

LAWRENCE AND MEMORIAL 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.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$39,933,225	\$13,568,654	(\$26,364,571)	-66%
2	Short Term Investments	\$105,904,042	\$138,433,638	\$32,529,596	31%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$29,920,862	\$28,719,548	(\$1,201,314)	-4%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$2,441,664	\$808,442	(\$1,633,222)	-67%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$4,528,017	\$4,469,470	(\$58,547)	-1%
8	Prepaid Expenses	\$1,739,804	\$2,004,576	\$264,772	15%
9	Other Current Assets	\$4,991,604	\$18,699,699	\$13,708,095	275%
	<b>Total Current Assets</b>	<b>\$189,459,218</b>	<b>\$206,704,027</b>	<b>\$17,244,809</b>	<b>9%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$11,241,951	\$971,261	(\$10,270,690)	-91%
2	Board Designated for Capital Acquisition	\$8,427,695	\$0	(\$8,427,695)	-100%
3	Funds Held in Escrow	\$2,247,370	\$2,247,125	(\$245)	0%
4	Other Noncurrent Assets Whose Use is Limited	\$20,207,049	\$22,903,951	\$2,696,902	13%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$42,124,065</b>	<b>\$26,122,337</b>	<b>(\$16,001,728)</b>	<b>-38%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$1,938,833	\$1,857,504	(\$81,329)	-4%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$321,282,313	\$337,299,259	\$16,016,946	5%
2	Less: Accumulated Depreciation	\$210,414,909	\$224,709,996	\$14,295,087	7%
	<b>Property, Plant and Equipment, Net</b>	<b>\$110,867,404</b>	<b>\$112,589,263</b>	<b>\$1,721,859</b>	<b>2%</b>
3	Construction in Progress	\$10,109,457	\$22,337,285	\$12,227,828	121%
	<b>Total Net Fixed Assets</b>	<b>\$120,976,861</b>	<b>\$134,926,548</b>	<b>\$13,949,687</b>	<b>12%</b>
	<b>Total Assets</b>	<b>\$354,498,977</b>	<b>\$369,610,416</b>	<b>\$15,111,439</b>	<b>4%</b>

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REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
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		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$33,351,173	\$36,729,771	\$3,378,598	10%
2	Salaries, Wages and Payroll Taxes	\$2,751,697	\$3,600,791	\$849,094	31%
3	Due To Third Party Payers	\$7,838,088	\$5,409,556	(\$2,428,532)	-31%
4	Due To Affiliates	\$1,913,991	\$2,421,244	\$507,253	27%
5	Current Portion of Long Term Debt	\$2,976,493	\$2,762,007	(\$214,486)	-7%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	<b>Total Current Liabilities</b>	<b>\$48,831,442</b>	<b>\$50,923,369</b>	<b>\$2,091,927</b>	<b>4%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$82,249,920	\$79,507,217	(\$2,742,703)	-3%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	<b>Total Long Term Debt</b>	<b>\$82,249,920</b>	<b>\$79,507,217</b>	<b>(\$2,742,703)</b>	<b>-3%</b>
3	Accrued Pension Liability	\$43,423,221	\$51,185,800	\$7,762,579	18%
4	Other Long Term Liabilities	\$14,213,720	\$17,998,408	\$3,784,688	27%
	<b>Total Long Term Liabilities</b>	<b>\$139,886,861</b>	<b>\$148,691,425</b>	<b>\$8,804,564</b>	<b>6%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$142,478,037	\$144,038,576	\$1,560,539	1%
2	Temporarily Restricted Net Assets	\$17,792,779	\$20,092,239	\$2,299,460	13%
3	Permanently Restricted Net Assets	\$5,509,858	\$5,864,807	\$354,949	6%
	<b>Total Net Assets</b>	<b>\$165,780,674</b>	<b>\$169,995,622</b>	<b>\$4,214,948</b>	<b>3%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$354,498,977</b>	<b>\$369,610,416</b>	<b>\$15,111,439</b>	<b>4%</b>

LAWRENCE AND MEMORIAL 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
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$661,160,918	\$704,064,528	\$42,903,610	6%
2	Less: Allowances	\$337,906,139	\$377,264,487	\$39,358,348	12%
3	Less: Charity Care	\$6,368,501	\$5,735,971	(\$632,530)	-10%
4	Less: Other Deductions	(\$1,926,932)	(\$2,579,127)	(\$652,195)	34%
	<b>Total Net Patient Revenue</b>	<b>\$318,813,210</b>	<b>\$323,643,197</b>	<b>\$4,829,987</b>	<b>2%</b>
5	Other Operating Revenue	\$15,662,907	\$15,433,709	(\$229,198)	-1%
6	Net Assets Released from Restrictions	\$394,829	\$449,575	\$54,746	14%
	<b>Total Operating Revenue</b>	<b>\$334,870,946</b>	<b>\$339,526,481</b>	<b>\$4,655,535</b>	<b>1%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$141,165,650	\$145,714,028	\$4,548,378	3%
2	Fringe Benefits	\$41,723,413	\$41,915,487	\$192,074	0%
3	Physicians Fees	\$1,676,732	\$0	(\$1,676,732)	-100%
4	Supplies and Drugs	\$39,118,046	\$38,072,467	(\$1,045,579)	-3%
5	Depreciation and Amortization	\$17,199,558	\$18,825,589	\$1,626,031	9%
6	Bad Debts	\$13,865,211	\$11,930,619	(\$1,934,592)	-14%
7	Interest	\$2,212,177	\$2,315,992	\$103,815	5%
8	Malpractice	\$3,954,496	\$4,267,471	\$312,975	8%
9	Other Operating Expenses	\$51,415,826	\$55,153,063	\$3,737,237	7%
	<b>Total Operating Expenses</b>	<b>\$312,331,109</b>	<b>\$318,194,716</b>	<b>\$5,863,607</b>	<b>2%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$22,539,837</b>	<b>\$21,331,765</b>	<b>(\$1,208,072)</b>	<b>-5%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$4,137,772	\$4,584,564	\$446,792	11%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	<b>Total Non-Operating Revenue</b>	<b>\$4,137,772</b>	<b>\$4,584,564</b>	<b>\$446,792</b>	<b>11%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$26,677,609</b>	<b>\$25,916,329</b>	<b>(\$761,280)</b>	<b>-3%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$26,677,609</b>	<b>\$25,916,329</b>	<b>(\$761,280)</b>	<b>-3%</b>
	Principal Payments	\$2,775,000	\$2,915,000	\$140,000	5%

**LAWRENCE AND MEMORIAL 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
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$139,616,545	\$137,173,465	(\$2,443,080)	-2%
2	MEDICARE MANAGED CARE	\$16,223,043	\$19,510,364	\$3,287,321	20%
3	MEDICAID	\$29,897,324	\$44,148,844	\$14,251,520	48%
4	MEDICAID MANAGED CARE	\$18,107,484	\$3,723,853	(\$14,383,631)	-79%
5	CHAMPUS/TRICARE	\$12,235,130	\$12,748,626	\$513,496	4%
6	COMMERCIAL INSURANCE	\$7,631,501	\$6,512,435	(\$1,119,066)	-15%
7	NON-GOVERNMENT MANAGED CARE	\$60,286,502	\$61,812,212	\$1,525,710	3%
8	WORKER'S COMPENSATION	\$3,200,470	\$3,499,229	\$298,759	9%
9	SELF- PAY/UNINSURED	\$1,105,922	\$935,031	(\$170,891)	-15%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$977,901	\$481,545	(\$496,356)	-51%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$289,281,822</b>	<b>\$290,545,604</b>	<b>\$1,263,782</b>	<b>0%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$94,348,371	\$106,175,439	\$11,827,068	13%
2	MEDICARE MANAGED CARE	\$13,377,904	\$17,762,804	\$4,384,900	33%
3	MEDICAID	\$27,942,466	\$59,277,644	\$31,335,178	112%
4	MEDICAID MANAGED CARE	\$32,251,602	\$8,370,713	(\$23,880,889)	-74%
5	CHAMPUS/TRICARE	\$23,023,949	\$23,215,651	\$191,702	1%
6	COMMERCIAL INSURANCE	\$17,711,987	\$17,713,800	\$1,813	0%
7	NON-GOVERNMENT MANAGED CARE	\$144,961,817	\$149,295,624	\$4,333,807	3%
8	WORKER'S COMPENSATION	\$6,427,127	\$8,411,607	\$1,984,480	31%
9	SELF- PAY/UNINSURED	\$10,910,851	\$10,178,944	(\$731,907)	-7%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$923,024	\$1,039,368	\$116,344	13%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$371,879,098</b>	<b>\$401,441,594</b>	<b>\$29,562,496</b>	<b>8%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$233,964,916	\$243,348,904	\$9,383,988	4%
2	MEDICARE MANAGED CARE	\$29,600,947	\$37,273,168	\$7,672,221	26%
3	MEDICAID	\$57,839,790	\$103,426,488	\$45,586,698	79%
4	MEDICAID MANAGED CARE	\$50,359,086	\$12,094,566	(\$38,264,520)	-76%
5	CHAMPUS/TRICARE	\$35,259,079	\$35,964,277	\$705,198	2%
6	COMMERCIAL INSURANCE	\$25,343,488	\$24,226,235	(\$1,117,253)	-4%
7	NON-GOVERNMENT MANAGED CARE	\$205,248,319	\$211,107,836	\$5,859,517	3%
8	WORKER'S COMPENSATION	\$9,627,597	\$11,910,836	\$2,283,239	24%
9	SELF- PAY/UNINSURED	\$12,016,773	\$11,113,975	(\$902,798)	-8%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,900,925	\$1,520,913	(\$380,012)	-20%
	<b>TOTAL GROSS REVENUE</b>	<b>\$661,160,920</b>	<b>\$691,987,198</b>	<b>\$30,826,278</b>	<b>5%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$62,725,256	\$65,798,159	\$3,072,903	5%
2	MEDICARE MANAGED CARE	\$6,409,937	\$7,828,593	\$1,418,656	22%
3	MEDICAID	\$12,325,734	\$15,056,489	\$2,730,755	22%
4	MEDICAID MANAGED CARE	\$6,146,377	\$1,053,785	(\$5,092,592)	-83%
5	CHAMPUS/TRICARE	\$4,790,269	\$5,510,106	\$719,837	15%
6	COMMERCIAL INSURANCE	\$4,710,203	\$1,933,177	(\$2,777,026)	-59%
7	NON-GOVERNMENT MANAGED CARE	\$45,443,830	\$47,490,126	\$2,046,296	5%
8	WORKER'S COMPENSATION	\$2,042,341	\$2,437,075	\$394,734	19%
9	SELF- PAY/UNINSURED	\$0	\$0	\$0	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$131,070	\$143,250	\$12,180	9%

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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
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$144,725,017</b>	<b>\$147,250,760</b>	<b>\$2,525,743</b>	<b>2%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$27,174,464	\$28,926,489	\$1,752,025	6%
2	MEDICARE MANAGED CARE	\$3,651,657	\$4,510,821	\$859,164	24%
3	MEDICAID	\$8,910,228	\$16,329,436	\$7,419,208	83%
4	MEDICAID MANAGED CARE	\$10,618,765	\$2,560,417	(\$8,058,348)	-76%
5	CHAMPUS/TRICARE	\$8,387,614	\$7,041,745	(\$1,345,869)	-16%
6	COMMERCIAL INSURANCE	\$10,399,743	\$11,343,689	\$943,946	9%
7	NON-GOVERNMENT MANAGED CARE	\$84,447,092	\$88,263,167	\$3,816,075	5%
8	WORKER'S COMPENSATION	\$4,251,600	\$5,545,889	\$1,294,289	30%
9	SELF- PAY/UNINSURED	\$0	\$0	\$0	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$454,759	\$268,389	(\$186,370)	-41%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$158,295,922</b>	<b>\$164,790,042</b>	<b>\$6,494,120</b>	<b>4%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$89,899,720	\$94,724,648	\$4,824,928	5%
2	MEDICARE MANAGED CARE	\$10,061,594	\$12,339,414	\$2,277,820	23%
3	MEDICAID	\$21,235,962	\$31,385,925	\$10,149,963	48%
4	MEDICAID MANAGED CARE	\$16,765,142	\$3,614,202	(\$13,150,940)	-78%
5	CHAMPUS/TRICARE	\$13,177,883	\$12,551,851	(\$626,032)	-5%
6	COMMERCIAL INSURANCE	\$15,109,946	\$13,276,866	(\$1,833,080)	-12%
7	NON-GOVERNMENT MANAGED CARE	\$129,890,922	\$135,753,293	\$5,862,371	5%
8	WORKER'S COMPENSATION	\$6,293,941	\$7,982,964	\$1,689,023	27%
9	SELF- PAY/UNINSURED	\$0	\$0	\$0	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$585,829	\$411,639	(\$174,190)	-30%
	<b>TOTAL NET REVENUE</b>	<b>\$303,020,939</b>	<b>\$312,040,802</b>	<b>\$9,019,863</b>	<b>3%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	6,253	6,066	(187)	-3%
2	MEDICARE MANAGED CARE	644	763	119	18%
3	MEDICAID	1,630	2,764	1,134	70%
4	MEDICAID MANAGED CARE	1,562	264	(1,298)	-83%
5	CHAMPUS/TRICARE	890	969	79	9%
6	COMMERCIAL INSURANCE	462	435	(27)	-6%
7	NON-GOVERNMENT MANAGED CARE	3,636	3,460	(176)	-5%
8	WORKER'S COMPENSATION	105	111	6	6%
9	SELF- PAY/UNINSURED	89	69	(20)	-22%
10	SAGA	0	0	0	0%
11	OTHER	57	31	(26)	-46%
	<b>TOTAL DISCHARGES</b>	<b>15,328</b>	<b>14,932</b>	<b>(396)</b>	<b>-3%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	36,505	33,701	(2,804)	-8%
2	MEDICARE MANAGED CARE	3,701	4,318	617	17%
3	MEDICAID	8,969	12,799	3,830	43%
4	MEDICAID MANAGED CARE	5,120	931	(4,189)	-82%
5	CHAMPUS/TRICARE	2,946	3,191	245	8%
6	COMMERCIAL INSURANCE	1,877	1,533	(344)	-18%
7	NON-GOVERNMENT MANAGED CARE	13,889	13,304	(585)	-4%
8	WORKER'S COMPENSATION	434	426	(8)	-2%
9	SELF- PAY/UNINSURED	334	216	(118)	-35%
10	SAGA	0	0	0	0%
11	OTHER	307	139	(168)	-55%
	<b>TOTAL PATIENT DAYS</b>	<b>74,082</b>	<b>70,558</b>	<b>(3,524)</b>	<b>-5%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				

**LAWRENCE AND MEMORIAL HOSPITAL  
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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
1	MEDICARE TRADITIONAL	139,197	126,202	(12,995)	-9%
2	MEDICARE MANAGED CARE	17,301	18,901	1,600	9%
3	MEDICAID	24,922	35,110	10,188	41%
4	MEDICAID MANAGED CARE	37,233	5,403	(31,830)	-85%
5	CHAMPUS/TRICARE	19,268	13,182	(6,086)	-32%
6	COMMERCIAL INSURANCE	31,530	58,131	26,601	84%
7	NON-GOVERNMENT MANAGED CARE	146,619	93,730	(52,889)	-36%
8	WORKER'S COMPENSATION	4,772	4,832	60	1%
9	SELF- PAY/UNINSURED	9,380	3,307	(6,073)	-65%
10	SAGA	0	0	0	0%
11	OTHER	2,338	933	(1,405)	-60%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>432,560</b>	<b>359,731</b>	<b>(72,829)</b>	<b>-17%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$14,240,565	\$15,677,778	\$1,437,213	10%
2	MEDICARE MANAGED CARE	\$1,541,452	\$2,085,655	\$544,203	35%
3	MEDICAID	\$1,107,481	\$23,464,022	\$22,356,541	2019%
4	MEDICAID MANAGED CARE	\$14,015,762	\$3,286,666	(\$10,729,096)	-77%
5	CHAMPUS/TRICARE	\$7,844,029	\$6,772,968	(\$1,071,061)	-14%
6	COMMERCIAL INSURANCE	\$4,360,919	\$5,848,357	\$1,487,438	34%
7	NON-GOVERNMENT MANAGED CARE	\$22,555,514	\$22,206,731	(\$348,783)	-2%
8	WORKER'S COMPENSATION	\$1,136,665	\$1,254,884	\$118,219	10%
9	SELF- PAY/UNINSURED	\$6,203,173	\$4,821,664	(\$1,381,509)	-22%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,846,612	\$457,753	(\$1,388,859)	-75%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$74,852,172</b>	<b>\$85,876,478</b>	<b>\$11,024,306</b>	<b>15%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$3,268,051	\$3,435,848	\$167,797	5%
2	MEDICARE MANAGED CARE	\$371,014	\$499,008	\$127,994	34%
3	MEDICAID	\$2,907,713	\$5,959,757	\$3,052,044	105%
4	MEDICAID MANAGED CARE	\$4,391,144	\$979,039	(\$3,412,105)	-78%
5	CHAMPUS/TRICARE	\$2,836,864	\$2,190,052	(\$646,812)	-23%
6	COMMERCIAL INSURANCE	\$2,979,686	\$3,173,166	\$193,480	6%
7	NON-GOVERNMENT MANAGED CARE	\$14,362,388	\$13,908,639	(\$453,749)	-3%
8	WORKER'S COMPENSATION	\$821,566	\$1,033,514	\$211,948	26%
9	SELF- PAY/UNINSURED	\$682,245	\$158,407	(\$523,838)	-77%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$403,450	\$100,439	(\$303,011)	-75%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$33,024,121</b>	<b>\$31,437,869</b>	<b>(\$1,586,252)</b>	<b>-5%</b>
<b>C.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	10,083	11,060	977	10%
2	MEDICARE MANAGED CARE	985	1,331	346	35%
3	MEDICAID	9,382	22,829	13,447	143%
4	MEDICAID MANAGED CARE	14,787	3,614	(11,173)	-76%
5	CHAMPUS/TRICARE	7,016	6,443	(573)	-8%
6	COMMERCIAL INSURANCE	3,686	5,013	1,327	36%
7	NON-GOVERNMENT MANAGED CARE	18,534	19,143	609	3%
8	WORKER'S COMPENSATION	1,297	1,557	260	20%
9	SELF- PAY/UNINSURED	5,428	4,810	(618)	-11%
10	SAGA	0	0	0	0%
11	OTHER	1,373	340	(1,033)	-75%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>72,571</b>	<b>76,140</b>	<b>3,569</b>	<b>5%</b>

**LAWRENCE AND MEMORIAL 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>
<b>I. OPERATING EXPENSE BY CATEGORY</b>					
<b>A. Salaries &amp; Wages:</b>					
1	Nursing Salaries	\$48,372,889	\$43,204,569	(\$5,168,320)	-11%
2	Physician Salaries	\$2,740,700	\$799,526	(\$1,941,174)	-71%
3	Non-Nursing, Non-Physician Salaries	\$90,052,061	\$101,709,933	\$11,657,872	13%
	<b>Total Salaries &amp; Wages</b>	<b>\$141,165,650</b>	<b>\$145,714,028</b>	<b>\$4,548,378</b>	<b>3%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$14,297,260	\$12,428,142	(\$1,869,118)	-13%
2	Physician Fringe Benefits	\$810,051	\$229,988	(\$580,063)	-72%
3	Non-Nursing, Non-Physician Fringe Benefits	\$26,616,102	\$29,257,357	\$2,641,255	10%
	<b>Total Fringe Benefits</b>	<b>\$41,723,413</b>	<b>\$41,915,487</b>	<b>\$192,074</b>	<b>0%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$288,491	\$387,613	\$99,122	34%
2	Physician Fees	\$1,676,732	\$0	(\$1,676,732)	-100%
3	Non-Nursing, Non-Physician Fees	\$4,121,629	\$1,921,890	(\$2,199,739)	-53%
	<b>Total Contractual Labor Fees</b>	<b>\$6,086,852</b>	<b>\$2,309,503</b>	<b>(\$3,777,349)</b>	<b>-62%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$28,916,037	\$26,953,135	(\$1,962,902)	-7%
2	Pharmaceutical Costs	\$10,202,009	\$11,119,332	\$917,323	9%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$39,118,046</b>	<b>\$38,072,467</b>	<b>(\$1,045,579)</b>	<b>-3%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$3,460,991	\$3,410,863	(\$50,128)	-1%
2	Depreciation-Equipment	\$12,910,100	\$14,440,402	\$1,530,302	12%
3	Amortization	\$828,467	\$974,324	\$145,857	18%
	<b>Total Depreciation and Amortization</b>	<b>\$17,199,558</b>	<b>\$18,825,589</b>	<b>\$1,626,031</b>	<b>9%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$13,865,211	\$11,930,619	(\$1,934,592)	-14%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$2,212,177	\$2,315,992	\$103,815	5%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$3,954,496	\$4,267,471	\$312,975	8%
<b>I. Utilities:</b>					
1	Water	\$132,521	\$126,966	(\$5,555)	-4%
2	Natural Gas	\$1,130,500	\$994,253	(\$136,247)	-12%
3	Oil	\$60,230	\$55,323	(\$4,907)	-8%
4	Electricity	\$3,078,811	\$2,619,267	(\$459,544)	-15%
5	Telephone	\$517,320	\$497,039	(\$20,281)	-4%
6	Other Utilities	\$0	\$0	\$0	0%
	<b>Total Utilities</b>	<b>\$4,919,382</b>	<b>\$4,292,848</b>	<b>(\$626,534)</b>	<b>-13%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$948,777	\$601,254	(\$347,523)	-37%
2	Legal Fees	\$1,207,627	\$1,226,135	\$18,508	2%
3	Consulting Fees	\$2,228,689	\$1,493,299	(\$735,390)	-33%
4	Dues and Membership	\$489,553	\$463,665	(\$25,888)	-5%
5	Equipment Leases	\$2,664,656	\$1,342,899	(\$1,321,757)	-50%
6	Building Leases	\$2,426,892	\$2,309,643	(\$117,249)	-5%
7	Repairs and Maintenance	\$7,839,168	\$8,574,599	\$735,431	9%
8	Insurance	\$610,175	\$735,338	\$125,163	21%

**LAWRENCE AND MEMORIAL 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	\$473,453	\$386,240	(\$87,213)	-18%
10	Conferences	\$300,314	\$258,875	(\$41,439)	-14%
11	Property Tax	\$76,350	\$220,736	\$144,386	189%
12	General Supplies	\$2,436,633	\$2,200,797	(\$235,836)	-10%
13	Licenses and Subscriptions	\$555,173	\$434,799	(\$120,374)	-22%
14	Postage and Shipping	\$286,315	\$293,856	\$7,541	3%
15	Advertising	\$1,891,548	\$1,535,857	(\$355,691)	-19%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$370,281	\$370,281	0%
18	Computer hardware & small equipment	\$0	\$97,624	\$97,624	0%
19	Dietary / Food Services	\$0	\$2,563,704	\$2,563,704	0%
20	Lab Fees / Red Cross charges	\$0	\$1,486,988	\$1,486,988	0%
21	Billing & Collection / Bank Fees	\$0	\$348,958	\$348,958	0%
22	Recruiting / Employee Education & Recognition	\$0	\$1,111,329	\$1,111,329	0%
23	Laundry / Linen	\$0	\$24,131	\$24,131	0%
24	Professional / Physician Fees	\$0	\$4,625,581	\$4,625,581	0%
25	Waste disposal	\$0	\$0	\$0	0%
26	Purchased Services - Medical	\$0	\$7,040,159	\$7,040,159	0%
27	Purchased Services - Non Medical	\$0	\$7,603,985	\$7,603,985	0%
28	Other Business Expenses	\$17,414,285	\$729,907	(\$16,684,378)	-96%
	<b>Total Business Expenses</b>	<b>\$41,849,608</b>	<b>\$48,080,639</b>	<b>\$6,231,031</b>	<b>15%</b>
<b>K.</b>	<b>Other Operating Expense:</b>				
1	Miscellaneous Other Operating Expenses	\$236,716	\$470,073	\$233,357	99%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$312,331,109</b>	<b>\$318,194,716</b>	<b>\$5,863,607</b>	<b>2%</b>
	<b>*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150</b>				
<b>II.</b>	<b>OPERATING EXPENSE BY DEPARTMENT</b>				
<b>A.</b>	<b>General Services:</b>				
1	General Administration	\$17,102,734	\$16,883,918	(\$218,816)	-1%
2	General Accounting	\$1,469,145	\$1,518,144	\$48,999	3%
3	Patient Billing & Collection	\$3,544,226	\$3,521,390	(\$22,836)	-1%
4	Admitting / Registration Office	\$4,420,824	\$5,291,735	\$870,911	20%
5	Data Processing	\$8,702,132	\$11,645,542	\$2,943,410	34%
6	Communications	\$344,747	\$356,782	\$12,035	3%
7	Personnel	\$44,203,434	\$44,097,754	(\$105,680)	0%
8	Public Relations	\$860,283	\$800,579	(\$59,704)	-7%
9	Purchasing	\$1,756,798	\$1,696,319	(\$60,479)	-3%
10	Dietary and Cafeteria	\$5,528,065	\$5,576,153	\$48,088	1%
11	Housekeeping	\$4,114,487	\$4,195,914	\$81,427	2%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$4,359,081	\$3,853,305	(\$505,776)	-12%
14	Security	\$1,644,138	\$1,682,672	\$38,534	2%
15	Repairs and Maintenance	\$4,329,324	\$4,341,926	\$12,602	0%
16	Central Sterile Supply	\$2,100,010	\$2,216,152	\$116,142	6%
17	Pharmacy Department	\$12,951,250	\$14,382,877	\$1,431,627	11%
18	Other General Services	\$5,297,467	\$4,949,209	(\$348,258)	-7%
	<b>Total General Services</b>	<b>\$122,728,145</b>	<b>\$127,010,371</b>	<b>\$4,282,226</b>	<b>3%</b>
<b>B.</b>	<b>Professional Services:</b>				
1	Medical Care Administration	\$198,619	\$668,247	\$469,628	236%
2	Residency Program	\$110,340	\$113,076	\$2,736	2%
3	Nursing Services Administration	\$3,073,851	\$2,427,534	(\$646,317)	-21%
4	Medical Records	\$4,230,593	\$4,858,092	\$627,499	15%

**LAWRENCE AND MEMORIAL 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	\$2,738,767	\$2,789,276	\$50,509	2%
6	Other Professional Services	\$3,307,523	\$3,728,016	\$420,493	13%
	<b>Total Professional Services</b>	<b>\$13,659,693</b>	<b>\$14,584,241</b>	<b>\$924,548</b>	<b>7%</b>
<b>C.</b>	<b><u>Special Services:</u></b>				
1	Operating Room	\$21,139,451	\$20,165,327	(\$974,124)	-5%
2	Recovery Room	\$1,027,597	\$1,083,349	\$55,752	5%
3	Anesthesiology	\$475,395	\$476,718	\$1,323	0%
4	Delivery Room	\$120,248	\$126,867	\$6,619	6%
5	Diagnostic Radiology	\$4,334,844	\$4,470,226	\$135,382	3%
6	Diagnostic Ultrasound	\$2,883,167	\$2,990,781	\$107,614	4%
7	Radiation Therapy	\$2,796,424	\$2,719,027	(\$77,397)	-3%
8	Radioisotopes	\$1,640,588	\$1,564,810	(\$75,778)	-5%
9	CT Scan	\$2,317,005	\$2,048,527	(\$268,478)	-12%
10	Laboratory	\$16,401,845	\$16,469,884	\$68,039	0%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$642,465	\$1,015,931	\$373,466	58%
13	Electrocardiology	\$37,598	\$9,258	(\$28,340)	-75%
14	Electroencephalography	\$251,811	\$258,370	\$6,559	3%
15	Occupational Therapy	\$1,675,977	\$1,915,552	\$239,575	14%
16	Speech Pathology	\$837,436	\$878,539	\$41,103	5%
17	Audiology	\$572,201	\$630,203	\$58,002	10%
18	Respiratory Therapy	\$2,891,373	\$2,826,759	(\$64,614)	-2%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$2,161,644	\$2,196,636	\$34,992	2%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,159,522	\$1,395,560	\$236,038	20%
23	Renal Dialysis	\$604,582	\$580,104	(\$24,478)	-4%
24	Emergency Room	\$13,021,547	\$11,796,965	(\$1,224,582)	-9%
25	MRI	\$1,443,583	\$1,635,833	\$192,250	13%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,164,914	\$1,261,998	\$97,084	8%
29	Sleep Center	\$1,202,606	\$1,368,493	\$165,887	14%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$5,043,541	\$5,143,873	\$100,332	2%
32	Occupational Therapy / Physical Therapy	\$4,006,475	\$4,385,667	\$379,192	9%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$7,137,509	\$8,098,622	\$961,113	13%
	<b>Total Special Services</b>	<b>\$96,991,348</b>	<b>\$97,513,879</b>	<b>\$522,531</b>	<b>1%</b>
<b>D.</b>	<b><u>Routine Services:</u></b>				
1	Medical & Surgical Units	\$21,774,840	\$22,373,807	\$598,967	3%
2	Intensive Care Unit	\$3,033,380	\$2,993,130	(\$40,250)	-1%
3	Coronary Care Unit	\$3,346,286	\$3,216,935	(\$129,351)	-4%
4	Psychiatric Unit	\$2,526,774	\$2,751,957	\$225,183	9%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$5,723,900	\$6,020,783	\$296,883	5%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$2,345,092	\$2,242,060	(\$103,032)	-4%
9	Rehabilitation Unit	\$2,657,878	\$2,824,547	\$166,669	6%
10	Ambulatory Surgery	\$2,315,055	\$2,388,095	\$73,040	3%
11	Home Care	\$0	\$0	\$0	0%

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2012</b>
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$306,562,977	\$ 318,813,210	\$323,643,197
2	Other Operating Revenue	14,705,837	16,057,736	15,883,284
3	Total Operating Revenue	\$321,268,814	\$334,870,946	\$339,526,481
4	Total Operating Expenses	299,648,936	312,331,109	318,194,716
5	Income/(Loss) From Operations	\$21,619,878	\$22,539,837	\$21,331,765
6	Total Non-Operating Revenue	(18,052,615)	4,137,772	4,584,564
7	Excess/(Deficiency) of Revenue Over Expenses	\$3,567,263	\$26,677,609	\$25,916,329
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	7.13%	6.65%	6.20%
2	Hospital Non Operating Margin	-5.95%	1.22%	1.33%
3	Hospital Total Margin	1.18%	7.87%	7.53%
4	Income/(Loss) From Operations	\$21,619,878	\$22,539,837	\$21,331,765
5	Total Operating Revenue	\$321,268,814	\$334,870,946	\$339,526,481
6	Total Non-Operating Revenue	(\$18,052,615)	\$4,137,772	\$4,584,564
7	Total Revenue	\$303,216,199	\$339,008,718	\$344,111,045
8	Excess/(Deficiency) of Revenue Over Expenses	\$3,567,263	\$26,677,609	\$25,916,329
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$137,717,053	\$142,478,037	\$144,038,576
2	Hospital Total Net Assets	\$161,616,678	\$165,780,674	\$169,995,622
3	Hospital Change in Total Net Assets	(\$2,160,059)	\$4,163,996	\$4,214,948
4	Hospital Change in Total Net Assets %	98.7%	2.6%	2.5%
<b>D. <u>Cost Data Summary</u></b>				
1	<b><u>Ratio of Cost to Charges</u></b>	<b>0.47</b>	<b>0.46</b>	<b>0.45</b>
2	Total Operating Expenses	\$299,648,936	\$312,331,109	\$318,194,716
3	Total Gross Revenue	\$624,951,148	\$661,160,920	\$691,987,197
4	Total Other Operating Revenue	\$14,292,897	\$15,662,907	\$15,433,709
5	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.35</b>	<b>1.36</b>	<b>1.41</b>
6	Total Non-Government Payments	\$151,125,329	\$151,294,809	\$157,013,123

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>
7	Total Uninsured Payments	\$0	\$0	\$0
8	Total Non-Government Charges	\$251,173,831	\$252,236,177	\$258,358,882
9	Total Uninsured Charges	\$12,440,439	\$12,016,773	\$11,113,975
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.86</b>	<b>0.82</b>	<b>0.85</b>
11	Total Medicare Payments	\$98,441,244	\$99,961,314	\$107,064,062
12	Total Medicare Charges	\$243,761,397	\$263,565,863	\$280,622,072
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.70</b>	<b>0.76</b>	<b>0.67</b>
14	Total Medicaid Payments	\$26,012,944	\$38,001,104	\$35,000,127
15	Total Medicaid Charges	\$79,370,051	\$108,198,876	\$115,521,054
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$8,219,444</b>	<b>\$7,851,175</b>	<b>\$6,638,637</b>
17	Charity Care	\$3,153,445	\$3,148,344	\$2,828,618
18	Bad Debts	\$14,381,177	\$13,865,210	\$11,930,618
19	Total Uncompensated Care	\$17,534,622	\$17,013,554	\$14,759,236
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>2.7%</b>	<b>2.5%</b>	<b>2.1%</b>
21	Total Operating Expenses	\$299,648,936	\$312,331,109	\$318,194,716
<b>E.</b>	<b><u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>3.71</b>	<b>3.88</b>	<b>4.06</b>
2	Total Current Assets	\$188,159,530	\$189,459,218	\$206,704,027
3	Total Current Liabilities	\$50,735,618	\$48,831,442	\$50,923,369
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>175</b>	<b>180</b>	<b>185</b>
5	Cash and Cash Equivalents	\$29,002,112	\$39,933,225	\$13,568,654
6	Short Term Investments	106,795,008	105,904,042	138,433,638
7	Total Cash and Short Term Investments	\$135,797,120	\$145,837,267	\$152,002,292
8	Total Operating Expenses	\$299,648,936	\$312,331,109	\$318,194,716
9	Depreciation Expense	\$16,728,407	\$17,199,558	\$18,825,589
10	Operating Expenses less Depreciation Expense	\$282,920,529	\$295,131,551	\$299,369,127
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>25.15</b>	<b>25.28</b>	<b>26.29</b>

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2012</b>
12	Net Patient Accounts Receivable	\$ 29,686,477	\$ 29,920,862	\$ 28,719,548
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$8,559,110	\$7,838,088	\$5,409,556
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 21,127,367	\$ 22,082,774	\$ 23,309,992
16	Total Net Patient Revenue	\$306,562,977	\$ 318,813,210	\$ 323,643,197
17	<b><u>Average Payment Period</u></b>	<b>65.45</b>	<b>60.39</b>	<b>62.09</b>
18	Total Current Liabilities	\$50,735,618	\$48,831,442	\$50,923,369
19	Total Operating Expenses	\$299,648,936	\$312,331,109	\$318,194,716
20	Depreciation Expense	\$16,728,407	\$17,199,558	\$18,825,589
21	Total Operating Expenses less Depreciation Expense	\$282,920,529	\$295,131,551	\$299,369,127
<b>F. <u>Solvency Measures Summary</u></b>				
1	<b><u>Equity Financing Ratio</u></b>	<b>47.7</b>	<b>46.8</b>	<b>46.0</b>
2	Total Net Assets	\$161,616,678	\$165,780,674	\$169,995,622
3	Total Assets	\$338,646,194	\$354,498,977	\$369,610,416
4	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>18.0</b>	<b>33.5</b>	<b>34.3</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$3,567,263	\$26,677,609	\$25,916,329
6	Depreciation Expense	\$16,728,407	\$17,199,558	\$18,825,589
7	Excess of Revenues Over Expenses and Depreciation Expense	\$20,295,670	\$43,877,167	\$44,741,918
8	Total Current Liabilities	\$50,735,618	\$48,831,442	\$50,923,369
9	Total Long Term Debt	\$61,883,130	\$82,249,920	\$79,507,217
10	Total Current Liabilities and Total Long Term Debt	\$112,618,748	\$131,081,362	\$130,430,586
11	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>27.7</b>	<b>33.2</b>	<b>31.9</b>
12	Total Long Term Debt	\$61,883,130	\$82,249,920	\$79,507,217
13	Total Net Assets	\$161,616,678	\$165,780,674	\$169,995,622
14	Total Long Term Debt and Total Net Assets	\$223,499,808	\$248,030,594	\$249,502,839
15	<b><u>Debt Service Coverage Ratio</u></b>	<b>4.6</b>	<b>9.2</b>	<b>9.0</b>
16	Excess Revenues over Expenses	\$3,567,263	\$26,677,609	\$25,916,329
17	Interest Expense	\$2,332,245	\$2,212,177	\$2,315,992
18	Depreciation and Amortization Expense	\$16,728,407	\$17,199,558	\$18,825,589

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>
19	Principal Payments	\$2,640,000	\$2,775,000	\$2,915,000
<b>G. <u>Other Financial Ratios</u></b>				
20	<b>Average Age of Plant</b>	<b>11.6</b>	<b>12.2</b>	<b>11.9</b>
21	Accumulated Depreciation	\$193,724,897	\$210,414,909	\$224,709,996
22	Depreciation and Amortization Expense	\$16,728,407	\$17,199,558	\$18,825,589
<b>H. <u>Utilization Measures Summary</u></b>				
1	Patient Days	71,761	74,082	70,558
2	Discharges	15,464	15,328	14,932
3	ALOS	4.6	4.8	4.7
4	Staffed Beds	256	256	256
5	Available Beds	-	256	256
6	Licensed Beds	308	308	308
6	Occupancy of Staffed Beds	76.8%	79.3%	75.5%
7	Occupancy of Available Beds	76.8%	79.3%	75.5%
8	Full Time Equivalent Employees	1,892.8	1,939.1	1,954.8
<b>I. <u>Hospital Gross Revenue Payer Mix Percentage</u></b>				
1	Non-Government Gross Revenue Payer Mix Percentage	38.2%	36.3%	35.7%
2	Medicare Gross Revenue Payer Mix Percentage	39.0%	39.9%	40.6%
3	Medicaid Gross Revenue Payer Mix Percentage	12.7%	16.4%	16.7%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	2.7%	0.3%	0.2%
5	Uninsured Gross Revenue Payer Mix Percentage	2.0%	1.8%	1.6%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	5.4%	5.3%	5.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$238,733,392	\$240,219,404	\$247,244,907
9	Medicare Gross Revenue (Charges)	\$243,761,397	\$263,565,863	\$280,622,072
10	Medicaid Gross Revenue (Charges)	\$79,370,051	\$108,198,876	\$115,521,054
11	Other Medical Assistance Gross Revenue (Charges)	\$16,928,214	\$1,900,925	\$1,520,912
12	Uninsured Gross Revenue (Charges)	\$12,440,439	\$12,016,773	\$11,113,975
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$33,717,655	\$35,259,079	\$35,964,277
14	Total Gross Revenue (Charges)	\$624,951,148	\$661,160,920	\$691,987,197
<b>J. <u>Hospital Net Revenue Payer Mix Percentage</u></b>				
1	Non-Government Net Revenue Payer Mix Percentage	51.7%	49.9%	50.3%

LAWRENCE AND MEMORIAL 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
2	Medicare Net Revenue Payer Mix Percentage	33.7%	33.0%	34.3%
3	Medicaid Net Revenue Payer Mix Percentage	8.9%	12.5%	11.2%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.3%	0.2%	0.1%
5	Uninsured Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	4.5%	4.3%	4.0%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$151,125,329	\$151,294,809	\$157,013,123
9	Medicare Net Revenue (Payments)	\$98,441,244	\$99,961,314	\$107,064,062
10	Medicaid Net Revenue (Payments)	\$26,012,944	\$38,001,104	\$35,000,127
11	Other Medical Assistance Net Revenue (Payments)	\$3,792,552	\$585,829	\$411,640
12	Uninsured Net Revenue (Payments)	\$0	\$0	\$0
13	CHAMPUS / TRICARE Net Revenue Payments)	\$13,029,569	\$13,177,883	\$12,551,851
14	Total Net Revenue (Payments)	\$292,401,638	\$303,020,939	\$312,040,803
<b>K.</b>	<b>Discharges</b>			
1	Non-Government (Including Self Pay / Uninsured)	4,669	4,292	4,075
2	Medicare	6,829	6,897	6,829
3	Medical Assistance	3,012	3,249	3,059
4	Medicaid	2,568	3,192	3,028
5	Other Medical Assistance	444	57	31
6	CHAMPUS / TRICARE	954	890	969
7	Uninsured (Included In Non-Government)	168	89	69
8	Total	15,464	15,328	14,932
<b>L.</b>	<b>Case Mix Index</b>			
1	Non-Government (Including Self Pay / Uninsured)	1.058700	1.114800	1.149000
2	Medicare	1.448900	1.437000	1.408200
3	Medical Assistance	0.923982	0.951087	0.996122
4	Medicaid	0.893100	0.952800	0.996600
5	Other Medical Assistance	1.102600	0.855200	0.949500
6	CHAMPUS / TRICARE	0.730200	0.903400	0.895900
7	Uninsured (Included In Non-Government)	0.918700	0.891000	1.148700
8	Total Case Mix Index	1.184509	1.212801	1.219799
<b>M.</b>	<b>Emergency Department Visits</b>			
1	Emergency Room - Treated and Admitted	7,469	7,543	6,525
2	Emergency Room - Treated and Discharged	73,421	72,571	76,140
3	Total Emergency Room Visits	80,890	80,114	82,665

**LAWRENCE AND MEMORIAL 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
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$604,664	\$1,072,052	\$467,388	77%
2	Inpatient Payments	\$105,625	\$434,721	\$329,096	312%
3	Outpatient Charges	\$613,242	\$1,035,149	\$421,907	69%
4	Outpatient Payments	\$22,323	\$348,570	\$326,247	1461%
5	Discharges	28	43	15	54%
6	Patient Days	180	237	57	32%
7	Outpatient Visits (Excludes ED Visits)	696	871	175	25%
8	Emergency Department Outpatient Visits	47	76	29	62%
9	Emergency Department Inpatient Admissions	19	23	4	21%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,217,906</b>	<b>\$2,107,201</b>	<b>\$889,295</b>	<b>73%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$127,948</b>	<b>\$783,291</b>	<b>\$655,343</b>	<b>512%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$9,258	\$0	(\$9,258)	-100%
4	Outpatient Payments	\$2,840	\$0	(\$2,840)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	12	0	(12)	-100%
8	Emergency Department Outpatient Visits	3	0	(3)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$9,258</b>	<b>\$0</b>	<b>(\$9,258)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$2,840</b>	<b>\$0</b>	<b>(\$2,840)</b>	<b>-100%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$3,358,510	\$5,438,897	\$2,080,387	62%
2	Inpatient Payments	\$1,426,221	\$2,224,229	\$798,008	56%
3	Outpatient Charges	\$2,843,506	\$5,297,236	\$2,453,730	86%
4	Outpatient Payments	\$1,006,031	\$1,311,699	\$305,668	30%
5	Discharges	119	207	88	74%
6	Patient Days	751	1,108	357	48%
7	Outpatient Visits (Excludes ED Visits)	0	5,501	5,501	0%
8	Emergency Department Outpatient Visits	0	317	317	0%
9	Emergency Department Inpatient Admissions	0	99	99	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$6,202,016</b>	<b>\$10,736,133</b>	<b>\$4,534,117</b>	<b>73%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$2,432,252</b>	<b>\$3,535,928</b>	<b>\$1,103,676</b>	<b>45%</b>

**LAWRENCE AND MEMORIAL 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
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$1,809,305	\$0	(\$1,809,305)	-100%
2	Inpatient Payments	\$270,745	\$0	(\$270,745)	-100%
3	Outpatient Charges	\$1,919,342	\$0	(\$1,919,342)	-100%
4	Outpatient Payments	\$32,187	\$0	(\$32,187)	-100%
5	Discharges	75	0	(75)	-100%
6	Patient Days	365	0	(365)	-100%
7	Outpatient Visits (Excludes ED Visits)	5,792	0	(5,792)	-100%
8	Emergency Department Outpatient Visits	277	0	(277)	-100%
9	Emergency Department Inpatient Admissions	95	0	(95)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$3,728,647</b>	<b>\$0</b>	<b>(\$3,728,647)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$302,932</b>	<b>\$0</b>	<b>(\$302,932)</b>	<b>-100%</b>
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$9,288,231	\$159,514	(\$9,128,717)	-98%
2	Inpatient Payments	\$4,109,801	\$65,546	(\$4,044,255)	-98%
3	Outpatient Charges	\$7,227,366	\$189,118	(\$7,038,248)	-97%
4	Outpatient Payments	\$2,368,319	\$38,951	(\$2,329,368)	-98%
5	Discharges	374	10	(364)	-97%
6	Patient Days	2,100	38	(2,062)	-98%
7	Outpatient Visits (Excludes ED Visits)	8,925	54	(8,871)	-99%
8	Emergency Department Outpatient Visits	584	33	(551)	-94%
9	Emergency Department Inpatient Admissions	212	6	(206)	-97%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$16,515,597</b>	<b>\$348,632</b>	<b>(\$16,166,965)</b>	<b>-98%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$6,478,120</b>	<b>\$104,497</b>	<b>(\$6,373,623)</b>	<b>-98%</b>

**LAWRENCE AND MEMORIAL 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
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$0	\$12,123,923	\$12,123,923	0%
2	Inpatient Payments	\$0	\$4,794,636	\$4,794,636	0%
3	Outpatient Charges	\$0	\$10,732,980	\$10,732,980	0%
4	Outpatient Payments	\$0	\$2,675,049	\$2,675,049	0%
5	Discharges	0	471	471	0%
6	Patient Days	0	2,775	2,775	0%
7	Outpatient Visits (Excludes ED Visits)	0	10,556	10,556	0%
8	Emergency Department Outpatient Visits	0	852	852	0%
9	Emergency Department Inpatient Admissions	0	267	267	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$22,856,903</b>	<b>\$22,856,903</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$7,469,685</b>	<b>\$7,469,685</b>	<b>0%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>I. AETNA</b>					
1	Inpatient Charges	\$424,617	\$384,224	(\$40,393)	-10%
2	Inpatient Payments	\$175,036	\$144,492	(\$30,544)	-17%
3	Outpatient Charges	\$196,332	\$186,147	(\$10,185)	-5%
4	Outpatient Payments	\$86,907	\$51,295	(\$35,612)	-41%
5	Discharges	18	15	(3)	-17%
6	Patient Days	111	87	(24)	-22%
7	Outpatient Visits (Excludes ED Visits)	388	242	(146)	-38%
8	Emergency Department Outpatient Visits	20	23	3	15%
9	Emergency Department Inpatient Admissions	11	11	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$620,949</b>	<b>\$570,371</b>	<b>(\$50,578)</b>	<b>-8%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$261,943</b>	<b>\$195,787</b>	<b>(\$66,156)</b>	<b>-25%</b>

**LAWRENCE AND MEMORIAL 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
<b>J. HUMANA</b>					
1	Inpatient Charges	\$143,579	\$74,890	(\$68,689)	-48%
2	Inpatient Payments	\$46,837	\$37,786	(\$9,051)	-19%
3	Outpatient Charges	\$66,275	\$83,879	\$17,604	27%
4	Outpatient Payments	\$15,230	\$19,866	\$4,636	30%
5	Discharges	6	4	(2)	-33%
6	Patient Days	35	19	(16)	-46%
7	Outpatient Visits (Excludes ED Visits)	46	49	3	7%
8	Emergency Department Outpatient Visits	11	16	5	45%
9	Emergency Department Inpatient Admissions	4	2	(2)	-50%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$209,854</b>	<b>\$158,769</b>	<b>(\$51,085)</b>	<b>-24%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$62,067</b>	<b>\$57,652</b>	<b>(\$4,415)</b>	<b>-7%</b>
<b>K. SECURE HORIZONS</b>					
1	Inpatient Charges	\$594,137	\$256,864	(\$337,273)	-57%
2	Inpatient Payments	\$275,672	\$127,183	(\$148,489)	-54%
3	Outpatient Charges	\$502,583	\$238,295	(\$264,288)	-53%
4	Outpatient Payments	\$117,820	\$65,391	(\$52,429)	-44%
5	Discharges	24	13	(11)	-46%
6	Patient Days	159	54	(105)	-66%
7	Outpatient Visits (Excludes ED Visits)	457	297	(160)	-35%
8	Emergency Department Outpatient Visits	43	14	(29)	-67%
9	Emergency Department Inpatient Admissions	12	8	(4)	-33%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,096,720</b>	<b>\$495,159</b>	<b>(\$601,561)</b>	<b>-55%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$393,492</b>	<b>\$192,574</b>	<b>(\$200,918)</b>	<b>-51%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 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
<b>M. UNIVERSAL AMERICAN</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N. EVERCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$16,223,043</b>	<b>\$19,510,364</b>	<b>\$3,287,321</b>	<b>20%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$6,409,937</b>	<b>\$7,828,593</b>	<b>\$1,418,656</b>	<b>22%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$13,377,904</b>	<b>\$17,762,804</b>	<b>\$4,384,900</b>	<b>33%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$3,651,657</b>	<b>\$4,510,821</b>	<b>\$859,164</b>	<b>24%</b>
	<b>TOTAL DISCHARGES</b>	<b>644</b>	<b>763</b>	<b>119</b>	<b>18%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>3,701</b>	<b>4,318</b>	<b>617</b>	<b>17%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>16,316</b>	<b>17,570</b>	<b>1,254</b>	<b>8%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>985</b>	<b>1,331</b>	<b>346</b>	<b>35%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>353</b>	<b>416</b>	<b>63</b>	<b>18%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$29,600,947</b>	<b>\$37,273,168</b>	<b>\$7,672,221</b>	<b>26%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$10,061,594</b>	<b>\$12,339,414</b>	<b>\$2,277,820</b>	<b>23%</b>

**LAWRENCE AND MEMORIAL 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
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$12,029,849	\$2,619,296	(\$9,410,553)	-78%
2	Inpatient Payments	\$4,244,721	\$769,980	(\$3,474,741)	-82%
3	Outpatient Charges	\$23,486,812	\$6,106,090	(\$17,380,722)	-74%
4	Outpatient Payments	\$7,761,517	\$1,869,376	(\$5,892,141)	-76%
5	Discharges	1,036	177	(859)	-83%
6	Patient Days	3,372	654	(2,718)	-81%
7	Outpatient Visits (Excludes ED Visits)	16,577	1,410	(15,167)	-91%
8	Emergency Department Outpatient Visits	10,627	2,585	(8,042)	-76%
9	Emergency Department Inpatient Admissions	163	29	(134)	-82%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$35,516,661</b>	<b>\$8,725,386</b>	<b>(\$26,791,275)</b>	<b>-75%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$12,006,238</b>	<b>\$2,639,356</b>	<b>(\$9,366,882)</b>	<b>-78%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2012  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>E. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 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%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>G. UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$2,235,678	\$569,834	(\$1,665,844)	-75%
2	Inpatient Payments	\$699,744	\$119,088	(\$580,656)	-83%
3	Outpatient Charges	\$3,312,434	\$844,635	(\$2,467,799)	-75%
4	Outpatient Payments	\$973,131	\$254,860	(\$718,271)	-74%
5	Discharges	216	39	(177)	-82%
6	Patient Days	686	135	(551)	-80%
7	Outpatient Visits (Excludes ED Visits)	2,270	133	(2,137)	-94%
8	Emergency Department Outpatient Visits	1,672	402	(1,270)	-76%
9	Emergency Department Inpatient Admissions	26	7	(19)	-73%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$5,548,112</b>	<b>\$1,414,469</b>	<b>(\$4,133,643)</b>	<b>-75%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,672,875</b>	<b>\$373,948</b>	<b>(\$1,298,927)</b>	<b>-78%</b>
	<b>H. AETNA</b>				
1	Inpatient Charges	\$3,841,957	\$534,723	(\$3,307,234)	-86%
2	Inpatient Payments	\$1,201,912	\$164,717	(\$1,037,195)	-86%
3	Outpatient Charges	\$5,452,356	\$1,419,988	(\$4,032,368)	-74%
4	Outpatient Payments	\$1,884,117	\$436,181	(\$1,447,936)	-77%
5	Discharges	310	48	(262)	-85%
6	Patient Days	1,062	142	(920)	-87%
7	Outpatient Visits (Excludes ED Visits)	3,599	246	(3,353)	-93%
8	Emergency Department Outpatient Visits	2,488	627	(1,861)	-75%
9	Emergency Department Inpatient Admissions	49	14	(35)	-71%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$9,294,313</b>	<b>\$1,954,711</b>	<b>(\$7,339,602)</b>	<b>-79%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$3,086,029</b>	<b>\$600,898</b>	<b>(\$2,485,131)</b>	<b>-81%</b>
	<b>II. TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$18,107,484</b>	<b>\$3,723,853</b>	<b>(\$14,383,631)</b>	<b>-79%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$6,146,377</b>	<b>\$1,053,785</b>	<b>(\$5,092,592)</b>	<b>-83%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$32,251,602</b>	<b>\$8,370,713</b>	<b>(\$23,880,889)</b>	<b>-74%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$10,618,765</b>	<b>\$2,560,417</b>	<b>(\$8,058,348)</b>	<b>-76%</b>
	<b>TOTAL DISCHARGES</b>	<b>1,562</b>	<b>264</b>	<b>(1,298)</b>	<b>-83%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>5,120</b>	<b>931</b>	<b>(4,189)</b>	<b>-82%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>22,446</b>	<b>1,789</b>	<b>(20,657)</b>	<b>-92%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>14,787</b>	<b>3,614</b>	<b>(11,173)</b>	<b>-76%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>238</b>	<b>50</b>	<b>(188)</b>	<b>-79%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$50,359,086</b>	<b>\$12,094,566</b>	<b>(\$38,264,520)</b>	<b>-76%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$16,765,142</b>	<b>\$3,614,202</b>	<b>(\$13,150,940)</b>	<b>-78%</b>

**LAWRENCE AND MEMORIAL HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2012  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

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

<b>L+M CORPORATION</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2012</b>					
<b>REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011 ACTUAL</b>	<b>FY 2012 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$44,580,932	\$15,956,015	(\$28,624,917)	-64%
2	Short Term Investments	\$156,173,381	\$207,930,544	\$51,757,163	33%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$32,212,263	\$32,312,475	\$100,212	0%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$4,552,611	\$4,503,709	(\$48,902)	-1%
8	Prepaid Expenses	\$2,322,555	\$3,094,289	\$771,734	33%
9	Other Current Assets	\$5,704,433	\$8,205,212	\$2,500,779	44%
	<b>Total Current Assets</b>	<b>\$245,546,175</b>	<b>\$272,002,244</b>	<b>\$26,456,069</b>	<b>11%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$11,241,951	\$1,471,261	(\$9,770,690)	-87%
2	Board Designated for Capital Acquisition	\$8,427,695	\$0	(\$8,427,695)	-100%
3	Funds Held in Escrow	\$2,247,370	\$2,247,125	(\$245)	0%
4	Other Noncurrent Assets Whose Use is Limited	\$28,731,417	\$32,364,792	\$3,633,375	13%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$50,648,433</b>	<b>\$36,083,178</b>	<b>(\$14,565,255)</b>	<b>-29%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$1,938,833	\$1,857,504	(\$81,329)	-4%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$338,146,246	\$353,562,008	\$15,415,762	5%
2	Less: Accumulated Depreciation	\$213,597,308	\$227,405,684	\$13,808,376	\$0
	<b>Property, Plant and Equipment, Net</b>	<b>\$124,548,938</b>	<b>\$126,156,324</b>	<b>\$1,607,386</b>	<b>1%</b>
3	Construction in Progress	\$10,109,457	\$22,337,285	\$12,227,828	121%
	<b>Total Net Fixed Assets</b>	<b>\$134,658,395</b>	<b>\$148,493,609</b>	<b>\$13,835,214</b>	<b>10%</b>
	<b>Total Assets</b>	<b>\$432,791,836</b>	<b>\$458,436,535</b>	<b>\$25,644,699</b>	<b>6%</b>

<b>L+M CORPORATION</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2012</b>					
<b>REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011 ACTUAL</b>	<b>FY 2012 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$35,821,187	\$40,092,715	\$4,271,528	12%
2	Salaries, Wages and Payroll Taxes	\$3,577,694	\$5,389,708	\$1,812,014	51%
3	Due To Third Party Payers	\$8,013,088	\$5,646,905	(\$2,366,183)	-30%
4	Due To Affiliates	\$98,310	\$0	(\$98,310)	-100%
5	Current Portion of Long Term Debt	\$3,202,481	\$2,762,007	(\$440,474)	-14%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$65,242	\$358,122	\$292,880	449%
	<b>Total Current Liabilities</b>	<b>\$50,778,002</b>	<b>\$54,249,457</b>	<b>\$3,471,455</b>	<b>7%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$82,249,920	\$79,507,217	(\$2,742,703)	-3%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	<b>Total Long Term Debt</b>	<b>\$82,249,920</b>	<b>\$79,507,217</b>	<b>(\$2,742,703)</b>	<b>-3%</b>
3	Accrued Pension Liability	\$43,423,221	\$51,185,800	\$7,762,579	18%
4	Other Long Term Liabilities	\$14,213,720	\$20,384,647	\$6,170,927	43%
	<b>Total Long Term Liabilities</b>	<b>\$139,886,861</b>	<b>\$151,077,664</b>	<b>\$11,190,803</b>	<b>8%</b>
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$217,665,390	\$225,862,751	\$8,197,361	4%
2	Temporarily Restricted Net Assets	\$18,924,725	\$21,354,856	\$2,430,131	13%
3	Permanently Restricted Net Assets	\$5,536,858	\$5,891,807	\$354,949	6%
	<b>Total Net Assets</b>	<b>\$242,126,973</b>	<b>\$253,109,414</b>	<b>\$10,982,441</b>	<b>5%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$432,791,836</b>	<b>\$458,436,535</b>	<b>\$25,644,699</b>	<b>6%</b>

<b>L+M CORPORATION</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2012</b>					
<b>REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011 ACTUAL</b>	<b>FY 2012 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$699,985,953	\$747,825,592	\$47,839,639	7%
2	Less: Allowances	\$346,959,900	\$388,047,782	\$41,087,882	12%
3	Less: Charity Care	\$6,383,831	\$5,735,791	(\$648,040)	-10%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$346,642,222</b>	<b>\$354,042,019</b>	<b>\$7,399,797</b>	<b>2%</b>
5	Other Operating Revenue	\$17,511,017	\$14,772,422	(\$2,738,595)	-16%
6	Net Assets Released from Restrictions	\$926,208	\$1,308,521	\$382,313	41%
	<b>Total Operating Revenue</b>	<b>\$365,079,447</b>	<b>\$370,122,962</b>	<b>\$5,043,515</b>	<b>1%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$172,671,133	\$180,787,943	\$8,116,810	5%
2	Fringe Benefits	\$45,553,162	\$45,920,442	\$367,280	1%
3	Physicians Fees	\$5,157,050	\$6,398,966	\$1,241,916	24%
4	Supplies and Drugs	\$47,120,092	\$49,112,557	\$1,992,465	4%
5	Depreciation and Amortization	\$17,704,358	\$19,255,553	\$1,551,195	9%
6	Bad Debts	\$14,608,057	\$12,408,255	(\$2,199,802)	-15%
7	Interest	\$2,248,192	\$2,316,341	\$68,149	3%
8	Malpractice	\$3,954,496	\$10,132,903	\$6,178,407	156%
9	Other Operating Expenses	\$46,814,696	\$43,082,531	(\$3,732,165)	-8%
	<b>Total Operating Expenses</b>	<b>\$355,831,236</b>	<b>\$369,415,491</b>	<b>\$13,584,255</b>	<b>4%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$9,248,211</b>	<b>\$707,471</b>	<b>(\$8,540,740)</b>	<b>-92%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$8,510,159	\$7,013,860	(\$1,496,299)	-18%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$1,855,597)	\$0	\$1,855,597	-100%
	<b>Total Non-Operating Revenue</b>	<b>\$6,654,562</b>	<b>\$7,013,860</b>	<b>\$359,298</b>	<b>5%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$15,902,773</b>	<b>\$7,721,331</b>	<b>(\$8,181,442)</b>	<b>-51%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$15,902,773</b>	<b>\$7,721,331</b>	<b>(\$8,181,442)</b>	<b>-51%</b>

<b>L+M CORPORATION</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2012</b>
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$326,063,574	\$346,642,222	\$354,042,019
2	Other Operating Revenue	19,974,336	18,437,225	16,080,943
3	Total Operating Revenue	\$346,037,910	\$365,079,447	\$370,122,962
4	Total Operating Expenses	334,984,009	355,831,236	369,415,491
5	Income/(Loss) From Operations	\$11,053,901	\$9,248,211	\$707,471
6	Total Non-Operating Revenue	3,507,474	6,654,562	7,013,860
7	Excess/(Deficiency) of Revenue Over Expenses	\$14,561,375	\$15,902,773	\$7,721,331
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	3.16%	2.49%	0.19%
2	Parent Corporation Non-Operating Margin	1.00%	1.79%	1.86%
3	Parent Corporation Total Margin	4.17%	4.28%	2.05%
4	Income/(Loss) From Operations	\$11,053,901	\$9,248,211	\$707,471
5	Total Operating Revenue	\$346,037,910	\$365,079,447	\$370,122,962
6	Total Non-Operating Revenue	\$3,507,474	\$6,654,562	\$7,013,860
7	Total Revenue	\$349,545,384	\$371,734,009	\$377,136,822
8	Excess/(Deficiency) of Revenue Over Expenses	\$14,561,375	\$15,902,773	\$7,721,331
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$203,283,725	\$217,665,390	\$225,862,751
2	Parent Corporation Total Net Assets	\$227,619,698	\$242,126,973	\$253,109,414
3	Parent Corporation Change in Total Net Assets	\$16,963,686	\$14,507,275	\$10,982,441
4	Parent Corporation Change in Total Net Assets %	108.1%	6.4%	4.5%

<b>L+M CORPORATION</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2012</b>
<b>D. Liquidity Measures Summary</b>				
<b>1</b>	<b>Current Ratio</b>	<b>4.84</b>	<b>4.84</b>	<b>5.01</b>
2	Total Current Assets	\$242,334,833	\$245,546,175	\$272,002,244
3	Total Current Liabilities	\$50,036,702	\$50,778,002	\$54,249,457
<b>4</b>	<b>Days Cash on Hand</b>	<b>226</b>	<b>217</b>	<b>233</b>
5	Cash and Cash Equivalents	\$41,222,090	\$44,580,932	\$15,956,015
6	Short Term Investments	155,780,987	156,173,381	207,930,544
7	Total Cash and Short Term Investments	\$197,003,077	\$200,754,313	\$223,886,559
8	Total Operating Expenses	\$334,984,009	\$355,831,236	\$369,415,491
9	Depreciation Expense	\$17,160,934	\$17,704,358	\$19,255,553
10	Operating Expenses less Depreciation Expense	\$317,823,075	\$338,126,878	\$350,159,938
<b>11</b>	<b>Days Revenue in Patient Accounts Receivable</b>	<b>26</b>	<b>25</b>	<b>27</b>
12	Net Patient Accounts Receivable	\$ 32,328,543	\$ 32,212,263	\$ 32,312,475
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$8,839,110	\$8,013,088	\$5,646,905
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 23,489,433	\$ 24,199,175	\$ 26,665,570
16	Total Net Patient Revenue	\$326,063,574	\$346,642,222	\$354,042,019
<b>17</b>	<b>Average Payment Period</b>	<b>57</b>	<b>55</b>	<b>57</b>
18	Total Current Liabilities	\$50,036,702	\$50,778,002	\$54,249,457
19	Total Operating Expenses	\$334,984,009	\$355,831,236	\$369,415,491
20	Depreciation Expense	\$17,160,934	\$17,704,358	\$19,255,553
21	Total Operating Expenses less Depreciation Expense	\$317,823,075	\$338,126,878	\$350,159,938

<b>L+M CORPORATION</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010</b>	<b>FY 2011</b>	<b>FY 2012</b>
<b>E.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>56.3</b>	<b>55.9</b>	<b>55.2</b>
2	Total Net Assets	\$227,619,698	\$242,126,973	\$253,109,414
3	Total Assets	\$404,219,362	\$432,791,836	\$458,436,535
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>28.3</b>	<b>25.3</b>	<b>20.2</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$14,561,375	\$15,902,773	\$7,721,331
6	Depreciation Expense	\$17,160,934	\$17,704,358	\$19,255,553
7	Excess of Revenues Over Expenses and Depreciation Expense	\$31,722,309	\$33,607,131	\$26,976,884
8	Total Current Liabilities	\$50,036,702	\$50,778,002	\$54,249,457
9	Total Long Term Debt	\$62,148,146	\$82,249,920	\$79,507,217
10	Total Current Liabilities and Total Long Term Debt	\$112,184,848	\$133,027,922	\$133,756,674
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>21.4</b>	<b>25.4</b>	<b>23.9</b>
12	Total Long Term Debt	\$62,148,146	\$82,249,920	\$79,507,217
13	Total Net Assets	\$227,619,698	\$242,126,973	\$253,109,414
14	Total Long Term Debt and Total Net Assets	\$289,767,844	\$324,376,893	\$332,616,631

LAWRENCE AND MEMORIAL 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	44,819	10,607	10,261	148	148	83.0%	83.0%
2	ICU/CCU (Excludes Neonatal ICU)	5,053	356	0	20	20	69.2%	69.2%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	5,447	675	675	18	18	82.9%	82.9%
	<b>TOTAL PSYCHIATRIC</b>	<b>5,447</b>	<b>675</b>	<b>675</b>	<b>18</b>	<b>18</b>	<b>82.9%</b>	<b>82.9%</b>
5	Rehabilitation	4,867	340	340	16	16	83.3%	83.3%
6	Maternity	4,319	1,596	1,596	24	24	49.3%	49.3%
7	Newborn	3,356	1,380	1,380	14	14	65.7%	65.7%
8	Neonatal ICU	2,152	158	0	10	10	59.0%	59.0%
9	Pediatric	545	176	176	6	6	24.9%	24.9%
10	Other	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>67,202</b>	<b>13,552</b>	<b>13,048</b>	<b>242</b>	<b>242</b>	<b>76.1%</b>	<b>76.1%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>70,558</b>	<b>14,932</b>	<b>14,428</b>	<b>256</b>	<b>256</b>	<b>75.5%</b>	<b>75.5%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>70,558</b>	<b>14,932</b>	<b>14,428</b>	<b>256</b>	<b>256</b>	<b>75.5%</b>	<b>75.5%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>74,082</b>	<b>15,328</b>	<b>14,773</b>	<b>256</b>	<b>256</b>	<b>79.3%</b>	<b>79.3%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-3,524</b>	<b>-396</b>	<b>-345</b>	<b>0</b>	<b>0</b>	<b>-3.8%</b>	<b>-3.8%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-5%</b>	<b>-3%</b>	<b>-2%</b>	<b>0%</b>	<b>0%</b>	<b>-5%</b>	<b>-5%</b>
	Total Licensed Beds and Bassinets	308						
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>								
<b>Note: Total discharges do not include ICU/CCU patients.</b>								

LAWRENCE AND MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 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
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	7,555	6,816	-739	-10%
2	Outpatient Scans (Excluding Emergency Department Scans)	10,682	10,042	-640	-6%
3	Emergency Department Scans	8,049	7,628	-421	-5%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>26,286</b>	<b>24,486</b>	<b>-1,800</b>	<b>-7%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	1,564	1,501	-63	-4%
2	Outpatient Scans (Excluding Emergency Department Scans)	9,945	9,993	48	0%
3	Emergency Department Scans	110	105	-5	-5%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>11,619</b>	<b>11,599</b>	<b>-20</b>	<b>0%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	2	0	-2	-100%
2	Outpatient Scans (Excluding Emergency Department Scans)	419	418	-1	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>421</b>	<b>418</b>	<b>-3</b>	<b>-1%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	183	329	146	80%
2	Outpatient Procedures	8,255	9,350	1,095	13%
	<b>Total Linear Accelerator Procedures</b>	<b>8,438</b>	<b>9,679</b>	<b>1,241</b>	<b>15%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	364	353	-11	-3%
2	Outpatient Procedures	289	239	-50	-17%
	<b>Total Cardiac Catheterization Procedures</b>	<b>653</b>	<b>592</b>	<b>-61</b>	<b>-9%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	70	91	21	30%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>70</b>	<b>91</b>	<b>21</b>	<b>30%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	2,962	3,397	435	15%
2	Outpatient Surgical Procedures	10,501	11,018	517	5%
	<b>Total Surgical Procedures</b>	<b>13,463</b>	<b>14,415</b>	<b>952</b>	<b>7%</b>
<b>J. Endoscopy Procedures</b>					

LAWRENCE AND MEMORIAL 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
1	Inpatient Endoscopy Procedures	665	695	30	5%
2	Outpatient Endoscopy Procedures	2,120	1,691	-429	-20%
	<b>Total Endoscopy Procedures</b>	<b>2,785</b>	<b>2,386</b>	<b>-399</b>	<b>-14%</b>
	<b>K. Hospital Emergency Room Visits</b>				
1	Emergency Room Visits: Treated and Admitted	7,543	6,525	-1,018	-13%
2	Emergency Room Visits: Treated and Discharged	72,571	76,140	3,569	5%
	<b>Total Emergency Room Visits</b>	<b>80,114</b>	<b>82,665</b>	<b>2,551</b>	<b>3%</b>
	<b>L. Hospital Clinic Visits</b>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	14,030	17,490	3,460	25%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	0	0	0	0%
	<b>Total Hospital Clinic Visits</b>	<b>14,030</b>	<b>17,490</b>	<b>3,460</b>	<b>25%</b>
	<b>M. Other Hospital Outpatient Visits</b>				
1	Rehabilitation (PT/OT/ST)	69,848	79,924	10,076	14%
2	Cardiology	3,935	4,610	675	17%
3	Chemotherapy	1,735	1,602	-133	-8%
4	Gastroenterology	3,464	2,809	-655	-19%
5	Other Outpatient Visits	280,827	197,580	-83,247	-30%
	<b>Total Other Hospital Outpatient Visits</b>	<b>359,809</b>	<b>286,525</b>	<b>-73,284</b>	<b>-20%</b>
	<b>N. Hospital Full Time Equivalent Employees</b>				
1	Total Nursing FTEs	519.2	460.5	-58.7	-11%
2	Total Physician FTEs	9.4	2.3	-7.1	-76%
3	Total Non-Nursing and Non-Physician FTEs	1,410.5	1,492.0	81.5	6%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>1,939.1</b>	<b>1,954.8</b>	<b>15.7</b>	<b>1%</b>

LAWRENCE AND MEMORIAL 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
<b>A. Outpatient Surgical Procedures</b>					
1	L&M 365 Montauk Hospital	7,747	8,282	535	7%
2	Pequot Health Center Groton	2,754	2,736	-18	-1%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>10,501</b>	<b>11,018</b>	<b>517</b>	<b>5%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	L&M 365 Montauk Ave Hospital	2,120	1,691	-429	-20%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>2,120</b>	<b>1,691</b>	<b>-429</b>	<b>-20%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	L&M 365 Montauk Ave Hospital	36,021	40,965	4,944	14%
2	Pequot Health Center Groton	36,550	35,175	-1,375	-4%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>72,571</b>	<b>76,140</b>	<b>3,569</b>	<b>5%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

LAWRENCE AND MEMORIAL 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
<b>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$155,839,588	\$156,683,829	\$844,241	1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$69,135,193	\$73,626,752	\$4,491,559	6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	44.36%	46.99%	2.63%	6%
4	DISCHARGES	6,897	6,829	(68)	-1%
5	CASE MIX INDEX (CMI)	1.43700	1.40820	(0.02880)	-2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	9,910.98900	9,616.59780	(294.39120)	-3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,975.61	\$7,656.22	\$680.61	10%
8	PATIENT DAYS	40,206	38,019	(2,187)	-5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,719.52	\$1,936.58	\$217.05	13%
10	AVERAGE LENGTH OF STAY	5.8	5.6	(0.3)	-4%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$107,726,275	\$123,938,243	\$16,211,968	15%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$30,826,121	\$33,437,310	\$2,611,189	8%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	28.62%	26.98%	-1.64%	-6%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	69.13%	79.10%	9.97%	14%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,767.64684	5,401.79715	634.15032	13%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,465.69	\$6,190.03	(\$275.65)	-4%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$263,565,863	\$280,622,072	\$17,056,209	6%
18	TOTAL ACCRUED PAYMENTS	\$99,961,314	\$107,064,062	\$7,102,748	7%
19	TOTAL ALLOWANCES	\$163,604,549	\$173,558,010	\$9,953,461	6%

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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
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b>NON-GOVERNMENT INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$72,224,395	\$72,758,907	\$534,512	1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$52,196,374	\$51,860,378	(\$335,996)	-1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	72.27%	71.28%	-0.99%	-1%
4	DISCHARGES	4,292	4,075	(217)	-5%
5	CASE MIX INDEX (CMI)	1.11480	1.14900	0.03420	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,784.72160	4,682.17500	(102.54660)	-2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,908.97	\$11,076.13	\$167.16	2%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,933.36)	(\$3,419.91)	\$513.44	-13%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$18,820,023)	(\$16,012,634)	\$2,807,389	-15%
10	PATIENT DAYS	16,534	15,479	(1,055)	-6%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,156.91	\$3,350.37	\$193.46	6%
12	AVERAGE LENGTH OF STAY	3.9	3.8	(0.1)	-1%
<b>NON-GOVERNMENT OUTPATIENT</b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$180,011,782	\$185,599,975	\$5,588,193	3%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$99,098,435	\$105,152,745	\$6,054,310	6%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	55.05%	56.66%	1.60%	3%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	249.24%	255.09%	5.85%	2%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	10,697.36297	10,394.87713	(302.48584)	-3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,263.82	\$10,115.82	\$852.00	9%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$2,798.13)	(\$3,925.79)	(\$1,127.66)	40%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$29,932,615)	(\$40,808,098)	(\$10,875,484)	36%
<b>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</b>					
21	TOTAL ACCRUED CHARGES	\$252,236,177	\$258,358,882	\$6,122,705	2%
22	TOTAL ACCRUED PAYMENTS	\$151,294,809	\$157,013,123	\$5,718,314	4%
23	TOTAL ALLOWANCES	\$100,941,368	\$101,345,759	\$404,391	0%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$48,752,637)	(\$56,820,732)	(\$8,068,095)	17%
<b>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$240,219,404	\$232,465,068	(\$7,754,336)	-3%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$151,294,809	\$153,442,991	\$2,148,182	1%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$88,924,595	\$79,022,077	(\$9,902,518)	-11%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	37.02%	33.99%	-3.02%	

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>C.</b>	<b>UNINSURED</b>				
	<b>UNINSURED INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$1,105,922	\$935,031	(\$170,891)	-15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	89	69	(20)	-22%
5	CASE MIX INDEX (CMI)	0.89100	1.14870	0.25770	29%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	79.29900	79.26030	(0.03870)	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$10,908.97	\$11,076.13	\$167.16	2%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,975.61	\$7,656.22	\$680.61	10%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$553,159	\$606,834	\$53,675	10%
11	PATIENT DAYS	334	216	(118)	-35%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	3.8	3.1	(0.6)	-17%
	<b>UNINSURED OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$10,910,851	\$10,178,944	(\$731,907)	-7%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	986.58%	1088.62%	102.04%	10%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	878.05988	751.14850	(126.91138)	-14%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$9,263.82	\$10,115.82	\$852.00	9%
21	MEDICARE - UNINSURED OP PMT / OPED	\$6,465.69	\$6,190.03	(\$275.65)	-4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,677,262	\$4,649,635	(\$1,027,627)	-18%
	<b>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$12,016,773	\$11,113,975	(\$902,798)	-8%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$12,016,773	\$11,113,975	(\$902,798)	-8%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,230,421	\$5,256,469	(\$973,952)	-16%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$48,004,808	\$47,872,697	(\$132,111)	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$18,472,111	\$16,110,274	(\$2,361,837)	-13%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	38.48%	33.65%	-4.83%	-13%
4	DISCHARGES	3,192	3,028	(164)	-5%
5	CASE MIX INDEX (CMI)	0.95280	0.99660	0.04380	5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,041.33760	3,017.70480	(23.63280)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,073.68	\$5,338.59	(\$735.09)	-12%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$4,835.29	\$5,737.54	\$902.26	19%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$901.93	\$2,317.63	\$1,415.70	157%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,743,074	\$6,993,926	\$4,250,853	155%
11	PATIENT DAYS	14,089	13,730	(359)	-3%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,311.10	\$1,173.36	(\$137.74)	-11%
13	AVERAGE LENGTH OF STAY	4.4	4.5	0.1	3%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$60,194,068	\$67,648,357	\$7,454,289	12%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,528,993	\$18,889,853	(\$639,140)	-3%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.44%	27.92%	-4.52%	-14%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	125.39%	141.31%	15.92%	13%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,002.50460	4,278.83194	276.32734	7%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,879.19	\$4,414.72	(\$464.47)	-10%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$4,384.63	\$5,701.10	\$1,316.48	30%
21	MEDICARE - MEDICAID OP PMT / OPED	\$1,586.50	\$1,775.31	\$188.82	12%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,349,956	\$7,596,264	\$1,246,307	20%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$108,198,876	\$115,521,054	\$7,322,178	7%
24	TOTAL ACCRUED PAYMENTS	\$38,001,104	\$35,000,127	(\$3,000,977)	-8%
25	TOTAL ALLOWANCES	\$70,197,772	\$80,520,927	\$10,323,155	15%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,093,030	\$14,590,190	\$5,497,160	60%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>E.</b>	<b><u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u></b>				
	<b><u>OTHER MEDICAL ASSISTANCE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$977,901	\$481,544	(\$496,357)	-51%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$131,070	\$143,250	\$12,180	9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	13.40%	29.75%	16.34%	122%
4	DISCHARGES	57	31	(26)	-46%
5	CASE MIX INDEX (CMI)	0.85520	0.94950	0.09430	11%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	48.74640	29.43450	(19.31190)	-40%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,688.81	\$4,866.74	\$2,177.92	81%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$8,220.15	\$6,209.39	(\$2,010.76)	-24%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$4,286.80	\$2,789.48	(\$1,497.32)	-35%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$208,966	\$82,107	(\$126,859)	-61%
11	PATIENT DAYS	307	139	(168)	-55%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$426.94	\$1,030.58	\$603.64	141%
13	AVERAGE LENGTH OF STAY	5.4	4.5	(0.9)	-17%
	<b><u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$923,024	\$1,039,368	\$116,344	13%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$454,759	\$268,390	(\$186,369)	-41%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	49.27%	25.82%	-23.45%	-48%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	94.39%	215.84%	121.45%	129%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	53.80132	66.91062	13.10930	24%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,452.56	\$4,011.17	(\$4,441.39)	-53%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$811.26	\$6,104.65	\$5,293.39	652%
21	MEDICARE - O.M.A. OP PMT / CMAD	(\$1,986.87)	\$2,178.86	\$4,165.74	-210%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$106,896)	\$145,789	\$252,685	-236%
	<b><u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$1,900,925	\$1,520,912	(\$380,013)	-20%
24	TOTAL ACCRUED PAYMENTS	\$585,829	\$411,640	(\$174,189)	-30%
25	TOTAL ALLOWANCES	\$1,315,096	\$1,109,272	(\$205,824)	-16%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$102,069	\$227,896	\$125,826	123%

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LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
<b>F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>					
<b>TOTAL MEDICAL ASSISTANCE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$48,982,709	\$48,354,241	(\$628,468)	-1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$18,603,181	\$16,253,524	(\$2,349,657)	-13%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	37.98%	33.61%	-4.37%	-11%
4	DISCHARGES	3,249	3,059	(190)	-6%
5	CASE MIX INDEX (CMI)	0.95109	0.99612	0.04503	5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,090.08400	3,047.13930	(42.94470)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,020.28	\$5,334.03	(\$686.26)	-11%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$4,888.68	\$5,742.10	\$853.42	17%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$955.33	\$2,322.19	\$1,366.86	143%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,952,040	\$7,076,033	\$4,123,994	140%
11	PATIENT DAYS	14,396	13,869	(527)	-4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,292.25	\$1,171.93	(\$120.31)	-9%
13	AVERAGE LENGTH OF STAY	4.4	4.5	0.1	2%
<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$61,117,092	\$68,687,725	\$7,570,633	12%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,983,752	\$19,158,243	(\$825,509)	-4%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.70%	27.89%	-4.81%	-15%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	124.77%	142.05%	17.28%	14%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,056.30593	4,345.74256	289.43663	7%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,926.59	\$4,408.51	(\$518.08)	-11%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,337.23	\$5,707.32	\$1,370.09	32%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$1,539.10	\$1,781.53	\$242.43	16%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,243,060	\$7,742,053	\$1,498,993	24%
<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$110,099,801	\$117,041,966	\$6,942,165	6%
24	TOTAL ACCRUED PAYMENTS	\$38,586,933	\$35,411,767	(\$3,175,166)	-8%
25	TOTAL ALLOWANCES	\$71,512,868	\$81,630,199	\$10,117,331	14%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$12,235,130	\$12,748,626	\$513,496	4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,790,269	\$5,510,106	\$719,837	15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	39.15%	43.22%	4.07%	10%
4	DISCHARGES	890	969	79	9%
5	CASE MIX INDEX (CMI)	0.90340	0.89590	(0.00750)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	804.02600	868.12710	64.10110	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,957.85	\$6,347.12	\$389.27	7%
8	PATIENT DAYS	2,946	3,191	245	8%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,626.02	\$1,726.76	\$100.74	6%
10	AVERAGE LENGTH OF STAY	3.3	3.3	(0.0)	-1%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$23,023,949	\$23,215,651	\$191,702	1%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$8,387,614	\$7,041,745	(\$1,345,869)	-16%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$35,259,079	\$35,964,277	\$705,198	2%
14	TOTAL ACCRUED PAYMENTS	\$13,177,883	\$12,551,851	(\$626,032)	-5%
15	TOTAL ALLOWANCES	\$22,081,196	\$23,412,426	\$1,331,230	6%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$15,662,907	\$15,433,709	(\$229,198)	-1%
2	TOTAL OPERATING EXPENSES	\$312,331,109	\$318,194,716	\$5,863,607	2%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
<b>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</b>					
4	CHARITY CARE (CHARGES)	\$3,148,344	\$2,828,618	(\$319,726)	-10%
5	BAD DEBTS (CHARGES)	\$13,865,210	\$11,930,618	(\$1,934,592)	-14%
6	UNCOMPENSATED CARE (CHARGES)	\$17,013,554	\$14,759,236	(\$2,254,318)	-13%
7	COST OF UNCOMPENSATED CARE	\$7,465,447	\$6,655,447	(\$810,000)	-11%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$110,099,801	\$117,041,966	\$6,942,165	6%
9	TOTAL ACCRUED PAYMENTS	\$38,586,933	\$35,411,767	(\$3,175,166)	-8%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$48,311,139	\$52,778,244	\$4,467,105	9%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$9,724,206	\$17,366,477	\$7,642,271	79%

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LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$289,281,822	\$290,545,603	\$1,263,781	0%
2	TOTAL INPATIENT PAYMENTS	\$144,725,017	\$147,250,760	\$2,525,743	2%
3	TOTAL INPATIENT PAYMENTS / CHARGES	50.03%	50.68%	0.65%	1%
4	TOTAL DISCHARGES	15,328	14,932	(396)	-3%
5	TOTAL CASE MIX INDEX	1.21280	1.21980	0.00700	1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	18,589.82060	18,214.03920	(375.78140)	-2%
7	TOTAL OUTPATIENT CHARGES	\$371,879,098	\$401,441,594	\$29,562,496	8%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	128.55%	138.17%	9.62%	7%
9	TOTAL OUTPATIENT PAYMENTS	\$158,295,922	\$164,790,043	\$6,494,121	4%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	42.57%	41.05%	-1.52%	-4%
11	TOTAL CHARGES	\$661,160,920	\$691,987,197	\$30,826,277	5%
12	TOTAL PAYMENTS	\$303,020,939	\$312,040,803	\$9,019,864	3%
13	TOTAL PAYMENTS / TOTAL CHARGES	45.83%	45.09%	-0.74%	-2%
14	PATIENT DAYS	74,082	70,558	(3,524)	-5%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$217,057,427	\$217,786,696	\$729,269	0%
2	INPATIENT PAYMENTS	\$92,528,643	\$95,390,382	\$2,861,739	3%
3	GOVT. INPATIENT PAYMENTS / CHARGES	42.63%	43.80%	1.17%	3%
4	DISCHARGES	11,036	10,857	(179)	-2%
5	CASE MIX INDEX	1.25092	1.24637	(0.00454)	0%
6	CASE MIX ADJUSTED DISCHARGES	13,805.09900	13,531.86420	(273.23480)	-2%
7	OUTPATIENT CHARGES	\$191,867,316	\$215,841,619	\$23,974,303	12%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	88.39%	99.11%	10.71%	12%
9	OUTPATIENT PAYMENTS	\$59,197,487	\$59,637,298	\$439,811	1%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.85%	27.63%	-3.22%	-10%
11	TOTAL CHARGES	\$408,924,743	\$433,628,315	\$24,703,572	6%
12	TOTAL PAYMENTS	\$151,726,130	\$155,027,680	\$3,301,550	2%
13	TOTAL PAYMENTS / CHARGES	37.10%	35.75%	-1.35%	-4%
14	PATIENT DAYS	57,548	55,079	(2,469)	-4%
15	TOTAL GOVERNMENT DEDUCTIONS	\$257,198,613	\$278,600,635	\$21,402,022	8%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	5.8	5.6	(0.3)	-4%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.9	3.8	(0.1)	-1%
3	UNINSURED	3.8	3.1	(0.6)	-17%
4	MEDICAID	4.4	4.5	0.1	3%
5	OTHER MEDICAL ASSISTANCE	5.4	4.5	(0.9)	-17%
6	CHAMPUS / TRICARE	3.3	3.3	(0.0)	-1%
7	TOTAL AVERAGE LENGTH OF STAY	4.8	4.7	(0.1)	-2%

LAWRENCE AND MEMORIAL 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
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$661,160,920	\$691,987,197	\$30,826,277	5%
2	TOTAL GOVERNMENT DEDUCTIONS	\$257,198,613	\$278,600,635	\$21,402,022	8%
3	UNCOMPENSATED CARE	\$17,013,554	\$14,759,236	(\$2,254,318)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$88,924,595	\$79,022,077	(\$9,902,518)	-11%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$7,910,671	\$7,564,445	(\$346,226)	-4%
6	TOTAL ADJUSTMENTS	\$371,047,433	\$379,946,393	\$8,898,960	2%
7	TOTAL ACCRUED PAYMENTS	\$290,113,487	\$312,040,804	\$21,927,317	8%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$290,113,487	\$312,040,804	\$21,927,317	8%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4387940639	0.4509343603	0.0121402963	3%
11	COST OF UNCOMPENSATED CARE	\$7,465,447	\$6,655,447	(\$810,000)	-11%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$9,724,206	\$17,366,477	\$7,642,271	79%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$17,189,653	\$24,021,924	\$6,832,271	40%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$6,349,956	\$7,596,264	\$1,246,307	20%
2	OTHER MEDICAL ASSISTANCE	\$102,069	\$227,896	\$125,826	123%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,230,421	\$5,256,469	(\$973,952)	-16%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$12,682,447	\$13,080,629	\$398,182	3%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$15,323,591	\$14,779,838	(\$543,753)	-3.55%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$15,792,142	\$11,602,393	(\$4,189,749)	-26.53%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$318,813,210	\$323,643,197	\$4,829,987	1.51%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$661,160,918	\$691,987,197	\$30,826,279	4.66%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$3,220,157	\$2,907,353	(\$312,804)	-9.71%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$20,233,711	\$17,666,590	(\$2,567,121)	-12.69%

LAWRENCE AND MEMORIAL 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
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$72,224,395	\$72,758,907	\$534,512
2	MEDICARE	\$155,839,588	156,683,829	\$844,241
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$48,982,709	48,354,241	(\$628,468)
4	MEDICAID	\$48,004,808	47,872,697	(\$132,111)
5	OTHER MEDICAL ASSISTANCE	\$977,901	481,544	(\$496,357)
6	CHAMPUS / TRICARE	\$12,235,130	12,748,626	\$513,496
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,105,922	935,031	(\$170,891)
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$217,057,427</b>	<b>\$217,786,696</b>	<b>\$729,269</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$289,281,822</b>	<b>\$290,545,603</b>	<b>\$1,263,781</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$180,011,782	\$185,599,975	\$5,588,193
2	MEDICARE	\$107,726,275	123,938,243	\$16,211,968
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$61,117,092	68,687,725	\$7,570,633
4	MEDICAID	\$60,194,068	67,648,357	\$7,454,289
5	OTHER MEDICAL ASSISTANCE	\$923,024	1,039,368	\$116,344
6	CHAMPUS / TRICARE	\$23,023,949	23,215,651	\$191,702
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,910,851	10,178,944	(\$731,907)
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$191,867,316</b>	<b>\$215,841,619</b>	<b>\$23,974,303</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$371,879,098</b>	<b>\$401,441,594</b>	<b>\$29,562,496</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$252,236,177	\$258,358,882	\$6,122,705
2	TOTAL MEDICARE	\$263,565,863	\$280,622,072	\$17,056,209
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$110,099,801	\$117,041,966	\$6,942,165
4	TOTAL MEDICAID	\$108,198,876	\$115,521,054	\$7,322,178
5	TOTAL OTHER MEDICAL ASSISTANCE	\$1,900,925	\$1,520,912	(\$380,013)
6	TOTAL CHAMPUS / TRICARE	\$35,259,079	\$35,964,277	\$705,198
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,016,773	\$11,113,975	(\$902,798)
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$408,924,743</b>	<b>\$433,628,315</b>	<b>\$24,703,572</b>
	<b>TOTAL CHARGES</b>	<b>\$661,160,920</b>	<b>\$691,987,197</b>	<b>\$30,826,277</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$52,196,374	\$51,860,378	(\$335,996)
2	MEDICARE	\$69,135,193	73,626,752	\$4,491,559
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$18,603,181	16,253,524	(\$2,349,657)
4	MEDICAID	\$18,472,111	16,110,274	(\$2,361,837)
5	OTHER MEDICAL ASSISTANCE	\$131,070	143,250	\$12,180
6	CHAMPUS / TRICARE	\$4,790,269	5,510,106	\$719,837
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	0	\$0
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$92,528,643</b>	<b>\$95,390,382</b>	<b>\$2,861,739</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$144,725,017</b>	<b>\$147,250,760</b>	<b>\$2,525,743</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$99,098,435	\$105,152,745	\$6,054,310
2	MEDICARE	\$30,826,121	33,437,310	\$2,611,189
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$19,983,752	19,158,243	(\$825,509)
4	MEDICAID	\$19,528,993	18,889,853	(\$639,140)
5	OTHER MEDICAL ASSISTANCE	\$454,759	268,390	(\$186,369)
6	CHAMPUS / TRICARE	\$8,387,614	7,041,745	(\$1,345,869)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	0	\$0
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$59,197,487</b>	<b>\$59,637,298</b>	<b>\$439,811</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$158,295,922</b>	<b>\$164,790,043</b>	<b>\$6,494,121</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$151,294,809	\$157,013,123	\$5,718,314
2	TOTAL MEDICARE	\$99,961,314	\$107,064,062	\$7,102,748
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$38,586,933	\$35,411,767	(\$3,175,166)
4	TOTAL MEDICAID	\$38,001,104	\$35,000,127	(\$3,000,977)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$585,829	\$411,640	(\$174,189)
6	TOTAL CHAMPUS / TRICARE	\$13,177,883	\$12,551,851	(\$626,032)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	\$0	\$0
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$151,726,130</b>	<b>\$155,027,680</b>	<b>\$3,301,550</b>
	<b>TOTAL PAYMENTS</b>	<b>\$303,020,939</b>	<b>\$312,040,803</b>	<b>\$9,019,864</b>

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>AMOUNT DIFFERENCE</b>
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10.92%	10.51%	-0.41%
2	MEDICARE	23.57%	22.64%	-0.93%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.41%	6.99%	-0.42%
4	MEDICAID	7.26%	6.92%	-0.34%
5	OTHER MEDICAL ASSISTANCE	0.15%	0.07%	-0.08%
6	CHAMPUS / TRICARE	1.85%	1.84%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.17%	0.14%	-0.03%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>32.83%</b>	<b>31.47%</b>	<b>-1.36%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>43.75%</b>	<b>41.99%</b>	<b>-1.77%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	27.23%	26.82%	-0.41%
2	MEDICARE	16.29%	17.91%	1.62%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.24%	9.93%	0.68%
4	MEDICAID	9.10%	9.78%	0.67%
5	OTHER MEDICAL ASSISTANCE	0.14%	0.15%	0.01%
6	CHAMPUS / TRICARE	3.48%	3.35%	-0.13%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.65%	1.47%	-0.18%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>29.02%</b>	<b>31.19%</b>	<b>2.17%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>56.25%</b>	<b>58.01%</b>	<b>1.77%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17.23%	16.62%	-0.61%
2	MEDICARE	22.82%	23.60%	0.78%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.14%	5.21%	-0.93%
4	MEDICAID	6.10%	5.16%	-0.93%
5	OTHER MEDICAL ASSISTANCE	0.04%	0.05%	0.00%
6	CHAMPUS / TRICARE	1.58%	1.77%	0.18%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.00%	0.00%	0.00%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>30.54%</b>	<b>30.57%</b>	<b>0.03%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>47.76%</b>	<b>47.19%</b>	<b>-0.57%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	32.70%	33.70%	0.99%
2	MEDICARE	10.17%	10.72%	0.54%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.59%	6.14%	-0.46%
4	MEDICAID	6.44%	6.05%	-0.39%
5	OTHER MEDICAL ASSISTANCE	0.15%	0.09%	-0.06%
6	CHAMPUS / TRICARE	2.77%	2.26%	-0.51%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.00%	0.00%	0.00%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>19.54%</b>	<b>19.11%</b>	<b>-0.42%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>52.24%</b>	<b>52.81%</b>	<b>0.57%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>

LAWRENCE AND MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 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
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,292	4,075	(217)
2	MEDICARE	6,897	6,829	(68)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,249	3,059	(190)
4	MEDICAID	3,192	3,028	(164)
5	OTHER MEDICAL ASSISTANCE	57	31	(26)
6	CHAMPUS / TRICARE	890	969	79
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	89	69	(20)
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>11,036</b>	<b>10,857</b>	<b>(179)</b>
	<b>TOTAL DISCHARGES</b>	<b>15,328</b>	<b>14,932</b>	<b>(396)</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16,534	15,479	(1,055)
2	MEDICARE	40,206	38,019	(2,187)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,396	13,869	(527)
4	MEDICAID	14,089	13,730	(359)
5	OTHER MEDICAL ASSISTANCE	307	139	(168)
6	CHAMPUS / TRICARE	2,946	3,191	245
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	334	216	(118)
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>57,548</b>	<b>55,079</b>	<b>(2,469)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>74,082</b>	<b>70,558</b>	<b>(3,524)</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.9	3.8	(0.1)
2	MEDICARE	5.8	5.6	(0.3)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.4	4.5	0.1
4	MEDICAID	4.4	4.5	0.1
5	OTHER MEDICAL ASSISTANCE	5.4	4.5	(0.9)
6	CHAMPUS / TRICARE	3.3	3.3	(0.0)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.8	3.1	(0.6)
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>5.2</b>	<b>5.1</b>	<b>(0.1)</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.8</b>	<b>4.7</b>	<b>(0.1)</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.11480	1.14900	0.03420
2	MEDICARE	1.43700	1.40820	(0.02880)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.95109	0.99612	0.04503
4	MEDICAID	0.95280	0.99660	0.04380
5	OTHER MEDICAL ASSISTANCE	0.85520	0.94950	0.09430
6	CHAMPUS / TRICARE	0.90340	0.89590	(0.00750)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.89100	1.14870	0.25770
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.25092</b>	<b>1.24637</b>	<b>(0.00454)</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.21280</b>	<b>1.21980</b>	<b>0.00700</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$240,219,404	\$232,465,068	(\$7,754,336)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$151,294,809	\$153,442,991	\$2,148,182
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$88,924,595	\$79,022,077	(\$9,902,518)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	37.02%	33.99%	-3.02%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$15,323,591	\$14,779,838	(\$543,753)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$7,910,671	\$7,564,445	(\$346,226)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$3,148,344	\$2,828,618	(\$319,726)
9	BAD DEBTS	\$13,865,210	\$11,930,618	(\$1,934,592)
10	TOTAL UNCOMPENSATED CARE	\$17,013,554	\$14,759,236	(\$2,254,318)
11	TOTAL OTHER OPERATING REVENUE	\$240,219,404	\$232,465,068	(\$7,754,336)
12	TOTAL OPERATING EXPENSES	\$312,331,109	\$318,194,716	\$5,863,607

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>AMOUNT DIFFERENCE</b>
<b>IV. DSH UPPER PAYMENT LIMIT CALCULATIONS</b>				
<b>A. CASE MIX ADJUSTED DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,784.72160	4,682.17500	(102.54660)
2	MEDICARE	9,910.98900	9,616.59780	(294.39120)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,090.08400	3,047.13930	(42.94470)
4	MEDICAID	3,041.33760	3,017.70480	(23.63280)
5	OTHER MEDICAL ASSISTANCE	48.74640	29.43450	(19.31190)
6	CHAMPUS / TRICARE	804.02600	868.12710	64.10110
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	79.29900	79.26030	(0.03870)
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>13,805.09900</b>	<b>13,531.86420</b>	<b>(273.23480)</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>18,589.82060</b>	<b>18,214.03920</b>	<b>(375.78140)</b>
<b>B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,697.36297	10,394.87713	-302.48584
2	MEDICARE	4,767.64684	5,401.79715	634.15032
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,056.30593	4,345.74256	289.43663
4	MEDICAID	4,002.50460	4,278.83194	276.32734
5	OTHER MEDICAL ASSISTANCE	53.80132	66.91062	13.10930
6	CHAMPUS / TRICARE	1,674.79337	1,764.57964	89.78627
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	878.05988	751.14850	-126.91138
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>10,498.74613</b>	<b>11,512.11935</b>	<b>1,013.37322</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>21,196.10910</b>	<b>21,906.99648</b>	<b>710.88738</b>
<b>C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,908.97	\$11,076.13	\$167.16
2	MEDICARE	\$6,975.61	\$7,656.22	\$680.61
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,020.28	\$5,334.03	(\$686.26)
4	MEDICAID	\$6,073.68	\$5,338.59	(\$735.09)
5	OTHER MEDICAL ASSISTANCE	\$2,688.81	\$4,866.74	\$2,177.92
6	CHAMPUS / TRICARE	\$5,957.85	\$6,347.12	\$389.27
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0.00	\$0.00	\$0.00
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$6,702.50</b>	<b>\$7,049.32</b>	<b>\$346.82</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,785.18</b>	<b>\$8,084.46</b>	<b>\$299.29</b>
<b>D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,263.82	\$10,115.82	\$852.00
2	MEDICARE	\$6,465.69	\$6,190.03	(\$275.65)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,926.59	\$4,408.51	(\$518.08)
4	MEDICAID	\$4,879.19	\$4,414.72	(\$464.47)
5	OTHER MEDICAL ASSISTANCE	\$8,452.56	\$4,011.17	(\$4,441.39)
6	CHAMPUS / TRICARE	\$5,008.15	\$3,990.61	(\$1,017.54)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0.00	\$0.00	\$0.00
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$5,638.53</b>	<b>\$5,180.39</b>	<b>(\$458.14)</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$7,468.16</b>	<b>\$7,522.26</b>	<b>\$54.10</b>

LAWRENCE AND MEMORIAL 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
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$6,349,956	\$7,596,264	\$1,246,307
2	OTHER MEDICAL ASSISTANCE	\$102,069	\$227,896	\$125,826
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$0	\$0	\$0
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$6,452,026</b>	<b>\$7,824,160</b>	<b>\$1,372,134</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$661,160,920	\$691,987,197	\$30,826,277
2	TOTAL GOVERNMENT DEDUCTIONS	\$257,198,613	\$278,600,635	\$21,402,022
3	UNCOMPENSATED CARE	\$17,013,554	\$14,759,236	(\$2,254,318)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$88,924,595	\$79,022,077	(\$9,902,518)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$7,910,671	\$7,564,445	(\$346,226)
6	TOTAL ADJUSTMENTS	\$371,047,433	\$379,946,393	\$8,898,960
7	TOTAL ACCRUED PAYMENTS	\$290,113,487	\$312,040,804	\$21,927,317
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$290,113,487	\$312,040,804	\$21,927,317
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4387940639	0.4509343603	0.0121402963
11	COST OF UNCOMPENSATED CARE	\$7,465,447	\$6,655,447	(\$810,000)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$9,724,206	\$17,366,477	\$7,642,271
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$17,189,653	\$24,021,924	\$6,832,271
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	72.27%	71.28%	-0.99%
2	MEDICARE	44.36%	46.99%	2.63%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	37.98%	33.61%	-4.37%
4	MEDICAID	38.48%	33.65%	-4.83%
5	OTHER MEDICAL ASSISTANCE	13.40%	29.75%	16.34%
6	CHAMPUS / TRICARE	39.15%	43.22%	4.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.00%	0.00%	0.00%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>42.63%</b>	<b>43.80%</b>	<b>1.17%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>50.03%</b>	<b>50.68%</b>	<b>0.65%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	55.05%	56.66%	1.60%
2	MEDICARE	28.62%	26.98%	-1.64%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	32.70%	27.89%	-4.81%
4	MEDICAID	32.44%	27.92%	-4.52%
5	OTHER MEDICAL ASSISTANCE	49.27%	25.82%	-23.45%
6	CHAMPUS / TRICARE	36.43%	30.33%	-6.10%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.00%	0.00%	0.00%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>30.85%</b>	<b>27.63%</b>	<b>-3.22%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>42.57%</b>	<b>41.05%</b>	<b>-1.52%</b>

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>AMOUNT DIFFERENCE</b>
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$303,020,939	\$312,040,803	\$9,019,864
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$303,020,939</b>	<b>\$312,040,803</b>	<b>\$9,019,864</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$15,792,142	\$11,602,393	(\$4,189,749)
4	<b>CALCULATED NET REVENUE</b>	<b>\$318,813,081</b>	<b>\$323,643,196</b>	<b>\$4,830,115</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$318,813,210	\$323,643,197	\$4,829,987
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$129)</b>	<b>(\$1)</b>	<b>\$128</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$661,160,920	\$691,987,197	\$30,826,277
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$661,160,920</b>	<b>\$691,987,197</b>	<b>\$30,826,277</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$661,160,918	\$691,987,197	\$30,826,279
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$2</b>	<b>\$0</b>	<b>(\$2)</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$17,013,554	\$14,759,236	(\$2,254,318)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$3,220,157	\$2,907,353	(\$312,804)
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$20,233,711</b>	<b>\$17,666,589</b>	<b>(\$2,567,122)</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$20,233,711	\$17,666,590	(\$2,567,121)
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>(\$1)</b>	<b>(\$1)</b>

LAWRENCE AND MEMORIAL 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
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$72,758,907
2	MEDICARE	156,683,829
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	48,354,241
4	MEDICAID	47,872,697
5	OTHER MEDICAL ASSISTANCE	481,544
6	CHAMPUS / TRICARE	12,748,626
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	935,031
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$217,786,696</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$290,545,603</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$185,599,975
2	MEDICARE	123,938,243
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	68,687,725
4	MEDICAID	67,648,357
5	OTHER MEDICAL ASSISTANCE	1,039,368
6	CHAMPUS / TRICARE	23,215,651
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,178,944
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$215,841,619</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$401,441,594</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$258,358,882
2	TOTAL GOVERNMENT ACCRUED CHARGES	433,628,315
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$691,987,197</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$51,860,378
2	MEDICARE	73,626,752
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16,253,524
4	MEDICAID	16,110,274
5	OTHER MEDICAL ASSISTANCE	143,250
6	CHAMPUS / TRICARE	5,510,106
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$95,390,382</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$147,250,760</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$105,152,745
2	MEDICARE	33,437,310
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19,158,243
4	MEDICAID	18,889,853
5	OTHER MEDICAL ASSISTANCE	268,390
6	CHAMPUS / TRICARE	7,041,745
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$59,637,298</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$164,790,043</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$157,013,123
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	155,027,680
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$312,040,803</b>

LAWRENCE AND MEMORIAL 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
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,075
2	MEDICARE	6,829
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,059
4	MEDICAID	3,028
5	OTHER MEDICAL ASSISTANCE	31
6	CHAMPUS / TRICARE	969
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	69
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>10,857</b>
	<b>TOTAL DISCHARGES</b>	<b>14,932</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.14900
2	MEDICARE	1.40820
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.99612
4	MEDICAID	0.99660
5	OTHER MEDICAL ASSISTANCE	0.94950
6	CHAMPUS / TRICARE	0.89590
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.14870
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.24637</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.21980</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$232,465,068
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$153,442,991
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$79,022,077
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	33.99%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$14,779,838
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$7,564,445
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$2,828,618
9	BAD DEBTS	\$11,930,618
10	TOTAL UNCOMPENSATED CARE	\$14,759,236
11	TOTAL OTHER OPERATING REVENUE	\$15,433,709
12	TOTAL OPERATING EXPENSES	\$318,194,716

LAWRENCE AND MEMORIAL 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
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$312,040,803
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$312,040,803</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$11,602,393
	<b>CALCULATED NET REVENUE</b>	<b>\$323,643,196</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$323,643,197
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$1)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$691,987,197
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$691,987,197</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$691,987,197
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$14,759,236
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$2,907,353
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$17,666,589</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$17,666,590
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$1)</b>

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2012</b>					
<b>REPORT 650 - HOSPITAL UNCOMPENSATED CARE</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. <u>Hospital Charity Care (from HRS Report 500)</u></b>					
1	Number of Applicants	1,544	1,714	170	11%
2	Number of Approved Applicants	1,383	1,364	(19)	-1%
3	<b>Total Charges (A)</b>	<b>\$3,148,344</b>	<b>\$2,828,618</b>	<b>(\$319,726)</b>	<b>-10%</b>
4	<b>Average Charges</b>	<b>\$2,276</b>	<b>\$2,074</b>	<b>(\$203)</b>	<b>-9%</b>
5	Ratio of Cost to Charges (RCC)	0.468755	0.461466	(0.007289)	-2%
6	<b>Total Cost</b>	<b>\$1,475,802</b>	<b>\$1,305,311</b>	<b>(\$170,491)</b>	<b>-12%</b>
7	<b>Average Cost</b>	<b>\$1,067</b>	<b>\$957</b>	<b>(\$110)</b>	<b>-10%</b>
8	Charity Care - Inpatient Charges	\$650,292	\$356,641	(\$293,651)	-45%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	1,517,355	1,486,688	(30,667)	-2%
10	Charity Care - Emergency Department Charges	980,697	985,289	4,592	0%
11	<b>Total Charges (A)</b>	<b>\$3,148,344</b>	<b>\$2,828,618</b>	<b>(\$319,726)</b>	<b>-10%</b>
12	Charity Care - Number of Patient Days	230	93	(137)	-60%
13	Charity Care - Number of Discharges	46	31	(15)	-33%
14	Charity Care - Number of Outpatient ED Visits	857	857	0	0%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	1,516	1,479	(37)	-2%
<b>B. <u>Hospital Bad Debts (from HRS Report 500)</u></b>					
1	Bad Debts - Inpatient Services	\$3,586,698	\$2,955,474	(\$631,224)	-18%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	3,862,447	3,365,362	(497,085)	-13%
3	Bad Debts - Emergency Department	6,416,065	5,609,782	(806,283)	-13%
4	<b>Total Bad Debts (A)</b>	<b>\$13,865,210</b>	<b>\$11,930,618</b>	<b>(\$1,934,592)</b>	<b>-14%</b>
<b>C. <u>Hospital Uncompensated Care (from HRS Report 500)</u></b>					
1	Charity Care (A)	\$3,148,344	\$2,828,618	(\$319,726)	-10%
2	Bad Debts (A)	13,865,210	11,930,618	(1,934,592)	-14%
3	<b>Total Uncompensated Care (A)</b>	<b>\$17,013,554</b>	<b>\$14,759,236</b>	<b>(\$2,254,318)</b>	<b>-13%</b>
4	Uncompensated Care - Inpatient Services	\$4,236,990	\$3,312,115	(\$924,875)	-22%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	5,379,802	4,852,050	(527,752)	-10%
6	Uncompensated Care - Emergency Department	7,396,762	6,595,071	(801,691)	-11%
7	<b>Total Uncompensated Care (A)</b>	<b>\$17,013,554</b>	<b>\$14,759,236</b>	<b>(\$2,254,318)</b>	<b>-13%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					

LAWRENCE AND MEMORIAL 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) FY 2011	(4) FY 2012	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
	<b><u>COMMERCIAL - ALL PAYERS</u></b>				
1	Total Gross Revenue	\$240,219,404	\$232,465,068	(\$7,754,336)	-3%
2	Total Contractual Allowances	\$88,924,595	\$79,022,077	(\$9,902,518)	-11%
	<b>Total Accrued Payments (A)</b>	<b>\$151,294,809</b>	<b>\$153,442,991</b>	<b>\$2,148,182</b>	<b>1%</b>
	<b>Total Discount Percentage</b>	<b>37.02%</b>	<b>33.99%</b>	<b>-3.02%</b>	<b>-8%</b>
<b>(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.</b>					

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>
<b>A. <u>Gross and Net Revenue</u></b>				
1	Inpatient Gross Revenue	\$277,650,576	\$289,281,822	\$290,545,603
2	Outpatient Gross Revenue	\$347,300,572	\$371,879,098	\$401,441,594
3	Total Gross Patient Revenue	\$624,951,148	\$661,160,920	\$691,987,197
4	Net Patient Revenue	\$306,562,977	\$318,813,210	\$323,643,197
<b>B. <u>Total Operating Expenses</u></b>				
1	Total Operating Expense	\$299,648,936	\$312,331,109	\$318,194,716
<b>C. <u>Utilization Statistics</u></b>				
1	Patient Days	71,761	74,082	70,558
2	Discharges	15,464	15,328	14,932
3	Average Length of Stay	4.6	4.8	4.7
4	Equivalent (Adjusted) Patient Days (EPD)	161,524	169,316	168,047
0	Equivalent (Adjusted) Discharges (ED)	34,807	35,033	35,563
<b>D. <u>Case Mix Statistics</u></b>				
1	Case Mix Index	1.18451	1.21280	1.21980
2	Case Mix Adjusted Patient Days (CMAPD)	85,002	89,847	86,067
3	Case Mix Adjusted Discharges (CMAD)	18,317	18,590	18,214
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	191,326	205,347	204,983
5	Case Mix Adjusted Equivalent Discharges (CMAED)	41,229	42,488	43,380
<b>E. <u>Gross Revenue Per Statistic</u></b>				
1	Total Gross Revenue per Patient Day	\$8,709	\$8,925	\$9,807
2	Total Gross Revenue per Discharge	\$40,413	\$43,134	\$46,343
3	Total Gross Revenue per EPD	\$3,869	\$3,905	\$4,118
4	Total Gross Revenue per ED	\$17,955	\$18,873	\$19,458
5	Total Gross Revenue per CMAEPD	\$3,266	\$3,220	\$3,376
6	Total Gross Revenue per CMAED	\$15,158	\$15,561	\$15,952
7	Inpatient Gross Revenue per EPD	\$1,719	\$1,709	\$1,729
8	Inpatient Gross Revenue per ED	\$7,977	\$8,258	\$8,170

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>
<b>F. Net Revenue Per Statistic</b>				
1	Net Patient Revenue per Patient Day	\$4,272	\$4,304	\$4,587
2	Net Patient Revenue per Discharge	\$19,824	\$20,799	\$21,674
3	Net Patient Revenue per EPD	\$1,898	\$1,883	\$1,926
4	Net Patient Revenue per ED	\$8,807	\$9,100	\$9,100
5	Net Patient Revenue per CMAEPD	\$1,602	\$1,553	\$1,579
6	Net Patient Revenue per CMAED	\$7,436	\$7,504	\$7,461
<b>G. Operating Expense Per Statistic</b>				
1	Total Operating Expense per Patient Day	\$4,176	\$4,216	\$4,510
2	Total Operating Expense per Discharge	\$19,377	\$20,377	\$21,310
3	Total Operating Expense per EPD	\$1,855	\$1,845	\$1,893
4	Total Operating Expense per ED	\$8,609	\$8,915	\$8,947
5	Total Operating Expense per CMAEPD	\$1,566	\$1,521	\$1,552
6	Total Operating Expense per CMAED	\$7,268	\$7,351	\$7,335
<b>H. Nursing Salary and Fringe Benefits Expense</b>				
1	Nursing Salary Expense	\$45,991,977	\$48,372,889	\$43,204,569
2	Nursing Fringe Benefits Expense	\$13,654,674	\$14,297,260	\$12,428,142
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$59,646,651</b>	<b>\$62,670,149</b>	<b>\$55,632,711</b>
<b>I. Physician Salary and Fringe Expense</b>				
1	Physician Salary Expense	\$2,994,322	\$2,740,700	\$799,526
2	Physician Fringe Benefits Expense	\$888,992	\$810,051	\$229,988
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$3,883,314</b>	<b>\$3,550,751</b>	<b>\$1,029,514</b>
<b>J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</b>				
1	Non-Nursing, Non-Physician Salary Expense	\$85,567,860	\$90,052,061	\$101,709,933
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$25,404,457	\$26,616,102	\$29,257,357
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$110,972,317</b>	<b>\$116,668,163</b>	<b>\$130,967,290</b>
<b>K. Total Salary and Fringe Benefits Expense</b>				
1	Total Salary Expense	\$134,554,159	\$141,165,650	\$145,714,028
2	Total Fringe Benefits Expense	\$39,948,123	\$41,723,413	\$41,915,487
3	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$174,502,282</b>	<b>\$182,889,063</b>	<b>\$187,629,515</b>

<b>LAWRENCE AND MEMORIAL HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2012</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>
<b>L.</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>			
1	Total Nursing FTEs	496.9	519.2	460.5
2	Total Physician FTEs	8.1	9.4	2.3
3	Total Non-Nursing, Non-Physician FTEs	1387.8	1410.5	1492.0
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>1,892.8</b>	<b>1,939.1</b>	<b>1,954.8</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$92,558	\$93,168	\$93,821
2	Nursing Fringe Benefits Expense per FTE	\$27,480	\$27,537	\$26,988
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$120,038</b>	<b>\$120,705</b>	<b>\$120,809</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$369,669	\$291,564	\$347,620
2	Physician Fringe Benefits Expense per FTE	\$109,752	\$86,176	\$99,995
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$479,421</b>	<b>\$377,739</b>	<b>\$447,615</b>
<b>O.</b>	<b>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$61,657	\$63,844	\$68,170
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$18,306	\$18,870	\$19,609
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$79,963</b>	<b>\$82,714</b>	<b>\$87,780</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$71,087	\$72,800	\$74,542
2	Total Fringe Benefits Expense per FTE	\$21,105	\$21,517	\$21,442
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$92,193</b>	<b>\$94,316</b>	<b>\$95,984</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,432	\$2,469	\$2,659
2	Total Salary and Fringe Benefits Expense per Discharge	\$11,284	\$11,932	\$12,566
3	Total Salary and Fringe Benefits Expense per EPD	\$1,080	\$1,080	\$1,117
4	Total Salary and Fringe Benefits Expense per ED	\$5,013	\$5,221	\$5,276
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$912	\$891	\$915
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,232	\$4,305	\$4,325