

MIDSTATE MEDICAL CENTER					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$19,361,929	\$46,117,517	\$26,755,588	138%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$23,676,854	\$25,147,640	\$1,470,786	6%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$6,319,474	\$6,319,474	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,896,399	\$2,649,756	\$753,357	40%
8	Prepaid Expenses	\$2,561,470	\$2,739,748	\$178,278	7%
9	Other Current Assets	\$1,416,029	\$8,170,030	\$6,754,001	477%
	<b>Total Current Assets</b>	<b>\$48,912,681</b>	<b>\$91,144,165</b>	<b>\$42,231,484</b>	<b>86%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$11,682,166	\$13,223,292	\$1,541,126	13%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$6,312,325	\$6,312,325	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$119,216	\$65,932	(\$53,284)	-45%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$18,113,707</b>	<b>\$19,601,549</b>	<b>\$1,487,842</b>	<b>8%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$12,501,552	\$14,919,838	\$2,418,286	19%
7	Other Noncurrent Assets	\$29,971,427	\$38,650,167	\$8,678,740	29%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$242,571,664	\$249,735,660	\$7,163,996	3%
2	Less: Accumulated Depreciation	\$111,313,262	\$124,211,246	\$12,897,984	12%
	<b>Property, Plant and Equipment, Net</b>	<b>\$131,258,402</b>	<b>\$125,524,414</b>	<b>(\$5,733,988)</b>	<b>-4%</b>
3	Construction in Progress	\$338,221	\$1,581,507	\$1,243,286	368%
	<b>Total Net Fixed Assets</b>	<b>\$131,596,623</b>	<b>\$127,105,921</b>	<b>(\$4,490,702)</b>	<b>-3%</b>
	<b>Total Assets</b>	<b>\$241,095,990</b>	<b>\$291,421,640</b>	<b>\$50,325,650</b>	<b>21%</b>

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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>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$3,860,594	\$11,318,779	\$7,458,185	193%
2	Salaries, Wages and Payroll Taxes	\$9,082,834	\$10,060,359	\$977,525	11%
3	Due To Third Party Payers	\$1,800,530	\$3,562,417	\$1,761,887	98%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$10,646,951	\$4,665,737	(\$5,981,214)	-56%
	<b>Total Current Liabilities</b>	<b>\$25,390,909</b>	<b>\$29,607,292</b>	<b>\$4,216,383</b>	<b>17%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$88,754,643	\$88,731,315	(\$23,328)	0%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	<b>Total Long Term Debt</b>	<b>\$88,754,643</b>	<b>\$88,731,315</b>	<b>(\$23,328)</b>	<b>0%</b>
3	Accrued Pension Liability	\$57,749,335	\$56,785,518	(\$963,817)	-2%
4	Other Long Term Liabilities	\$1,953,497	\$26,378,887	\$24,425,390	1250%
	<b>Total Long Term Liabilities</b>	<b>\$148,457,475</b>	<b>\$171,895,720</b>	<b>\$23,438,245</b>	<b>16%</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	\$52,820,335	\$73,637,750	\$20,817,415	39%
2	Temporarily Restricted Net Assets	\$1,966,917	\$2,279,087	\$312,170	16%
3	Permanently Restricted Net Assets	\$12,460,354	\$14,001,791	\$1,541,437	12%
	<b>Total Net Assets</b>	<b>\$67,247,606</b>	<b>\$89,918,628</b>	<b>\$22,671,022</b>	<b>34%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$241,095,990</b>	<b>\$291,421,640</b>	<b>\$50,325,650</b>	<b>21%</b>

MIDSTATE MEDICAL CENTER					
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	\$423,415,942	\$479,645,635	\$56,229,693	13%
2	Less: Allowances	\$223,635,468	\$257,058,291	\$33,422,823	15%
3	Less: Charity Care	\$3,025,038	\$4,233,596	\$1,208,558	40%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$196,755,436</b>	<b>\$218,353,748</b>	<b>\$21,598,312</b>	<b>11%</b>
5	Other Operating Revenue	\$14,343,247	\$27,519,593	\$13,176,346	92%
6	Net Assets Released from Restrictions	\$241,164	\$327,257	\$86,093	36%
	<b>Total Operating Revenue</b>	<b>\$211,339,847</b>	<b>\$246,200,598</b>	<b>\$34,860,751</b>	<b>16%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$73,213,622	\$75,938,860	\$2,725,238	4%
2	Fringe Benefits	\$26,412,104	\$28,088,853	\$1,676,749	6%
3	Physicians Fees	\$1,503,048	\$3,200,313	\$1,697,265	113%
4	Supplies and Drugs	\$22,136,153	\$29,954,294	\$7,818,141	35%
5	Depreciation and Amortization	\$12,845,628	\$12,961,930	\$116,302	1%
6	Bad Debts	\$7,875,420	\$6,461,499	(\$1,413,921)	-18%
7	Interest	\$2,222,925	\$3,996,300	\$1,773,375	80%
8	Malpractice	\$5,172,300	\$4,164,372	(\$1,007,928)	-19%
9	Other Operating Expenses	\$52,294,087	\$56,539,874	\$4,245,787	8%
	<b>Total Operating Expenses</b>	<b>\$203,675,287</b>	<b>\$221,306,295</b>	<b>\$17,631,008</b>	<b>9%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$7,664,560</b>	<b>\$24,894,303</b>	<b>\$17,229,743</b>	<b>225%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$130,175	\$92,682	(\$37,493)	-29%
2	Gifts, Contributions and Donations	\$247,500	\$0	(\$247,500)	-100%
3	Other Non-Operating Gains/(Losses)	\$795,107	\$1,355,485	\$560,378	70%
	<b>Total Non-Operating Revenue</b>	<b>\$1,172,782</b>	<b>\$1,448,167</b>	<b>\$275,385</b>	<b>23%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$8,837,342</b>	<b>\$26,342,470</b>	<b>\$17,505,128</b>	<b>198%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	(\$610,653)	\$1,362,036	\$1,972,689	-323%
	All Other Adjustments	(\$106,639)	(\$1,587,712)	(\$1,481,073)	1389%
	<b>Total Other Adjustments</b>	<b>(\$717,292)</b>	<b>(\$225,676)</b>	<b>\$491,616</b>	<b>-69%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$8,120,050</b>	<b>\$26,116,794</b>	<b>\$17,996,744</b>	<b>222%</b>
	Principal Payments	\$82,915,000	\$23,328	(\$82,891,672)	-100%

**MIDSTATE MEDICAL CENTER  
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	\$95,456,131	\$98,162,113	\$2,705,982	3%
2	MEDICARE MANAGED CARE	\$22,714,680	\$24,475,499	\$1,760,819	8%
3	MEDICAID	\$19,391,649	\$30,728,477	\$11,336,828	58%
4	MEDICAID MANAGED CARE	\$10,618,522	\$2,412,193	(\$8,206,329)	-77%
5	CHAMPUS/TRICARE	\$220,664	\$353,256	\$132,592	60%
6	COMMERCIAL INSURANCE	\$2,404,103	\$2,328,421	(\$75,682)	-3%
7	NON-GOVERNMENT MANAGED CARE	\$48,215,834	\$48,707,622	\$491,788	1%
8	WORKER'S COMPENSATION	\$1,054,325	\$1,314,220	\$259,895	25%
9	SELF- PAY/UNINSURED	\$3,391,142	\$3,563,947	\$172,805	5%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$741,619	\$0	(\$741,619)	-100%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$204,208,669</b>	<b>\$212,045,748</b>	<b>\$7,837,079</b>	<b>4%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$55,940,191	\$68,415,388	\$12,475,197	22%
2	MEDICARE MANAGED CARE	\$16,629,348	\$20,200,256	\$3,570,908	21%
3	MEDICAID	\$20,822,023	\$52,241,500	\$31,419,477	151%
4	MEDICAID MANAGED CARE	\$20,758,054	\$5,300,896	(\$15,457,158)	-74%
5	CHAMPUS/TRICARE	\$543,893	\$685,597	\$141,704	26%
6	COMMERCIAL INSURANCE	\$3,806,959	\$4,546,403	\$739,444	19%
7	NON-GOVERNMENT MANAGED CARE	\$89,558,740	\$104,982,504	\$15,423,764	17%
8	WORKER'S COMPENSATION	\$2,875,382	\$3,561,352	\$685,970	24%
9	SELF- PAY/UNINSURED	\$7,307,136	\$7,665,991	\$358,855	5%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$965,547	\$0	(\$965,547)	-100%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$219,207,273</b>	<b>\$267,599,887</b>	<b>\$48,392,614</b>	<b>22%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$151,396,322	\$166,577,501	\$15,181,179	10%
2	MEDICARE MANAGED CARE	\$39,344,028	\$44,675,755	\$5,331,727	14%
3	MEDICAID	\$40,213,672	\$82,969,977	\$42,756,305	106%
4	MEDICAID MANAGED CARE	\$31,376,576	\$7,713,089	(\$23,663,487)	-75%
5	CHAMPUS/TRICARE	\$764,557	\$1,038,853	\$274,296	36%
6	COMMERCIAL INSURANCE	\$6,211,062	\$6,874,824	\$663,762	11%
7	NON-GOVERNMENT MANAGED CARE	\$137,774,574	\$153,690,126	\$15,915,552	12%
8	WORKER'S COMPENSATION	\$3,929,707	\$4,875,572	\$945,865	24%
9	SELF- PAY/UNINSURED	\$10,698,278	\$11,229,938	\$531,660	5%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,707,166	\$0	(\$1,707,166)	-100%
	<b>TOTAL GROSS REVENUE</b>	<b>\$423,415,942</b>	<b>\$479,645,635</b>	<b>\$56,229,693</b>	<b>13%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$40,060,687	\$42,146,127	\$2,085,440	5%
2	MEDICARE MANAGED CARE	\$8,517,337	\$9,660,667	\$1,143,330	13%
3	MEDICAID	\$6,069,950	\$10,399,937	\$4,329,987	71%
4	MEDICAID MANAGED CARE	\$3,735,434	\$630,381	(\$3,105,053)	-83%
5	CHAMPUS/TRICARE	\$82,451	\$105,326	\$22,875	28%
6	COMMERCIAL INSURANCE	\$1,843,918	\$1,503,132	(\$340,786)	-18%
7	NON-GOVERNMENT MANAGED CARE	\$32,290,415	\$32,938,873	\$648,458	2%
8	WORKER'S COMPENSATION	\$888,034	\$1,119,205	\$231,171	26%
9	SELF- PAY/UNINSURED	\$303,258	\$276,890	(\$26,368)	-9%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$272,976	\$0	(\$272,976)	-100%

**MIDSTATE MEDICAL CENTER  
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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
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$94,064,460</b>	<b>\$98,780,538</b>	<b>\$4,716,078</b>	<b>5%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$16,632,192	\$19,898,084	\$3,265,892	20%
2	MEDICARE MANAGED CARE	\$4,825,098	\$5,520,277	\$695,179	14%
3	MEDICAID	\$4,460,061	\$13,152,934	\$8,692,873	195%
4	MEDICAID MANAGED CARE	\$6,488,567	\$1,367,631	(\$5,120,936)	-79%
5	CHAMPUS/TRICARE	\$203,226	\$204,418	\$1,192	1%
6	COMMERCIAL INSURANCE	\$3,295,023	\$3,589,838	\$294,815	9%
7	NON-GOVERNMENT MANAGED CARE	\$60,157,455	\$70,795,912	\$10,638,457	18%
8	WORKER'S COMPENSATION	\$2,406,457	\$3,012,175	\$605,718	25%
9	SELF- PAY/UNINSURED	\$519,914	\$908,179	\$388,265	75%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$246,214	\$0	(\$246,214)	-100%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$99,234,207</b>	<b>\$118,449,448</b>	<b>\$19,215,241</b>	<b>19%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$56,692,879	\$62,044,211	\$5,351,332	9%
2	MEDICARE MANAGED CARE	\$13,342,435	\$15,180,944	\$1,838,509	14%
3	MEDICAID	\$10,530,011	\$23,552,871	\$13,022,860	124%
4	MEDICAID MANAGED CARE	\$10,224,001	\$1,998,012	(\$8,225,989)	-80%
5	CHAMPUS/TRICARE	\$285,677	\$309,744	\$24,067	8%
6	COMMERCIAL INSURANCE	\$5,138,941	\$5,092,970	(\$45,971)	-1%
7	NON-GOVERNMENT MANAGED CARE	\$92,447,870	\$103,734,785	\$11,286,915	12%
8	WORKER'S COMPENSATION	\$3,294,491	\$4,131,380	\$836,889	25%
9	SELF- PAY/UNINSURED	\$823,172	\$1,185,069	\$361,897	44%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$519,190	\$0	(\$519,190)	-100%
	<b>TOTAL NET REVENUE</b>	<b>\$193,298,667</b>	<b>\$217,229,986</b>	<b>\$23,931,319</b>	<b>12%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	3,930	4,067	137	3%
2	MEDICARE MANAGED CARE	896	987	91	10%
3	MEDICAID	965	1,946	981	102%
4	MEDICAID MANAGED CARE	1,141	205	(936)	-82%
5	CHAMPUS/TRICARE	19	27	8	42%
6	COMMERCIAL INSURANCE	127	119	(8)	-6%
7	NON-GOVERNMENT MANAGED CARE	2,890	2,691	(199)	-7%
8	WORKER'S COMPENSATION	26	34	8	31%
9	SELF- PAY/UNINSURED	209	254	45	22%
10	SAGA	0	0	0	0%
11	OTHER	32	0	(32)	-100%
	<b>TOTAL DISCHARGES</b>	<b>10,235</b>	<b>10,330</b>	<b>95</b>	<b>1%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	20,405	19,323	(1,082)	-5%
2	MEDICARE MANAGED CARE	4,795	4,568	(227)	-5%
3	MEDICAID	4,689	7,636	2,947	63%
4	MEDICAID MANAGED CARE	3,133	536	(2,597)	-83%
5	CHAMPUS/TRICARE	58	84	26	45%
6	COMMERCIAL INSURANCE	485	409	(76)	-16%
7	NON-GOVERNMENT MANAGED CARE	9,845	8,939	(906)	-9%
8	WORKER'S COMPENSATION	82	110	28	34%
9	SELF- PAY/UNINSURED	870	925	55	6%
10	SAGA	0	0	0	0%
11	OTHER	242	0	(242)	-100%
	<b>TOTAL PATIENT DAYS</b>	<b>44,604</b>	<b>42,530</b>	<b>(2,074)</b>	<b>-5%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				

**MIDSTATE MEDICAL CENTER  
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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	29,164	33,398	4,234	15%
2	MEDICARE MANAGED CARE	8,212	9,772	1,560	19%
3	MEDICAID	16,495	39,551	23,056	140%
4	MEDICAID MANAGED CARE	27,167	6,289	(20,878)	-77%
5	CHAMPUS/TRICARE	475	510	35	7%
6	COMMERCIAL INSURANCE	3,657	2,548	(1,109)	-30%
7	NON-GOVERNMENT MANAGED CARE	63,755	66,636	2,881	5%
8	WORKER'S COMPENSATION	2,346	2,340	(6)	0%
9	SELF- PAY/UNINSURED	8,654	8,339	(315)	-4%
10	SAGA	0	0	0	0%
11	OTHER	347	0	(347)	-100%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>160,272</b>	<b>169,383</b>	<b>9,111</b>	<b>6%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$15,650,000	\$16,500,000	\$850,000	5%
2	MEDICARE MANAGED CARE	\$3,385,000	\$4,385,000	\$1,000,000	30%
3	MEDICAID	\$11,800,000	\$30,800,000	\$19,000,000	161%
4	MEDICAID MANAGED CARE	\$13,600,000	\$3,300,000	(\$10,300,000)	-76%
5	CHAMPUS/TRICARE	\$255,000	\$260,000	\$5,000	2%
6	COMMERCIAL INSURANCE	\$1,950,000	\$1,365,000	(\$585,000)	-30%
7	NON-GOVERNMENT MANAGED CARE	\$24,150,000	\$27,600,000	\$3,450,000	14%
8	WORKER'S COMPENSATION	\$790,000	\$845,000	\$55,000	7%
9	SELF- PAY/UNINSURED	\$6,100,000	\$6,650,000	\$550,000	9%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$300,000	\$0	(\$300,000)	-100%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$77,980,000</b>	<b>\$91,705,000</b>	<b>\$13,725,000</b>	<b>18%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$3,200,000	\$3,400,000	\$200,000	6%
2	MEDICARE MANAGED CARE	\$850,000	\$950,000	\$100,000	12%
3	MEDICAID	\$2,500,000	\$5,900,000	\$3,400,000	136%
4	MEDICAID MANAGED CARE	\$3,500,000	\$800,000	(\$2,700,000)	-77%
5	CHAMPUS/TRICARE	\$80,000	\$60,000	(\$20,000)	-25%
6	COMMERCIAL INSURANCE	\$1,100,000	\$700,000	(\$400,000)	-36%
7	NON-GOVERNMENT MANAGED CARE	\$14,400,000	\$16,400,000	\$2,000,000	14%
8	WORKER'S COMPENSATION	\$650,000	\$700,000	\$50,000	8%
9	SELF- PAY/UNINSURED	\$300,000	\$300,000	\$0	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$40,000	\$0	(\$40,000)	-100%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$26,620,000</b>	<b>\$29,210,000</b>	<b>\$2,590,000</b>	<b>10%</b>
<b>C.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	9,276	10,287	1,011	11%
2	MEDICARE MANAGED CARE	1,856	2,383	527	28%
3	MEDICAID	10,600	28,640	18,040	170%
4	MEDICAID MANAGED CARE	19,653	4,857	(14,796)	-75%
5	CHAMPUS/TRICARE	307	324	17	6%
6	COMMERCIAL INSURANCE	2,168	1,240	(928)	-43%
7	NON-GOVERNMENT MANAGED CARE	26,032	28,923	2,891	11%
8	WORKER'S COMPENSATION	1,059	1,134	75	7%
9	SELF- PAY/UNINSURED	7,108	7,119	11	0%
10	SAGA	0	0	0	0%
11	OTHER	277	0	(277)	-100%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>78,336</b>	<b>84,907</b>	<b>6,571</b>	<b>8%</b>

**MIDSTATE MEDICAL CENTER**  
**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	\$27,000,880	\$28,460,163	\$1,459,283	5%
2	Physician Salaries	\$8,870,537	\$7,503,379	(\$1,367,158)	-15%
3	Non-Nursing, Non-Physician Salaries	\$37,342,205	\$39,975,318	\$2,633,113	7%
	<b>Total Salaries &amp; Wages</b>	<b>\$73,213,622</b>	<b>\$75,938,860</b>	<b>\$2,725,238</b>	<b>4%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$9,772,478	\$10,526,845	\$754,367	8%
2	Physician Fringe Benefits	\$3,169,452	\$2,025,011	(\$1,144,441)	-36%
3	Non-Nursing, Non-Physician Fringe Benefits	\$13,470,174	\$15,536,997	\$2,066,823	15%
	<b>Total Fringe Benefits</b>	<b>\$26,412,104</b>	<b>\$28,088,853</b>	<b>\$1,676,749</b>	<b>6%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$374,172	\$383,349	\$9,177	2%
2	Physician Fees	\$1,503,048	\$3,200,313	\$1,697,265	113%
3	Non-Nursing, Non-Physician Fees	\$18,181,627	\$20,533,330	\$2,351,703	13%
	<b>Total Contractual Labor Fees</b>	<b>\$20,058,847</b>	<b>\$24,116,992</b>	<b>\$4,058,145</b>	<b>20%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$15,736,625	\$16,752,117	\$1,015,492	6%
2	Pharmaceutical Costs	\$6,399,528	\$13,202,177	\$6,802,649	106%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$22,136,153</b>	<b>\$29,954,294</b>	<b>\$7,818,141</b>	<b>35%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$5,668,645	\$5,867,844	\$199,199	4%
2	Depreciation-Equipment	\$7,096,397	\$7,016,343	(\$80,054)	-1%
3	Amortization	\$80,586	\$77,743	(\$2,843)	-4%
	<b>Total Depreciation and Amortization</b>	<b>\$12,845,628</b>	<b>\$12,961,930</b>	<b>\$116,302</b>	<b>1%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$7,875,420	\$6,461,499	(\$1,413,921)	-18%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$2,222,925	\$3,996,300	\$1,773,375	80%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$5,172,300	\$4,164,372	(\$1,007,928)	-19%
<b>I. Utilities:</b>					
1	Water	\$275,000	\$315,000	\$40,000	15%
2	Natural Gas	\$909,088	\$772,701	(\$136,387)	-15%
3	Oil	\$26,005	\$28,306	\$2,301	9%
4	Electricity	\$1,820,146	\$1,752,386	(\$67,760)	-4%
5	Telephone	\$325,439	\$380,782	\$55,343	17%
6	Other Utilities	\$16,509	\$16,840	\$331	2%
	<b>Total Utilities</b>	<b>\$3,372,187</b>	<b>\$3,266,015</b>	<b>(\$106,172)</b>	<b>-3%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$133,155	\$193,289	\$60,134	45%
2	Legal Fees	\$258,741	\$277,401	\$18,660	7%
3	Consulting Fees	\$1,297,000	\$2,549,360	\$1,252,360	97%
4	Dues and Membership	\$2,129,239	\$2,406,673	\$277,434	13%
5	Equipment Leases	\$855,683	\$874,487	\$18,804	2%
6	Building Leases	\$3,114,529	\$2,857,322	(\$257,207)	-8%
7	Repairs and Maintenance	\$3,592,108	\$3,738,811	\$146,703	4%
8	Insurance	\$316,731	\$315,398	(\$1,333)	0%

**MIDSTATE MEDICAL CENTER  
TWELVE MONTHS ACTUAL FILING  
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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$86,377	\$82,668	(\$3,709)	-4%
10	Conferences	\$140,987	\$163,201	\$22,214	16%
11	Property Tax	\$87,376	\$126,122	\$38,746	44%
12	General Supplies	\$1,254,525	\$1,241,148	(\$13,377)	-1%
13	Licenses and Subscriptions	\$182,898	\$147,972	(\$34,926)	-19%
14	Postage and Shipping	\$194,014	\$124,565	(\$69,449)	-36%
15	Advertising	\$745,692	\$813,002	\$67,310	9%
16	Corporate parent/system fees	\$0	\$1,895,892	\$1,895,892	0%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$0	\$1,101,157	\$1,101,157	0%
20	Lab Fees / Red Cross charges	\$0	\$919,352	\$919,352	0%
21	Billing & Collection / Bank Fees	\$0	\$767,609	\$767,609	0%
22	Recruiting / Employee Education & Recognition	\$0	\$762,984	\$762,984	0%
23	Laundry / Linen	\$0	\$652,045	\$652,045	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$144,384	\$144,384	0%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$10,422,748	\$10,202,338	(\$220,410)	-2%
	<b>Total Business Expenses</b>	<b>\$24,811,803</b>	<b>\$32,357,180</b>	<b>\$7,545,377</b>	<b>30%</b>
<b>K.</b>	<b>Other Operating Expense:</b>				
1	Miscellaneous Other Operating Expenses	\$5,554,298	\$0	(\$5,554,298)	-100%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$203,675,287</b>	<b>\$221,306,295</b>	<b>\$17,631,008</b>	<b>9%</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	\$55,688,066	\$56,124,474	\$436,408	1%
2	General Accounting	\$1,987,142	\$2,059,849	\$72,707	4%
3	Patient Billing & Collection	\$1,868,587	\$3,824,509	\$1,955,922	105%
4	Admitting / Registration Office	\$1,655,366	\$1,661,010	\$5,644	0%
5	Data Processing	\$5,557,356	\$5,303,858	(\$253,498)	-5%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$968,572	\$1,027,630	\$59,058	6%
8	Public Relations	\$1,757,584	\$1,853,009	\$95,425	5%
9	Purchasing	\$991,221	\$951,877	(\$39,344)	-4%
10	Dietary and Cafeteria	\$3,352,613	\$3,396,188	\$43,575	1%
11	Housekeeping	\$3,037,385	\$3,153,217	\$115,832	4%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$6,418,563	\$6,163,187	(\$255,376)	-4%
14	Security	\$0	\$0	\$0	0%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$0	\$0	\$0	0%
17	Pharmacy Department	\$8,027,540	\$15,027,295	\$6,999,755	87%
18	Other General Services	\$14,143,176	\$16,958,230	\$2,815,054	20%
	<b>Total General Services</b>	<b>\$105,453,171</b>	<b>\$117,504,333</b>	<b>\$12,051,162</b>	<b>11%</b>
<b>B.</b>	<b>Professional Services:</b>				
1	Medical Care Administration	\$1,163,957	\$1,112,264	(\$51,693)	-4%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,856,243	\$1,755,182	(\$101,061)	-5%
4	Medical Records	\$2,098,970	\$2,448,511	\$349,541	17%

**MIDSTATE MEDICAL CENTER**  
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**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
5	Social Service	\$1,504,752	\$1,649,599	\$144,847	10%
6	Other Professional Services	\$4,213,231	\$4,674,081	\$460,850	11%
	<b>Total Professional Services</b>	<b>\$10,837,153</b>	<b>\$11,639,637</b>	<b>\$802,484</b>	<b>7%</b>
	<b>C. <u>Special Services:</u></b>				
1	Operating Room	\$16,660,791	\$18,016,268	\$1,355,477	8%
2	Recovery Room	\$2,508,569	\$2,556,264	\$47,695	2%
3	Anesthesiology	\$299,839	\$396,534	\$96,695	32%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$6,126,960	\$6,803,348	\$676,388	11%
6	Diagnostic Ultrasound	\$956,071	\$1,034,908	\$78,837	8%
7	Radiation Therapy	\$2,255,391	\$3,692,533	\$1,437,142	64%
8	Radioisotopes	\$920,843	\$755,676	(\$165,167)	-18%
9	CT Scan	\$1,108,273	\$1,100,163	(\$8,110)	-1%
10	Laboratory	\$7,568,477	\$7,487,753	(\$80,724)	-1%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$1,024,793	\$1,094,252	\$69,459	7%
14	Electroencephalography	\$0	\$0	\$0	0%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,306,801	\$1,322,920	\$16,119	1%
19	Pulmonary Function	\$86,797	\$109,148	\$22,351	26%
20	Intravenous Therapy	\$306,466	\$332,509	\$26,043	8%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$12,045,761	\$12,691,211	\$645,450	5%
25	MRI	\$1,419,179	\$1,515,570	\$96,391	7%
26	PET Scan	\$48,580	\$74,222	\$25,642	53%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$2,719,567	\$2,896,891	\$177,324	7%
29	Sleep Center	\$818,971	\$905,188	\$86,217	11%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$163,275	\$177,999	\$14,724	9%
32	Occupational Therapy / Physical Therapy	\$803,247	\$873,582	\$70,335	9%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$1,752,817	\$2,230,331	\$477,514	27%
	<b>Total Special Services</b>	<b>\$60,901,468</b>	<b>\$66,067,270</b>	<b>\$5,165,802</b>	<b>8%</b>
	<b>D. <u>Routine Services:</u></b>				
1	Medical & Surgical Units	\$18,788,316	\$19,212,084	\$423,768	2%
2	Intensive Care Unit	\$0	\$0	\$0	0%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,242,696	\$2,076,441	(\$166,255)	-7%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,527,106	\$4,806,530	\$279,424	6%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%

<b>MIDSTATE MEDICAL CENTER</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	\$182,022,152	\$ 196,755,436	\$218,353,748
2	Other Operating Revenue	18,695,433	14,584,411	27,846,850
3	Total Operating Revenue	\$200,717,585	\$211,339,847	\$246,200,598
4	Total Operating Expenses	190,181,772	203,675,287	221,306,295
5	Income/(Loss) From Operations	\$10,535,813	\$7,664,560	\$24,894,303
6	Total Non-Operating Revenue	534,112	455,490	1,222,491
7	Excess/(Deficiency) of Revenue Over Expenses	\$11,069,925	\$8,120,050	\$26,116,794
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	5.24%	3.62%	10.06%
2	Hospital Non Operating Margin	0.27%	0.22%	0.49%
3	Hospital Total Margin	5.50%	3.83%	10.56%
4	Income/(Loss) From Operations	\$10,535,813	\$7,664,560	\$24,894,303
5	Total Operating Revenue	\$200,717,585	\$211,339,847	\$246,200,598
6	Total Non-Operating Revenue	\$534,112	\$455,490	\$1,222,491
7	Total Revenue	\$201,251,697	\$211,795,337	\$247,423,089
8	Excess/(Deficiency) of Revenue Over Expenses	\$11,069,925	\$8,120,050	\$26,116,794
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$58,808,950	\$52,820,335	\$73,637,750
2	Hospital Total Net Assets	\$73,744,007	\$67,247,606	\$89,918,628
3	Hospital Change in Total Net Assets	\$10,811,891	(\$6,496,401)	\$22,671,022
4	Hospital Change in Total Net Assets %	117.2%	-8.8%	33.7%
<b>D. <u>Cost Data Summary</u></b>				
1	<b>Ratio of Cost to Charges</b>	<b>0.48</b>	<b>0.47</b>	<b>0.44</b>
2	Total Operating Expenses	\$190,181,772	\$203,675,287	\$221,306,295
3	Total Gross Revenue	\$374,870,862	\$423,415,942	\$479,645,635
4	Total Other Operating Revenue	\$18,695,433	\$14,584,411	\$27,519,593
5	<b>Private Payment to Cost Ratio</b>	<b>1.40</b>	<b>1.47</b>	<b>1.56</b>
6	Total Non-Government Payments	\$94,458,495	\$101,704,474	\$114,144,204

<b>MIDSTATE MEDICAL CENTER</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)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
7	Total Uninsured Payments	\$643,398	\$823,172	\$1,185,069
8	Total Non-Government Charges	\$150,493,817	\$158,613,621	\$176,670,460
9	Total Uninsured Charges	\$11,675,728	\$10,698,278	\$11,229,938
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.78</b>	<b>0.79</b>	<b>0.84</b>
11	Total Medicare Payments	\$63,158,315	\$70,035,314	\$77,225,155
12	Total Medicare Charges	\$166,558,985	\$190,740,350	\$211,253,256
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.68</b>	<b>0.62</b>	<b>0.65</b>
14	Total Medicaid Payments	\$16,421,372	\$20,754,012	\$25,550,883
15	Total Medicaid Charges	\$49,786,738	\$71,590,248	\$90,683,066
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$6,815,201</b>	<b>\$5,068,840</b>	<b>\$4,666,905</b>
17	Charity Care	\$3,637,983	\$3,025,038	\$4,233,596
18	Bad Debts	\$10,465,542	\$7,875,420	\$6,461,499
19	Total Uncompensated Care	\$14,103,525	\$10,900,458	\$10,695,095
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>3.6%</b>	<b>2.5%</b>	<b>2.1%</b>
21	Total Operating Expenses	\$190,181,772	\$203,675,287	\$221,306,295
<b>E.</b>	<b><u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1.93</b>	<b>1.93</b>	<b>3.08</b>
2	Total Current Assets	\$56,637,135	\$48,912,681	\$91,144,165
3	Total Current Liabilities	\$29,324,432	\$25,390,909	\$29,607,292
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>57</b>	<b>37</b>	<b>81</b>
5	Cash and Cash Equivalents	\$28,181,027	\$19,361,929	\$46,117,517
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$28,181,027	\$19,361,929	\$46,117,517
8	Total Operating Expenses	\$190,181,772	\$203,675,287	\$221,306,295
9	Depreciation Expense	\$10,982,105	\$12,845,628	\$12,961,930
10	Operating Expenses less Depreciation Expense	\$179,199,667	\$190,829,659	\$208,344,365
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>44.82</b>	<b>40.58</b>	<b>36.08</b>

<b>MIDSTATE MEDICAL CENTER</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	\$ 23,291,912	\$ 23,676,854	\$ 25,147,640
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$942,231	\$1,800,530	\$3,562,417
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 22,349,681	\$ 21,876,324	\$ 21,585,223
16	Total Net Patient Revenue	\$182,022,152	\$ 196,755,436	\$ 218,353,748
17	<b><u>Average Payment Period</u></b>	<b>59.73</b>	<b>48.57</b>	<b>51.87</b>
18	Total Current Liabilities	\$29,324,432	\$25,390,909	\$29,607,292
19	Total Operating Expenses	\$190,181,772	\$203,675,287	\$221,306,295
20	Depreciation Expense	\$10,982,105	\$12,845,628	\$12,961,930
21	Total Operating Expenses less Depreciation Expense	\$179,199,667	\$190,829,659	\$208,344,365
<b>F. <u>Solvency Measures Summary</u></b>				
1	<b><u>Equity Financing Ratio</u></b>	<b>31.0</b>	<b>27.9</b>	<b>30.9</b>
2	Total Net Assets	\$73,744,007	\$67,247,606	\$89,918,628
3	Total Assets	\$237,737,709	\$241,095,990	\$291,421,640
4	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>20.1</b>	<b>18.4</b>	<b>33.0</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$11,069,925	\$8,120,050	\$26,116,794
6	Depreciation Expense	\$10,982,105	\$12,845,628	\$12,961,930
7	Excess of Revenues Over Expenses and Depreciation Expense	\$22,052,030	\$20,965,678	\$39,078,724
8	Total Current Liabilities	\$29,324,432	\$25,390,909	\$29,607,292
9	Total Long Term Debt	\$80,580,000	\$88,754,643	\$88,731,315
10	Total Current Liabilities and Total Long Term Debt	\$109,904,432	\$114,145,552	\$118,338,607
11	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>52.2</b>	<b>56.9</b>	<b>49.7</b>
12	Total Long Term Debt	\$80,580,000	\$88,754,643	\$88,731,315
13	Total Net Assets	\$73,744,007	\$67,247,606	\$89,918,628
14	Total Long Term Debt and Total Net Assets	\$154,324,007	\$156,002,249	\$178,649,943
15	<b><u>Debt Service Coverage Ratio</u></b>	<b>5.3</b>	<b>0.3</b>	<b>10.7</b>
16	Excess Revenues over Expenses	\$11,069,925	\$8,120,050	\$26,116,794
17	Interest Expense	\$2,221,191	\$2,222,925	\$3,996,300
18	Depreciation and Amortization Expense	\$10,982,105	\$12,845,628	\$12,961,930

<b>MIDSTATE MEDICAL CENTER</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>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>
19	Principal Payments	\$2,390,000	\$82,915,000	\$23,328
<b>G. Other Financial Ratios</b>				
20	<b>Average Age of Plant</b>	<b>9.0</b>	<b>8.7</b>	<b>9.6</b>
21	Accumulated Depreciation	\$98,568,512	\$111,313,262	\$124,211,246
22	Depreciation and Amortization Expense	\$10,982,105	\$12,845,628	\$12,961,930
<b>H. Utilization Measures Summary</b>				
1	Patient Days	42,359	44,604	42,530
2	Discharges	9,818	10,235	10,330
3	ALOS	4.3	4.4	4.1
4	Staffed Beds	142	144	144
5	Available Beds	-	156	156
6	Licensed Beds	156	156	156
6	Occupancy of Staffed Beds	81.7%	84.9%	80.9%
7	Occupancy of Available Beds	74.4%	78.3%	74.7%
8	Full Time Equivalent Employees	985.8	1,018.6	1,054.6
<b>I. Hospital Gross Revenue Payer Mix Percentage</b>				
1	Non-Government Gross Revenue Payer Mix Percentage	37.0%	34.9%	34.5%
2	Medicare Gross Revenue Payer Mix Percentage	44.4%	45.0%	44.0%
3	Medicaid Gross Revenue Payer Mix Percentage	13.3%	16.9%	18.9%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	2.0%	0.4%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	3.1%	2.5%	2.3%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.2%	0.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$138,818,089	\$147,915,343	\$165,440,522
9	Medicare Gross Revenue (Charges)	\$166,558,985	\$190,740,350	\$211,253,256
10	Medicaid Gross Revenue (Charges)	\$49,786,738	\$71,590,248	\$90,683,066
11	Other Medical Assistance Gross Revenue (Charges)	\$7,370,534	\$1,707,166	\$0
12	Uninsured Gross Revenue (Charges)	\$11,675,728	\$10,698,278	\$11,229,938
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$660,788	\$764,557	\$1,038,853
14	Total Gross Revenue (Charges)	\$374,870,862	\$423,415,942	\$479,645,635
<b>J. Hospital Net Revenue Payer Mix Percentage</b>				
1	Non-Government Net Revenue Payer Mix Percentage	53.6%	52.2%	52.0%

<b>MIDSTATE MEDICAL CENTER</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>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>
2	Medicare Net Revenue Payer Mix Percentage	36.1%	36.2%	35.5%
3	Medicaid Net Revenue Payer Mix Percentage	9.4%	10.7%	11.8%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.4%	0.3%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.4%	0.4%	0.5%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$93,815,097	\$100,881,302	\$112,959,135
9	Medicare Net Revenue (Payments)	\$63,158,315	\$70,035,314	\$77,225,155
10	Medicaid Net Revenue (Payments)	\$16,421,372	\$20,754,012	\$25,550,883
11	Other Medical Assistance Net Revenue (Payments)	\$762,923	\$519,190	\$0
12	Uninsured Net Revenue (Payments)	\$643,398	\$823,172	\$1,185,069
13	CHAMPUS / TRICARE Net Revenue Payments)	\$271,081	\$285,677	\$309,744
14	Total Net Revenue (Payments)	\$175,072,186	\$193,298,667	\$217,229,986
<b>K. Discharges</b>				
1	Non-Government (Including Self Pay / Uninsured)	3,270	3,252	3,098
2	Medicare	4,619	4,826	5,054
3	Medical Assistance	1,909	2,138	2,151
4	Medicaid	1,741	2,106	2,151
5	Other Medical Assistance	168	32	-
6	CHAMPUS / TRICARE	20	19	27
7	Uninsured (Included In Non-Government)	234	209	254
8	Total	9,818	10,235	10,330
<b>L. Case Mix Index</b>				
1	Non-Government (Including Self Pay / Uninsured)	1.034840	1.029630	1.092100
2	Medicare	1.424870	1.406880	1.386000
3	Medical Assistance	0.840037	0.904263	0.930730
4	Medicaid	0.811130	0.900810	0.930730
5	Other Medical Assistance	1.139610	1.131530	0.000000
6	CHAMPUS / TRICARE	1.121740	0.911390	0.700380
7	Uninsured (Included In Non-Government)	1.074940	0.978100	0.978250
8	Total Case Mix Index	1.180634	1.181103	1.201266
<b>M. Emergency Department Visits</b>				
1	Emergency Room - Treated and Admitted	6,380	6,629	7,232
2	Emergency Room - Treated and Discharged	68,942	78,336	84,907
3	Total Emergency Room Visits	75,322	84,965	92,139

**MIDSTATE MEDICAL CENTER  
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	\$2,314,400	\$4,050,424	\$1,736,024	75%
2	Inpatient Payments	\$924,071	\$1,499,223	\$575,152	62%
3	Outpatient Charges	\$1,250,302	\$3,124,031	\$1,873,729	150%
4	Outpatient Payments	\$503,247	\$996,254	\$493,007	98%
5	Discharges	108	144	36	33%
6	Patient Days	499	798	299	60%
7	Outpatient Visits (Excludes ED Visits)	503	1,016	513	102%
8	Emergency Department Outpatient Visits	134	299	165	123%
9	Emergency Department Inpatient Admissions	89	124	35	39%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$3,564,702</b>	<b>\$7,174,455</b>	<b>\$3,609,753</b>	<b>101%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,427,318</b>	<b>\$2,495,477</b>	<b>\$1,068,159</b>	<b>75%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$4,105,645	\$5,322,990	\$1,217,345	30%
2	Inpatient Payments	\$1,367,081	\$2,029,217	\$662,136	48%
3	Outpatient Charges	\$3,860,313	\$5,685,531	\$1,825,218	47%
4	Outpatient Payments	\$1,058,112	\$1,628,336	\$570,224	54%
5	Discharges	150	208	58	39%
6	Patient Days	836	891	55	7%
7	Outpatient Visits (Excludes ED Visits)	1,485	2,246	761	51%
8	Emergency Department Outpatient Visits	367	519	152	41%
9	Emergency Department Inpatient Admissions	121	162	41	34%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$7,965,958</b>	<b>\$11,008,521</b>	<b>\$3,042,563</b>	<b>38%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$2,425,193</b>	<b>\$3,657,553</b>	<b>\$1,232,360</b>	<b>51%</b>

**MIDSTATE MEDICAL CENTER  
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	\$3,730,175	\$0	(\$3,730,175)	-100%
2	Inpatient Payments	\$1,401,664	\$0	(\$1,401,664)	-100%
3	Outpatient Charges	\$2,467,792	\$0	(\$2,467,792)	-100%
4	Outpatient Payments	\$694,293	\$0	(\$694,293)	-100%
5	Discharges	138	0	(138)	-100%
6	Patient Days	793	0	(793)	-100%
7	Outpatient Visits (Excludes ED Visits)	851	0	(851)	-100%
8	Emergency Department Outpatient Visits	376	0	(376)	-100%
9	Emergency Department Inpatient Admissions	112	0	(112)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$6,197,967</b>	<b>\$0</b>	<b>(\$6,197,967)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$2,095,957</b>	<b>\$0</b>	<b>(\$2,095,957)</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	\$1,066,250	\$242,889	(\$823,361)	-77%
2	Inpatient Payments	\$402,504	\$119,268	(\$283,236)	-70%
3	Outpatient Charges	\$972,992	\$190,529	(\$782,463)	-80%
4	Outpatient Payments	\$254,632	\$46,680	(\$207,952)	-82%
5	Discharges	48	12	(36)	-75%
6	Patient Days	232	43	(189)	-81%
7	Outpatient Visits (Excludes ED Visits)	486	63	(423)	-87%
8	Emergency Department Outpatient Visits	123	28	(95)	-77%
9	Emergency Department Inpatient Admissions	40	9	(31)	-78%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$2,039,242</b>	<b>\$433,418</b>	<b>(\$1,605,824)</b>	<b>-79%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$657,136</b>	<b>\$165,948</b>	<b>(\$491,188)</b>	<b>-75%</b>

**MIDSTATE MEDICAL CENTER  
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	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$425,146	\$912,818	\$487,672	115%
2	Inpatient Payments	\$179,464	\$307,983	\$128,519	72%
3	Outpatient Charges	\$202,345	\$714,287	\$511,942	253%
4	Outpatient Payments	\$51,617	\$127,929	\$76,312	148%
5	Discharges	11	34	23	209%
6	Patient Days	88	194	106	120%
7	Outpatient Visits (Excludes ED Visits)	72	230	158	219%
8	Emergency Department Outpatient Visits	36	88	52	144%
9	Emergency Department Inpatient Admissions	11	34	23	209%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$627,491</b>	<b>\$1,627,105</b>	<b>\$999,614</b>	<b>159%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$231,081</b>	<b>\$435,912</b>	<b>\$204,831</b>	<b>89%</b>
<b>I. AETNA</b>					
1	Inpatient Charges	\$980,915	\$1,225,483	\$244,568	25%
2	Inpatient Payments	\$400,954	\$448,723	\$47,769	12%
3	Outpatient Charges	\$660,949	\$1,090,004	\$429,055	65%
4	Outpatient Payments	\$199,805	\$318,499	\$118,694	59%
5	Discharges	40	49	9	23%
6	Patient Days	180	230	50	28%
7	Outpatient Visits (Excludes ED Visits)	257	382	125	49%
8	Emergency Department Outpatient Visits	76	117	41	54%
9	Emergency Department Inpatient Admissions	31	47	16	52%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,641,864</b>	<b>\$2,315,487</b>	<b>\$673,623</b>	<b>41%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$600,759</b>	<b>\$767,222</b>	<b>\$166,463</b>	<b>28%</b>

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

**MIDSTATE MEDICAL CENTER  
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	\$10,092,149	\$12,720,895	\$2,628,746	26%
2	Inpatient Payments	\$3,841,599	\$5,256,253	\$1,414,654	37%
3	Outpatient Charges	\$7,214,655	\$9,395,874	\$2,181,219	30%
4	Outpatient Payments	\$2,063,392	\$2,402,579	\$339,187	16%
5	Discharges	401	540	139	35%
6	Patient Days	2,167	2,412	245	11%
7	Outpatient Visits (Excludes ED Visits)	2,702	3,452	750	28%
8	Emergency Department Outpatient Visits	744	1,332	588	79%
9	Emergency Department Inpatient Admissions	329	497	168	51%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$17,306,804</b>	<b>\$22,116,769</b>	<b>\$4,809,965</b>	<b>28%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$5,904,991</b>	<b>\$7,658,832</b>	<b>\$1,753,841</b>	<b>30%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$22,714,680</b>	<b>\$24,475,499</b>	<b>\$1,760,819</b>	<b>8%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$8,517,337</b>	<b>\$9,660,667</b>	<b>\$1,143,330</b>	<b>13%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$16,629,348</b>	<b>\$20,200,256</b>	<b>\$3,570,908</b>	<b>21%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$4,825,098</b>	<b>\$5,520,277</b>	<b>\$695,179</b>	<b>14%</b>
	<b>TOTAL DISCHARGES</b>	<b>896</b>	<b>987</b>	<b>91</b>	<b>10%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>4,795</b>	<b>4,568</b>	<b>(227)</b>	<b>-5%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>6,356</b>	<b>7,389</b>	<b>1,033</b>	<b>16%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>1,856</b>	<b>2,383</b>	<b>527</b>	<b>28%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>733</b>	<b>873</b>	<b>140</b>	<b>19%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$39,344,028</b>	<b>\$44,675,755</b>	<b>\$5,331,727</b>	<b>14%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$13,342,435</b>	<b>\$15,180,944</b>	<b>\$1,838,509</b>	<b>14%</b>

**MIDSTATE MEDICAL CENTER  
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	\$8,892,413	\$2,019,081	(\$6,873,332)	-77%
2	Inpatient Payments	\$3,110,773	\$473,526	(\$2,637,247)	-85%
3	Outpatient Charges	\$17,855,247	\$4,591,255	(\$13,263,992)	-74%
4	Outpatient Payments	\$5,530,060	\$1,186,256	(\$4,343,804)	-79%
5	Discharges	944	160	(784)	-83%
6	Patient Days	2,595	437	(2,158)	-83%
7	Outpatient Visits (Excludes ED Visits)	6,559	1,266	(5,293)	-81%
8	Emergency Department Outpatient Visits	16,621	4,091	(12,530)	-75%
9	Emergency Department Inpatient Admissions	165	46	(119)	-72%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$26,747,660</b>	<b>\$6,610,336</b>	<b>(\$20,137,324)</b>	<b>-75%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$8,640,833</b>	<b>\$1,659,782</b>	<b>(\$6,981,051)</b>	<b>-81%</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>

**MIDSTATE MEDICAL CENTER  
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%

**MIDSTATE MEDICAL CENTER  
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	\$754,437	\$98,280	(\$656,157)	-87%
2	Inpatient Payments	\$289,109	\$22,839	(\$266,270)	-92%
3	Outpatient Charges	\$1,219,732	\$285,922	(\$933,810)	-77%
4	Outpatient Payments	\$402,756	\$78,962	(\$323,794)	-80%
5	Discharges	93	9	(84)	-90%
6	Patient Days	249	19	(230)	-92%
7	Outpatient Visits (Excludes ED Visits)	404	65	(339)	-84%
8	Emergency Department Outpatient Visits	1,204	271	(933)	-77%
9	Emergency Department Inpatient Admissions	14	0	(14)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,974,169</b>	<b>\$384,202</b>	<b>(\$1,589,967)</b>	<b>-81%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$691,865</b>	<b>\$101,801</b>	<b>(\$590,064)</b>	<b>-85%</b>
	<b>H. AETNA</b>				
1	Inpatient Charges	\$971,672	\$294,832	(\$676,840)	-70%
2	Inpatient Payments	\$335,552	\$134,016	(\$201,536)	-60%
3	Outpatient Charges	\$1,683,075	\$423,719	(\$1,259,356)	-75%
4	Outpatient Payments	\$555,751	\$102,413	(\$453,338)	-82%
5	Discharges	104	36	(68)	-65%
6	Patient Days	289	80	(209)	-72%
7	Outpatient Visits (Excludes ED Visits)	551	101	(450)	-82%
8	Emergency Department Outpatient Visits	1,828	495	(1,333)	-73%
9	Emergency Department Inpatient Admissions	23	3	(20)	-87%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$2,654,747</b>	<b>\$718,551</b>	<b>(\$1,936,196)</b>	<b>-73%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$891,303</b>	<b>\$236,429</b>	<b>(\$654,874)</b>	<b>-73%</b>
	<b>II. TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$10,618,522</b>	<b>\$2,412,193</b>	<b>(\$8,206,329)</b>	<b>-77%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$3,735,434</b>	<b>\$630,381</b>	<b>(\$3,105,053)</b>	<b>-83%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$20,758,054</b>	<b>\$5,300,896</b>	<b>(\$15,457,158)</b>	<b>-74%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$6,488,567</b>	<b>\$1,367,631</b>	<b>(\$5,120,936)</b>	<b>-79%</b>
	<b>TOTAL DISCHARGES</b>	<b>1,141</b>	<b>205</b>	<b>(936)</b>	<b>-82%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>3,133</b>	<b>536</b>	<b>(2,597)</b>	<b>-83%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>7,514</b>	<b>1,432</b>	<b>(6,082)</b>	<b>-81%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>19,653</b>	<b>4,857</b>	<b>(14,796)</b>	<b>-75%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>202</b>	<b>49</b>	<b>(153)</b>	<b>-76%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$31,376,576</b>	<b>\$7,713,089</b>	<b>(\$23,663,487)</b>	<b>-75%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$10,224,001</b>	<b>\$1,998,012</b>	<b>(\$8,225,989)</b>	<b>-80%</b>

**MIDSTATE MEDICAL CENTER  
 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

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$20,898,243	\$47,972,840	\$27,074,597	130%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$29,581,747	\$25,147,640	(\$4,434,107)	-15%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$6,319,474	\$6,319,474	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,896,399	\$2,649,756	\$753,357	40%
8	Prepaid Expenses	\$2,626,149	\$2,789,213	\$163,064	6%
9	Other Current Assets	\$1,416,029	\$9,036,167	\$7,620,138	538%
	<b>Total Current Assets</b>	<b>\$56,418,567</b>	<b>\$93,915,090</b>	<b>\$37,496,523</b>	<b>66%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$11,682,166	\$13,223,292	\$1,541,126	13%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$6,312,325	\$6,312,325	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$119,216	\$65,932	(\$53,284)	-45%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$18,113,707</b>	<b>\$19,601,549</b>	<b>\$1,487,842</b>	<b>8%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$12,501,552	\$14,919,838	\$2,418,286	19%
7	Other Noncurrent Assets	\$28,097,820	\$36,966,559	\$8,868,739	32%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$245,640,720	\$252,998,135	\$7,357,415	3%
2	Less: Accumulated Depreciation	\$113,748,505	\$126,840,826	\$13,092,321	\$0
	<b>Property, Plant and Equipment, Net</b>	<b>\$131,892,215</b>	<b>\$126,157,309</b>	<b>(\$5,734,906)</b>	<b>-4%</b>
3	Construction in Progress	\$338,221	\$1,631,461	\$1,293,240	382%
	<b>Total Net Fixed Assets</b>	<b>\$132,230,436</b>	<b>\$127,788,770</b>	<b>(\$4,441,666)</b>	<b>-3%</b>
	<b>Total Assets</b>	<b>\$247,362,082</b>	<b>\$293,191,806</b>	<b>\$45,829,724</b>	<b>19%</b>

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$4,489,564	\$11,891,063	\$7,401,499	165%
2	Salaries, Wages and Payroll Taxes	\$9,084,845	\$10,062,117	\$977,272	11%
3	Due To Third Party Payers	\$1,800,530	\$3,562,417	\$1,761,887	98%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$10,646,951	\$4,665,737	(\$5,981,214)	-56%
	<b>Total Current Liabilities</b>	<b>\$26,021,890</b>	<b>\$30,181,334</b>	<b>\$4,159,444</b>	<b>16%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$88,754,643	\$88,731,315	(\$23,328)	0%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	<b>Total Long Term Debt</b>	<b>\$88,754,643</b>	<b>\$88,731,315</b>	<b>(\$23,328)</b>	<b>0%</b>
3	Accrued Pension Liability	\$57,749,335	\$56,785,518	(\$963,817)	-2%
4	Other Long Term Liabilities	\$2,432,939	\$26,866,681	\$24,433,742	1004%
	<b>Total Long Term Liabilities</b>	<b>\$148,936,917</b>	<b>\$172,383,514</b>	<b>\$23,446,597</b>	<b>16%</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	\$57,976,004	\$74,346,080	\$16,370,076	28%
2	Temporarily Restricted Net Assets	\$1,966,917	\$2,279,087	\$312,170	16%
3	Permanently Restricted Net Assets	\$12,460,354	\$14,001,791	\$1,541,437	12%
	<b>Total Net Assets</b>	<b>\$72,403,275</b>	<b>\$90,626,958</b>	<b>\$18,223,683</b>	<b>25%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$247,362,082</b>	<b>\$293,191,806</b>	<b>\$45,829,724</b>	<b>19%</b>

MIDSTATE MEDICAL CENTER AND SUBSIDIARIES					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$423,415,942	\$479,645,635	\$56,229,693	13%
2	Less: Allowances	\$223,635,468	\$257,058,291	\$33,422,823	15%
3	Less: Charity Care	\$3,025,038	\$4,233,596	\$1,208,558	40%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$196,755,436</b>	<b>\$218,353,748</b>	<b>\$21,598,312</b>	<b>11%</b>
5	Other Operating Revenue	\$27,159,567	\$41,887,116	\$14,727,549	54%
6	Net Assets Released from Restrictions	\$241,164	\$327,257	\$86,093	36%
	<b>Total Operating Revenue</b>	<b>\$224,156,167</b>	<b>\$260,568,121</b>	<b>\$36,411,954</b>	<b>16%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$74,803,914	\$78,095,938	\$3,292,024	4%
2	Fringe Benefits	\$26,868,042	\$28,749,594	\$1,881,552	7%
3	Physicians Fees	\$4,816,391	\$6,593,565	\$1,777,174	37%
4	Supplies and Drugs	\$22,356,871	\$30,249,936	\$7,893,065	35%
5	Depreciation and Amortization	\$13,144,617	\$13,214,810	\$70,193	1%
6	Bad Debts	\$8,300,420	\$6,461,499	(\$1,838,921)	-22%
7	Interest	\$2,222,925	\$3,996,300	\$1,773,375	80%
8	Malpractice	\$5,172,300	\$4,164,372	(\$1,007,928)	-19%
9	Other Operating Expenses	\$59,032,149	\$72,620,142	\$13,587,993	23%
	<b>Total Operating Expenses</b>	<b>\$216,717,629</b>	<b>\$244,146,156</b>	<b>\$27,428,527</b>	<b>13%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$7,438,538</b>	<b>\$16,421,965</b>	<b>\$8,983,427</b>	<b>121%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$130,175	\$92,682	(\$37,493)	-29%
2	Gifts, Contributions and Donations	\$247,500	\$0	(\$247,500)	-100%
3	Other Non-Operating Gains/(Losses)	\$795,107	\$1,355,485	\$560,378	70%
	<b>Total Non-Operating Revenue</b>	<b>\$1,172,782</b>	<b>\$1,448,167</b>	<b>\$275,385</b>	<b>23%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$8,611,320</b>	<b>\$17,870,132</b>	<b>\$9,258,812</b>	<b>108%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	(\$610,653)	\$1,362,036	\$1,972,689	-323%
	All Other Adjustments	(\$106,639)	(\$1,587,712)	(\$1,481,073)	1389%
	<b>Total Other Adjustments</b>	<b>(\$717,292)</b>	<b>(\$225,676)</b>	<b>\$491,616</b>	<b>-69%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$7,894,028</b>	<b>\$17,644,456</b>	<b>\$9,750,428</b>	<b>124%</b>

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2012

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$182,022,152	\$196,755,436	\$218,353,748
2	Other Operating Revenue	31,717,287	27,400,731	42,214,373
3	Total Operating Revenue	\$213,739,439	\$224,156,167	\$260,568,121
4	Total Operating Expenses	203,532,336	216,717,629	244,146,156
5	Income/(Loss) From Operations	\$10,207,103	\$7,438,538	\$16,421,965
6	Total Non-Operating Revenue	534,112	455,490	1,222,491
7	Excess/(Deficiency) of Revenue Over Expenses	\$10,741,215	\$7,894,028	\$17,644,456
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	4.76%	3.31%	6.27%
2	Parent Corporation Non-Operating Margin	0.25%	0.20%	0.47%
3	Parent Corporation Total Margin	5.01%	3.51%	6.74%
4	Income/(Loss) From Operations	\$10,207,103	\$7,438,538	\$16,421,965
5	Total Operating Revenue	\$213,739,439	\$224,156,167	\$260,568,121
6	Total Non-Operating Revenue	\$534,112	\$455,490	\$1,222,491
7	Total Revenue	\$214,273,551	\$224,611,657	\$261,790,612
8	Excess/(Deficiency) of Revenue Over Expenses	\$10,741,215	\$7,894,028	\$17,644,456
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$62,140,641	\$57,976,004	\$74,346,080
2	Parent Corporation Total Net Assets	\$77,075,698	\$72,403,275	\$90,626,958
3	Parent Corporation Change in Total Net Assets	\$11,683,181	(\$4,672,423)	\$18,223,683
4	Parent Corporation Change in Total Net Assets %	117.9%	-6.1%	25.2%

## MIDSTATE MEDICAL CENTER AND SUBSIDIARIES

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2012

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
<b>D. Liquidity Measures Summary</b>				
<b>1</b>	<b>Current Ratio</b>	<b>2.07</b>	<b>2.17</b>	<b>3.11</b>
2	Total Current Assets	\$62,140,637	\$56,418,567	\$93,915,090
3	Total Current Liabilities	\$29,978,662	\$26,021,890	\$30,181,334
<b>4</b>	<b>Days Cash on Hand</b>	<b>56</b>	<b>37</b>	<b>76</b>
5	Cash and Cash Equivalents	\$29,570,490	\$20,898,243	\$47,972,840
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$29,570,490	\$20,898,243	\$47,972,840
8	Total Operating Expenses	\$203,532,336	\$216,717,629	\$244,146,156
9	Depreciation Expense	\$11,405,092	\$13,144,617	\$13,214,810
10	Operating Expenses less Depreciation Expense	\$192,127,244	\$203,573,012	\$230,931,346
<b>11</b>	<b>Days Revenue in Patient Accounts Receivable</b>	<b>53</b>	<b>52</b>	<b>36</b>
12	Net Patient Accounts Receivable	\$ 27,340,758	\$ 29,581,747	\$ 25,147,640
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$942,231	\$1,800,530	\$3,562,417
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 26,398,527	\$ 27,781,217	\$ 21,585,223
16	Total Net Patient Revenue	\$182,022,152	\$196,755,436	\$218,353,748
<b>17</b>	<b>Average Payment Period</b>	<b>57</b>	<b>47</b>	<b>48</b>
18	Total Current Liabilities	\$29,978,662	\$26,021,890	\$30,181,334
19	Total Operating Expenses	\$203,532,336	\$216,717,629	\$244,146,156
20	Depreciation Expense	\$11,405,092	\$13,144,617	\$13,214,810
21	Total Operating Expenses less Depreciation Expense	\$192,127,244	\$203,573,012	\$230,931,346

<b>MIDSTATE MEDICAL CENTER AND SUBSIDIARIES</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>31.8</b>	<b>29.3</b>	<b>30.9</b>
2	Total Net Assets	\$77,075,698	\$72,403,275	\$90,626,958
3	Total Assets	\$242,188,102	\$247,362,082	\$293,191,806
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>20.0</b>	<b>18.3</b>	<b>26.0</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$10,741,215	\$7,894,028	\$17,644,456
6	Depreciation Expense	\$11,405,092	\$13,144,617	\$13,214,810
7	Excess of Revenues Over Expenses and Depreciation Expense	\$22,146,307	\$21,038,645	\$30,859,266
8	Total Current Liabilities	\$29,978,662	\$26,021,890	\$30,181,334
9	Total Long Term Debt	\$80,580,000	\$88,754,643	\$88,731,315
10	Total Current Liabilities and Total Long Term Debt	\$110,558,662	\$114,776,533	\$118,912,649
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>51.1</b>	<b>55.1</b>	<b>49.5</b>
12	Total Long Term Debt	\$80,580,000	\$88,754,643	\$88,731,315
13	Total Net Assets	\$77,075,698	\$72,403,275	\$90,626,958
14	Total Long Term Debt and Total Net Assets	\$157,655,698	\$161,157,918	\$179,358,273

MIDSTATE MEDICAL CENTER								
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	34,237	8,205	8,205	111	116	84.5%	80.9%
2	ICU/CCU (Excludes Neonatal ICU)	1,690	558	0	7	9	66.1%	51.4%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	1,936	217	217	6	6	88.4%	88.4%
	<b>TOTAL PSYCHIATRIC</b>	<b>1,936</b>	<b>217</b>	<b>217</b>	<b>6</b>	<b>6</b>	<b>88.4%</b>	<b>88.4%</b>
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	2,413	966	966	10	13	66.1%	50.9%
7	Newborn	2,254	942	942	10	12	61.8%	51.5%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>40,276</b>	<b>9,388</b>	<b>9,388</b>	<b>134</b>	<b>144</b>	<b>82.3%</b>	<b>76.6%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>42,530</b>	<b>10,330</b>	<b>10,330</b>	<b>144</b>	<b>156</b>	<b>80.9%</b>	<b>74.7%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>42,530</b>	<b>10,330</b>	<b>10,330</b>	<b>144</b>	<b>156</b>	<b>80.9%</b>	<b>74.7%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>44,604</b>	<b>10,235</b>	<b>10,235</b>	<b>144</b>	<b>156</b>	<b>84.9%</b>	<b>78.3%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-2,074</b>	<b>95</b>	<b>95</b>	<b>0</b>	<b>0</b>	<b>-3.9%</b>	<b>-3.6%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-5%</b>	<b>1%</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>	<b>-5%</b>	<b>-5%</b>
	Total Licensed Beds and Bassinets	156						
<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>								

MIDSTATE MEDICAL CENTER					
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	5,759	5,389	-370	-6%
2	Outpatient Scans (Excluding Emergency Department Scans)	4,983	4,293	-690	-14%
3	Emergency Department Scans	7,719	7,660	-59	-1%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>18,461</b>	<b>17,342</b>	<b>-1,119</b>	<b>-6%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	1,527	1,700	173	11%
2	Outpatient Scans (Excluding Emergency Department Scans)	5,542	5,754	212	4%
3	Emergency Department Scans	465	507	42	9%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>7,534</b>	<b>7,961</b>	<b>427</b>	<b>6%</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	7	14	7	100%
2	Outpatient Scans (Excluding Emergency Department Scans)	472	490	18	4%
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>479</b>	<b>504</b>	<b>25</b>	<b>5%</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	131	126	-5	-4%
2	Outpatient Procedures	6,342	5,095	-1,247	-20%
	<b>Total Linear Accelerator Procedures</b>	<b>6,473</b>	<b>5,221</b>	<b>-1,252</b>	<b>-19%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Cardiac Catheterization Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	2,438	2,301	-137	-6%
2	Outpatient Surgical Procedures	5,878	6,213	335	6%
	<b>Total Surgical Procedures</b>	<b>8,316</b>	<b>8,514</b>	<b>198</b>	<b>2%</b>
<b>J. Endoscopy Procedures</b>					

MIDSTATE MEDICAL CENTER					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	1,288	1,182	-106	-8%
2	Outpatient Endoscopy Procedures	6,543	7,046	503	8%
	<b>Total Endoscopy Procedures</b>	<b>7,831</b>	<b>8,228</b>	<b>397</b>	<b>5%</b>
<b>K.</b>	<b>Hospital Emergency Room Visits</b>				
1	Emergency Room Visits: Treated and Admitted	6,629	7,232	603	9%
2	Emergency Room Visits: Treated and Discharged	78,336	84,907	6,571	8%
	<b>Total Emergency Room Visits</b>	<b>84,965</b>	<b>92,139</b>	<b>7,174</b>	<b>8%</b>
<b>L.</b>	<b>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	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	2,260	2,298	38	2%
	<b>Total Hospital Clinic Visits</b>	<b>2,260</b>	<b>2,298</b>	<b>38</b>	<b>2%</b>
<b>M.</b>	<b>Other Hospital Outpatient Visits</b>				
1	Rehabilitation (PT/OT/ST)	202	444	242	120%
2	Cardiology	2,485	2,567	82	3%
3	Chemotherapy	504	3,701	3,197	634%
4	Gastroenterology	6,543	7,046	503	8%
5	Other Outpatient Visits	69,942	68,420	-1,522	-2%
	<b>Total Other Hospital Outpatient Visits</b>	<b>79,676</b>	<b>82,178</b>	<b>2,502</b>	<b>3%</b>
<b>N.</b>	<b>Hospital Full Time Equivalent Employees</b>				
1	Total Nursing FTEs	315.5	332.6	17.1	5%
2	Total Physician FTEs	49.7	43.8	-5.9	-12%
3	Total Non-Nursing and Non-Physician FTEs	653.4	678.2	24.8	4%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>1,018.6</b>	<b>1,054.6</b>	<b>36.0</b>	<b>4%</b>

MIDSTATE MEDICAL CENTER					
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	Main hospital campus	5,878	6,213	335	6%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>5,878</b>	<b>6,213</b>	<b>335</b>	<b>6%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	Main hospital campus	6,543	7,046	503	8%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>6,543</b>	<b>7,046</b>	<b>503</b>	<b>8%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	61 Pomeroy Ave	27,683	27,877	194	1%
2	Main hospital campus	50,653	52,463	1,810	4%
3	680 S. Main St Cheshire	0	4,567	4,567	0%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>78,336</b>	<b>84,907</b>	<b>6,571</b>	<b>8%</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>					

MIDSTATE MEDICAL CENTER					
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	\$118,170,811	\$122,637,612	\$4,466,801	4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$48,578,024	\$51,806,794	\$3,228,770	7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.11%	42.24%	1.14%	3%
4	DISCHARGES	4,826	5,054	228	5%
5	CASE MIX INDEX (CMI)	1.40688	1.38600	(0.02088)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,789.60288	7,004.84400	215.24112	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,154.77	\$7,395.85	\$241.09	3%
8	PATIENT DAYS	25,200	23,891	(1,309)	-5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,927.70	\$2,168.46	\$240.77	12%
10	AVERAGE LENGTH OF STAY	5.2	4.7	(0.5)	-9%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$72,569,539	\$88,615,644	\$16,046,105	22%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$21,457,290	\$25,418,361	\$3,961,071	18%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.57%	28.68%	-0.88%	-3%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	61.41%	72.26%	10.85%	18%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,963.68107	3,651.92584	688.24478	23%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,240.08	\$6,960.26	(\$279.82)	-4%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$190,740,350	\$211,253,256	\$20,512,906	11%
18	TOTAL ACCRUED PAYMENTS	\$70,035,314	\$77,225,155	\$7,189,841	10%
19	TOTAL ALLOWANCES	\$120,705,036	\$134,028,101	\$13,323,065	11%

MIDSTATE MEDICAL CENTER					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>B.</b>	<b><u>NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</u></b>				
	<b><u>NON-GOVERNMENT INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$55,065,404	\$55,914,210	\$848,806	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$35,325,625	\$35,838,100	\$512,475	1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	64.15%	64.09%	-0.06%	0%
4	DISCHARGES	3,252	3,098	(154)	-5%
5	CASE MIX INDEX (CMI)	1.02963	1.09210	0.06247	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,348.35676	3,383.32580	34.96904	1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,550.14	\$10,592.57	\$42.43	0%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,395.37)	(\$3,196.71)	\$198.66	-6%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$11,368,914)	(\$10,815,521)	\$553,393	-5%
10	PATIENT DAYS	11,282	10,383	(899)	-8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,131.15	\$3,451.61	\$320.46	10%
12	AVERAGE LENGTH OF STAY	3.5	3.4	(0.1)	-3%
	<b><u>NON-GOVERNMENT OUTPATIENT</u></b>				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$103,548,217	\$120,756,250	\$17,208,033	17%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$66,378,849	\$78,306,104	\$11,927,255	18%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	64.10%	64.85%	0.74%	1%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	188.05%	215.97%	27.92%	15%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,115.25163	6,690.65811	575.40648	9%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$10,854.64	\$11,703.80	\$849.16	8%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$3,614.56)	(\$4,743.53)	(\$1,128.98)	31%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$22,103,934)	(\$31,737,370)	(\$9,633,436)	44%
	<b><u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u></b>				
21	TOTAL ACCRUED CHARGES	\$158,613,621	\$176,670,460	\$18,056,839	11%
22	TOTAL ACCRUED PAYMENTS	\$101,704,474	\$114,144,204	\$12,439,730	12%
23	TOTAL ALLOWANCES	\$56,909,147	\$62,526,256	\$5,617,109	10%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$33,472,848)	(\$42,552,891)	(\$9,080,043)	27%
	<b><u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u></b>				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$145,881,128	\$165,440,521	\$19,559,393	13%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$100,144,953	\$113,609,361	\$13,464,408	13%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$45,736,175	\$51,831,160	\$6,094,985	13%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	31.35%	31.33%	-0.02%	

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>C.</b>	<b><u>UNINSURED</u></b>				
	<b><u>UNINSURED INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$3,391,142	\$3,563,947	\$172,805	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$303,258	\$276,890	(\$26,368)	-9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	8.94%	7.77%	-1.17%	-13%
4	DISCHARGES	209	254	45	22%
5	CASE MIX INDEX (CMI)	0.97810	0.97825	0.00015	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	204.42290	248.47550	44.05260	22%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,483.48	\$1,114.36	(\$369.13)	-25%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$9,066.65	\$9,478.21	\$411.56	5%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$5,671.28	\$6,281.50	\$610.21	11%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,159,340	\$1,560,798	\$401,458	35%
11	PATIENT DAYS	870	925	55	6%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$348.57	\$299.34	(\$49.23)	-14%
13	AVERAGE LENGTH OF STAY	4.2	3.6	(0.5)	-13%
	<b><u>UNINSURED OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,307,136	\$7,665,991	\$358,855	5%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$519,914	\$908,179	\$388,265	75%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	7.12%	11.85%	4.73%	67%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	215.48%	215.10%	-0.38%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	450.34724	546.34980	96.00256	21%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,154.47	\$1,662.27	\$507.79	44%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$9,700.17	\$10,041.53	\$341.36	4%
21	MEDICARE - UNINSURED OP PMT / OPED	\$6,085.61	\$5,298.00	(\$787.61)	-13%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,740,636	\$2,894,559	\$153,922	6%
	<b><u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$10,698,278	\$11,229,938	\$531,660	5%
24	TOTAL ACCRUED PAYMENTS	\$823,172	\$1,185,069	\$361,897	44%
25	TOTAL ALLOWANCES	\$9,875,106	\$10,044,869	\$169,763	2%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,899,976	\$4,455,357	\$555,380	14%

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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	\$30,010,171	\$33,140,670	\$3,130,499	10%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$9,805,384	\$11,030,318	\$1,224,934	12%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	32.67%	33.28%	0.61%	2%
4	DISCHARGES	2,106	2,151	45	2%
5	CASE MIX INDEX (CMI)	0.90081	0.93073	0.02992	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,897.10586	2,002.00023	104.89437	6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,168.60	\$5,509.65	\$341.05	7%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,381.54	\$5,082.92	(\$298.62)	-6%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,986.17	\$1,886.20	(\$99.96)	-5%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,767,966	\$3,776,181	\$8,215	0%
11	PATIENT DAYS	7,822	8,172	350	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,253.56	\$1,349.77	\$96.20	8%
13	AVERAGE LENGTH OF STAY	3.7	3.8	0.1	2%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$41,580,077	\$57,542,396	\$15,962,319	38%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$10,948,628	\$14,520,565	\$3,571,937	33%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.33%	25.23%	-1.10%	-4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	138.55%	173.63%	35.08%	25%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,917.93213	3,734.79757	816.86544	28%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,752.19	\$3,887.91	\$135.72	4%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$7,102.45	\$7,815.88	\$713.43	10%
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,487.89	\$3,072.35	(\$415.54)	-12%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,177,436	\$11,474,605	\$1,297,169	13%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$71,590,248	\$90,683,066	\$19,092,818	27%
24	TOTAL ACCRUED PAYMENTS	\$20,754,012	\$25,550,883	\$4,796,871	23%
25	TOTAL ALLOWANCES	\$50,836,236	\$65,132,183	\$14,295,947	28%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$13,945,402	\$15,250,786	\$1,305,384	9%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>E. OTHER MEDICAL ASSISTANCE (O.M.A.)</b>					
<b>OTHER MEDICAL ASSISTANCE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$741,619	\$0	(\$741,619)	-100%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$272,976	\$0	(\$272,976)	-100%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	36.81%	0.00%	-36.81%	-100%
4	DISCHARGES	32	-	(32)	-100%
5	CASE MIX INDEX (CMI)	1.13153	0.00000	(1.13153)	-100%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	36.20896	0.00000	(36.20896)	-100%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,538.91	\$0.00	(\$7,538.91)	-100%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$3,011.23	\$10,592.57	\$7,581.34	252%
9	MEDICARE - O.M.A. IP PMT / CMAD	(\$384.14)	\$7,395.85	\$7,779.99	-2025%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$13,909)	\$0	\$13,909	-100%
11	PATIENT DAYS	242	0	(242)	-100%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,128.00	\$0.00	(\$1,128.00)	-100%
13	AVERAGE LENGTH OF STAY	7.6	-	(7.6)	-100%
<b>OTHER MEDICAL ASSISTANCE OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$965,547	\$0	(\$965,547)	-100%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$246,214	\$0	(\$246,214)	-100%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.50%	0.00%	-25.50%	-100%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	130.19%	0.00%	-130.19%	-100%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	41.66223	0.00000	(41.66223)	-100%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,909.76	\$0.00	(\$5,909.76)	-100%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$4,944.87	\$11,703.80	\$6,758.92	137%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$1,330.32	\$6,960.26	\$5,629.95	423%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$55,424	\$0	(\$55,424)	-100%
<b>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$1,707,166	\$0	(\$1,707,166)	-100%
24	TOTAL ACCRUED PAYMENTS	\$519,190	\$0	(\$519,190)	-100%
25	TOTAL ALLOWANCES	\$1,187,976	\$0	(\$1,187,976)	-100%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$41,515	\$0	(\$41,515)	-100%

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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	\$30,751,790	\$33,140,670	\$2,388,880	8%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$10,078,360	\$11,030,318	\$951,958	9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	32.77%	33.28%	0.51%	2%
4	DISCHARGES	2,138	2,151	13	1%
5	CASE MIX INDEX (CMI)	0.90426	0.93073	0.02647	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,933.31482	2,002.00023	68.68541	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,212.99	\$5,509.65	\$296.65	6%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,337.14	\$5,082.92	(\$254.23)	-5%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,941.77	\$1,886.20	(\$55.57)	-3%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,754,056	\$3,776,181	\$22,124	1%
11	PATIENT DAYS	8,064	8,172	108	1%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,249.80	\$1,349.77	\$99.97	8%
13	AVERAGE LENGTH OF STAY	3.8	3.8	0.0	1%
<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$42,545,624	\$57,542,396	\$14,996,772	35%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$11,194,842	\$14,520,565	\$3,325,723	30%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.31%	25.23%	-1.08%	-4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	138.35%	173.63%	35.28%	25%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,959.59436	3,734.79757	775.20321	26%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,782.56	\$3,887.91	\$105.35	3%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$7,072.08	\$7,815.88	\$743.81	11%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,457.52	\$3,072.35	(\$385.17)	-11%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,232,860	\$11,474,605	\$1,241,745	12%
<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$73,297,414	\$90,683,066	\$17,385,652	24%
24	TOTAL ACCRUED PAYMENTS	\$21,273,202	\$25,550,883	\$4,277,681	20%
25	TOTAL ALLOWANCES	\$52,024,212	\$65,132,183	\$13,107,971	25%

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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	\$220,664	\$353,256	\$132,592	60%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$82,451	\$105,326	\$22,875	28%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	37.36%	29.82%	-7.55%	-20%
4	DISCHARGES	19	27	8	42%
5	CASE MIX INDEX (CMI)	0.91139	0.70038	(0.21101)	-23%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	17.31641	18.91026	1.59385	9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,761.44	\$5,569.78	\$808.34	17%
8	PATIENT DAYS	58	84	26	45%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,421.57	\$1,253.88	(\$167.69)	-12%
10	AVERAGE LENGTH OF STAY	3.1	3.1	0.1	2%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$543,893	\$685,597	\$141,704	26%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$203,226	\$204,418	\$1,192	1%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$764,557	\$1,038,853	\$274,296	36%
14	TOTAL ACCRUED PAYMENTS	\$285,677	\$309,744	\$24,067	8%
15	TOTAL ALLOWANCES	\$478,880	\$729,109	\$250,229	52%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$14,584,411	\$27,519,593	\$12,935,182	89%
2	TOTAL OPERATING EXPENSES	\$203,675,287	\$221,306,295	\$17,631,008	9%
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)	\$3,025,038	\$4,233,596	\$1,208,558	40%
5	BAD DEBTS (CHARGES)	\$7,875,420	\$6,461,499	(\$1,413,921)	-18%
6	UNCOMPENSATED CARE (CHARGES)	\$10,900,458	\$10,695,095	(\$205,363)	-2%
7	COST OF UNCOMPENSATED CARE	\$4,976,298	\$4,843,775	(\$132,524)	-3%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$73,297,414	\$90,683,066	\$17,385,652	24%
9	TOTAL ACCRUED PAYMENTS	\$21,273,202	\$25,550,883	\$4,277,681	20%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$33,461,878	\$41,070,073	\$7,608,195	23%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$12,188,676	\$15,519,190	\$3,330,514	27%

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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	\$204,208,669	\$212,045,748	\$7,837,079	4%
2	TOTAL INPATIENT PAYMENTS	\$94,064,460	\$98,780,538	\$4,716,078	5%
3	TOTAL INPATIENT PAYMENTS / CHARGES	46.06%	46.58%	0.52%	1%
4	TOTAL DISCHARGES	10,235	10,330	95	1%
5	TOTAL CASE MIX INDEX	1.18110	1.20127	0.02016	2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	12,088,59087	12,409,08029	320,48942	3%
7	TOTAL OUTPATIENT CHARGES	\$219,207,273	\$267,599,887	\$48,392,614	22%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	107.34%	126.20%	18.85%	18%
9	TOTAL OUTPATIENT PAYMENTS	\$99,234,207	\$118,449,448	\$19,215,241	19%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	45.27%	44.26%	-1.01%	-2%
11	TOTAL CHARGES	\$423,415,942	\$479,645,635	\$56,229,693	13%
12	TOTAL PAYMENTS	\$193,298,667	\$217,229,986	\$23,931,319	12%
13	TOTAL PAYMENTS / TOTAL CHARGES	45.65%	45.29%	-0.36%	-1%
14	PATIENT DAYS	44,604	42,530	(2,074)	-5%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$149,143,265	\$156,131,538	\$6,988,273	5%
2	INPATIENT PAYMENTS	\$58,738,835	\$62,942,438	\$4,203,603	7%
3	GOVT. INPATIENT PAYMENTS / CHARGES	39.38%	40.31%	0.93%	2%
4	DISCHARGES	6,983	7,232	249	4%
5	CASE MIX INDEX	1.25164	1.24803	(0.00361)	0%
6	CASE MIX ADJUSTED DISCHARGES	8,740,23411	9,025,75449	285,52038	3%
7	OUTPATIENT CHARGES	\$115,659,056	\$146,843,637	\$31,184,581	27%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	77.55%	94.05%	16.50%	21%
9	OUTPATIENT PAYMENTS	\$32,855,358	\$40,143,344	\$7,287,986	22%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	28.41%	27.34%	-1.07%	-4%
11	TOTAL CHARGES	\$264,802,321	\$302,975,175	\$38,172,854	14%
12	TOTAL PAYMENTS	\$91,594,193	\$103,085,782	\$11,491,589	13%
13	TOTAL PAYMENTS / CHARGES	34.59%	34.02%	-0.57%	-2%
14	PATIENT DAYS	33,322	32,147	(1,175)	-4%
15	TOTAL GOVERNMENT DEDUCTIONS	\$173,208,128	\$199,889,393	\$26,681,265	15%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	5.2	4.7	(0.5)	-9%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.4	(0.1)	-3%
3	UNINSURED	4.2	3.6	(0.5)	-13%
4	MEDICAID	3.7	3.8	0.1	2%
5	OTHER MEDICAL ASSISTANCE	7.6	-	(7.6)	-100%
6	CHAMPUS / TRICARE	3.1	3.1	0.1	2%
7	TOTAL AVERAGE LENGTH OF STAY	4.4	4.1	(0.2)	-6%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$423,415,942	\$479,645,635	\$56,229,693	13%
2	TOTAL GOVERNMENT DEDUCTIONS	\$173,208,128	\$199,889,393	\$26,681,265	15%
3	UNCOMPENSATED CARE	\$10,900,458	\$10,695,095	(\$205,363)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$45,736,175	\$51,831,160	\$6,094,985	13%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$272,514	\$0	(\$272,514)	-100%
6	TOTAL ADJUSTMENTS	\$230,117,275	\$262,415,648	\$32,298,373	14%
7	TOTAL ACCRUED PAYMENTS	\$193,298,667	\$217,229,987	\$23,931,320	12%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$193,298,667	\$217,229,987	\$23,931,320	12%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4565219394	0.4528968287	(0.0036251106)	-1%
11	COST OF UNCOMPENSATED CARE	\$4,976,298	\$4,843,775	(\$132,524)	-3%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$12,188,676	\$15,519,190	\$3,330,514	27%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$17,164,974	\$20,362,965	\$3,197,991	19%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$10,177,436	\$11,474,605	\$1,297,169	13%
2	OTHER MEDICAL ASSISTANCE	\$41,515	\$0	(\$41,515)	-100%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,899,976	\$4,455,357	\$555,380	14%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$14,118,927	\$15,929,962	\$1,811,035	13%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$474,597	\$0	(\$474,597)	-100.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$3,456,769	\$1,123,762	(\$2,333,007)	-67.49%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$196,755,436	\$218,353,748	\$21,598,312	10.98%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$423,415,942	\$479,645,635	\$56,229,693	13.28%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$10,900,458	\$10,695,095	(\$205,363)	-1.88%

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<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>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$55,065,404	\$55,914,210	\$848,806
2	MEDICARE	\$118,170,811	122,637,612	\$4,466,801
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$30,751,790	33,140,670	\$2,388,880
4	MEDICAID	\$30,010,171	33,140,670	\$3,130,499
5	OTHER MEDICAL ASSISTANCE	\$741,619	0	(\$741,619)
6	CHAMPUS / TRICARE	\$220,664	353,256	\$132,592
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,391,142	3,563,947	\$172,805
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$149,143,265</b>	<b>\$156,131,538</b>	<b>\$6,988,273</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$204,208,669</b>	<b>\$212,045,748</b>	<b>\$7,837,079</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$103,548,217	\$120,756,250	\$17,208,033
2	MEDICARE	\$72,569,539	88,615,644	\$16,046,105
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$42,545,624	57,542,396	\$14,996,772
4	MEDICAID	\$41,580,077	57,542,396	\$15,962,319
5	OTHER MEDICAL ASSISTANCE	\$965,547	0	(\$965,547)
6	CHAMPUS / TRICARE	\$543,893	685,597	\$141,704
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,307,136	7,665,991	\$358,855
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$115,659,056</b>	<b>\$146,843,637</b>	<b>\$31,184,581</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$219,207,273</b>	<b>\$267,599,887</b>	<b>\$48,392,614</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$158,613,621	\$176,670,460	\$18,056,839
2	TOTAL MEDICARE	\$190,740,350	\$211,253,256	\$20,512,906
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$73,297,414	\$90,683,066	\$17,385,652
4	TOTAL MEDICAID	\$71,590,248	\$90,683,066	\$19,092,818
5	TOTAL OTHER MEDICAL ASSISTANCE	\$1,707,166	\$0	(\$1,707,166)
6	TOTAL CHAMPUS / TRICARE	\$764,557	\$1,038,853	\$274,296
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,698,278	\$11,229,938	\$531,660
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$264,802,321</b>	<b>\$302,975,175</b>	<b>\$38,172,854</b>
	<b>TOTAL CHARGES</b>	<b>\$423,415,942</b>	<b>\$479,645,635</b>	<b>\$56,229,693</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,325,625	\$35,838,100	\$512,475
2	MEDICARE	\$48,578,024	51,806,794	\$3,228,770
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$10,078,360	11,030,318	\$951,958
4	MEDICAID	\$9,805,384	11,030,318	\$1,224,934
5	OTHER MEDICAL ASSISTANCE	\$272,976	0	(\$272,976)
6	CHAMPUS / TRICARE	\$82,451	105,326	\$22,875
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$303,258	276,890	(\$26,368)
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$58,738,835</b>	<b>\$62,942,438</b>	<b>\$4,203,603</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$94,064,460</b>	<b>\$98,780,538</b>	<b>\$4,716,078</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$66,378,849	\$78,306,104	\$11,927,255
2	MEDICARE	\$21,457,290	25,418,361	\$3,961,071
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,194,842	14,520,565	\$3,325,723
4	MEDICAID	\$10,948,628	14,520,565	\$3,571,937
5	OTHER MEDICAL ASSISTANCE	\$246,214	0	(\$246,214)
6	CHAMPUS / TRICARE	\$203,226	204,418	\$1,192
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$519,914	908,179	\$388,265
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$32,855,358</b>	<b>\$40,143,344</b>	<b>\$7,287,986</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$99,234,207</b>	<b>\$118,449,448</b>	<b>\$19,215,241</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$101,704,474	\$114,144,204	\$12,439,730
2	TOTAL MEDICARE	\$70,035,314	\$77,225,155	\$7,189,841
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$21,273,202	\$25,550,883	\$4,277,681
4	TOTAL MEDICAID	\$20,754,012	\$25,550,883	\$4,796,871
5	TOTAL OTHER MEDICAL ASSISTANCE	\$519,190	\$0	(\$519,190)
6	TOTAL CHAMPUS / TRICARE	\$285,677	\$309,744	\$24,067
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$823,172	\$1,185,069	\$361,897
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$91,594,193</b>	<b>\$103,085,782</b>	<b>\$11,491,589</b>
	<b>TOTAL PAYMENTS</b>	<b>\$193,298,667</b>	<b>\$217,229,986</b>	<b>\$23,931,319</b>

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<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)	13.01%	11.66%	-1.35%
2	MEDICARE	27.91%	25.57%	-2.34%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.26%	6.91%	-0.35%
4	MEDICAID	7.09%	6.91%	-0.18%
5	OTHER MEDICAL ASSISTANCE	0.18%	0.00%	-0.18%
6	CHAMPUS / TRICARE	0.05%	0.07%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.80%	0.74%	-0.06%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>35.22%</b>	<b>32.55%</b>	<b>-2.67%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>48.23%</b>	<b>44.21%</b>	<b>-4.02%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	24.46%	25.18%	0.72%
2	MEDICARE	17.14%	18.48%	1.34%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10.05%	12.00%	1.95%
4	MEDICAID	9.82%	12.00%	2.18%
5	OTHER MEDICAL ASSISTANCE	0.23%	0.00%	-0.23%
6	CHAMPUS / TRICARE	0.13%	0.14%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.73%	1.60%	-0.13%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>27.32%</b>	<b>30.62%</b>	<b>3.30%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>51.77%</b>	<b>55.79%</b>	<b>4.02%</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)	18.28%	16.50%	-1.78%
2	MEDICARE	25.13%	23.85%	-1.28%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.21%	5.08%	-0.14%
4	MEDICAID	5.07%	5.08%	0.01%
5	OTHER MEDICAL ASSISTANCE	0.14%	0.00%	-0.14%
6	CHAMPUS / TRICARE	0.04%	0.05%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.16%	0.13%	-0.03%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>30.39%</b>	<b>28.98%</b>	<b>-1.41%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>48.66%</b>	<b>45.47%</b>	<b>-3.19%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	34.34%	36.05%	1.71%
2	MEDICARE	11.10%	11.70%	0.60%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.79%	6.68%	0.89%
4	MEDICAID	5.66%	6.68%	1.02%
5	OTHER MEDICAL ASSISTANCE	0.13%	0.00%	-0.13%
6	CHAMPUS / TRICARE	0.11%	0.09%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.27%	0.42%	0.15%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>17.00%</b>	<b>18.48%</b>	<b>1.48%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>51.34%</b>	<b>54.53%</b>	<b>3.19%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>

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(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)	3,252	3,098	(154)
2	MEDICARE	4,826	5,054	228
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,138	2,151	13
4	MEDICAID	2,106	2,151	45
5	OTHER MEDICAL ASSISTANCE	32	0	(32)
6	CHAMPUS / TRICARE	19	27	8
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	209	254	45
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>6,983</b>	<b>7,232</b>	<b>249</b>
	<b>TOTAL DISCHARGES</b>	<b>10,235</b>	<b>10,330</b>	<b>95</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	11,282	10,383	(899)
2	MEDICARE	25,200	23,891	(1,309)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,064	8,172	108
4	MEDICAID	7,822	8,172	350
5	OTHER MEDICAL ASSISTANCE	242	0	(242)
6	CHAMPUS / TRICARE	58	84	26
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	870	925	55
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>33,322</b>	<b>32,147</b>	<b>(1,175)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>44,604</b>	<b>42,530</b>	<b>(2,074)</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.4	(0.1)
2	MEDICARE	5.2	4.7	(0.5)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.8	3.8	0.0
4	MEDICAID	3.7	3.8	0.1
5	OTHER MEDICAL ASSISTANCE	7.6	0.0	(7.6)
6	CHAMPUS / TRICARE	3.1	3.1	0.1
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.2	3.6	(0.5)
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>4.8</b>	<b>4.4</b>	<b>(0.3)</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.4</b>	<b>4.1</b>	<b>(0.2)</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.02963	1.09210	0.06247
2	MEDICARE	1.40688	1.38600	(0.02088)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.90426	0.93073	0.02647
4	MEDICAID	0.90081	0.93073	0.02992
5	OTHER MEDICAL ASSISTANCE	1.13153	0.00000	(1.13153)
6	CHAMPUS / TRICARE	0.91139	0.70038	(0.21101)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.97810	0.97825	0.00015
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.25164</b>	<b>1.24803</b>	<b>(0.00361)</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.18110</b>	<b>1.20127</b>	<b>0.02016</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$145,881,128	\$165,440,521	\$19,559,393
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$100,144,953	\$113,609,361	\$13,464,408
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$45,736,175	\$51,831,160	\$6,094,985
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	31.35%	31.33%	-0.02%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$474,597	\$0	(\$474,597)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$272,514	\$0	(\$272,514)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$3,025,038	\$4,233,596	\$1,208,558
9	BAD DEBTS	\$7,875,420	\$6,461,499	(\$1,413,921)
10	TOTAL UNCOMPENSATED CARE	\$10,900,458	\$10,695,095	(\$205,363)
11	TOTAL OTHER OPERATING REVENUE	\$145,881,128	\$165,440,521	\$19,559,393
12	TOTAL OPERATING EXPENSES	\$203,675,287	\$221,306,295	\$17,631,008

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<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)	3,348.35676	3,383.32580	34.96904
2	MEDICARE	6,789.60288	7,004.84400	215.24112
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,933.31482	2,002.00023	68.68541
4	MEDICAID	1,897.10586	2,002.00023	104.89437
5	OTHER MEDICAL ASSISTANCE	36.20896	0.00000	(36.20896)
6	CHAMPUS / TRICARE	17.31641	18.91026	1.59385
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	204.42290	248.47550	44.05260
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>8,740.23411</b>	<b>9,025.75449</b>	<b>285.52038</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>12,088.59087</b>	<b>12,409.08029</b>	<b>320.48942</b>
<b>B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,115.25163	6,690.65811	575.40648
2	MEDICARE	2,963.68107	3,651.92584	688.24478
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,959.59436	3,734.79757	775.20321
4	MEDICAID	2,917.93213	3,734.79757	816.86544
5	OTHER MEDICAL ASSISTANCE	41.66223	0.00000	-41.66223
6	CHAMPUS / TRICARE	46.83123	52.40143	5.57020
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	450.34724	546.34980	96.00256
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>5,970.10666</b>	<b>7,439.12484</b>	<b>1,469.01818</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>12,085.35829</b>	<b>14,129.78295</b>	<b>2,044.42466</b>
<b>C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,550.14	\$10,592.57	\$42.43
2	MEDICARE	\$7,154.77	\$7,395.85	\$241.09
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,212.99	\$5,509.65	\$296.65
4	MEDICAID	\$5,168.60	\$5,509.65	\$341.05
5	OTHER MEDICAL ASSISTANCE	\$7,538.91	\$0.00	(\$7,538.91)
6	CHAMPUS / TRICARE	\$4,761.44	\$5,569.78	\$808.34
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,483.48	\$1,114.36	(\$369.13)
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$6,720.51</b>	<b>\$6,973.65</b>	<b>\$253.14</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,781.26</b>	<b>\$7,960.34</b>	<b>\$179.08</b>
<b>D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,854.64	\$11,703.80	\$849.16
2	MEDICARE	\$7,240.08	\$6,960.26	(\$279.82)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,782.56	\$3,887.91	\$105.35
4	MEDICAID	\$3,752.19	\$3,887.91	\$135.72
5	OTHER MEDICAL ASSISTANCE	\$5,909.76	\$0.00	(\$5,909.76)
6	CHAMPUS / TRICARE	\$4,339.54	\$3,901.00	(\$438.54)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,154.47	\$1,662.27	\$507.79
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$5,503.31</b>	<b>\$5,396.25</b>	<b>(\$107.07)</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$8,211.11</b>	<b>\$8,382.96</b>	<b>\$171.85</b>

MIDSTATE MEDICAL CENTER				
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	\$10,177,436	\$11,474,605	\$1,297,169
2	OTHER MEDICAL ASSISTANCE	\$41,515	\$0	(\$41,515)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,899,976	\$4,455,357	\$555,380
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$14,118,927</b>	<b>\$15,929,962</b>	<b>\$1,811,035</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$423,415,942	\$479,645,635	\$56,229,693
2	TOTAL GOVERNMENT DEDUCTIONS	\$173,208,128	\$199,889,393	\$26,681,265
3	UNCOMPENSATED CARE	\$10,900,458	\$10,695,095	(\$205,363)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$45,736,175	\$51,831,160	\$6,094,985
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$272,514	\$0	(\$272,514)
6	TOTAL ADJUSTMENTS	\$230,117,275	\$262,415,648	\$32,298,373
7	TOTAL ACCRUED PAYMENTS	\$193,298,667	\$217,229,987	\$23,931,320
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$193,298,667	\$217,229,987	\$23,931,320
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4565219394	0.4528968287	(0.0036251106)
11	COST OF UNCOMPENSATED CARE	\$4,976,298	\$4,843,775	(\$132,524)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$12,188,676	\$15,519,190	\$3,330,514
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$17,164,974	\$20,362,965	\$3,197,991
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	64.15%	64.09%	-0.06%
2	MEDICARE	41.11%	42.24%	1.14%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	32.77%	33.28%	0.51%
4	MEDICAID	32.67%	33.28%	0.61%
5	OTHER MEDICAL ASSISTANCE	36.81%	0.00%	-36.81%
6	CHAMPUS / TRICARE	37.36%	29.82%	-7.55%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	8.94%	7.77%	-1.17%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>39.38%</b>	<b>40.31%</b>	<b>0.93%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>46.06%</b>	<b>46.58%</b>	<b>0.52%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	64.10%	64.85%	0.74%
2	MEDICARE	29.57%	28.68%	-0.88%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	26.31%	25.23%	-1.08%
4	MEDICAID	26.33%	25.23%	-1.10%
5	OTHER MEDICAL ASSISTANCE	25.50%	0.00%	-25.50%
6	CHAMPUS / TRICARE	37.37%	29.82%	-7.55%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	7.12%	11.85%	4.73%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>28.41%</b>	<b>27.34%</b>	<b>-1.07%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>45.27%</b>	<b>44.26%</b>	<b>-1.01%</b>

MIDSTATE MEDICAL CENTER				
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>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	\$193,298,667	\$217,229,986	\$23,931,319
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$193,298,667</b>	<b>\$217,229,986</b>	<b>\$23,931,319</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,456,769	\$1,123,762	(\$2,333,007)
4	<b>CALCULATED NET REVENUE</b>	<b>\$196,755,436</b>	<b>\$218,353,748</b>	<b>\$21,598,312</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$196,755,436	\$218,353,748	\$21,598,312
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$423,415,942	\$479,645,635	\$56,229,693
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$423,415,942</b>	<b>\$479,645,635</b>	<b>\$56,229,693</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$423,415,942	\$479,645,635	\$56,229,693
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</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)	\$10,900,458	\$10,695,095	(\$205,363)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$10,900,458</b>	<b>\$10,695,095</b>	<b>(\$205,363)</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,900,458	\$10,695,095	(\$205,363)
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

MIDSTATE MEDICAL CENTER 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)	\$55,914,210
2	MEDICARE	122,637,612
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	33,140,670
4	MEDICAID	33,140,670
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	353,256
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,563,947
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$156,131,538</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$212,045,748</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$120,756,250
2	MEDICARE	88,615,644
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	57,542,396
4	MEDICAID	57,542,396
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	685,597
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	7,665,991
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$146,843,637</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$267,599,887</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$176,670,460
2	TOTAL GOVERNMENT ACCRUED CHARGES	302,975,175
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$479,645,635</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,838,100
2	MEDICARE	51,806,794
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11,030,318
4	MEDICAID	11,030,318
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	105,326
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	276,890
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$62,942,438</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$98,780,538</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$78,306,104
2	MEDICARE	25,418,361
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,520,565
4	MEDICAID	14,520,565
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	204,418
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	908,179
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$40,143,344</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$118,449,448</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$114,144,204
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	103,085,782
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$217,229,986</b>

<b>MIDSTATE MEDICAL CENTER            TWELVE MONTHS ACTUAL FILING            FISCAL YEAR 2012            REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND            BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,098
2	MEDICARE	5,054
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,151
4	MEDICAID	2,151
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	27
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	254
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>7,232</b>
	<b>TOTAL DISCHARGES</b>	<b>10,330</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.09210
2	MEDICARE	1.38600
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.93073
4	MEDICAID	0.93073
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	0.70038
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.97825
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.24803</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.20127</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$165,440,521
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$113,609,361
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$51,831,160
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	31.33%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$4,233,596
9	BAD DEBTS	\$6,461,499
10	TOTAL UNCOMPENSATED CARE	\$10,695,095
11	TOTAL OTHER OPERATING REVENUE	\$27,519,593
12	TOTAL OPERATING EXPENSES	\$221,306,295

<b>MIDSTATE MEDICAL CENTER            TWELVE MONTHS ACTUAL FILING            FISCAL YEAR 2012            REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND            BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>
<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	\$217,229,986
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$217,229,986</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$1,123,762
	<b>CALCULATED NET REVENUE</b>	<b>\$218,353,748</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$218,353,748
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$479,645,635
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$479,645,635</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$479,645,635
	<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)	\$10,695,095
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$10,695,095</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,695,095
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

MIDSTATE MEDICAL CENTER TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Hospital Charity Care (from HRS Report 500)</b>					
1	Number of Applicants	1,349	3,601	2,252	167%
2	Number of Approved Applicants	1,214	3,421	2,207	182%
3	<b>Total Charges (A)</b>	\$3,025,038	\$4,233,596	\$1,208,558	40%
4	<b>Average Charges</b>	<b>\$2,492</b>	<b>\$1,238</b>	<b>(\$1,254)</b>	<b>-50%</b>
5	Ratio of Cost to Charges (RCC)	0.483227	0.465012	(0.018215)	-4%
6	<b>Total Cost</b>	<b>\$1,461,780</b>	<b>\$1,968,673</b>	<b>\$506,893</b>	<b>35%</b>
7	<b>Average Cost</b>	<b>\$1,204</b>	<b>\$575</b>	<b>(\$629)</b>	<b>-52%</b>
8	Charity Care - Inpatient Charges	\$1,362,740	\$1,394,433	\$31,693	2%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	693,898	1,056,280	362,382	52%
10	Charity Care - Emergency Department Charges	968,400	1,782,883	814,483	84%
11	<b>Total Charges (A)</b>	<b>\$3,025,038</b>	<b>\$4,233,596</b>	<b>\$1,208,558</b>	<b>40%</b>
12	Charity Care - Number of Patient Days	480	576	96	20%
13	Charity Care - Number of Discharges	250	372	122	49%
14	Charity Care - Number of Outpatient ED Visits	1,307	3,596	2,289	175%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	814	1,233	419	51%
<b>B. Hospital Bad Debts (from HRS Report 500)</b>					
1	Bad Debts - Inpatient Services	\$1,904,896	\$1,892,624	(\$12,272)	-1%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,250,658	1,332,821	82,163	7%
3	Bad Debts - Emergency Department	4,719,866	3,236,054	(1,483,812)	-31%
4	<b>Total Bad Debts (A)</b>	<b>\$7,875,420</b>	<b>\$6,461,499</b>	<b>(\$1,413,921)</b>	<b>-18%</b>
<b>C. Hospital Uncompensated Care (from HRS Report 500)</b>					
1	Charity Care (A)	\$3,025,038	\$4,233,596	\$1,208,558	40%
2	Bad Debts (A)	7,875,420	6,461,499	(1,413,921)	-18%
3	<b>Total Uncompensated Care (A)</b>	<b>\$10,900,458</b>	<b>\$10,695,095</b>	<b>(\$205,363)</b>	<b>-2%</b>
4	Uncompensated Care - Inpatient Services	\$3,267,636	\$3,287,057	\$19,421	1%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	1,944,556	2,389,101	444,545	23%
6	Uncompensated Care - Emergency Department	5,688,266	5,018,937	(669,329)	-12%
7	<b>Total Uncompensated Care (A)</b>	<b>\$10,900,458</b>	<b>\$10,695,095</b>	<b>(\$205,363)</b>	<b>-2%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					

MIDSTATE MEDICAL CENTER 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	\$145,881,128	\$165,440,521	\$19,559,393	13%
2	Total Contractual Allowances	\$45,736,175	\$51,831,160	\$6,094,985	13%
	<b>Total Accrued Payments (A)</b>	<b>\$100,144,953</b>	<b>\$113,609,361</b>	<b>\$13,464,408</b>	<b>13%</b>
	<b>Total Discount Percentage</b>	<b>31.35%</b>	<b>31.33%</b>	<b>-0.02%</b>	<b>0%</b>
<b>(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.</b>					

<b>MIDSTATE MEDICAL CENTER</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	\$181,180,626	\$204,208,669	\$212,045,748
2	Outpatient Gross Revenue	\$193,690,236	\$219,207,273	\$267,599,887
3	Total Gross Patient Revenue	\$374,870,862	\$423,415,942	\$479,645,635
4	Net Patient Revenue	\$182,022,152	\$196,755,436	\$218,353,748
<b>B. <u>Total Operating Expenses</u></b>				
1	Total Operating Expense	\$190,181,772	\$203,675,287	\$221,306,295
<b>C. <u>Utilization Statistics</u></b>				
1	Patient Days	42,359	44,604	42,530
2	Discharges	9,818	10,235	10,330
3	Average Length of Stay	4.3	4.4	4.1
4	Equivalent (Adjusted) Patient Days (EPD)	87,643	92,484	96,202
0	Equivalent (Adjusted) Discharges (ED)	20,314	21,222	23,366
<b>D. <u>Case Mix Statistics</u></b>				
1	Case Mix Index	1.18063	1.18110	1.20127
2	Case Mix Adjusted Patient Days (CMAPD)	50,010	52,682	51,090
3	Case Mix Adjusted Discharges (CMAD)	11,591	12,089	12,409
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	103,474	109,233	115,565
5	Case Mix Adjusted Equivalent Discharges (CMAED)	23,983	25,065	28,069
<b>E. <u>Gross Revenue Per Statistic</u></b>				
1	Total Gross Revenue per Patient Day	\$8,850	\$9,493	\$11,278
2	Total Gross Revenue per Discharge	\$38,182	\$41,369	\$46,432
3	Total Gross Revenue per EPD	\$4,277	\$4,578	\$4,986
4	Total Gross Revenue per ED	\$18,454	\$19,952	\$20,527
5	Total Gross Revenue per CMAEPD	\$3,623	\$3,876	\$4,150
6	Total Gross Revenue per CMAED	\$15,631	\$16,893	\$17,088
7	Inpatient Gross Revenue per EPD	\$2,067	\$2,208	\$2,204
8	Inpatient Gross Revenue per ED	\$8,919	\$9,623	\$9,075

<b>MIDSTATE MEDICAL CENTER</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	\$4,297	\$4,411	\$5,134
2	Net Patient Revenue per Discharge	\$18,540	\$19,224	\$21,138
3	Net Patient Revenue per EPD	\$2,077	\$2,127	\$2,270
4	Net Patient Revenue per ED	\$8,960	\$9,271	\$9,345
5	Net Patient Revenue per CMAEPD	\$1,759	\$1,801	\$1,889
6	Net Patient Revenue per CMAED	\$7,590	\$7,850	\$7,779
<b>G. Operating Expense Per Statistic</b>				
1	Total Operating Expense per Patient Day	\$4,490	\$4,566	\$5,204
2	Total Operating Expense per Discharge	\$19,371	\$19,900	\$21,424
3	Total Operating Expense per EPD	\$2,170	\$2,202	\$2,300
4	Total Operating Expense per ED	\$9,362	\$9,597	\$9,471
5	Total Operating Expense per CMAEPD	\$1,838	\$1,865	\$1,915
6	Total Operating Expense per CMAED	\$7,930	\$8,126	\$7,884
<b>H. Nursing Salary and Fringe Benefits Expense</b>				
1	Nursing Salary Expense	\$25,964,260	\$27,000,880	\$28,460,163
2	Nursing Fringe Benefits Expense	\$8,009,974	\$9,772,478	\$10,526,845
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$33,974,234</b>	<b>\$36,773,358</b>	<b>\$38,987,008</b>
<b>I. Physician Salary and Fringe Expense</b>				
1	Physician Salary Expense	\$9,314,012	\$8,870,537	\$7,503,379
2	Physician Fringe Benefits Expense	\$2,873,372	\$3,169,452	\$2,025,011
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$12,187,384</b>	<b>\$12,039,989</b>	<b>\$9,528,390</b>
<b>J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</b>				
1	Non-Nursing, Non-Physician Salary Expense	\$33,947,144	\$37,342,205	\$39,975,318
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$10,476,488	\$13,470,174	\$15,536,997
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$44,423,632</b>	<b>\$50,812,379</b>	<b>\$55,512,315</b>
<b>K. Total Salary and Fringe Benefits Expense</b>				
1	Total Salary Expense	\$69,225,416	\$73,213,622	\$75,938,860
2	Total Fringe Benefits Expense	\$21,359,834	\$26,412,104	\$28,088,853
3	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$90,585,250</b>	<b>\$99,625,726</b>	<b>\$104,027,713</b>

<b>MIDSTATE MEDICAL CENTER</b>				
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<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	308.0	315.5	332.6
2	Total Physician FTEs	51.4	49.7	43.8
3	Total Non-Nursing, Non-Physician FTEs	626.4	653.4	678.2
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>985.8</b>	<b>1,018.6</b>	<b>1,054.6</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$84,300	\$85,581	\$85,569
2	Nursing Fringe Benefits Expense per FTE	\$26,006	\$30,975	\$31,650
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$110,306</b>	<b>\$116,556</b>	<b>\$117,219</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$181,206	\$178,482	\$171,310
2	Physician Fringe Benefits Expense per FTE	\$55,902	\$63,772	\$46,233
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$237,109</b>	<b>\$242,253</b>	<b>\$217,543</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	\$54,194	\$57,151	\$58,943
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$16,725	\$20,616	\$22,909
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$70,919</b>	<b>\$77,766</b>	<b>\$81,852</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$70,223	\$71,877	\$72,007
2	Total Fringe Benefits Expense per FTE	\$21,668	\$25,930	\$26,635
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$91,890</b>	<b>\$97,807</b>	<b>\$98,642</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,139	\$2,234	\$2,446
2	Total Salary and Fringe Benefits Expense per Discharge	\$9,226	\$9,734	\$10,070
3	Total Salary and Fringe Benefits Expense per EPD	\$1,034	\$1,077	\$1,081
4	Total Salary and Fringe Benefits Expense per ED	\$4,459	\$4,695	\$4,452
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$875	\$912	\$900
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,777	\$3,975	\$3,706