$85,293,028	\$914,533	1%
8	WORKER'S COMPENSATION	\$4,965,320	\$4,079,984	(\$885,336)	-18%
9	SELF- PAY/UNINSURED	\$2,365,301	\$1,974,665	(\$390,636)	-17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$285,216	\$266,662	(\$18,554)	-7%
	TOTAL OUTPATIENT NET REVENUE	\$143,304,747	\$146,826,640	\$3,521,893	2%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$69,541,901	\$80,617,092	\$11,075,191	16%
2	MEDICARE MANAGED CARE	\$9,084,893	\$11,240,608	\$2,155,715	24%
3	MEDICAID	\$14,448,373	\$23,049,597	\$8,601,224	60%
4	MEDICAID MANAGED CARE	\$12,010,569	\$3,018,843	(\$8,991,726)	-75%
5	CHAMPUS/TRICARE	\$3,067,073	\$3,322,417	\$255,344	8%
6	COMMERCIAL INSURANCE	\$9,603,095	\$10,881,201	\$1,278,106	13%
7	NON-GOVERNMENT MANAGED CARE	\$138,267,829	\$135,357,231	(\$2,910,598)	-2%
8	WORKER'S COMPENSATION	\$7,969,302	\$6,487,180	(\$1,482,122)	-19%
9	SELF- PAY/UNINSURED	\$3,067,822	\$2,681,150	(\$386,672)	-13%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$570,170	\$629,483	\$59,313	10%
	TOTAL NET REVENUE	\$267,631,027	\$277,284,802	\$9,653,775	4%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	4,617	4,787	170	4%
2	MEDICARE MANAGED CARE	583	721	138	24%
3	MEDICAID	1,205	2,055	850	71%
4	MEDICAID MANAGED CARE	1,113	231	(882)	-79%
5	CHAMPUS/TRICARE	237	220	(17)	-7%
6	COMMERCIAL INSURANCE	146	169	23	16%
7	NON-GOVERNMENT MANAGED CARE	3,730	3,433	(297)	-8%
8	WORKER'S COMPENSATION	130	110	(20)	-15%
9	SELF- PAY/UNINSURED	172	124	(48)	-28%
10	SAGA	0	0	0	0%
11	OTHER	66	61	(5)	-8%
	TOTAL DISCHARGES	11,999	11,911	(88)	-1%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	22,778	23,639	861	4%
2	MEDICARE MANAGED CARE	2,805	3,279	474	17%
3	MEDICAID	5,833	8,064	2,231	38%
4	MEDICAID MANAGED CARE	3,236	748	(2,488)	-77%
5	CHAMPUS/TRICARE	617	636	19	3%
6	COMMERCIAL INSURANCE	487	584	97	20%
7	NON-GOVERNMENT MANAGED CARE	12,482	11,225	(1,257)	-10%
8	WORKER'S COMPENSATION	353	318	(35)	-10%
9	SELF- PAY/UNINSURED	697	595	(102)	-15%
10	SAGA	0	0	0	0%
11	OTHER	366	273	(93)	-25%
	TOTAL PATIENT DAYS	49,654	49,361	(293)	-1%
C.	OUTPATIENT VISITS				

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

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LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	105,292	107,376	2,084	2%
2	MEDICARE MANAGED CARE	11,042	13,558	2,516	23%
3	MEDICAID	39,951	62,474	22,523	56%
4	MEDICAID MANAGED CARE	26,245	6,719	(19,526)	-74%
5	CHAMPUS/TRICARE	6,874	6,716	(158)	-2%
6	COMMERCIAL INSURANCE	6,696	7,380	684	10%
7	NON-GOVERNMENT MANAGED CARE	168,142	166,630	(1,512)	-1%
8	WORKER'S COMPENSATION	4,807	4,310	(497)	-10%
9	SELF- PAY/UNINSURED	13,040	13,704	664	5%
10	SAGA	0	0	0	0%
11	OTHER	896	832	(64)	-7%
	TOTAL OUTPATIENT VISITS	382,985	389,699	6,714	2%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$17,550,451	\$18,359,534	\$809,083	5%
2	MEDICARE MANAGED CARE	\$1,965,971	\$2,423,726	\$457,755	23%
3	MEDICAID	\$13,918,040	\$35,650,231	\$21,732,191	156%
4	MEDICAID MANAGED CARE	\$14,749,904	\$3,914,200	(\$10,835,704)	-73%
5	CHAMPUS/TRICARE	\$2,255,077	\$2,260,380	\$5,303	0%
6	COMMERCIAL INSURANCE	\$2,717,199	\$2,953,979	\$236,780	9%
7	NON-GOVERNMENT MANAGED CARE	\$29,791,455	\$29,633,311	(\$158,144)	-1%
8	WORKER'S COMPENSATION	\$1,618,152	\$1,534,595	(\$83,557)	-5%
9	SELF- PAY/UNINSURED	\$6,946,245	\$6,973,359	\$27,114	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$853,351	\$323,101	(\$530,250)	-62%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$92,365,845	\$104,026,416	\$11,660,571	13%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$4,349,618	\$4,350,816	\$1,198	0%
2	MEDICARE MANAGED CARE	\$499,465	\$592,367	\$92,902	19%
3	MEDICAID	\$3,096,918	\$6,355,813	\$3,258,895	105%
4	MEDICAID MANAGED CARE	\$4,108,415	\$1,050,728	(\$3,057,687)	-74%
5	CHAMPUS/TRICARE	\$841,599	\$710,317	(\$131,282)	-16%
6	COMMERCIAL INSURANCE	\$2,213,340	\$2,377,226	\$163,886	7%
7	NON-GOVERNMENT MANAGED CARE	\$23,193,904	\$21,857,829	(\$1,336,075)	-6%
8	WORKER'S COMPENSATION	\$1,276,781	\$1,242,975	(\$33,806)	-3%
9	SELF- PAY/UNINSURED	\$1,639,314	\$1,322,564	(\$316,750)	-19%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$170,793	\$58,164	(\$112,629)	-66%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$41,390,147	\$39,918,799	(\$1,471,348)	-4%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	8,684	9,926	1,242	14%
2	MEDICARE MANAGED CARE	875	1,018	143	16%
3	MEDICAID	8,701	19,976	11,275	130%
4	MEDICAID MANAGED CARE	11,713	2,939	(8,774)	-75%
5	CHAMPUS/TRICARE	1,569	1,534	(35)	-2%
6	COMMERCIAL INSURANCE	1,378	1,586	208	15%
7	NON-GOVERNMENT MANAGED CARE	17,078	17,327	249	1%
8	WORKER'S COMPENSATION	1,133	1,161	28	2%
9	SELF- PAY/UNINSURED	4,773	4,799	26	1%
10	SAGA	0	0	0	0%
11	OTHER	448	472	24	5%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	56,352	60,738	4,386	8%

**WILLIAM W. BACKUS HOSPITAL
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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$39,914,015	\$41,141,324	\$1,227,309	3%
2	Physician Salaries	\$11,095,920	\$10,294,416	(\$801,504)	-7%
3	Non-Nursing, Non-Physician Salaries	\$57,392,944	\$60,931,073	\$3,538,129	6%
	Total Salaries & Wages	\$108,402,879	\$112,366,813	\$3,963,934	4%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$7,696,604	\$9,543,566	\$1,846,962	24%
2	Physician Fringe Benefits	\$1,266,332	\$1,260,567	(\$5,765)	0%
3	Non-Nursing, Non-Physician Fringe Benefits	\$16,692,410	\$21,204,157	\$4,511,747	27%
	Total Fringe Benefits	\$25,655,346	\$32,008,290	\$6,352,944	25%
C. Contractual Labor Fees:					
1	Nursing Fees	\$947,879	\$1,634,865	\$686,986	72%
2	Physician Fees	\$1,766,978	\$1,773,524	\$6,546	0%
3	Non-Nursing, Non-Physician Fees	\$3,605,001	\$6,489,941	\$2,884,940	80%
	Total Contractual Labor Fees	\$6,319,858	\$9,898,330	\$3,578,472	57%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$30,858,845	\$24,766,385	(\$6,092,460)	-20%
2	Pharmaceutical Costs	\$10,729,579	\$12,139,873	\$1,410,294	13%
	Total Medical Supplies and Pharmaceutical Cost	\$41,588,424	\$36,906,258	(\$4,682,166)	-11%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$8,840,289	\$9,033,362	\$193,073	2%
2	Depreciation-Equipment	\$8,039,864	\$8,885,262	\$845,398	11%
3	Amortization	\$91,034	\$87,571	(\$3,463)	-4%
	Total Depreciation and Amortization	\$16,971,187	\$18,006,195	\$1,035,008	6%
F. Bad Debts:					
1	Bad Debts	\$12,522,978	\$7,949,694	(\$4,573,284)	-37%
G. Interest Expense:					
1	Interest Expense	\$3,247,715	\$3,276,169	\$28,454	1%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$1,344,246	\$1,295,901	(\$48,345)	-4%
I. Utilities:					
1	Water	\$270,390	\$263,657	(\$6,733)	-2%
2	Natural Gas	\$1,325,484	\$1,204,425	(\$121,059)	-9%
3	Oil	\$42,600	\$40,302	(\$2,298)	-5%
4	Electricity	\$2,983,942	\$3,092,082	\$108,140	4%
5	Telephone	\$483,724	\$456,335	(\$27,389)	-6%
6	Other Utilities	\$39,471	\$50,268	\$10,797	27%
	Total Utilities	\$5,145,611	\$5,107,069	(\$38,542)	-1%
J. Business Expenses:					
1	Accounting Fees	\$158,170	\$415,616	\$257,446	163%
2	Legal Fees	\$972,377	\$2,172,228	\$1,199,851	123%
3	Consulting Fees	\$3,750,121	\$3,622,311	(\$127,810)	-3%
4	Dues and Membership	\$1,069,580	\$946,280	(\$123,300)	-12%
5	Equipment Leases	\$362,177	\$270,042	(\$92,135)	-25%
6	Building Leases	\$961,720	\$1,080,500	\$118,780	12%
7	Repairs and Maintenance	\$1,091,451	\$1,377,016	\$285,565	26%
8	Insurance	\$534,189	\$359,778	(\$174,411)	-33%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$110,680	\$83,857	(\$26,823)	-24%
10	Conferences	\$369,607	\$319,627	(\$49,980)	-14%
11	Property Tax	\$135,241	\$107,279	(\$27,962)	-21%
12	General Supplies	\$2,046,634	\$1,420,335	(\$626,299)	-31%
13	Licenses and Subscriptions	\$68,833	\$95,919	\$27,086	39%
14	Postage and Shipping	\$749,678	\$791,416	\$41,738	6%
15	Advertising	\$194,970	\$188,256	(\$6,714)	-3%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$2,872,875	\$2,872,875	0%
18	Computer hardware & small equipment	\$0	\$672,866	\$672,866	0%
19	Dietary / Food Services	\$0	\$1,552,537	\$1,552,537	0%
20	Lab Fees / Red Cross charges	\$0	\$3,894,164	\$3,894,164	0%
21	Billing & Collection / Bank Fees	\$0	\$103,090	\$103,090	0%
22	Recruiting / Employee Education & Recognition	\$0	\$544,055	\$544,055	0%
23	Laundry / Linen	\$0	\$894,106	\$894,106	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$230,533	\$230,533	0%
26	Purchased Services - Medical	\$0	\$3,596,645	\$3,596,645	0%
27	Purchased Services - Non Medical	\$0	\$4,871,600	\$4,871,600	0%
28	Other Business Expenses	\$18,300,063	\$4,814,081	(\$13,485,982)	-74%
	Total Business Expenses	\$30,875,491	\$37,297,012	\$6,421,521	21%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$252,073,735	\$264,111,731	\$12,037,996	5%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$45,092,393	\$44,684,977	(\$407,416)	-1%
2	General Accounting	\$1,220,190	\$1,285,799	\$65,609	5%
3	Patient Billing & Collection	\$2,773,551	\$2,777,119	\$3,568	0%
4	Admitting / Registration Office	\$2,768,080	\$2,859,442	\$91,362	3%
5	Data Processing	\$8,908,110	\$11,164,937	\$2,256,827	25%
6	Communications	\$227,608	\$0	(\$227,608)	-100%
7	Personnel	\$30,500,666	\$36,113,016	\$5,612,350	18%
8	Public Relations	\$1,217,313	\$1,711,598	\$494,285	41%
9	Purchasing	\$985,191	\$1,130,504	\$145,313	15%
10	Dietary and Cafeteria	\$3,243,831	\$3,453,659	\$209,828	6%
11	Housekeeping	\$2,593,379	\$2,838,619	\$245,240	9%
12	Laundry & Linen	\$131,283	\$187,844	\$56,561	43%
13	Operation of Plant	\$6,025,261	\$4,724,281	(\$1,300,980)	-22%
14	Security	\$1,278,567	\$1,591,264	\$312,697	24%
15	Repairs and Maintenance	\$2,240,585	\$2,549,087	\$308,502	14%
16	Central Sterile Supply	\$1,605,071	\$1,530,262	(\$74,809)	-5%
17	Pharmacy Department	\$13,346,562	\$14,971,819	\$1,625,257	12%
18	Other General Services	\$0	\$0	\$0	0%
	Total General Services	\$124,157,641	\$133,574,227	\$9,416,586	8%
B.	Professional Services:				
1	Medical Care Administration	\$472,710	\$573,167	\$100,457	21%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$2,115,775	\$2,464,481	\$348,706	16%
4	Medical Records	\$2,984,509	\$2,915,700	(\$68,809)	-2%

WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
5	Social Service	\$1,870,074	\$2,307,251	\$437,177	23%
6	Other Professional Services	\$1,458,337	\$1,345,576	(\$112,761)	-8%
	Total Professional Services	\$8,901,405	\$9,606,175	\$704,770	8%
C.	<u>Special Services:</u>				
1	Operating Room	\$9,298,879	\$9,238,553	(\$60,326)	-1%
2	Recovery Room	\$2,126,059	\$2,372,485	\$246,426	12%
3	Anesthesiology	\$1,155,436	\$765,159	(\$390,277)	-34%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$8,748,643	\$7,407,486	(\$1,341,157)	-15%
6	Diagnostic Ultrasound	\$1,401,204	\$1,287,069	(\$114,135)	-8%
7	Radiation Therapy	\$3,195,481	\$3,295,326	\$99,845	3%
8	Radioisotopes	\$1,099,386	\$972,824	(\$126,562)	-12%
9	CT Scan	\$2,007,427	\$2,176,045	\$168,618	8%
10	Laboratory	\$11,024,380	\$11,316,289	\$291,909	3%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$1,298,385	\$1,320,953	\$22,568	2%
13	Electrocardiology	\$235,781	\$239,435	\$3,654	2%
14	Electroencephalography	\$148,588	\$176,926	\$28,338	19%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,874,778	\$1,919,733	\$44,955	2%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$1,103,572	\$1,111,825	\$8,253	1%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,589,580	\$1,587,372	(\$2,208)	0%
23	Renal Dialysis	\$615,670	\$570,667	(\$45,003)	-7%
24	Emergency Room	\$14,607,816	\$16,229,700	\$1,621,884	11%
25	MRI	\$2,887,133	\$3,104,280	\$217,147	8%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$680,941	\$645,208	(\$35,733)	-5%
28	Endoscopy	\$1,139,984	\$1,338,374	\$198,390	17%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$241,131	\$273,370	\$32,239	13%
31	Cardiac Catheterization/Rehabilitation	\$1,350,207	\$1,426,927	\$76,720	6%
32	Occupational Therapy / Physical Therapy	\$2,140,351	\$2,242,391	\$102,040	5%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$16,556,406	\$12,913,645	(\$3,642,761)	-22%
	Total Special Services	\$86,527,218	\$83,932,042	(\$2,595,176)	-3%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$18,937,783	\$23,372,280	\$4,434,497	23%
2	Intensive Care Unit	\$3,156,837	\$3,059,440	(\$97,397)	-3%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,107,786	\$2,181,926	\$74,140	4%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,014,654	\$4,178,659	\$164,005	4%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$270,048,715	\$ 271,933,218	\$283,219,755
2	Other Operating Revenue	4,374,927	5,109,286	7,456,692
3	Total Operating Revenue	\$274,423,642	\$277,042,504	\$290,676,447
4	Total Operating Expenses	262,102,283	252,073,735	264,111,731
5	Income/(Loss) From Operations	\$12,321,359	\$24,968,769	\$26,564,716
6	Total Non-Operating Revenue	6,430,426	174,374	12,819,113
7	Excess/(Deficiency) of Revenue Over Expenses	\$18,751,785	\$25,143,143	\$39,383,829
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	4.39%	9.01%	8.75%
2	Hospital Non Operating Margin	2.29%	0.06%	4.22%
3	Hospital Total Margin	6.68%	9.07%	12.98%
4	Income/(Loss) From Operations	\$12,321,359	\$24,968,769	\$26,564,716
5	Total Operating Revenue	\$274,423,642	\$277,042,504	\$290,676,447
6	Total Non-Operating Revenue	\$6,430,426	\$174,374	\$12,819,113
7	Total Revenue	\$280,854,068	\$277,216,878	\$303,495,560
8	Excess/(Deficiency) of Revenue Over Expenses	\$18,751,785	\$25,143,143	\$39,383,829
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$147,348,055	\$153,327,362	\$187,197,385
2	Hospital Total Net Assets	\$158,925,018	\$162,176,033	\$197,844,044
3	Hospital Change in Total Net Assets	\$46,321,449	\$3,251,015	\$35,668,011
4	Hospital Change in Total Net Assets %	141.1%	2.0%	22.0%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.44	0.41	0.42
2	Total Operating Expenses	\$262,102,283	\$252,073,735	\$264,111,731
3	Total Gross Revenue	\$585,390,725	\$604,060,585	\$615,524,463
4	Total Other Operating Revenue	\$4,374,927	\$5,109,286	\$7,456,692
5	Private Payment to Cost Ratio	1.42	1.53	1.53
6	Total Non-Government Payments	\$155,853,342	\$158,908,048	\$155,406,762

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
7	Total Uninsured Payments	\$3,099,707	\$3,067,822	\$2,681,150
8	Total Non-Government Charges	\$256,545,666	\$258,871,276	\$248,782,024
9	Total Uninsured Charges	\$13,942,288	\$13,285,645	\$13,123,061
10	<u>Medicare Payment to Cost Ratio</u>	0.77	0.82	0.88
11	Total Medicare Payments	\$76,969,419	\$78,626,794	\$91,857,700
12	Total Medicare Charges	\$225,705,418	\$230,657,198	\$246,444,156
13	<u>Medicaid Payment to Cost Ratio</u>	0.61	0.62	0.57
14	Total Medicaid Payments	\$19,918,093	\$26,458,942	\$26,068,440
15	Total Medicaid Charges	\$73,995,947	\$102,365,290	\$107,546,705
16	<u>Uncompensated Care Cost</u>	\$9,257,065	\$7,184,927	\$5,694,063
17	Charity Care	\$6,321,367	\$4,672,730	\$5,341,790
18	Bad Debts	\$14,508,284	\$12,690,606	\$8,089,246
19	Total Uncompensated Care	\$20,829,651	\$17,363,336	\$13,431,036
20	<u>Uncompensated Care % of Total Expenses</u>	3.5%	2.9%	2.2%
21	Total Operating Expenses	\$262,102,283	\$252,073,735	\$264,111,731
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	3.90	4.14	4.99
2	Total Current Assets	\$116,727,013	\$136,970,305	\$154,331,609
3	Total Current Liabilities	\$29,948,555	\$33,059,842	\$30,958,015
4	<u>Days Cash on Hand</u>	108	145	159
5	Cash and Cash Equivalents	\$72,131,779	\$93,136,217	\$107,428,365
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$72,131,779	\$93,136,217	\$107,428,365
8	Total Operating Expenses	\$262,102,283	\$252,073,735	\$264,111,731
9	Depreciation Expense	\$17,480,126	\$16,971,187	\$18,006,195
10	Operating Expenses less Depreciation Expense	\$244,622,157	\$235,102,548	\$246,105,536
11	<u>Days Revenue in Patient Accounts Receivable</u>	38.04	37.17	39.72

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
12	Net Patient Accounts Receivable	\$ 30,758,941	\$ 32,373,122	\$ 32,015,340
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$2,614,222	\$4,683,178	\$1,193,235
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 28,144,719	\$ 27,689,944	\$ 30,822,105
16	Total Net Patient Revenue	\$270,048,715	\$ 271,933,218	\$ 283,219,755
17	<u>Average Payment Period</u>	44.69	51.33	45.91
18	Total Current Liabilities	\$29,948,555	\$33,059,842	\$30,958,015
19	Total Operating Expenses	\$262,102,283	\$252,073,735	\$264,111,731
20	Depreciation Expense	\$17,480,126	\$16,971,187	\$18,006,195
21	Total Operating Expenses less Depreciation Expense	\$244,622,157	\$235,102,548	\$246,105,536
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	47.4	45.3	50.4
2	Total Net Assets	\$158,925,018	\$162,176,033	\$197,844,044
3	Total Assets	\$335,070,249	\$357,969,938	\$392,933,024
4	<u>Cash Flow to Total Debt Ratio</u>	38.3	44.1	59.8
5	Excess/(Deficiency) of Revenues Over Expenses	\$18,751,785	\$25,143,143	\$39,383,829
6	Depreciation Expense	\$17,480,126	\$16,971,187	\$18,006,195
7	Excess of Revenues Over Expenses and Depreciation Expense	\$36,231,911	\$42,114,330	\$57,390,024
8	Total Current Liabilities	\$29,948,555	\$33,059,842	\$30,958,015
9	Total Long Term Debt	\$64,591,831	\$62,389,713	\$65,056,990
10	Total Current Liabilities and Total Long Term Debt	\$94,540,386	\$95,449,555	\$96,015,005
11	<u>Long Term Debt to Capitalization Ratio</u>	28.9	27.8	24.7
12	Total Long Term Debt	\$64,591,831	\$62,389,713	\$65,056,990
13	Total Net Assets	\$158,925,018	\$162,176,033	\$197,844,044
14	Total Long Term Debt and Total Net Assets	\$223,516,849	\$224,565,746	\$262,901,034
15	<u>Debt Service Coverage Ratio</u>	7.8	8.7	11.5
16	Excess Revenues over Expenses	\$18,751,785	\$25,143,143	\$39,383,829
17	Interest Expense	\$3,185,038	\$3,247,715	\$3,276,169
18	Depreciation and Amortization Expense	\$17,480,126	\$16,971,187	\$18,006,195

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
19	Principal Payments	\$1,838,414	\$1,948,410	\$2,021,619
G. <u>Other Financial Ratios</u>				
20	Average Age of Plant	7.6	8.3	8.3
21	Accumulated Depreciation	\$132,727,325	\$140,786,203	\$148,957,964
22	Depreciation and Amortization Expense	\$17,480,126	\$16,971,187	\$18,006,195
H. <u>Utilization Measures Summary</u>				
1	Patient Days	49,096	49,654	49,361
2	Discharges	12,175	11,999	11,911
3	ALOS	4.0	4.1	4.1
4	Staffed Beds	202	202	201
5	Available Beds	-	233	233
6	Licensed Beds	233	233	233
6	Occupancy of Staffed Beds	66.6%	67.3%	67.3%
7	Occupancy of Available Beds	57.7%	58.4%	58.0%
8	Full Time Equivalent Employees	1,542.1	1,513.9	1,542.8
I. <u>Hospital Gross Revenue Payer Mix Percentage</u>				
1	Non-Government Gross Revenue Payer Mix Percentage	41.4%	40.7%	38.3%
2	Medicare Gross Revenue Payer Mix Percentage	38.6%	38.2%	40.0%
3	Medicaid Gross Revenue Payer Mix Percentage	12.6%	16.9%	17.5%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	3.4%	0.4%	0.4%
5	Uninsured Gross Revenue Payer Mix Percentage	2.4%	2.2%	2.1%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	1.6%	1.6%	1.7%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$242,603,378	\$245,585,631	\$235,658,963
9	Medicare Gross Revenue (Charges)	\$225,705,418	\$230,657,198	\$246,444,156
10	Medicaid Gross Revenue (Charges)	\$73,995,947	\$102,365,290	\$107,546,705
11	Other Medical Assistance Gross Revenue (Charges)	\$19,617,131	\$2,423,534	\$2,435,726
12	Uninsured Gross Revenue (Charges)	\$13,942,288	\$13,285,645	\$13,123,061
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$9,526,563	\$9,743,287	\$10,315,852
14	Total Gross Revenue (Charges)	\$585,390,725	\$604,060,585	\$615,524,463
J. <u>Hospital Net Revenue Payer Mix Percentage</u>				
1	Non-Government Net Revenue Payer Mix Percentage	59.1%	58.2%	55.1%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
2	Medicare Net Revenue Payer Mix Percentage	29.8%	29.4%	33.1%
3	Medicaid Net Revenue Payer Mix Percentage	7.7%	9.9%	9.4%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.1%	0.2%	0.2%
5	Uninsured Net Revenue Payer Mix Percentage	1.2%	1.1%	1.0%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	1.2%	1.1%	1.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$152,753,635	\$155,840,226	\$152,725,612
9	Medicare Net Revenue (Payments)	\$76,969,419	\$78,626,794	\$91,857,700
10	Medicaid Net Revenue (Payments)	\$19,918,093	\$26,458,942	\$26,068,440
11	Other Medical Assistance Net Revenue (Payments)	\$2,765,668	\$570,170	\$629,483
12	Uninsured Net Revenue (Payments)	\$3,099,707	\$3,067,822	\$2,681,150
13	CHAMPUS / TRICARE Net Revenue Payments)	\$3,116,091	\$3,067,073	\$3,322,417
14	Total Net Revenue (Payments)	\$258,622,613	\$267,631,027	\$277,284,802
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	4,440	4,178	3,836
2	Medicare	5,229	5,200	5,508
3	Medical Assistance	2,289	2,384	2,347
4	Medicaid	1,891	2,318	2,286
5	Other Medical Assistance	398	66	61
6	CHAMPUS / TRICARE	217	237	220
7	Uninsured (Included In Non-Government)	176	172	124
8	Total	12,175	11,999	11,911
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	1.216000	1.257400	1.253000
2	Medicare	1.417000	1.450700	1.365400
3	Medical Assistance	0.934102	1.001294	1.005573
4	Medicaid	0.886200	0.996500	1.005100
5	Other Medical Assistance	1.161700	1.169700	1.023300
6	CHAMPUS / TRICARE	0.787400	0.839800	0.941200
7	Uninsured (Included In Non-Government)	1.011900	1.020200	1.150700
8	Total Case Mix Index	1.241688	1.282038	1.250463
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	6,391	6,846	7,364
2	Emergency Room - Treated and Discharged	59,170	56,352	60,738
3	Total Emergency Room Visits	65,561	63,198	68,102

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$444,399	\$1,482,310	\$1,037,911	234%
2	Inpatient Payments	\$244,260	\$594,747	\$350,487	143%
3	Outpatient Charges	\$694,010	\$2,100,622	\$1,406,612	203%
4	Outpatient Payments	\$172,546	\$657,965	\$485,419	281%
5	Discharges	21	64	43	205%
6	Patient Days	93	297	204	219%
7	Outpatient Visits (Excludes ED Visits)	334	1,253	919	275%
8	Emergency Department Outpatient Visits	35	98	63	180%
9	Emergency Department Inpatient Admissions	19	49	30	158%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,138,409	\$3,582,932	\$2,444,523	215%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$416,806	\$1,252,712	\$835,906	201%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$5,845,085	\$8,057,333	\$2,212,248	38%
2	Inpatient Payments	\$2,486,438	\$3,335,697	\$849,259	34%
3	Outpatient Charges	\$7,146,797	\$10,478,050	\$3,331,253	47%
4	Outpatient Payments	\$1,621,038	\$2,338,036	\$716,998	44%
5	Discharges	248	370	122	49%
6	Patient Days	1,129	1,650	521	46%
7	Outpatient Visits (Excludes ED Visits)	5,053	7,377	2,324	46%
8	Emergency Department Outpatient Visits	348	491	143	41%
9	Emergency Department Inpatient Admissions	168	282	114	68%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,991,882	\$18,535,383	\$5,543,501	43%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,107,476	\$5,673,733	\$1,566,257	38%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$1,765,932	\$14,651	(\$1,751,281)	-99%
2	Inpatient Payments	\$726,270	\$6,845	(\$719,425)	-99%
3	Outpatient Charges	\$2,045,059	\$18,749	(\$2,026,310)	-99%
4	Outpatient Payments	\$441,479	\$3,936	(\$437,543)	-99%
5	Discharges	77	1	(76)	-99%
6	Patient Days	402	4	(398)	-99%
7	Outpatient Visits (Excludes ED Visits)	1,544	13	(1,531)	-99%
8	Emergency Department Outpatient Visits	108	0	(108)	-100%
9	Emergency Department Inpatient Admissions	47	1	(46)	-98%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,810,991	\$33,400	(\$3,777,591)	-99%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,167,749	\$10,781	(\$1,156,968)	-99%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$1,803,407	\$603,502	(\$1,199,905)	-67%
2	Inpatient Payments	\$662,697	\$303,529	(\$359,168)	-54%
3	Outpatient Charges	\$757,398	\$748,773	(\$8,625)	-1%
4	Outpatient Payments	\$216,000	\$206,827	(\$9,173)	-4%
5	Discharges	72	38	(34)	-47%
6	Patient Days	360	136	(224)	-62%
7	Outpatient Visits (Excludes ED Visits)	432	371	(61)	-14%
8	Emergency Department Outpatient Visits	95	94	(1)	-1%
9	Emergency Department Inpatient Admissions	67	34	(33)	-49%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,560,805	\$1,352,275	(\$1,208,530)	-47%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$878,697	\$510,356	(\$368,341)	-42%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$71,126	\$19,471	(\$51,655)	-73%
2	Inpatient Payments	\$34,822	\$7,050	(\$27,772)	-80%
3	Outpatient Charges	\$17,230	\$737	(\$16,493)	-96%
4	Outpatient Payments	\$4,115	\$111	(\$4,004)	-97%
5	Discharges	4	1	(3)	-75%
6	Patient Days	20	3	(17)	-85%
7	Outpatient Visits (Excludes ED Visits)	5	5	0	0%
8	Emergency Department Outpatient Visits	4	0	(4)	-100%
9	Emergency Department Inpatient Admissions	4	1	(3)	-75%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$88,356	\$20,208	(\$68,148)	-77%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$38,937	\$7,161	(\$31,776)	-82%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$3,850,403	\$6,043,646	\$2,193,243	57%
2	Inpatient Payments	\$1,556,890	\$2,410,603	\$853,713	55%
3	Outpatient Charges	\$3,600,656	\$5,541,836	\$1,941,180	54%
4	Outpatient Payments	\$818,427	\$1,330,734	\$512,307	63%
5	Discharges	151	244	93	62%
6	Patient Days	762	1,179	417	55%
7	Outpatient Visits (Excludes ED Visits)	2,708	3,392	684	25%
8	Emergency Department Outpatient Visits	273	327	54	20%
9	Emergency Department Inpatient Admissions	118	187	69	58%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,451,059	\$11,585,482	\$4,134,423	55%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,375,317	\$3,741,337	\$1,366,020	58%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
I. AETNA					
1	Inpatient Charges	\$128,404	\$42,439	(\$85,965)	-67%
2	Inpatient Payments	\$60,121	\$20,565	(\$39,556)	-66%
3	Outpatient Charges	\$53,421	\$81,000	\$27,579	52%
4	Outpatient Payments	\$12,498	\$16,799	\$4,301	34%
5	Discharges	7	2	(5)	-71%
6	Patient Days	29	5	(24)	-83%
7	Outpatient Visits (Excludes ED Visits)	66	122	56	85%
8	Emergency Department Outpatient Visits	6	6	0	0%
9	Emergency Department Inpatient Admissions	6	1	(5)	-83%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$181,825	\$123,439	(\$58,386)	-32%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$72,619	\$37,364	(\$35,255)	-49%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$53,609	\$13,296	(\$40,313)	-75%
2	Inpatient Payments	\$19,043	\$5,310	(\$13,733)	-72%
3	Outpatient Charges	\$28,796	\$6,654	(\$22,142)	-77%
4	Outpatient Payments	\$8,249	\$1,854	(\$6,395)	-78%
5	Discharges	3	1	(2)	-67%
6	Patient Days	10	5	(5)	-50%
7	Outpatient Visits (Excludes ED Visits)	25	7	(18)	-72%
8	Emergency Department Outpatient Visits	6	2	(4)	-67%
9	Emergency Department Inpatient Admissions	3	1	(2)	-67%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$82,405	\$19,950	(\$62,455)	-76%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$27,292	\$7,164	(\$20,128)	-74%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$13,962,365	\$16,276,648	\$2,314,283	17%
	TOTAL INPATIENT PAYMENTS	\$5,790,541	\$6,684,346	\$893,805	15%
	TOTAL OUTPATIENT CHARGES	\$14,343,367	\$18,976,421	\$4,633,054	32%
	TOTAL OUTPATIENT PAYMENTS	\$3,294,352	\$4,556,262	\$1,261,910	38%
	TOTAL DISCHARGES	583	721	138	24%
	TOTAL PATIENT DAYS	2,805	3,279	474	17%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	10,167	12,540	2,373	23%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	875	1,018	143	16%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	432	556	124	29%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$28,305,732	\$35,253,069	\$6,947,337	25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$9,084,893	\$11,240,608	\$2,155,715	24%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$0	\$0	\$0	0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$7,968,729	\$2,072,872	(\$5,895,857)	-74%
2	Inpatient Payments	\$2,278,846	\$506,740	(\$1,772,106)	-78%
3	Outpatient Charges	\$21,294,421	\$5,609,912	(\$15,684,509)	-74%
4	Outpatient Payments	\$6,137,666	\$1,592,945	(\$4,544,721)	-74%
5	Discharges	778	158	(620)	-80%
6	Patient Days	1,957	416	(1,541)	-79%
7	Outpatient Visits (Excludes ED Visits)	10,819	2,784	(8,035)	-74%
8	Emergency Department Outpatient Visits	8,224	2,094	(6,130)	-75%
9	Emergency Department Inpatient Admissions	138	53	(85)	-62%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$29,263,150	\$7,682,784	(\$21,580,366)	-74%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$8,416,512	\$2,099,685	(\$6,316,827)	-75%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$0	\$0	\$0	0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$0	\$0	\$0	0%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$3,071,506	\$937,167	(\$2,134,339)	-69%
2	Inpatient Payments	\$1,028,637	\$312,303	(\$716,334)	-70%
3	Outpatient Charges	\$4,515,139	\$1,393,172	(\$3,121,967)	-69%
4	Outpatient Payments	\$1,194,953	\$351,060	(\$843,893)	-71%
5	Discharges	271	61	(210)	-77%
6	Patient Days	1,029	301	(728)	-71%
7	Outpatient Visits (Excludes ED Visits)	2,141	646	(1,495)	-70%
8	Emergency Department Outpatient Visits	1,723	448	(1,275)	-74%
9	Emergency Department Inpatient Admissions	95	36	(59)	-62%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,586,645	\$2,330,339	(\$5,256,306)	-69%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,223,590	\$663,363	(\$1,560,227)	-70%
E. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**WILLIAM W. BACKUS HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	G. UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	H. AETNA				
1	Inpatient Charges	\$1,259,360	\$150,060	(\$1,109,300)	-88%
2	Inpatient Payments	\$291,102	\$41,934	(\$249,168)	-86%
3	Outpatient Charges	\$4,145,634	\$859,818	(\$3,285,816)	-79%
4	Outpatient Payments	\$1,079,365	\$213,861	(\$865,504)	-80%
5	Discharges	64	12	(52)	-81%
6	Patient Days	250	31	(219)	-88%
7	Outpatient Visits (Excludes ED Visits)	1,572	350	(1,222)	-78%
8	Emergency Department Outpatient Visits	1,766	397	(1,369)	-78%
9	Emergency Department Inpatient Admissions	39	12	(27)	-69%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,404,994	\$1,009,878	(\$4,395,116)	-81%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,370,467	\$255,795	(\$1,114,672)	-81%
	II. TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$12,299,595	\$3,160,099	(\$9,139,496)	-74%
	TOTAL INPATIENT PAYMENTS	\$3,598,585	\$860,977	(\$2,737,608)	-76%
	TOTAL OUTPATIENT CHARGES	\$29,955,194	\$7,862,902	(\$22,092,292)	-74%
	TOTAL OUTPATIENT PAYMENTS	\$8,411,984	\$2,157,866	(\$6,254,118)	-74%
	TOTAL DISCHARGES	1,113	231	(882)	-79%
	TOTAL PATIENT DAYS	3,236	748	(2,488)	-77%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	14,532	3,780	(10,752)	-74%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	11,713	2,939	(8,774)	-75%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	272	101	(171)	-63%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$42,254,789	\$11,023,001	(\$31,231,788)	-74%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$12,010,569	\$3,018,843	(\$8,991,726)	-75%

**WILLIAM W. BACKUS HOSPITAL
 TWELVE MONTHS ACTUAL FILING
 FISCAL YEAR 2012
 REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$95,434,551	\$108,322,462	\$12,887,911	14%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$34,428,013	\$33,684,894	(\$743,119)	-2%
4	Current Assets Whose Use is Limited for Current Liabilities	\$5,885,482	\$7,433,046	\$1,547,564	26%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$3,704,067	\$3,548,865	(\$155,202)	-4%
8	Prepaid Expenses	\$1,634,141	\$3,370,245	\$1,736,104	106%
9	Other Current Assets	\$101,211	\$31,723	(\$69,488)	-69%
	Total Current Assets	\$141,187,465	\$156,391,235	\$15,203,770	11%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$28,078,427	\$30,175,064	\$2,096,637	7%
2	Board Designated for Capital Acquisition	\$99,552,920	\$109,435,719	\$9,882,799	10%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$127,631,347	\$139,610,783	\$11,979,436	9%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$3,979,554	\$8,251,731	\$4,272,177	107%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$230,357,085	\$239,543,110	\$9,186,025	4%
2	Less: Accumulated Depreciation	\$141,087,085	\$149,323,044	\$8,235,959	\$0
	Property, Plant and Equipment, Net	\$89,270,000	\$90,220,066	\$950,066	1%
3	Construction in Progress	\$1,365,773	\$1,747,654	\$381,881	28%
	Total Net Fixed Assets	\$90,635,773	\$91,967,720	\$1,331,947	1%
	Total Assets	\$363,434,139	\$396,221,469	\$32,787,330	9%

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$10,347,081	\$9,833,003	(\$514,078)	-5%
2	Salaries, Wages and Payroll Taxes	\$7,383,760	\$7,663,502	\$279,742	4%
3	Due To Third Party Payers	\$5,023,840	\$1,481,120	(\$3,542,720)	-71%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,965,000	\$2,045,000	\$80,000	4%
6	Current Portion of Notes Payable	\$150,360	\$301,210	\$150,850	100%
7	Other Current Liabilities	\$9,900,034	\$11,689,505	\$1,789,471	18%
	Total Current Liabilities	\$34,770,075	\$33,013,340	(\$1,756,735)	-5%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$59,976,971	\$57,887,276	(\$2,089,695)	-3%
2	Notes Payable (Net of Current Portion)	\$2,412,742	\$7,169,714	\$4,756,972	197%
	Total Long Term Debt	\$62,389,713	\$65,056,990	\$2,667,277	4%
3	Accrued Pension Liability	\$62,916,776	\$62,941,096	\$24,320	0%
4	Other Long Term Liabilities	\$40,594,961	\$37,185,741	(\$3,409,220)	-8%
	Total Long Term Liabilities	\$165,901,450	\$165,183,827	(\$717,623)	0%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$153,913,943	\$187,377,643	\$33,463,700	22%
2	Temporarily Restricted Net Assets	\$1,399,547	\$2,890,743	\$1,491,196	107%
3	Permanently Restricted Net Assets	\$7,449,124	\$7,755,916	\$306,792	4%
	Total Net Assets	\$162,762,614	\$198,024,302	\$35,261,688	22%
	Total Liabilities and Net Assets	\$363,434,139	\$396,221,469	\$32,787,330	9%

BACKUS CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$624,460,853	\$639,940,838	\$15,479,985	2%
2	Less: Allowances	\$334,249,153	\$336,783,841	\$2,534,688	1%
3	Less: Charity Care	\$5,004,135	\$5,552,920	\$548,785	11%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$285,207,565	\$297,604,077	\$12,396,512	4%
5	Other Operating Revenue	\$4,307,817	\$7,282,268	\$2,974,451	69%
6	Net Assets Released from Restrictions	\$673,194	\$174,552	(\$498,642)	-74%
	Total Operating Revenue	\$290,188,576	\$305,060,897	\$14,872,321	5%
B. Operating Expenses:					
1	Salaries and Wages	\$117,877,797	\$123,500,731	\$5,622,934	5%
2	Fringe Benefits	\$27,854,316	\$35,029,296	\$7,174,980	26%
3	Physicians Fees	\$1,766,978	\$1,773,524	\$6,546	0%
4	Supplies and Drugs	\$84,999,001	\$90,840,139	\$5,841,138	7%
5	Depreciation and Amortization	\$17,045,582	\$18,079,091	\$1,033,509	6%
6	Bad Debts	\$12,767,930	\$8,743,002	(\$4,024,928)	-32%
7	Interest	\$3,247,715	\$3,276,169	\$28,454	1%
8	Malpractice	\$3,088,438	\$192,200	(\$2,896,238)	-94%
9	Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses	\$268,647,757	\$281,434,152	\$12,786,395	5%
	Income/(Loss) From Operations	\$21,540,819	\$23,626,745	\$2,085,926	10%
C. Non-Operating Revenue:					
1	Income from Investments	\$8,259,609	\$3,898,403	(\$4,361,206)	-53%
2	Gifts, Contributions and Donations	\$158,300	\$147,058	(\$11,242)	-7%
3	Other Non-Operating Gains/(Losses)	(\$565,873)	(\$9,929)	\$555,944	-98%
	Total Non-Operating Revenue	\$7,852,036	\$4,035,532	(\$3,816,504)	-49%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$29,392,855	\$27,662,277	(\$1,730,578)	-6%
Other Adjustments:					
	Unrealized Gains/(Losses)	(\$5,813,831)	\$10,067,106	\$15,880,937	-273%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	(\$5,813,831)	\$10,067,106	\$15,880,937	-273%
	Excess/(Deficiency) of Revenue Over Expenses	\$23,579,024	\$37,729,383	\$14,150,359	60%

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$282,901,504	\$285,207,565	\$297,604,077
2	Other Operating Revenue	4,448,488	4,981,011	7,456,820
3	Total Operating Revenue	\$287,349,992	\$290,188,576	\$305,060,897
4	Total Operating Expenses	276,737,448	268,647,757	281,434,152
5	Income/(Loss) From Operations	\$10,612,544	\$21,540,819	\$23,626,745
6	Total Non-Operating Revenue	8,892,661	2,038,205	14,102,638
7	Excess/(Deficiency) of Revenue Over Expenses	\$19,505,205	\$23,579,024	\$37,729,383
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	3.58%	7.37%	7.40%
2	Parent Corporation Non-Operating Margin	3.00%	0.70%	4.42%
3	Parent Corporation Total Margin	6.58%	8.07%	11.82%
4	Income/(Loss) From Operations	\$10,612,544	\$21,540,819	\$23,626,745
5	Total Operating Revenue	\$287,349,992	\$290,188,576	\$305,060,897
6	Total Non-Operating Revenue	\$8,892,661	\$2,038,205	\$14,102,638
7	Total Revenue	\$296,242,653	\$292,226,781	\$319,163,535
8	Excess/(Deficiency) of Revenue Over Expenses	\$19,505,205	\$23,579,024	\$37,729,383
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$149,253,750	\$153,913,943	\$187,377,643
2	Parent Corporation Total Net Assets	\$160,830,713	\$162,762,614	\$198,024,302
3	Parent Corporation Change in Total Net Assets	\$45,744,988	\$1,931,901	\$35,261,688
4	Parent Corporation Change in Total Net Assets %	139.7%	1.2%	21.7%

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	3.60	4.06	4.74
2	Total Current Assets	\$120,782,920	\$141,187,465	\$156,391,235
3	Total Current Liabilities	\$33,555,637	\$34,770,075	\$33,013,340
4	<u>Days Cash on Hand</u>	106	138	150
5	Cash and Cash Equivalents	\$74,929,624	\$95,434,551	\$108,322,462
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$74,929,624	\$95,434,551	\$108,322,462
8	Total Operating Expenses	\$276,737,448	\$268,647,757	\$281,434,152
9	Depreciation Expense	\$17,534,609	\$17,045,582	\$18,079,091
10	Operating Expenses less Depreciation Expense	\$259,202,839	\$251,602,175	\$263,355,061
11	<u>Days Revenue in Patient Accounts Receivable</u>	38	38	39
12	Net Patient Accounts Receivable	\$ 32,546,895	\$ 34,428,013	\$ 33,684,894
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$2,963,415	\$5,023,840	\$1,481,120
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 29,583,480	\$ 29,404,173	\$ 32,203,774
16	Total Net Patient Revenue	\$282,901,504	\$285,207,565	\$297,604,077
17	<u>Average Payment Period</u>	47	50	46
18	Total Current Liabilities	\$33,555,637	\$34,770,075	\$33,013,340
19	Total Operating Expenses	\$276,737,448	\$268,647,757	\$281,434,152
20	Depreciation Expense	\$17,534,609	\$17,045,582	\$18,079,091
21	Total Operating Expenses less Depreciation Expense	\$259,202,839	\$251,602,175	\$263,355,061

BACKUS CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	47.2	44.8	50.0
2	Total Net Assets	\$160,830,713	\$162,762,614	\$198,024,302
3	Total Assets	\$340,583,026	\$363,434,139	\$396,221,469
4	<u>Cash Flow to Total Debt Ratio</u>	37.7	41.8	56.9
5	Excess/(Deficiency) of Revenues Over Expenses	\$19,505,205	\$23,579,024	\$37,729,383
6	Depreciation Expense	\$17,534,609	\$17,045,582	\$18,079,091
7	Excess of Revenues Over Expenses and Depreciation Expense	\$37,039,814	\$40,624,606	\$55,808,474
8	Total Current Liabilities	\$33,555,637	\$34,770,075	\$33,013,340
9	Total Long Term Debt	\$64,591,831	\$62,389,713	\$65,056,990
10	Total Current Liabilities and Total Long Term Debt	\$98,147,468	\$97,159,788	\$98,070,330
11	<u>Long Term Debt to Capitalization Ratio</u>	28.7	27.7	24.7
12	Total Long Term Debt	\$64,591,831	\$62,389,713	\$65,056,990
13	Total Net Assets	\$160,830,713	\$162,762,614	\$198,024,302
14	Total Long Term Debt and Total Net Assets	\$225,422,544	\$225,152,327	\$263,081,292

WILLIAM W. BACKUS HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2012								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
		PATIENT	DISCHARGES	ADMISSIONS	STAFFED	AVAILABLE	OCCUPANCY	OCCUPANCY
LINE	DESCRIPTION	DAYS	# PATIENT		BEDS (A)	BEDS	OF STAFFED	OF AVAILABLE
							BEDS (A)	BEDS
1	Adult Medical/Surgical	37,476	9,495	9,525	138	166	74.4%	61.9%
2	ICU/CCU (Excludes Neonatal ICU)	3,224	151	0	12	12	73.6%	73.6%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	4,699	574	569	18	20	71.5%	64.4%
	TOTAL PSYCHIATRIC	4,699	574	569	18	20	71.5%	64.4%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	2,066	923	880	15	15	37.7%	37.7%
7	Newborn	1,896	919	916	18	20	28.9%	26.0%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	47,465	10,992	10,974	183	213	71.1%	61.1%
	TOTAL INPATIENT BED UTILIZATION	49,361	11,911	11,890	201	233	67.3%	58.0%
	TOTAL INPATIENT REPORTED YEAR	49,361	11,911	11,890	201	233	67.3%	58.0%
	TOTAL INPATIENT PRIOR YEAR	49,654	11,999	11,992	202	233	67.3%	58.4%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-293	-88	-102	-1	0	-0.1%	-0.3%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-1%	-1%	-1%	0%	0%	0%	-1%
	Total Licensed Beds and Bassinets	233						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	7,810	7,830	20	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	13,339	13,282	-57	0%
3	Emergency Department Scans	10,882	11,251	369	3%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	32,031	32,363	332	1%
B. MRI Scans (A)					
1	Inpatient Scans	1,087	1,037	-50	-5%
2	Outpatient Scans (Excluding Emergency Department Scans)	9,259	9,062	-197	-2%
3	Emergency Department Scans	310	295	-15	-5%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	10,656	10,394	-262	-2%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	11	8	-3	-27%
2	Outpatient Scans (Excluding Emergency Department Scans)	781	743	-38	-5%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	792	751	-41	-5%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	426	348	-78	-18%
2	Outpatient Procedures	9,767	11,458	1,691	17%
	Total Linear Accelerator Procedures	10,193	11,806	1,613	16%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	119	174	55	46%
2	Outpatient Procedures	217	142	-75	-35%
	Total Cardiac Catheterization Procedures	336	316	-20	-6%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	28	25	-3	-11%
2	Outpatient Studies	40	23	-17	-43%
	Total Electrophysiology Studies	68	48	-20	-29%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	3,152	2,921	-231	-7%
2	Outpatient Surgical Procedures	7,347	6,968	-379	-5%
	Total Surgical Procedures	10,499	9,889	-610	-6%
J. Endoscopy Procedures					

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	518	409	-109	-21%
2	Outpatient Endoscopy Procedures	2,069	2,443	374	18%
	Total Endoscopy Procedures	2,587	2,852	265	10%
	K. Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	6,846	7,364	518	8%
2	Emergency Room Visits: Treated and Discharged	56,352	60,738	4,386	8%
	Total Emergency Room Visits	63,198	68,102	4,904	8%
	L. Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	19,490	17,357	-2,133	-11%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	56,774	45,552	-11,222	-20%
	Total Hospital Clinic Visits	76,264	62,909	-13,355	-18%
	M. Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	15,315	15,833	518	3%
2	Cardiology	6,015	5,290	-725	-12%
3	Chemotherapy	2,364	2,955	591	25%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	172,664	186,307	13,643	8%
	Total Other Hospital Outpatient Visits	196,358	210,385	14,027	7%
	N. Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	455.6	460.0	4.4	1%
2	Total Physician FTEs	36.3	37.0	0.7	2%
3	Total Non-Nursing and Non-Physician FTEs	1,022.0	1,045.8	23.8	2%
	Total Hospital Full Time Equivalent Employees	1,513.9	1,542.8	28.9	2%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	BACKUS HOSPITAL	7,347	6,968	-379	-5%
	Total Outpatient Surgical Procedures(A)	7,347	6,968	-379	-5%
B. Outpatient Endoscopy Procedures					
1	BACKUS HOSPITAL	2,069	2,443	374	18%
	Total Outpatient Endoscopy Procedures(B)	2,069	2,443	374	18%
C. Outpatient Hospital Emergency Room Visits					
1	BACKUS HOSPITAL	56,352	56,987	635	1%
2	BACKUS PLAINFIELD EMERGENCY DPT	0	3,751	3,751	0%
	Total Outpatient Hospital Emergency Room Visits(C)	56,352	60,738	4,386	8%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$122,661,517	\$125,132,685	\$2,471,168	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$51,533,821	\$62,107,906	\$10,574,085	21%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	42.01%	49.63%	7.62%	18%
4	DISCHARGES	5,200	5,508	308	6%
5	CASE MIX INDEX (CMI)	1.45070	1.36540	(0.08530)	-6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,543.64000	7,520.62320	(23.01680)	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,831.43	\$8,258.35	\$1,426.92	21%
8	PATIENT DAYS	25,583	26,918	1,335	5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,014.38	\$2,307.30	\$292.92	15%
10	AVERAGE LENGTH OF STAY	4.9	4.9	(0.0)	-1%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$107,995,681	\$121,311,471	\$13,315,790	12%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$27,092,973	\$29,749,794	\$2,656,821	10%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.09%	24.52%	-0.56%	-2%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	88.04%	96.95%	8.90%	10%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,578.26998	5,339.80057	761.53058	17%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,917.73	\$5,571.33	(\$346.40)	-6%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$230,657,198	\$246,444,156	\$15,786,958	7%
18	TOTAL ACCRUED PAYMENTS	\$78,626,794	\$91,857,700	\$13,230,906	17%
19	TOTAL ALLOWANCES	\$152,030,404	\$154,586,456	\$2,556,052	2%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$80,104,999	\$70,979,090	(\$9,125,909)	-11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$60,420,640	\$56,354,783	(\$4,065,857)	-7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	75.43%	79.40%	3.97%	5%
4	DISCHARGES	4,178	3,836	(342)	-8%
5	CASE MIX INDEX (CMI)	1.25740	1.25300	(0.00440)	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,253.41720	4,806.50800	(446.90920)	-9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,501.21	\$11,724.68	\$223.48	2%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$4,669.78)	(\$3,466.34)	\$1,203.44	-26%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$24,532,307)	(\$16,660,978)	\$7,871,329	-32%
10	PATIENT DAYS	14,019	12,722	(1,297)	-9%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$4,309.91	\$4,429.71	\$119.80	3%
12	AVERAGE LENGTH OF STAY	3.4	3.3	(0.0)	-1%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$178,766,277	\$177,802,934	(\$963,343)	-1%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$98,487,408	\$99,051,979	\$564,571	1%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	55.09%	55.71%	0.62%	1%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	223.16%	250.50%	27.34%	12%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	9,323.83140	9,609.19695	285.36554	3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$10,562.98	\$10,308.04	(\$254.94)	-2%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$4,645.24)	(\$4,736.71)	(\$91.46)	2%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$43,311,476)	(\$45,515,967)	(\$2,204,490)	5%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$258,871,276	\$248,782,024	(\$10,089,252)	-4%
22	TOTAL ACCRUED PAYMENTS	\$158,908,048	\$155,406,762	(\$3,501,286)	-2%
23	TOTAL ALLOWANCES	\$99,963,228	\$93,375,262	(\$6,587,966)	-7%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$67,843,784)	(\$62,176,945)	\$5,666,838	-8%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$231,352,289	\$224,371,597	(\$6,980,692)	-3%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$154,670,107	\$150,837,482	(\$3,832,625)	-2%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$76,682,182	\$73,534,115	(\$3,148,067)	-4%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	33.15%	32.77%	-0.37%	

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$3,268,265	\$2,711,434	(\$556,831)	-17%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$702,521	\$706,485	\$3,964	1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	21.50%	26.06%	4.56%	21%
4	DISCHARGES	172	124	(48)	-28%
5	CASE MIX INDEX (CMI)	1.02020	1.15070	0.13050	13%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	175.47440	142.68680	(32.78760)	-19%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,003.55	\$4,951.30	\$947.75	24%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$7,497.65	\$6,773.38	(\$724.27)	-10%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$2,827.87	\$3,307.05	\$479.17	17%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$496,219	\$471,872	(\$24,348)	-5%
11	PATIENT DAYS	697	595	(102)	-15%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,007.92	\$1,187.37	\$179.45	18%
13	AVERAGE LENGTH OF STAY	4.1	4.8	0.7	18%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$10,017,380	\$10,411,627	\$394,247	4%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,365,301	\$1,974,665	(\$390,636)	-17%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.61%	18.97%	-4.65%	-20%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	306.50%	383.99%	77.49%	25%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	527.18778	476.14722	(51,04056)	-10%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,486.64	\$4,147.17	(\$339.47)	-8%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$6,076.34	\$6,160.87	\$84.53	1%
21	MEDICARE - UNINSURED OP PMT / OPED	\$1,431.09	\$1,424.16	(\$6.94)	0%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$754,455	\$678,109	(\$76,346)	-10%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$13,285,645	\$13,123,061	(\$162,584)	-1%
24	TOTAL ACCRUED PAYMENTS	\$3,067,822	\$2,681,150	(\$386,672)	-13%
25	TOTAL ALLOWANCES	\$10,217,823	\$10,441,911	\$224,088	2%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,250,674	\$1,149,980	(\$100,694)	-8%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$37,204,651	\$36,860,359	(\$344,292)	-1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$10,926,316	\$10,267,905	(\$658,411)	-6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	29.37%	27.86%	-1.51%	-5%
4	DISCHARGES	2,318	2,286	(32)	-1%
5	CASE MIX INDEX (CMI)	0.99650	1.00510	0.00860	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,309.88700	2,297.65860	(12.22840)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,730.24	\$4,468.86	(\$261.38)	-6%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,770.97	\$7,255.83	\$484.86	7%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,101.19	\$3,789.49	\$1,688.30	80%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,853,507	\$8,706,954	\$3,853,447	79%
11	PATIENT DAYS	9,069	8,812	(257)	-3%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,204.80	\$1,165.22	(\$39.58)	-3%
13	AVERAGE LENGTH OF STAY	3.9	3.9	(0.1)	-1%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$65,160,639	\$70,686,346	\$5,525,707	8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$15,532,626	\$15,800,535	\$267,909	2%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.84%	22.35%	-1.48%	-6%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	175.14%	191.77%	16.63%	9%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,059.77095	4,383.81479	324.04384	8%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,825.99	\$3,604.29	(\$221.70)	-6%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$6,736.99	\$6,703.75	(\$33.24)	0%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,091.75	\$1,967.04	(\$124.70)	-6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,492,009	\$8,623,146	\$131,137	2%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$102,365,290	\$107,546,705	\$5,181,415	5%
24	TOTAL ACCRUED PAYMENTS	\$26,458,942	\$26,068,440	(\$390,502)	-1%
25	TOTAL ALLOWANCES	\$75,906,348	\$81,478,265	\$5,571,917	7%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$13,345,516	\$17,330,100	\$3,984,584	30%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$1,325,716	\$1,256,504	(\$69,212)	-5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$284,954	\$362,821	\$77,867	27%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	21.49%	28.88%	7.38%	34%
4	DISCHARGES	66	61	(5)	-8%
5	CASE MIX INDEX (CMI)	1.16970	1.02330	(0.14640)	-13%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	77.20020	62.42130	(14.77890)	-19%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,691.10	\$5,812.46	\$2,121.35	57%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$7,810.10	\$5,912.23	(\$1,897.87)	-24%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$3,140.32	\$2,445.89	(\$694.43)	-22%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$242,433	\$152,676	(\$89,758)	-37%
11	PATIENT DAYS	366	273	(93)	-25%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$778.56	\$1,329.01	\$550.45	71%
13	AVERAGE LENGTH OF STAY	5.5	4.5	(1.1)	-19%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,097,818	\$1,179,222	\$81,404	7%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$285,216	\$266,662	(\$18,554)	-7%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.98%	22.61%	-3.37%	-13%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	82.81%	93.85%	11.04%	13%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	54.65423	57.24816	2.59393	5%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,218.55	\$4,658.00	(\$560.55)	-11%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$5,344.42	\$5,650.04	\$305.61	6%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$699.18	\$913.33	\$214.15	31%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$38,213	\$52,286	\$14,073	37%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$2,423,534	\$2,435,726	\$12,192	1%
24	TOTAL ACCRUED PAYMENTS	\$570,170	\$629,483	\$59,313	10%
25	TOTAL ALLOWANCES	\$1,853,364	\$1,806,243	(\$47,121)	-3%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$280,647	\$204,962	(\$75,684)	-27%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$38,530,367	\$38,116,863	(\$413,504)	-1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$11,211,270	\$10,630,726	(\$580,544)	-5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	29.10%	27.89%	-1.21%	-4%
4	DISCHARGES	2,384	2,347	(37)	-2%
5	CASE MIX INDEX (CMI)	1.00129	1.00557	0.00428	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,387.08720	2,360.07990	(27.00730)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,696.63	\$4,504.39	(\$192.24)	-4%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$6,804.58	\$7,220.29	\$415.72	6%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,134.79	\$3,753.95	\$1,619.16	76%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,095,940	\$8,859,630	\$3,763,689	74%
11	PATIENT DAYS	9,435	9,085	(350)	-4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,188.26	\$1,170.14	(\$18.12)	-2%
13	AVERAGE LENGTH OF STAY	4.0	3.9	(0.1)	-2%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$66,258,457	\$71,865,568	\$5,607,111	8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$15,817,842	\$16,067,197	\$249,355	2%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.87%	22.36%	-1.52%	-6%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	171.96%	188.54%	16.58%	10%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,114.42518	4,441.06295	326.63777	8%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,844.48	\$3,617.87	(\$226.61)	-6%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$6,718.49	\$6,690.17	(\$28.32)	0%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,073.25	\$1,953.46	(\$119.79)	-6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,530,222	\$8,675,433	\$145,211	2%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$104,788,824	\$109,982,431	\$5,193,607	5%
24	TOTAL ACCRUED PAYMENTS	\$27,029,112	\$26,697,923	(\$331,189)	-1%
25	TOTAL ALLOWANCES	\$77,759,712	\$83,284,508	\$5,524,796	7%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$2,882,913	\$3,124,142	\$241,229	8%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,160,549	\$1,364,747	\$204,198	18%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	40.26%	43.68%	3.43%	9%
4	DISCHARGES	237	220	(17)	-7%
5	CASE MIX INDEX (CMI)	0.83980	0.94120	0.10140	12%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	199.03260	207.06400	8.03140	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,830.95	\$6,590.94	\$759.99	13%
8	PATIENT DAYS	617	636	19	3%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,880.95	\$2,145.83	\$264.87	14%
10	AVERAGE LENGTH OF STAY	2.6	2.9	0.3	11%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$6,860,374	\$7,191,710	\$331,336	5%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,906,524	\$1,957,670	\$51,146	3%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$9,743,287	\$10,315,852	\$572,565	6%
14	TOTAL ACCRUED PAYMENTS	\$3,067,073	\$3,322,417	\$255,344	8%
15	TOTAL ALLOWANCES	\$6,676,214	\$6,993,435	\$317,221	5%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$5,109,286	\$7,456,692	\$2,347,406	46%
2	TOTAL OPERATING EXPENSES	\$252,073,735	\$264,111,731	\$12,037,996	5%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$4,672,730	\$5,341,790	\$669,060	14%
5	BAD DEBTS (CHARGES)	\$12,690,606	\$8,089,246	(\$4,601,360)	-36%
6	UNCOMPENSATED CARE (CHARGES)	\$17,363,336	\$13,431,036	(\$3,932,300)	-23%
7	COST OF UNCOMPENSATED CARE	\$7,692,883	\$6,050,486	(\$1,642,397)	-21%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$104,788,824	\$109,982,431	\$5,193,607	5%
9	TOTAL ACCRUED PAYMENTS	\$27,029,112	\$26,697,923	(\$331,189)	-1%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$46,427,033	\$49,545,482	\$3,118,450	7%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$19,397,921	\$22,847,559	\$3,449,639	18%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$244,179,796	\$237,352,780	(\$6,827,016)	-3%
2	TOTAL INPATIENT PAYMENTS	\$124,326,280	\$130,458,162	\$6,131,882	5%
3	TOTAL INPATIENT PAYMENTS / CHARGES	50.92%	54.96%	4.05%	8%
4	TOTAL DISCHARGES	11,999	11,911	(88)	-1%
5	TOTAL CASE MIX INDEX	1.28204	1.25046	(0.03157)	-2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	15,383,17700	14,894,27510	(488,90190)	-3%
7	TOTAL OUTPATIENT CHARGES	\$359,880,789	\$378,171,683	\$18,290,894	5%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	147.38%	159.33%	11.95%	8%
9	TOTAL OUTPATIENT PAYMENTS	\$143,304,747	\$146,826,640	\$3,521,893	2%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	39.82%	38.83%	-0.99%	-2%
11	TOTAL CHARGES	\$604,060,585	\$615,524,463	\$11,463,878	2%
12	TOTAL PAYMENTS	\$267,631,027	\$277,284,802	\$9,653,775	4%
13	TOTAL PAYMENTS / TOTAL CHARGES	44.31%	45.05%	0.74%	2%
14	PATIENT DAYS	49,654	49,361	(293)	-1%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$164,074,797	\$166,373,690	\$2,298,893	1%
2	INPATIENT PAYMENTS	\$63,905,640	\$74,103,379	\$10,197,739	16%
3	GOVT. INPATIENT PAYMENTS / CHARGES	38.95%	44.54%	5.59%	14%
4	DISCHARGES	7,821	8,075	254	3%
5	CASE MIX INDEX	1.29520	1.24926	(0.04594)	-4%
6	CASE MIX ADJUSTED DISCHARGES	10,129.75980	10,087.76710	(41.99270)	0%
7	OUTPATIENT CHARGES	\$181,114,512	\$200,368,749	\$19,254,237	11%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	110.39%	120.43%	10.05%	9%
9	OUTPATIENT PAYMENTS	\$44,817,339	\$47,774,661	\$2,957,322	7%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.75%	23.84%	-0.90%	-4%
11	TOTAL CHARGES	\$345,189,309	\$366,742,439	\$21,553,130	6%
12	TOTAL PAYMENTS	\$108,722,979	\$121,878,040	\$13,155,061	12%
13	TOTAL PAYMENTS / CHARGES	31.50%	33.23%	1.74%	6%
14	PATIENT DAYS	35,635	36,639	1,004	3%
15	TOTAL GOVERNMENT DEDUCTIONS	\$236,466,330	\$244,864,399	\$8,398,069	4%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	4.9	4.9	(0.0)	-1%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.4	3.3	(0.0)	-1%
3	UNINSURED	4.1	4.8	0.7	18%
4	MEDICAID	3.9	3.9	(0.1)	-1%
5	OTHER MEDICAL ASSISTANCE	5.5	4.5	(1.1)	-19%
6	CHAMPUS / TRICARE	2.6	2.9	0.3	11%
7	TOTAL AVERAGE LENGTH OF STAY	4.1	4.1	0.0	0%

WILLIAM W. BACKUS HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$604,060,585	\$615,524,463	\$11,463,878	2%
2	TOTAL GOVERNMENT DEDUCTIONS	\$236,466,330	\$244,864,399	\$8,398,069	4%
3	UNCOMPENSATED CARE	\$17,363,336	\$13,431,036	(\$3,932,300)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$76,682,182	\$73,534,115	(\$3,148,067)	-4%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,917,710	\$6,410,112	\$492,402	8%
6	TOTAL ADJUSTMENTS	\$336,429,558	\$338,239,662	\$1,810,104	1%
7	TOTAL ACCRUED PAYMENTS	\$267,631,027	\$277,284,801	\$9,653,774	4%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMTS.	\$267,631,027	\$277,284,801	\$9,653,774	4%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4430532858	0.4504854277	0.0074321420	2%
11	COST OF UNCOMPENSATED CARE	\$7,692,883	\$6,050,486	(\$1,642,397)	-21%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$19,397,921	\$22,847,559	\$3,449,639	18%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$27,090,804	\$28,898,045	\$1,807,242	7%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$8,492,009	\$8,623,146	\$131,137	2%
2	OTHER MEDICAL ASSISTANCE	\$280,647	\$204,962	(\$75,684)	-27%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,250,674	\$1,149,980	(\$100,694)	-8%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$10,023,330	\$9,978,089	(\$45,241)	0%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$10,155,651	\$10,979,391	\$823,740	8.11%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$4,302,191	\$5,934,953	\$1,632,762	37.95%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$271,933,218	\$283,219,755	\$11,286,537	4.15%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP. AUDIT. FINANCIAL STATEMENTS	\$604,060,585	\$615,524,464	\$11,463,879	1.90%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$163,776	\$71,577	(\$92,199)	-56.30%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$17,527,112	\$13,502,614	(\$4,024,498)	-22.96%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$80,104,999	\$70,979,090	(\$9,125,909)
2	MEDICARE	\$122,661,517	125,132,685	\$2,471,168
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$38,530,367	38,116,863	(\$413,504)
4	MEDICAID	\$37,204,651	36,860,359	(\$344,292)
5	OTHER MEDICAL ASSISTANCE	\$1,325,716	1,256,504	(\$69,212)
6	CHAMPUS / TRICARE	\$2,882,913	3,124,142	\$241,229
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,268,265	2,711,434	(\$556,831)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$164,074,797	\$166,373,690	\$2,298,893
	TOTAL INPATIENT CHARGES	\$244,179,796	\$237,352,780	(\$6,827,016)
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$178,766,277	\$177,802,934	(\$963,343)
2	MEDICARE	\$107,995,681	121,311,471	\$13,315,790
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$66,258,457	71,865,568	\$5,607,111
4	MEDICAID	\$65,160,639	70,686,346	\$5,525,707
5	OTHER MEDICAL ASSISTANCE	\$1,097,818	1,179,222	\$81,404
6	CHAMPUS / TRICARE	\$6,860,374	7,191,710	\$331,336
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,017,380	10,411,627	\$394,247
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$181,114,512	\$200,368,749	\$19,254,237
	TOTAL OUTPATIENT CHARGES	\$359,880,789	\$378,171,683	\$18,290,894
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$258,871,276	\$248,782,024	(\$10,089,252)
2	TOTAL MEDICARE	\$230,657,198	\$246,444,156	\$15,786,958
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$104,788,824	\$109,982,431	\$5,193,607
4	TOTAL MEDICAID	\$102,365,290	\$107,546,705	\$5,181,415
5	TOTAL OTHER MEDICAL ASSISTANCE	\$2,423,534	\$2,435,726	\$12,192
6	TOTAL CHAMPUS / TRICARE	\$9,743,287	\$10,315,852	\$572,565
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$13,285,645	\$13,123,061	(\$162,584)
	TOTAL GOVERNMENT CHARGES	\$345,189,309	\$366,742,439	\$21,553,130
	TOTAL CHARGES	\$604,060,585	\$615,524,463	\$11,463,878
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$60,420,640	\$56,354,783	(\$4,065,857)
2	MEDICARE	\$51,533,821	62,107,906	\$10,574,085
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,211,270	10,630,726	(\$580,544)
4	MEDICAID	\$10,926,316	10,267,905	(\$658,411)
5	OTHER MEDICAL ASSISTANCE	\$284,954	362,821	\$77,867
6	CHAMPUS / TRICARE	\$1,160,549	1,364,747	\$204,198
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$702,521	706,485	\$3,964
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$63,905,640	\$74,103,379	\$10,197,739
	TOTAL INPATIENT PAYMENTS	\$124,326,280	\$130,458,162	\$6,131,882
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$98,487,408	\$99,051,979	\$564,571
2	MEDICARE	\$27,092,973	29,749,794	\$2,656,821
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$15,817,842	16,067,197	\$249,355
4	MEDICAID	\$15,532,626	15,800,535	\$267,909
5	OTHER MEDICAL ASSISTANCE	\$285,216	266,662	(\$18,554)
6	CHAMPUS / TRICARE	\$1,906,524	1,957,670	\$51,146
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,365,301	1,974,665	(\$390,636)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$44,817,339	\$47,774,661	\$2,957,322
	TOTAL OUTPATIENT PAYMENTS	\$143,304,747	\$146,826,640	\$3,521,893
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$158,908,048	\$155,406,762	(\$3,501,286)
2	TOTAL MEDICARE	\$78,626,794	\$91,857,700	\$13,230,906
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$27,029,112	\$26,697,923	(\$331,189)
4	TOTAL MEDICAID	\$26,458,942	\$26,068,440	(\$390,502)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$570,170	\$629,483	\$59,313
6	TOTAL CHAMPUS / TRICARE	\$3,067,073	\$3,322,417	\$255,344
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,067,822	\$2,681,150	(\$386,672)
	TOTAL GOVERNMENT PAYMENTS	\$108,722,979	\$121,878,040	\$13,155,061
	TOTAL PAYMENTS	\$267,631,027	\$277,284,802	\$9,653,775

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13.26%	11.53%	-1.73%
2	MEDICARE	20.31%	20.33%	0.02%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.38%	6.19%	-0.19%
4	MEDICAID	6.16%	5.99%	-0.17%
5	OTHER MEDICAL ASSISTANCE	0.22%	0.20%	-0.02%
6	CHAMPUS / TRICARE	0.48%	0.51%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.54%	0.44%	-0.10%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	27.16%	27.03%	-0.13%
	TOTAL INPATIENT PAYER MIX	40.42%	38.56%	-1.86%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	29.59%	28.89%	-0.71%
2	MEDICARE	17.88%	19.71%	1.83%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10.97%	11.68%	0.71%
4	MEDICAID	10.79%	11.48%	0.70%
5	OTHER MEDICAL ASSISTANCE	0.18%	0.19%	0.01%
6	CHAMPUS / TRICARE	1.14%	1.17%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.66%	1.69%	0.03%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	29.98%	32.55%	2.57%
	TOTAL OUTPATIENT PAYER MIX	59.58%	61.44%	1.86%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	22.58%	20.32%	-2.25%
2	MEDICARE	19.26%	22.40%	3.14%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.19%	3.83%	-0.36%
4	MEDICAID	4.08%	3.70%	-0.38%
5	OTHER MEDICAL ASSISTANCE	0.11%	0.13%	0.02%
6	CHAMPUS / TRICARE	0.43%	0.49%	0.06%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.26%	0.25%	-0.01%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	23.88%	26.72%	2.85%
	TOTAL INPATIENT PAYER MIX	46.45%	47.05%	0.59%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	36.80%	35.72%	-1.08%
2	MEDICARE	10.12%	10.73%	0.61%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.91%	5.79%	-0.12%
4	MEDICAID	5.80%	5.70%	-0.11%
5	OTHER MEDICAL ASSISTANCE	0.11%	0.10%	-0.01%
6	CHAMPUS / TRICARE	0.71%	0.71%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.88%	0.71%	-0.17%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	16.75%	17.23%	0.48%
	TOTAL OUTPATIENT PAYER MIX	53.55%	52.95%	-0.59%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,178	3,836	(342)
2	MEDICARE	5,200	5,508	308
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,384	2,347	(37)
4	MEDICAID	2,318	2,286	(32)
5	OTHER MEDICAL ASSISTANCE	66	61	(5)
6	CHAMPUS / TRICARE	237	220	(17)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	172	124	(48)
	TOTAL GOVERNMENT DISCHARGES	7,821	8,075	254
	TOTAL DISCHARGES	11,999	11,911	(88)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14,019	12,722	(1,297)
2	MEDICARE	25,583	26,918	1,335
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9,435	9,085	(350)
4	MEDICAID	9,069	8,812	(257)
5	OTHER MEDICAL ASSISTANCE	366	273	(93)
6	CHAMPUS / TRICARE	617	636	19
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	697	595	(102)
	TOTAL GOVERNMENT PATIENT DAYS	35,635	36,639	1,004
	TOTAL PATIENT DAYS	49,654	49,361	(293)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.4	3.3	(0.0)
2	MEDICARE	4.9	4.9	(0.0)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.0	3.9	(0.1)
4	MEDICAID	3.9	3.9	(0.1)
5	OTHER MEDICAL ASSISTANCE	5.5	4.5	(1.1)
6	CHAMPUS / TRICARE	2.6	2.9	0.3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.1	4.8	0.7
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.6	4.5	(0.0)
	TOTAL AVERAGE LENGTH OF STAY	4.1	4.1	0.0
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.25740	1.25300	(0.00440)
2	MEDICARE	1.45070	1.36540	(0.08530)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.00129	1.00557	0.00428
4	MEDICAID	0.99650	1.00510	0.00860
5	OTHER MEDICAL ASSISTANCE	1.16970	1.02330	(0.14640)
6	CHAMPUS / TRICARE	0.83980	0.94120	0.10140
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.02020	1.15070	0.13050
	TOTAL GOVERNMENT CASE MIX INDEX	1.29520	1.24926	(0.04594)
	TOTAL CASE MIX INDEX	1.28204	1.25046	(0.03157)
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$231,352,289	\$224,371,597	(\$6,980,692)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$154,670,107	\$150,837,482	(\$3,832,625)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$76,682,182	\$73,534,115	(\$3,148,067)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	33.15%	32.77%	-0.37%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$10,155,651	\$10,979,391	\$823,740
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,917,710	\$6,410,112	\$492,402
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$4,672,730	\$5,341,790	\$669,060
9	BAD DEBTS	\$12,690,606	\$8,089,246	(\$4,601,360)
10	TOTAL UNCOMPENSATED CARE	\$17,363,336	\$13,431,036	(\$3,932,300)
11	TOTAL OTHER OPERATING REVENUE	\$231,352,289	\$224,371,597	(\$6,980,692)
12	TOTAL OPERATING EXPENSES	\$252,073,735	\$264,111,731	\$12,037,996

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,253.41720	4,806.50800	(446.90920)
2	MEDICARE	7,543.64000	7,520.62320	(23.01680)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,387.08720	2,360.07990	(27.00730)
4	MEDICAID	2,309.88700	2,297.65860	(12.22840)
5	OTHER MEDICAL ASSISTANCE	77.20020	62.42130	(14.77890)
6	CHAMPUS / TRICARE	199.03260	207.06400	8.03140
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	175.47440	142.68680	(32.78760)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	10,129.75980	10,087.76710	(41.99270)
	TOTAL CASE MIX ADJUSTED DISCHARGES	15,383.17700	14,894.27510	(488.90190)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9,323.83140	9,609.19695	285.36554
2	MEDICARE	4,578.26998	5,339.80057	761.53058
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,114.42518	4,441.06295	326.63777
4	MEDICAID	4,059.77095	4,383.81479	324.04384
5	OTHER MEDICAL ASSISTANCE	54.65423	57.24816	2.59393
6	CHAMPUS / TRICARE	563.98117	506.43543	-57.54574
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	527.18778	476.14722	-51.04056
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	9,256.67633	10,287.29895	1,030.62262
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	18,580.50773	19,896.49589	1,315.98816
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,501.21	\$11,724.68	\$223.48
2	MEDICARE	\$6,831.43	\$8,258.35	\$1,426.92
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,696.63	\$4,504.39	(\$192.24)
4	MEDICAID	\$4,730.24	\$4,468.86	(\$261.38)
5	OTHER MEDICAL ASSISTANCE	\$3,691.10	\$5,812.46	\$2,121.35
6	CHAMPUS / TRICARE	\$5,830.95	\$6,590.94	\$759.99
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,003.55	\$4,951.30	\$947.75
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,308.70	\$7,345.87	\$1,037.16
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,081.96	\$8,758.95	\$676.98
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,562.98	\$10,308.04	(\$254.94)
2	MEDICARE	\$5,917.73	\$5,571.33	(\$346.40)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,844.48	\$3,617.87	(\$226.61)
4	MEDICAID	\$3,825.99	\$3,604.29	(\$221.70)
5	OTHER MEDICAL ASSISTANCE	\$5,218.55	\$4,658.00	(\$560.55)
6	CHAMPUS / TRICARE	\$3,380.47	\$3,865.59	\$485.11
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,486.64	\$4,147.17	(\$339.47)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,841.62	\$4,644.04	(\$197.58)
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,712.64	\$7,379.52	(\$333.12)

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$8,492,009	\$8,623,146	\$131,137
2	OTHER MEDICAL ASSISTANCE	\$280,647	\$204,962	(\$75,684)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,250,674	\$1,149,980	(\$100,694)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$10,023,330	\$9,978,089	(\$45,241)
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$604,060,585	\$615,524,463	\$11,463,878
2	TOTAL GOVERNMENT DEDUCTIONS	\$236,466,330	\$244,864,399	\$8,398,069
3	UNCOMPENSATED CARE	\$17,363,336	\$13,431,036	(\$3,932,300)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$76,682,182	\$73,534,115	(\$3,148,067)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,917,710	\$6,410,112	\$492,402
6	TOTAL ADJUSTMENTS	\$336,429,558	\$338,239,662	\$1,810,104
7	TOTAL ACCRUED PAYMENTS	\$267,631,027	\$277,284,801	\$9,653,774
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$267,631,027	\$277,284,801	\$9,653,774
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4430532858	0.4504854277	0.0074321420
11	COST OF UNCOMPENSATED CARE	\$7,692,883	\$6,050,486	(\$1,642,397)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$19,397,921	\$22,847,559	\$3,449,639
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$27,090,804	\$28,898,045	\$1,807,242
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	75.43%	79.40%	3.97%
2	MEDICARE	42.01%	49.63%	7.62%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	29.10%	27.89%	-1.21%
4	MEDICAID	29.37%	27.86%	-1.51%
5	OTHER MEDICAL ASSISTANCE	21.49%	28.88%	7.38%
6	CHAMPUS / TRICARE	40.26%	43.68%	3.43%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	21.50%	26.06%	4.56%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	38.95%	44.54%	5.59%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	50.92%	54.96%	4.05%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	55.09%	55.71%	0.62%
2	MEDICARE	25.09%	24.52%	-0.56%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.87%	22.36%	-1.52%
4	MEDICAID	23.84%	22.35%	-1.48%
5	OTHER MEDICAL ASSISTANCE	25.98%	22.61%	-3.37%
6	CHAMPUS / TRICARE	27.79%	27.22%	-0.57%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	23.61%	18.97%	-4.65%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	24.75%	23.84%	-0.90%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	39.82%	38.83%	-0.99%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$267,631,027	\$277,284,802	\$9,653,775
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$267,631,027	\$277,284,802	\$9,653,775
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$4,302,191	\$5,934,953	\$1,632,762
4	CALCULATED NET REVENUE	\$271,933,218	\$283,219,755	\$11,286,537
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$271,933,218	\$283,219,755	\$11,286,537
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$604,060,585	\$615,524,463	\$11,463,878
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$604,060,585	\$615,524,463	\$11,463,878
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$604,060,585	\$615,524,464	\$11,463,879
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	(\$1)	(\$1)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$17,363,336	\$13,431,036	(\$3,932,300)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$163,776	\$71,577	(\$92,199)
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$17,527,112	\$13,502,613	(\$4,024,499)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$17,527,112	\$13,502,614	(\$4,024,498)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	(\$1)	(\$1)

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$70,979,090
2	MEDICARE	125,132,685
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	38,116,863
4	MEDICAID	36,860,359
5	OTHER MEDICAL ASSISTANCE	1,256,504
6	CHAMPUS / TRICARE	3,124,142
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,711,434
	TOTAL INPATIENT GOVERNMENT CHARGES	\$166,373,690
	TOTAL INPATIENT CHARGES	\$237,352,780
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$177,802,934
2	MEDICARE	121,311,471
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	71,865,568
4	MEDICAID	70,686,346
5	OTHER MEDICAL ASSISTANCE	1,179,222
6	CHAMPUS / TRICARE	7,191,710
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,411,627
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$200,368,749
	TOTAL OUTPATIENT CHARGES	\$378,171,683
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$248,782,024
2	TOTAL GOVERNMENT ACCRUED CHARGES	366,742,439
	TOTAL ACCRUED CHARGES	\$615,524,463
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$56,354,783
2	MEDICARE	62,107,906
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,630,726
4	MEDICAID	10,267,905
5	OTHER MEDICAL ASSISTANCE	362,821
6	CHAMPUS / TRICARE	1,364,747
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	706,485
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$74,103,379
	TOTAL INPATIENT PAYMENTS	\$130,458,162
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$99,051,979
2	MEDICARE	29,749,794
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16,067,197
4	MEDICAID	15,800,535
5	OTHER MEDICAL ASSISTANCE	266,662
6	CHAMPUS / TRICARE	1,957,670
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,974,665
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$47,774,661
	TOTAL OUTPATIENT PAYMENTS	\$146,826,640
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$155,406,762
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	121,878,040
	TOTAL ACCRUED PAYMENTS	\$277,284,802

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,836
2	MEDICARE	5,508
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,347
4	MEDICAID	2,286
5	OTHER MEDICAL ASSISTANCE	61
6	CHAMPUS / TRICARE	220
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	124
	TOTAL GOVERNMENT DISCHARGES	8,075
	TOTAL DISCHARGES	11,911
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.25300
2	MEDICARE	1.36540
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.00557
4	MEDICAID	1.00510
5	OTHER MEDICAL ASSISTANCE	1.02330
6	CHAMPUS / TRICARE	0.94120
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.15070
	TOTAL GOVERNMENT CASE MIX INDEX	1.24926
	TOTAL CASE MIX INDEX	1.25046
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$224,371,597
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$150,837,482
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$73,534,115
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	32.77%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$10,979,391
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,410,112
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$5,341,790
9	BAD DEBTS	\$8,089,246
10	TOTAL UNCOMPENSATED CARE	\$13,431,036
11	TOTAL OTHER OPERATING REVENUE	\$7,456,692
12	TOTAL OPERATING EXPENSES	\$264,111,731

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$277,284,802
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$277,284,802
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$5,934,953
	CALCULATED NET REVENUE	\$283,219,755
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$283,219,755
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$615,524,463
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$615,524,463
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$615,524,464
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$13,431,036
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$71,577
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$13,502,613
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$13,502,614
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	1,641	2,085	444	27%
2	Number of Approved Applicants	1,395	1,845	450	32%
3	Total Charges (A)	\$4,672,730	\$5,341,790	\$669,060	14%
4	Average Charges	\$3,350	\$2,895	(\$454)	-14%
5	Ratio of Cost to Charges (RCC)	0.444418	0.413799	(0.030619)	-7%
6	Total Cost	\$2,076,645	\$2,210,427	\$133,782	6%
7	Average Cost	\$1,489	\$1,198	(\$291)	-20%
8	Charity Care - Inpatient Charges	\$1,555,832	\$1,576,229	\$20,397	1%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	1,353,196	2,183,751	830,555	61%
10	Charity Care - Emergency Department Charges	1,763,702	1,581,810	(181,892)	-10%
11	Total Charges (A)	\$4,672,730	\$5,341,790	\$669,060	14%
12	Charity Care - Number of Patient Days	2,002	1,821	(181)	-9%
13	Charity Care - Number of Discharges	438	426	(12)	-3%
14	Charity Care - Number of Outpatient ED Visits	1,696	1,835	139	8%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	4,316	4,499	183	4%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$2,338,365	\$1,239,881	(\$1,098,484)	-47%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	3,128,863	2,103,319	(1,025,544)	-33%
3	Bad Debts - Emergency Department	7,223,378	4,746,046	(2,477,332)	-34%
4	Total Bad Debts (A)	\$12,690,606	\$8,089,246	(\$4,601,360)	-36%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$4,672,730	\$5,341,790	\$669,060	14%
2	Bad Debts (A)	12,690,606	8,089,246	(4,601,360)	-36%
3	Total Uncompensated Care (A)	\$17,363,336	\$13,431,036	(\$3,932,300)	-23%
4	Uncompensated Care - Inpatient Services	\$3,894,197	\$2,816,110	(\$1,078,087)	-28%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	4,482,059	4,287,070	(194,989)	-4%
6	Uncompensated Care - Emergency Department	8,987,080	6,327,856	(2,659,224)	-30%
7	Total Uncompensated Care (A)	\$17,363,336	\$13,431,036	(\$3,932,300)	-23%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL TOTAL NON-GOVERNMENT	FY 2012 ACTUAL TOTAL NON-GOVERNMENT	AMOUNT DIFFERENCE	% DIFFERENCE
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$231,352,289	\$224,371,597	(\$6,980,692)	-3%
2	Total Contractual Allowances	\$76,682,182	\$73,534,115	(\$3,148,067)	-4%
	Total Accrued Payments (A)	\$154,670,107	\$150,837,482	(\$3,832,625)	-2%
	Total Discount Percentage	33.15%	32.77%	-0.37%	-1%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$232,397,678	\$244,179,796	\$237,352,780
2	Outpatient Gross Revenue	\$352,993,047	\$359,880,789	\$378,171,683
3	Total Gross Patient Revenue	\$585,390,725	\$604,060,585	\$615,524,463
4	Net Patient Revenue	\$270,048,715	\$271,933,218	\$283,219,755
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$262,102,283	\$252,073,735	\$264,111,731
C. <u>Utilization Statistics</u>				
1	Patient Days	49,096	49,654	49,361
2	Discharges	12,175	11,999	11,911
3	Average Length of Stay	4.0	4.1	4.1
4	Equivalent (Adjusted) Patient Days (EPD)	123,669	122,836	128,007
0	Equivalent (Adjusted) Discharges (ED)	30,668	29,684	30,889
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.24169	1.28204	1.25046
2	Case Mix Adjusted Patient Days (CMAPD)	60,962	63,658	61,724
3	Case Mix Adjusted Discharges (CMAD)	15,118	15,383	14,894
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	153,558	157,480	160,069
5	Case Mix Adjusted Equivalent Discharges (CMAED)	38,080	38,055	38,625
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$11,923	\$12,165	\$12,470
2	Total Gross Revenue per Discharge	\$48,081	\$50,343	\$51,677
3	Total Gross Revenue per EPD	\$4,734	\$4,918	\$4,809
4	Total Gross Revenue per ED	\$19,088	\$20,350	\$19,927
5	Total Gross Revenue per CMAEPD	\$3,812	\$3,836	\$3,845
6	Total Gross Revenue per CMAED	\$15,373	\$15,873	\$15,936
7	Inpatient Gross Revenue per EPD	\$1,879	\$1,988	\$1,854
8	Inpatient Gross Revenue per ED	\$7,578	\$8,226	\$7,684

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$5,500	\$5,477	\$5,738
2	Net Patient Revenue per Discharge	\$22,181	\$22,663	\$23,778
3	Net Patient Revenue per EPD	\$2,184	\$2,214	\$2,213
4	Net Patient Revenue per ED	\$8,806	\$9,161	\$9,169
5	Net Patient Revenue per CMAEPD	\$1,759	\$1,727	\$1,769
6	Net Patient Revenue per CMAED	\$7,092	\$7,146	\$7,333
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$5,339	\$5,077	\$5,351
2	Total Operating Expense per Discharge	\$21,528	\$21,008	\$22,174
3	Total Operating Expense per EPD	\$2,119	\$2,052	\$2,063
4	Total Operating Expense per ED	\$8,546	\$8,492	\$8,550
5	Total Operating Expense per CMAEPD	\$1,707	\$1,601	\$1,650
6	Total Operating Expense per CMAED	\$6,883	\$6,624	\$6,838
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$40,612,798	\$39,914,015	\$41,141,324
2	Nursing Fringe Benefits Expense	\$7,936,981	\$7,696,604	\$9,543,566
3	Total Nursing Salary and Fringe Benefits Expense	\$48,549,779	\$47,610,619	\$50,684,890
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$11,850,977	\$11,095,920	\$10,294,416
2	Physician Fringe Benefits Expense	\$1,934,151	\$1,266,332	\$1,260,567
3	Total Physician Salary and Fringe Benefits Expense	\$13,785,128	\$12,362,252	\$11,554,983
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$54,917,330	\$57,392,944	\$60,931,073
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$17,310,311	\$16,692,410	\$21,204,157
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$72,227,641	\$74,085,354	\$82,135,230
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$107,381,105	\$108,402,879	\$112,366,813
2	Total Fringe Benefits Expense	\$27,181,443	\$25,655,346	\$32,008,290
3	Total Salary and Fringe Benefits Expense	\$134,562,548	\$134,058,225	\$144,375,103

WILLIAM W. BACKUS HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	450.8	455.6	460.0
2	Total Physician FTEs	36.7	36.3	37.0
3	Total Non-Nursing, Non-Physician FTEs	1054.6	1022.0	1045.8
4	Total Full Time Equivalent Employees (FTEs)	1,542.1	1,513.9	1,542.8
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$90,091	\$87,608	\$89,438
2	Nursing Fringe Benefits Expense per FTE	\$17,606	\$16,893	\$20,747
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$107,697	\$104,501	\$110,185
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$322,915	\$305,673	\$278,227
2	Physician Fringe Benefits Expense per FTE	\$52,702	\$34,885	\$34,069
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$375,617	\$340,558	\$312,297
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$52,074	\$56,157	\$58,263
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$16,414	\$16,333	\$20,276
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$68,488	\$72,491	\$78,538
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$69,633	\$71,605	\$72,833
2	Total Fringe Benefits Expense per FTE	\$17,626	\$16,947	\$20,747
3	Total Salary and Fringe Benefits Expense per FTE	\$87,259	\$88,552	\$93,580
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,741	\$2,700	\$2,925
2	Total Salary and Fringe Benefits Expense per Discharge	\$11,052	\$11,172	\$12,121
3	Total Salary and Fringe Benefits Expense per EPD	\$1,088	\$1,091	\$1,128
4	Total Salary and Fringe Benefits Expense per ED	\$4,388	\$4,516	\$4,674
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$876	\$851	\$902
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,534	\$3,523	\$3,738