

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$9,871,014	\$8,948,706	(\$922,308)	-9%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$13,441,101	\$13,504,471	\$63,370	0%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$971,585	\$840,007	(\$131,578)	-14%
7	Inventories of Supplies	\$2,025,113	\$2,092,246	\$67,133	3%
8	Prepaid Expenses	\$0	\$0	\$0	0%
9	Other Current Assets	\$1,717,026	\$2,724,846	\$1,007,820	59%
	Total Current Assets	\$28,025,839	\$28,110,276	\$84,437	0%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$18,116,227	\$20,525,079	\$2,408,852	13%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$400,278	\$0	(\$400,278)	-100%
4	Other Noncurrent Assets Whose Use is Limited	\$6,989,321	\$7,067,123	\$77,802	1%
	Total Noncurrent Assets Whose Use is Limited:	\$25,505,826	\$27,592,202	\$2,086,376	8%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$33,807,880	\$38,742,293	\$4,934,413	15%
7	Other Noncurrent Assets	\$1,334,720	\$1,135,267	(\$199,453)	-15%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$143,527,470	\$148,532,515	\$5,005,045	3%
2	Less: Accumulated Depreciation	\$106,694,984	\$112,631,179	\$5,936,195	6%
	Property, Plant and Equipment, Net	\$36,832,486	\$35,901,336	(\$931,150)	-3%
3	Construction in Progress	\$1,020,301	\$968,443	(\$51,858)	-5%
	Total Net Fixed Assets	\$37,852,787	\$36,869,779	(\$983,008)	-3%
	Total Assets	\$126,527,052	\$132,449,817	\$5,922,765	5%
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$5,029,676	\$7,289,342	\$2,259,666	45%
2	Salaries, Wages and Payroll Taxes	\$4,027,215	\$4,177,672	\$150,457	4%

CHARLOTTE HUNGERFORD HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012 ACTUAL</u>	<u>FY 2013 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
3	Due To Third Party Payers	\$1,917,192	\$2,468,522	\$551,330	29%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,200,000	\$0	(\$1,200,000)	-100%
6	Current Portion of Notes Payable	\$198,100	\$3,219,468	\$3,021,368	1525%
7	Other Current Liabilities	\$7,726,163	\$4,078,798	(\$3,647,365)	-47%
	Total Current Liabilities	\$20,098,346	\$21,233,802	\$1,135,456	6%
B.	<u>Long Term Debt:</u>				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$3,223,366	\$0	(\$3,223,366)	-100%
	Total Long Term Debt	\$3,223,366	\$0	(\$3,223,366)	-100%
3	Accrued Pension Liability	\$38,287,989	\$23,133,018	(\$15,154,971)	-40%
4	Other Long Term Liabilities	\$3,125,672	\$3,527,218	\$401,546	13%
	Total Long Term Liabilities	\$44,637,027	\$26,660,236	(\$17,976,791)	-40%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	<u>Net Assets:</u>				
1	Unrestricted Net Assets or Equity	\$40,934,207	\$61,139,349	\$20,205,142	49%
2	Temporarily Restricted Net Assets	\$3,236,940	\$3,314,742	\$77,802	2%
3	Permanently Restricted Net Assets	\$17,620,532	\$20,101,688	\$2,481,156	14%
	Total Net Assets	\$61,791,679	\$84,555,779	\$22,764,100	37%
	Total Liabilities and Net Assets	\$126,527,052	\$132,449,817	\$5,922,765	5%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012 ACTUAL</u>	<u>FY 2013 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$237,069,420	\$259,938,572	\$22,869,152	10%
2	Less: Allowances	\$118,988,604	\$136,668,445	\$17,679,841	15%
3	Less: Charity Care	\$1,766,984	\$3,214,518	\$1,447,534	82%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$116,313,832	\$120,055,609	\$3,741,777	3%
5	Provision for Bad Debts	\$0	\$3,378,061	\$3,378,061	0%
	Net Patient Service Revenue less provision for bad debts	\$116,313,832	\$116,677,548	\$363,716	0%
6	Other Operating Revenue	\$5,735,128	\$8,250,545	\$2,515,417	44%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$122,048,960	\$124,928,093	\$2,879,133	2%
B. Operating Expenses:					
1	Salaries and Wages	\$54,928,730	\$58,472,497	\$3,543,767	6%
2	Fringe Benefits	\$16,546,435	\$16,209,800	(\$336,635)	-2%
3	Physicians Fees	\$3,306,463	\$4,669,548	\$1,363,085	41%
4	Supplies and Drugs	\$12,272,846	\$12,520,721	\$247,875	2%
5	Depreciation and Amortization	\$6,060,455	\$6,050,075	(\$10,380)	0%
6	Bad Debts	\$3,125,364	\$0	(\$3,125,364)	-100%
7	Interest Expense	\$264,153	\$250,825	(\$13,328)	-5%
8	Malpractice Insurance Cost	\$1,748,531	\$1,842,449	\$93,918	5%
9	Other Operating Expenses	\$23,629,704	\$24,884,070	\$1,254,366	5%
	Total Operating Expenses	\$121,882,681	\$124,899,985	\$3,017,304	2%
	Income/(Loss) From Operations	\$166,279	\$28,108	(\$138,171)	-83%
C. Non-Operating Revenue:					
1	Income from Investments	\$2,102,513	\$2,298,212	\$195,699	9%
2	Gifts, Contributions and Donations	\$27,952	\$273,527	\$245,575	879%
3	Other Non-Operating Gains/(Losses)	\$118,880	\$93,073	(\$25,807)	-22%
	Total Non-Operating Revenue	\$2,249,345	\$2,664,812	\$415,467	18%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$2,415,624	\$2,692,920	\$277,296	11%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

CHARLOTTE HUNGERFORD HOSPITAL					
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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$2,415,624	\$2,692,920	\$277,296	11%
	Principal Payments	\$1,344,063	\$1,401,998	\$57,935	4%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$49,563,629	\$54,904,987	\$5,341,358	11%
2	MEDICARE MANAGED CARE	\$5,294,301	\$7,113,981	\$1,819,680	34%
3	MEDICAID	\$11,223,800	\$14,098,153	\$2,874,353	26%
4	MEDICAID MANAGED CARE	\$666,923	\$437,891	(\$229,032)	-34%
5	CHAMPUS/TRICARE	\$483,092	\$353,945	(\$129,147)	-27%
6	COMMERCIAL INSURANCE	\$4,108,259	\$2,608,785	(\$1,499,474)	-36%
7	NON-GOVERNMENT MANAGED CARE	\$15,794,964	\$19,441,893	\$3,646,929	23%
8	WORKER'S COMPENSATION	\$817,063	\$859,081	\$42,018	5%
9	SELF- PAY/UNINSURED	\$1,298,459	\$1,590,204	\$291,745	22%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$71,313	\$20,290	(\$51,023)	-72%
	TOTAL INPATIENT GROSS REVENUE	\$89,321,803	\$101,429,210	\$12,107,407	14%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$47,463,367	\$51,138,290	\$3,674,923	8%
2	MEDICARE MANAGED CARE	\$7,111,067	\$9,659,403	\$2,548,336	36%
3	MEDICAID	\$26,472,475	\$32,529,315	\$6,056,840	23%
4	MEDICAID MANAGED CARE	\$3,770,770	\$1,128,215	(\$2,642,555)	-70%
5	CHAMPUS/TRICARE	\$523,735	\$620,095	\$96,360	18%
6	COMMERCIAL INSURANCE	\$10,818,859	\$5,540,715	(\$5,278,144)	-49%
7	NON-GOVERNMENT MANAGED CARE	\$44,876,274	\$50,761,334	\$5,885,060	13%
8	WORKER'S COMPENSATION	\$1,293,897	\$1,465,316	\$171,419	13%
9	SELF- PAY/UNINSURED	\$5,212,131	\$5,513,269	\$301,138	6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$205,041	\$153,409	(\$51,632)	-25%
	TOTAL OUTPATIENT GROSS REVENUE	\$147,747,616	\$158,509,361	\$10,761,745	7%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$97,026,996	\$106,043,277	\$9,016,281	9%
2	MEDICARE MANAGED CARE	\$12,405,368	\$16,773,384	\$4,368,016	35%
3	MEDICAID	\$37,696,275	\$46,627,468	\$8,931,193	24%
4	MEDICAID MANAGED CARE	\$4,437,693	\$1,566,106	(\$2,871,587)	-65%
5	CHAMPUS/TRICARE	\$1,006,827	\$974,040	(\$32,787)	-3%
6	COMMERCIAL INSURANCE	\$14,927,118	\$8,149,500	(\$6,777,618)	-45%
7	NON-GOVERNMENT MANAGED CARE	\$60,671,238	\$70,203,227	\$9,531,989	16%
8	WORKER'S COMPENSATION	\$2,110,960	\$2,324,397	\$213,437	10%
9	SELF- PAY/UNINSURED	\$6,510,590	\$7,103,473	\$592,883	9%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$276,354	\$173,699	(\$102,655)	-37%
	TOTAL GROSS REVENUE	\$237,069,419	\$259,938,571	\$22,869,152	10%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$29,385,497	\$30,589,686	\$1,204,189	4%
2	MEDICARE MANAGED CARE	\$2,930,803	\$3,963,473	\$1,032,670	35%
3	MEDICAID	\$4,710,422	\$4,905,020	\$194,598	4%
4	MEDICAID MANAGED CARE	\$416,744	\$140,182	(\$276,562)	-66%
5	CHAMPUS/TRICARE	\$282,459	\$220,612	(\$61,847)	-22%
6	COMMERCIAL INSURANCE	\$2,460,964	\$1,699,129	(\$761,835)	-31%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$11,198,947	\$12,436,823	\$1,237,876	11%
8	WORKER'S COMPENSATION	\$605,554	\$652,620	\$47,066	8%
9	SELF- PAY/UNINSURED	\$330,637	\$272,165	(\$58,472)	-18%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$30,421	\$18,644	(\$11,777)	-39%
	TOTAL INPATIENT NET REVENUE	\$52,352,448	\$54,898,354	\$2,545,906	5%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$18,547,928	\$18,505,307	(\$42,621)	0%
2	MEDICARE MANAGED CARE	\$2,498,610	\$3,362,046	\$863,436	35%
3	MEDICAID	\$7,758,161	\$10,437,386	\$2,679,225	35%
4	MEDICAID MANAGED CARE	\$1,992,902	\$409,033	(\$1,583,869)	-79%
5	CHAMPUS/TRICARE	\$189,582	\$228,839	\$39,257	21%
6	COMMERCIAL INSURANCE	\$5,418,974	\$2,136,171	(\$3,282,803)	-61%
7	NON-GOVERNMENT MANAGED CARE	\$21,800,642	\$25,522,388	\$3,721,746	17%
8	WORKER'S COMPENSATION	\$1,059,323	\$1,008,717	(\$50,606)	-5%
9	SELF- PAY/UNINSURED	\$1,327,208	\$943,602	(\$383,606)	-29%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$37,780	\$31,406	(\$6,374)	-17%
	TOTAL OUTPATIENT NET REVENUE	\$60,631,110	\$62,584,895	\$1,953,785	3%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$47,933,425	\$49,094,993	\$1,161,568	2%
2	MEDICARE MANAGED CARE	\$5,429,413	\$7,325,519	\$1,896,106	35%
3	MEDICAID	\$12,468,583	\$15,342,406	\$2,873,823	23%
4	MEDICAID MANAGED CARE	\$2,409,646	\$549,215	(\$1,860,431)	-77%
5	CHAMPUS/TRICARE	\$472,041	\$449,451	(\$22,590)	-5%
6	COMMERCIAL INSURANCE	\$7,879,938	\$3,835,300	(\$4,044,638)	-51%
7	NON-GOVERNMENT MANAGED CARE	\$32,999,589	\$37,959,211	\$4,959,622	15%
8	WORKER'S COMPENSATION	\$1,664,877	\$1,661,337	(\$3,540)	0%
9	SELF- PAY/UNINSURED	\$1,657,845	\$1,215,767	(\$442,078)	-27%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$68,201	\$50,050	(\$18,151)	-27%
	TOTAL NET REVENUE	\$112,983,558	\$117,483,249	\$4,499,691	4%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	3,163	3,113	(50)	-2%
2	MEDICARE MANAGED CARE	319	397	78	24%
3	MEDICAID	1,020	1,136	116	11%
4	MEDICAID MANAGED CARE	83	31	(52)	-63%
5	CHAMPUS/TRICARE	31	32	1	3%
6	COMMERCIAL INSURANCE	337	397	60	18%
7	NON-GOVERNMENT MANAGED CARE	1,240	1,192	(48)	-4%
8	WORKER'S COMPENSATION	29	32	3	10%
9	SELF- PAY/UNINSURED	114	200	86	75%
10	SAGA	0	0	0	0%
11	OTHER	2	3	1	50%
	TOTAL DISCHARGES	6,338	6,533	195	3%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	14,049	14,227	178	1%
2	MEDICARE MANAGED CARE	1,344	1,655	311	23%
3	MEDICAID	3,937	4,494	557	14%

CHARLOTTE HUNGERFORD HOSPITAL					
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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	235	109	(126)	-54%
5	CHAMPUS/TRICARE	120	132	12	10%
6	COMMERCIAL INSURANCE	1,135	1,446	311	27%
7	NON-GOVERNMENT MANAGED CARE	3,943	3,715	(228)	-6%
8	WORKER'S COMPENSATION	63	95	32	51%
9	SELF- PAY/UNINSURED	392	696	304	78%
10	SAGA	0	0	0	0%
11	OTHER	31	5	(26)	-84%
	TOTAL PATIENT DAYS	25,249	26,574	1,325	5%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	75,495	77,205	1,710	2%
2	MEDICARE MANAGED CARE	11,354	14,176	2,822	25%
3	MEDICAID	35,076	40,002	4,926	14%
4	MEDICAID MANAGED CARE	5,649	1,469	(4,180)	-74%
5	CHAMPUS/TRICARE	707	742	35	5%
6	COMMERCIAL INSURANCE	17,982	17,781	(201)	-1%
7	NON-GOVERNMENT MANAGED CARE	71,553	64,730	(6,823)	-10%
8	WORKER'S COMPENSATION	1,462	1,282	(180)	-12%
9	SELF- PAY/UNINSURED	10,861	11,915	1,054	10%
10	SAGA	0	0	0	0%
11	OTHER	231	153	(78)	-34%
	TOTAL OUTPATIENT VISITS	230,370	229,455	(915)	0%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$9,265,065	\$9,763,336	\$498,271	5%
2	MEDICARE MANAGED CARE	\$1,096,262	\$1,426,960	\$330,698	30%
3	MEDICAID	\$10,463,251	\$12,853,422	\$2,390,171	23%
4	MEDICAID MANAGED CARE	\$1,361,416	\$269,400	(\$1,092,016)	-80%
5	CHAMPUS/TRICARE	\$243,687	\$258,930	\$15,243	6%
6	COMMERCIAL INSURANCE	\$2,547,650	\$2,696,856	\$149,206	6%
7	NON-GOVERNMENT MANAGED CARE	\$9,789,468	\$9,351,814	(\$437,654)	-4%
8	WORKER'S COMPENSATION	\$574,624	\$613,935	\$39,311	7%
9	SELF- PAY/UNINSURED	\$2,620,861	\$2,731,280	\$110,419	4%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$158,693	\$123,102	(\$35,591)	-22%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$38,120,977	\$40,089,035	\$1,968,058	5%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$2,943,718	\$2,261,948	(\$681,770)	-23%
2	MEDICARE MANAGED CARE	\$345,171	\$358,103	\$12,932	4%
3	MEDICAID	\$2,977,182	\$3,678,697	\$701,515	24%
4	MEDICAID MANAGED CARE	\$577,745	\$72,549	(\$505,196)	-87%
5	CHAMPUS/TRICARE	\$67,787	\$65,920	(\$1,867)	-3%
6	COMMERCIAL INSURANCE	\$1,423,129	\$1,270,620	(\$152,509)	-11%
7	NON-GOVERNMENT MANAGED CARE	\$4,782,192	\$3,916,626	(\$865,566)	-18%
8	WORKER'S COMPENSATION	\$421,447	\$512,680	\$91,233	22%
9	SELF- PAY/UNINSURED	\$232,316	\$1,593,082	\$1,360,766	586%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$32,060	\$33,743	\$1,683	5%

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$13,802,747	\$13,763,968	(\$38,779)	0%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	7,612	7,816	204	3%
2	MEDICARE MANAGED CARE	922	1,062	140	15%
3	MEDICAID	9,822	11,635	1,813	18%
4	MEDICAID MANAGED CARE	1,672	221	(1,451)	-87%
5	CHAMPUS/TRICARE	246	235	(11)	-4%
6	COMMERCIAL INSURANCE	2,437	2,382	(55)	-2%
7	NON-GOVERNMENT MANAGED CARE	9,358	8,439	(919)	-10%
8	WORKER'S COMPENSATION	737	692	(45)	-6%
9	SELF- PAY/UNINSURED	2,849	3,198	349	12%
10	SAGA	0	0	0	0%
11	OTHER	157	110	(47)	-30%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	35,812	35,790	(22)	0%

**CHARLOTTE HUNGERFORD HOSPITAL
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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$21,604,919	\$22,590,903	\$985,984	5%
2	Physician Salaries	\$7,857,318	\$8,984,103	\$1,126,785	14%
3	Non-Nursing, Non-Physician Salaries	\$25,466,493	\$26,897,491	\$1,430,998	6%
	Total Salaries & Wages	\$54,928,730	\$58,472,497	\$3,543,767	6%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$6,508,150	\$6,262,671	(\$245,479)	-4%
2	Physician Fringe Benefits	\$2,366,896	\$2,490,581	\$123,685	5%
3	Non-Nursing, Non-Physician Fringe Benefits	\$7,671,389	\$7,456,548	(\$214,841)	-3%
	Total Fringe Benefits	\$16,546,435	\$16,209,800	(\$336,635)	-2%
C. Contractual Labor Fees:					
1	Nursing Fees	\$639,573	\$613,655	(\$25,918)	-4%
2	Physician Fees	\$3,306,463	\$4,669,548	\$1,363,085	41%
3	Non-Nursing, Non-Physician Fees	\$438,753	\$234,519	(\$204,234)	-47%
	Total Contractual Labor Fees	\$4,384,789	\$5,517,722	\$1,132,933	26%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$8,625,979	\$8,819,965	\$193,986	2%
2	Pharmaceutical Costs	\$3,646,867	\$3,700,756	\$53,889	1%
	Total Medical Supplies and Pharmaceutical Cost	\$12,272,846	\$12,520,721	\$247,875	2%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$3,121,665	\$3,129,852	\$8,187	0%
2	Depreciation-Equipment	\$2,869,560	\$2,846,058	(\$23,502)	-1%
3	Amortization	\$69,230	\$74,165	\$4,935	7%
	Total Depreciation and Amortization	\$6,060,455	\$6,050,075	(\$10,380)	0%
F. Bad Debts:					
1	Bad Debts	\$3,125,364	\$0	(\$3,125,364)	-100%
G. Interest Expense:					
1	Interest Expense	\$264,153	\$250,825	(\$13,328)	-5%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$1,748,531	\$1,842,449	\$93,918	5%
I. Utilities:					
1	Water	\$50,888	\$58,435	\$7,547	15%
2	Natural Gas	\$462,973	\$474,363	\$11,390	2%
3	Oil	\$11,267	\$15,980	\$4,713	42%
4	Electricity	\$1,300,775	\$1,242,732	(\$58,043)	-4%
5	Telephone	\$260,422	\$233,223	(\$27,199)	-10%
6	Other Utilities	\$51,565	\$53,835	\$2,270	4%
	Total Utilities	\$2,137,890	\$2,078,568	(\$59,322)	-3%
J. Business Expenses:					
1	Accounting Fees	\$131,256	\$109,008	(\$22,248)	-17%
2	Legal Fees	\$257,120	\$253,533	(\$3,587)	-1%
3	Consulting Fees	\$466,384	\$570,512	\$104,128	22%

**CHARLOTTE HUNGERFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013**

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	Dues and Membership	\$330,293	\$359,416	\$29,123	9%
5	Equipment Leases	\$1,304,916	\$1,297,634	(\$7,282)	-1%
6	Building Leases	\$990,352	\$1,103,507	\$113,155	11%
7	Repairs and Maintenance	\$1,942,055	\$2,525,670	\$583,615	30%
8	Insurance	\$270,076	\$283,124	\$13,048	5%
9	Travel	\$60,934	\$33,726	(\$27,208)	-45%
10	Conferences	\$60,224	\$166,304	\$106,080	176%
11	Property Tax	\$209,737	\$208,552	(\$1,185)	-1%
12	General Supplies	\$652,487	\$736,066	\$83,579	13%
13	Licenses and Subscriptions	\$106,523	\$145,149	\$38,626	36%
14	Postage and Shipping	\$141,465	\$146,736	\$5,271	4%
15	Advertising	\$266,455	\$250,728	(\$15,727)	-6%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$1,336,103	\$1,336,296	\$193	0%
18	Computer hardware & small equipment	\$374,457	\$437,390	\$62,933	17%
19	Dietary / Food Services	\$1,749,668	\$1,822,885	\$73,217	4%
20	Lab Fees / Red Cross charges	\$2,641,805	\$2,290,720	(\$351,085)	-13%
21	Billing & Collection / Bank Fees	\$535,277	\$491,282	(\$43,995)	-8%
22	Recruiting / Employee Education & Recognition	\$445,308	\$393,613	(\$51,695)	-12%
23	Laundry / Linen	\$511,165	\$519,379	\$8,214	2%
24	Professional / Physician Fees	\$29,869	\$29,693	(\$176)	-1%
25	Waste disposal	\$134,908	\$154,468	\$19,560	14%
26	Purchased Services - Medical	\$874,035	\$1,033,842	\$159,807	18%
27	Purchased Services - Non Medical	\$3,760,818	\$4,124,487	\$363,669	10%
28	Other Business Expenses	\$780,721	\$1,110,989	\$330,268	42%
	Total Business Expenses	\$20,364,411	\$21,934,709	\$1,570,298	8%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$49,077	\$22,619	(\$26,458)	-54%
	Total Operating Expenses - All Expense Categories*	\$121,882,681	\$124,899,985	\$3,017,304	2%
	*A.-K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$32,240,541	\$29,263,477	(\$2,977,064)	-9%
2	General Accounting	\$869,256	\$877,749	\$8,493	1%
3	Patient Billing & Collection	\$1,189,245	\$1,176,951	(\$12,294)	-1%
4	Admitting / Registration Office	\$1,210,326	\$1,207,135	(\$3,191)	0%
5	Data Processing	\$2,857,814	\$3,340,256	\$482,442	17%
6	Communications	\$302,798	\$289,800	(\$12,998)	-4%
7	Personnel	\$833,216	\$1,048,041	\$214,825	26%
8	Public Relations	\$500,772	\$459,022	(\$41,750)	-8%
9	Purchasing	\$955,409	\$765,511	(\$189,898)	-20%
10	Dietary and Cafeteria	\$1,586,480	\$1,610,770	\$24,290	2%
11	Housekeeping	\$1,597,443	\$1,512,537	(\$84,906)	-5%
12	Laundry & Linen	\$531,515	\$529,202	(\$2,313)	0%
13	Operation of Plant	\$1,842,087	\$1,983,474	\$141,387	8%
14	Security	\$307,069	\$309,577	\$2,508	1%
15	Repairs and Maintenance	\$704,313	\$880,372	\$176,059	25%
16	Central Sterile Supply	\$402,478	\$422,444	\$19,966	5%

CHARLOTTE HUNGERFORD HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2013

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
17	Pharmacy Department	\$4,789,318	\$4,873,185	\$83,867	2%
18	Other General Services	\$0	\$0	\$0	0%
	Total General Services	\$52,720,080	\$50,549,503	(\$2,170,577)	-4%
	B. Professional Services:				
1	Medical Care Administration	\$668,938	\$683,458	\$14,520	2%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,303,152	\$1,350,351	\$47,199	4%
4	Medical Records	\$2,049,493	\$1,996,826	(\$52,667)	-3%
5	Social Service	\$1,394,999	\$1,490,296	\$95,297	7%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$5,416,582	\$5,520,931	\$104,349	2%
	C. Special Services:				
1	Operating Room	\$6,834,895	\$6,935,832	\$100,937	1%
2	Recovery Room	\$514,074	\$674,796	\$160,722	31%
3	Anesthesiology	\$195,221	\$213,591	\$18,370	9%
4	Delivery Room	\$605,796	\$695,595	\$89,799	15%
5	Diagnostic Radiology	\$3,085,284	\$2,941,459	(\$143,825)	-5%
6	Diagnostic Ultrasound	\$412,212	\$417,796	\$5,584	1%
7	Radiation Therapy	\$1,587,744	\$1,867,292	\$279,548	18%
8	Radioisotopes	\$445,420	\$375,872	(\$69,548)	-16%
9	CT Scan	\$725,805	\$754,602	\$28,797	4%
10	Laboratory	\$6,556,019	\$6,201,518	(\$354,501)	-5%
11	Blood Storing/Processing	\$1,118,312	\$1,085,406	(\$32,906)	-3%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$257,295	\$246,648	(\$10,647)	-4%
14	Electroencephalography	\$4,882	\$12,863	\$7,981	163%
15	Occupational Therapy	\$29,373	\$96,076	\$66,703	227%
16	Speech Pathology	\$52,453	\$62,629	\$10,176	19%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$843,344	\$894,513	\$51,169	6%
19	Pulmonary Function	\$233,169	\$247,358	\$14,189	6%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$4,581,600	\$5,071,382	\$489,782	11%
23	Renal Dialysis	\$141,628	\$179,437	\$37,809	27%
24	Emergency Room	\$6,160,646	\$6,729,539	\$568,893	9%
25	MRI	\$262,902	\$281,375	\$18,473	7%
26	PET Scan	\$138,402	\$182,813	\$44,411	32%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$349,381	\$389,648	\$40,267	12%
29	Sleep Center	\$423,636	\$527,035	\$103,399	24%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$322,430	\$349,241	\$26,811	8%
32	Occupational Therapy / Physical Therapy	\$910,931	\$963,081	\$52,150	6%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$94,044	\$113,269	\$19,225	20%
	Total Special Services	\$36,886,898	\$38,510,666	\$1,623,768	4%
	D. Routine Services:				
1	Medical & Surgical Units	\$7,125,530	\$7,474,652	\$349,122	5%
2	Intensive Care Unit	\$2,208,523	\$2,552,372	\$343,849	16%
3	Coronary Care Unit	\$0	\$0	\$0	0%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	Psychiatric Unit	\$2,606,104	\$2,854,438	\$248,334	10%
5	Pediatric Unit	\$839,890	\$963,633	\$123,743	15%
6	Maternity Unit	\$892,990	\$846,042	(\$46,948)	-5%
7	Newborn Nursery Unit	\$286,782	\$327,067	\$40,285	14%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$606,896	\$610,049	\$3,153	1%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$10,413,076	\$12,498,989	\$2,085,913	20%
13	Other Routine Services	\$1,572,968	\$1,913,976	\$341,008	22%
	Total Routine Services	\$26,552,759	\$30,041,218	\$3,488,459	13%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$306,362	\$277,667	(\$28,695)	-9%
	Total Operating Expenses - All Departments*	\$121,882,681	\$124,899,985	\$3,017,304	2%
*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.					

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$109,579,717	\$116,313,832	\$116,677,548
2	Other Operating Revenue	4,949,386	5,735,128	8,250,545
3	Total Operating Revenue	\$114,529,103	\$122,048,960	\$124,928,093
4	Total Operating Expenses	113,880,767	121,882,681	124,899,985
5	Income/(Loss) From Operations	\$648,336	\$166,279	\$28,108
6	Total Non-Operating Revenue	2,011,113	2,249,345	2,664,812
7	Excess/(Deficiency) of Revenue Over Expenses	\$2,659,449	\$2,415,624	\$2,692,920
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	0.56%	0.13%	0.02%
2	Hospital Non Operating Margin	1.73%	1.81%	2.09%
3	Hospital Total Margin	2.28%	1.94%	2.11%
4	Income/(Loss) From Operations	\$648,336	\$166,279	\$28,108
5	Total Operating Revenue	\$114,529,103	\$122,048,960	\$124,928,093
6	Total Non-Operating Revenue	\$2,011,113	\$2,249,345	\$2,664,812
7	Total Revenue	\$116,540,216	\$124,298,305	\$127,592,905
8	Excess/(Deficiency) of Revenue Over Expenses	\$2,659,449	\$2,415,624	\$2,692,920
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$47,062,165	\$40,934,207	\$61,139,349
2	Hospital Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779
3	Hospital Change in Total Net Assets	\$7,444,266	(\$4,194,171)	\$22,764,100
4	Hospital Change in Total Net Assets %	112.7%	-6.4%	36.8%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.53	0.50	0.47
2	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985
3	Total Gross Revenue	\$208,629,597	\$237,069,419	\$259,938,571
4	Total Other Operating Revenue	\$4,949,386	\$5,735,128	\$8,250,545

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
5	<u>Private Payment to Cost Ratio</u>	1.07	1.09	1.16
6	Total Non-Government Payments	\$41,153,855	\$44,202,249	\$44,671,615
7	Total Uninsured Payments	\$1,467,954	\$1,657,845	\$1,215,767
8	Total Non-Government Charges	\$74,660,403	\$84,219,906	\$87,780,597
9	Total Uninsured Charges	\$5,160,009	\$6,510,590	\$7,103,473
10	<u>Medicare Payment to Cost Ratio</u>	1.01	0.97	0.99
11	Total Medicare Payments	\$50,742,113	\$53,362,838	\$56,420,512
12	Total Medicare Charges	\$94,315,886	\$109,432,364	\$122,816,661
13	<u>Medicaid Payment to Cost Ratio</u>	0.72	0.70	0.71
14	Total Medicaid Payments	\$14,852,649	\$14,878,229	\$15,891,621
15	Total Medicaid Charges	\$38,541,692	\$42,133,968	\$48,193,574
16	<u>Uncompensated Care Cost</u>	\$2,056,056	\$2,455,854	\$3,070,270
17	Charity Care	\$1,726,098	\$1,766,984	\$3,214,518
18	Bad Debts	\$2,129,955	\$3,125,364	\$3,378,061
19	Total Uncompensated Care	\$3,856,053	\$4,892,348	\$6,592,579
20	<u>Uncompensated Care % of Total Expenses</u>	1.8%	2.0%	2.5%
21	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1	1	1
2	Total Current Assets	\$25,471,279	\$28,025,839	\$28,110,276
3	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802
4	<u>Days Cash on Hand</u>	29	31	27
5	Cash and Cash Equivalents	\$8,455,576	\$9,871,014	\$8,948,706
6	Short Term Investments	0	0	0

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
7	Total Cash and Short Term Investments	\$8,455,576	\$9,871,014	\$8,948,706
8	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985
9	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
10	Operating Expenses less Depreciation Expense	\$107,702,685	\$115,822,226	\$118,849,910
11	<u>Days Revenue in Patient Accounts Receivable</u>	37	39	37
12	Net Patient Accounts Receivable	\$11,144,540	\$13,441,101	\$13,504,471
13	Due From Third Party Payers	\$1,516,187	\$971,585	\$840,007
14	Due To Third Party Payers	\$1,693,818	\$1,917,192	\$2,468,522
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$10,966,909	\$12,495,494	\$11,875,956
16	Total Net Patient Revenue	\$109,579,717	\$116,313,832	\$116,677,548
17	<u>Average Payment Period</u>	65	63	65
18	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802
19	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985
20	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
21	Total Operating Expenses less Depreciation Expense	\$107,702,685	\$115,822,226	\$118,849,910
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	55.5	48.8	63.8
2	Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779
3	Total Assets	\$118,826,510	\$126,527,052	\$132,449,817
4	<u>Cash Flow to Total Debt Ratio</u>	37.2	36.3	41.2
5	Excess/(Deficiency) of Revenues Over Expenses	\$2,659,449	\$2,415,624	\$2,692,920
6	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
7	Excess of Revenues Over Expenses and Depreciation Expense	\$8,837,531	\$8,476,079	\$8,742,995
8	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802
9	Total Long Term Debt	\$4,624,338	\$3,223,366	\$0
10	Total Current Liabilities and Total Long Term Debt	\$23,785,996	\$23,321,712	\$21,233,802

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u> <u>FY 2011</u>	<u>ACTUAL</u> <u>FY 2012</u>	<u>ACTUAL</u> <u>FY 2013</u>
11	<u>Long Term Debt to Capitalization Ratio</u>	6.5	5.0	-
12	Total Long Term Debt	\$4,624,338	\$3,223,366	\$0
13	Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779
14	Total Long Term Debt and Total Net Assets	\$70,610,188	\$65,015,045	\$84,555,779
15	<u>Debt Service Coverage Ratio</u>	5.3	5.4	5.4
16	Excess Revenues over Expenses	2,659,449	\$2,415,624	\$2,692,920
17	Interest Expense	308,286	\$264,153	\$250,825
18	Depreciation and Amortization Expense	6,178,082	\$6,060,455	\$6,050,075
19	Principal Payments	1,411,317	\$1,344,063	\$1,401,998
G.	<u>Other Financial Ratios</u>			
20	<u>Average Age of Plant</u>	16.6	17.6	18.6
21	Accumulated Depreciation	102,493,235	106,694,984	112,631,179
22	Depreciation and Amortization Expense	6,178,082	6,060,455	6,050,075
H.	<u>Utilization Measures Summary</u>			
1	Patient Days	27,425	25,249	26,574
2	Discharges	6,512	6,338	6,533
3	ALOS	4.2	4.0	4.1
4	Staffed Beds	81	75	77
5	Available Beds	-	122	122
6	Licensed Beds	122	122	122
7	Occupancy of Staffed Beds	92.8%	92.2%	94.6%
8	Occupancy of Available Beds	61.6%	56.7%	59.7%
9	Full Time Equivalent Employees	744.3	768.4	789.0
I.	<u>Hospital Gross Revenue Payer Mix Percentage</u>			
1	Non-Government Gross Revenue Payer Mix Percentage	33.3%	32.8%	31.0%
2	Medicare Gross Revenue Payer Mix Percentage	45.2%	46.2%	47.2%

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
3	Medicaid Gross Revenue Payer Mix Percentage	18.5%	17.8%	18.5%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
5	Uninsured Gross Revenue Payer Mix Percentage	2.5%	2.7%	2.7%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.4%	0.4%	0.4%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$69,500,394	\$77,709,316	\$80,677,124
9	Medicare Gross Revenue (Charges)	\$94,315,886	\$109,432,364	\$122,816,661
10	Medicaid Gross Revenue (Charges)	\$38,541,692	\$42,133,968	\$48,193,574
11	Other Medical Assistance Gross Revenue (Charges)	\$232,999	\$276,354	\$173,699
12	Uninsured Gross Revenue (Charges)	\$5,160,009	\$6,510,590	\$7,103,473
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$878,617	\$1,006,827	\$974,040
14	Total Gross Revenue (Charges)	\$208,629,597	\$237,069,419	\$259,938,571
J.	Hospital Net Revenue Payer Mix Percentage			
1	Non-Government Net Revenue Payer Mix Percentage	37.0%	37.7%	37.0%
2	Medicare Net Revenue Payer Mix Percentage	47.3%	47.2%	48.0%
3	Medicaid Net Revenue Payer Mix Percentage	13.8%	13.2%	13.5%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.1%	0.1%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	1.4%	1.5%	1.0%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.4%	0.4%	0.4%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$39,685,901	\$42,544,404	\$43,455,848
9	Medicare Net Revenue (Payments)	\$50,742,113	\$53,362,838	\$56,420,512
10	Medicaid Net Revenue (Payments)	\$14,852,649	\$14,878,229	\$15,891,621
11	Other Medical Assistance Net Revenue (Payments)	\$67,869	\$68,201	\$50,050
12	Uninsured Net Revenue (Payments)	\$1,467,954	\$1,657,845	\$1,215,767
13	CHAMPUS / TRICARE Net Revenue Payments)	\$459,226	\$472,041	\$449,451
14	Total Net Revenue (Payments)	\$107,275,712	\$112,983,558	\$117,483,249
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	1,747	1,720	1,821
2	Medicare	3,532	3,482	3,510
3	Medical Assistance	1,200	1,105	1,170
4	Medicaid	1,192	1,103	1,167
5	Other Medical Assistance	8	2	3
6	CHAMPUS / TRICARE	33	31	32

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
7	Uninsured (Included In Non-Government)	90	114	200
8	Total	6,512	6,338	6,533
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.15440	1.16030	1.08960
2	Medicare	1.40620	1.35650	1.44760
3	Medical Assistance	0.97323	1.00831	1.04819
4	Medicaid	0.97260	1.00740	1.04800
5	Other Medical Assistance	1.06700	1.51200	1.12350
6	CHAMPUS / TRICARE	1.15050	1.06440	1.00330
7	Uninsured (Included In Non-Government)	0.97450	1.09030	1.02690
8	Total Case Mix Index	1.25757	1.24112	1.27411
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	5,055	5,066	5,182
2	Emergency Room - Treated and Discharged	34,480	35,812	35,790
3	Total Emergency Room Visits	39,535	40,878	40,972

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$236,294	\$439,418	\$203,124	86%
2	Inpatient Payments	\$111,324	\$205,951	\$94,627	85%
3	Outpatient Charges	\$245,783	\$537,003	\$291,220	118%
4	Outpatient Payments	\$74,674	\$166,622	\$91,948	123%
5	Discharges	17	23	6	35%
6	Patient Days	70	92	22	31%
7	Outpatient Visits (Excludes ED Visits)	472	822	350	74%
8	Emergency Department Outpatient Visits	39	71	32	82%
9	Emergency Department Inpatient Admissions	17	21	4	24%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$482,077	\$976,421	\$494,344	103%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$185,998	\$372,573	\$186,575	100%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$2,887,477	\$2,950,906	\$63,429	2%
2	Inpatient Payments	\$1,550,570	\$1,703,814	\$153,244	10%
3	Outpatient Charges	\$3,597,401	\$4,194,625	\$597,224	17%
4	Outpatient Payments	\$1,247,567	\$1,437,328	\$189,761	15%
5	Discharges	164	171	7	4%
6	Patient Days	673	677	4	1%
7	Outpatient Visits (Excludes ED Visits)	5,403	6,018	615	11%
8	Emergency Department Outpatient Visits	409	421	12	3%
9	Emergency Department Inpatient Admissions	133	149	16	12%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,484,878	\$7,145,531	\$660,653	10%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,798,137	\$3,141,142	\$343,005	12%
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$85,793	\$227,820	\$142,027	166%
2	Inpatient Payments	\$52,677	\$115,019	\$62,342	118%
3	Outpatient Charges	\$47,539	\$79,451	\$31,912	67%
4	Outpatient Payments	\$10,120	\$31,376	\$21,256	210%
5	Discharges	5	10	5	100%
6	Patient Days	24	76	52	217%
7	Outpatient Visits (Excludes ED Visits)	51	91	40	78%
8	Emergency Department Outpatient Visits	18	28	10	56%
9	Emergency Department Inpatient Admissions	4	9	5	125%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$133,332	\$307,271	\$173,939	130%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$62,797	\$146,395	\$83,598	133%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$779	\$0	(\$779)	-100%
4	Outpatient Payments	\$295	\$0	(\$295)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	3	0	(3)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$779	\$0	(\$779)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$295	\$0	(\$295)	-100%
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$1,318,395	\$1,725,808	\$407,413	31%
2	Inpatient Payments	\$708,239	\$955,750	\$247,511	35%
3	Outpatient Charges	\$2,028,879	\$2,494,934	\$466,055	23%
4	Outpatient Payments	\$727,090	\$868,538	\$141,448	19%
5	Discharges	86	100	14	16%
6	Patient Days	369	394	25	7%
7	Outpatient Visits (Excludes ED Visits)	2,631	2,995	364	14%
8	Emergency Department Outpatient Visits	310	309	(1)	0%
9	Emergency Department Inpatient Admissions	75	86	11	15%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,347,274	\$4,220,742	\$873,468	26%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,435,329	\$1,824,288	\$388,959	27%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$6,177	\$0	(\$6,177)	-100%
4	Outpatient Payments	\$2,733	\$0	(\$2,733)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	3	0	(3)	-100%
8	Emergency Department Outpatient Visits	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,177	\$0	(\$6,177)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,733	\$0	(\$2,733)	-100%
I. AETNA					

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Charges	\$766,342	\$1,770,029	\$1,003,687	131%
2	Inpatient Payments	\$507,993	\$982,939	\$474,946	93%
3	Outpatient Charges	\$1,128,387	\$2,353,390	\$1,225,003	109%
4	Outpatient Payments	\$420,967	\$858,182	\$437,215	104%
5	Discharges	47	93	46	98%
6	Patient Days	208	416	208	100%
7	Outpatient Visits (Excludes ED Visits)	1,829	3,188	1,359	74%
8	Emergency Department Outpatient Visits	138	233	95	69%
9	Emergency Department Inpatient Admissions	46	70	24	52%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,894,729	\$4,123,419	\$2,228,690	118%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$928,960	\$1,841,121	\$912,161	98%
J.	HUMANA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$41,976	\$0	(\$41,976)	-100%
4	Outpatient Payments	\$11,301	\$0	(\$11,301)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	23	0	(23)	-100%
8	Emergency Department Outpatient Visits	6	0	(6)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$41,976	\$0	(\$41,976)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$11,301	\$0	(\$11,301)	-100%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$6,691	\$0	(\$6,691)	-100%
4	Outpatient Payments	\$1,727	\$0	(\$1,727)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	3	0	(3)	-100%
8	Emergency Department Outpatient Visits	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,691	\$0	(\$6,691)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,727	\$0	(\$1,727)	-100%
L.	UNICARE LIFE & HEALTH INSURANCE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
M.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	Outpatient Charges	\$3,284	\$0	(\$3,284)	-100%
4	Outpatient Payments	\$902	\$0	(\$902)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	9	0	(9)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,284	\$0	(\$3,284)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$902	\$0	(\$902)	-100%
N.	EVERCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$4,171	\$0	(\$4,171)	-100%
4	Outpatient Payments	\$1,234	\$0	(\$1,234)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	5	0	(5)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,171	\$0	(\$4,171)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,234	\$0	(\$1,234)	-100%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$5,294,301	\$7,113,981	\$1,819,680	34%
	TOTAL INPATIENT PAYMENTS	\$2,930,803	\$3,963,473	\$1,032,670	35%
	TOTAL OUTPATIENT CHARGES	\$7,111,067	\$9,659,403	\$2,548,336	36%
	TOTAL OUTPATIENT PAYMENTS	\$2,498,610	\$3,362,046	\$863,436	35%
	TOTAL DISCHARGES	319	397	78	24%
	TOTAL PATIENT DAYS	1,344	1,655	311	23%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	10,432	13,114	2,682	26%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	922	1,062	140	15%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	275	335	60	22%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,405,368	\$16,773,384	\$4,368,016	35%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,429,413	\$7,325,519	\$1,896,106	35%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$365,986	\$437,891	\$71,905	20%
2	Inpatient Payments	\$247,447	\$140,182	(\$107,265)	-43%
3	Outpatient Charges	\$1,755,382	\$1,128,215	(\$627,167)	-36%
4	Outpatient Payments	\$1,034,498	\$409,033	(\$625,465)	-60%
5	Discharges	43	31	(12)	-28%
6	Patient Days	107	109	2	2%
7	Outpatient Visits (Excludes ED Visits)	1,851	1,248	(603)	-33%
8	Emergency Department Outpatient Visits	1,041	221	(820)	-79%
9	Emergency Department Inpatient Admissions	20	21	1	5%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,121,368	\$1,566,106	(\$555,262)	-26%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,281,945	\$549,215	(\$732,730)	-57%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$115,204	\$0	(\$115,204)	-100%
2	Inpatient Payments	\$60,918	\$0	(\$60,918)	-100%
3	Outpatient Charges	\$813,448	\$0	(\$813,448)	-100%
4	Outpatient Payments	\$362,196	\$0	(\$362,196)	-100%
5	Discharges	15	0	(15)	-100%
6	Patient Days	68	0	(68)	-100%
7	Outpatient Visits (Excludes ED Visits)	1,003	0	(1,003)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	13	0	(13)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$928,652	\$0	(\$928,652)	-100%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$423,114	\$0	(\$423,114)	-100%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F.	FIRST CHOICE OF CONNECTICUT, PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$54,283	\$0	(\$54,283)	-100%
2	Inpatient Payments	\$21,291	\$0	(\$21,291)	-100%
3	Outpatient Charges	\$199,890	\$0	(\$199,890)	-100%
4	Outpatient Payments	\$113,568	\$0	(\$113,568)	-100%
5	Discharges	7	0	(7)	-100%
6	Patient Days	16	0	(16)	-100%
7	Outpatient Visits (Excludes ED Visits)	213	0	(213)	-100%
8	Emergency Department Outpatient Visits	101	0	(101)	-100%
9	Emergency Department Inpatient Admissions	1	0	(1)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$254,173	\$0	(\$254,173)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$134,859	\$0	(\$134,859)	-100%
H.	AETNA				
1	Inpatient Charges	\$131,450	\$0	(\$131,450)	-100%
2	Inpatient Payments	\$87,088	\$0	(\$87,088)	-100%
3	Outpatient Charges	\$1,002,050	\$0	(\$1,002,050)	-100%
4	Outpatient Payments	\$482,640	\$0	(\$482,640)	-100%
5	Discharges	18	0	(18)	-100%
6	Patient Days	44	0	(44)	-100%
7	Outpatient Visits (Excludes ED Visits)	910	0	(910)	-100%
8	Emergency Department Outpatient Visits	530	0	(530)	-100%
9	Emergency Department Inpatient Admissions	6	0	(6)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,133,500	\$0	(\$1,133,500)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$569,728	\$0	(\$569,728)	-100%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$666,923	\$437,891	(\$229,032)	-34%
	TOTAL INPATIENT PAYMENTS	\$416,744	\$140,182	(\$276,562)	-66%
	TOTAL OUTPATIENT CHARGES	\$3,770,770	\$1,128,215	(\$2,642,555)	-70%
	TOTAL OUTPATIENT PAYMENTS	\$1,992,902	\$409,033	(\$1,583,869)	-79%
	TOTAL DISCHARGES	83	31	(52)	-63%
	TOTAL PATIENT DAYS	235	109	(126)	-54%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	3,977	1,248	(2,729)	-69%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	1,672	221	(1,451)	-87%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	40	21	(19)	-48%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,437,693	\$1,566,106	(\$2,871,587)	-65%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,409,646	\$549,215	(\$1,860,431)	-77%

THE CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. ASSETS					
A. Current Assets:					
1	Cash and Cash Equivalents	\$9,871,014	\$8,948,706	(\$922,308)	-9%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$13,441,101	\$13,504,471	\$63,370	0%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$971,585	\$840,007	(\$131,578)	-14%
7	Inventories of Supplies	\$2,025,113	\$2,092,246	\$67,133	3%
8	Prepaid Expenses	\$0	\$0	\$0	0%
9	Other Current Assets	\$1,717,026	\$2,724,846	\$1,007,820	59%
	Total Current Assets	\$28,025,839	\$28,110,276	\$84,437	0%
B. Noncurrent Assets Whose Use is Limited:					
1	Held by Trustee	\$18,116,227	\$20,525,079	\$2,408,852	13%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$400,278	\$0	(\$400,278)	-100%
4	Other Noncurrent Assets Whose Use is Limited	\$6,989,321	\$7,067,123	\$77,802	1%
	Total Noncurrent Assets Whose Use is Limited:	\$25,505,826	\$27,592,202	\$2,086,376	8%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$33,807,880	\$38,742,293	\$4,934,413	15%
7	Other Noncurrent Assets	\$1,334,720	\$1,135,267	(\$199,453)	-15%
C. Net Fixed Assets:					
1	Property, Plant and Equipment	\$143,527,470	\$148,532,515	\$5,005,045	3%
2	Less: Accumulated Depreciation	\$106,694,984	\$112,631,179	\$5,936,195	\$0
	Property, Plant and Equipment, Net	\$36,832,486	\$35,901,336	(\$931,150)	-3%
3	Construction in Progress	\$1,020,301	\$968,443	(\$51,858)	-5%
	Total Net Fixed Assets	\$37,852,787	\$36,869,779	(\$983,008)	-3%
	Total Assets	\$126,527,052	\$132,449,817	\$5,922,765	5%
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					

THE CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Accounts Payable and Accrued Expenses	\$5,029,676	\$7,289,342	\$2,259,666	45%
2	Salaries, Wages and Payroll Taxes	\$4,027,215	\$4,177,672	\$150,457	4%
3	Due To Third Party Payers	\$1,917,192	\$2,468,522	\$551,330	29%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,200,000	\$0	(\$1,200,000)	-100%
6	Current Portion of Notes Payable	\$198,100	\$3,219,468	\$3,021,368	1525%
7	Other Current Liabilities	\$7,726,163	\$4,078,798	(\$3,647,365)	-47%
	Total Current Liabilities	\$20,098,346	\$21,233,802	\$1,135,456	6%
	B. Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$3,223,366	\$0	(\$3,223,366)	-100%
	Total Long Term Debt	\$3,223,366	\$0	(\$3,223,366)	-100%
3	Accrued Pension Liability	\$38,287,989	\$23,133,018	(\$15,154,971)	-40%
4	Other Long Term Liabilities	\$3,125,672	\$3,527,218	\$401,546	13%
	Total Long Term Liabilities	\$44,637,027	\$26,660,236	(\$17,976,791)	-40%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
	C. Net Assets:				
1	Unrestricted Net Assets or Equity	\$40,934,207	\$61,139,349	\$20,205,142	49%
2	Temporarily Restricted Net Assets	\$3,236,940	\$3,314,742	\$77,802	2%
3	Permanently Restricted Net Assets	\$17,620,532	\$20,101,688	\$2,481,156	14%
	Total Net Assets	\$61,791,679	\$84,555,779	\$22,764,100	37%
	Total Liabilities and Net Assets	\$126,527,052	\$132,449,817	\$5,922,765	5%

THE CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012 ACTUAL</u>	<u>FY 2013 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. <u>Operating Revenue:</u>					
1	Total Gross Patient Revenue	\$237,069,420	\$259,938,572	\$22,869,152	10%
2	Less: Allowances	\$118,988,604	\$136,668,445	\$17,679,841	15%
3	Less: Charity Care	\$1,766,984	\$3,214,518	\$1,447,534	82%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$116,313,832	\$120,055,609	\$3,741,777	3%
5	Provision for Bad Debts	\$0	\$3,378,061	\$3,378,061	0%
	Net Patient Service Revenue less provision for bad debts	\$116,313,832	\$116,677,548	\$363,716	0%
6	Other Operating Revenue	\$5,735,128	\$8,250,545	\$2,515,417	44%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$122,048,960	\$124,928,093	\$2,879,133	2%
B. <u>Operating Expenses:</u>					
1	Salaries and Wages	\$54,928,730	\$58,472,497	\$3,543,767	6%
2	Fringe Benefits	\$16,546,435	\$16,209,800	(\$336,635)	-2%
3	Physicians Fees	\$3,306,463	\$4,669,548	\$1,363,085	41%
4	Supplies and Drugs	\$12,272,846	\$12,510,410	\$237,564	2%
5	Depreciation and Amortization	\$6,060,455	\$6,050,075	(\$10,380)	0%
6	Bad Debts	\$3,125,364	\$0	(\$3,125,364)	-100%
7	Interest Expense	\$264,153	\$250,825	(\$13,328)	-5%
8	Malpractice Insurance Cost	\$1,748,531	\$1,842,449	\$93,918	5%
9	Other Operating Expenses	\$23,629,704	\$24,894,381	\$1,264,677	5%
	Total Operating Expenses	\$121,882,681	\$124,899,985	\$3,017,304	2%
	Income/(Loss) From Operations	\$166,279	\$28,108	(\$138,171)	-83%
C. <u>Non-Operating Revenue:</u>					
1	Income from Investments	\$2,102,513	\$2,298,212	\$195,699	9%
2	Gifts, Contributions and Donations	\$27,952	\$273,527	\$245,575	879%
3	Other Non-Operating Gains/(Losses)	\$118,880	\$93,073	(\$25,807)	-22%
	Total Non-Operating Revenue	\$2,249,345	\$2,664,812	\$415,467	18%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$2,415,624	\$2,692,920	\$277,296	11%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

THE CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>AMOUNT</u>	<u>%</u>
		<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$2,415,624	\$2,692,920	\$277,296	11%

THE CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
A. <u>Parent Corporation Statement of Operations Summary</u>				
1	Net Patient Revenue	\$109,569,717	\$116,313,832	\$116,677,548
2	Other Operating Revenue	4,949,386	5,735,128	8,250,545
3	Total Operating Revenue	\$114,519,103	\$122,048,960	\$124,928,093
4	Total Operating Expenses	113,880,767	121,882,681	124,899,985
5	Income/(Loss) From Operations	\$638,336	\$166,279	\$28,108
6	Total Non-Operating Revenue	2,011,113	2,249,345	2,664,812
7	Excess/(Deficiency) of Revenue Over Expenses	\$2,649,449	\$2,415,624	\$2,692,920
B. <u>Parent Corporation Profitability Summary</u>				
1	Parent Corporation Operating Margin	0.55%	0.13%	0.02%
2	Parent Corporation Non-Operating Margin	1.73%	1.81%	2.09%
3	Parent Corporation Total Margin	2.27%	1.94%	2.11%
4	Income/(Loss) From Operations	\$638,336	\$166,279	\$28,108
5	Total Operating Revenue	\$114,519,103	\$122,048,960	\$124,928,093
6	Total Non-Operating Revenue	\$2,011,113	\$2,249,345	\$2,664,812
7	Total Revenue	\$116,530,216	\$124,298,305	\$127,592,905
8	Excess/(Deficiency) of Revenue Over Expenses	\$2,649,449	\$2,415,624	\$2,692,920
C. <u>Parent Corporation Net Assets Summary</u>				
1	Parent Corporation Unrestricted Net Assets	\$47,062,165	\$40,934,207	\$61,139,349
2	Parent Corporation Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779
3	Parent Corporation Change in Total Net Assets	\$7,444,266	(\$4,194,171)	\$22,764,100
4	Parent Corporation Change in Total Net Assets %	112.7%	-6.4%	36.8%
D. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	1.33	1.39	1.32
2	Total Current Assets	\$25,471,279	\$28,025,839	\$28,110,276
3	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802

THE CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
4	<u>Days Cash on Hand</u>	29	31	27
5	Cash and Cash Equivalents	\$8,455,576	\$9,871,014	\$8,948,706
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$8,455,576	\$9,871,014	\$8,948,706
8	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985
9	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
10	Operating Expenses less Depreciation Expense	\$107,702,685	\$115,822,226	\$118,849,910
11	<u>Days Revenue in Patient Accounts Receivable</u>	37	39	37
12	Net Patient Accounts Receivable	\$ 11,144,540	\$ 13,441,101	\$ 13,504,471
13	Due From Third Party Payers	\$1,516,187	\$971,585	\$840,007
14	Due To Third Party Payers	\$1,693,818	\$1,917,192	\$2,468,522
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 10,966,909	\$ 12,495,494	\$ 11,875,956
16	Total Net Patient Revenue	\$109,569,717	\$116,313,832	\$116,677,548
17	<u>Average Payment Period</u>	65	63	65
18	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802
19	Total Operating Expenses	\$113,880,767	\$121,882,681	\$124,899,985
20	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
20	Total Operating Expenses less Depreciation Expense	\$107,702,685	\$115,822,226	\$118,849,910
E. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	55.5	48.8	63.8
2	Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779
3	Total Assets	\$118,826,510	\$126,527,052	\$132,449,817
4	<u>Cash Flow to Total Debt Ratio</u>	37.1	36.3	41.2
5	Excess/(Deficiency) of Revenues Over Expenses	\$2,649,449	\$2,415,624	\$2,692,920

THE CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
6	Depreciation Expense	\$6,178,082	\$6,060,455	\$6,050,075
7	Excess of Revenues Over Expenses and Depreciation Expense	\$8,827,531	\$8,476,079	\$8,742,995
8	Total Current Liabilities	\$19,161,658	\$20,098,346	\$21,233,802
9	Total Long Term Debt	\$4,624,338	\$3,223,366	\$0
10	Total Current Liabilities and Total Long Term Debt	\$23,785,996	\$23,321,712	\$21,233,802
11	<u>Long Term Debt to Capitalization Ratio</u>	6.5	5.0	-
12	Total Long Term Debt	\$4,624,338	\$3,223,366	\$0
13	Total Net Assets	\$65,985,850	\$61,791,679	\$84,555,779
14	Total Long Term Debt and Total Net Assets	\$70,610,188	\$65,015,045	\$84,555,779

		CHARLOTTE HUNGERFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013							
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT									
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)	
		PATIENT DAYS	DISCHARGES OR CU/CCU # PATIENT	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS	
LINE	DESCRIPTION								
1	Adult Medical/Surgical	18,265	4,981	4,981	51	73	98.1%	68.5%	
2	ICU/CCU (Excludes Neonatal ICU)	2,310	128	0	7	10	90.4%	63.3%	
3	Psychiatric: Ages 0 to 17	12	3	3	0	0	0.0%	0.0%	
4	Psychiatric: Ages 18+	3,732	609	609	11	17	93.0%	60.1%	
	TOTAL PSYCHIATRIC	3,744	612	612	11	17	93.3%	60.3%	
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%	
6	Maternity	1,062	436	453	3	7	97.0%	41.6%	
7	Newborn	1,095	453	453	4	13	75.0%	23.1%	
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%	
9	Pediatric	98	51	34	1	2	26.8%	13.4%	
10	Other	0	0	0	0	0	0.0%	0.0%	
	TOTAL EXCLUDING NEWBORN	25,479	6,080	6,080	73	109	95.6%	64.0%	
	TOTAL INPATIENT BED UTILIZATION	26,574	6,533	6,533	77	122	94.6%	59.7%	
	TOTAL INPATIENT REPORTED YEAR	26,574	6,533	6,533	77	122	94.6%	59.7%	
	TOTAL INPATIENT PRIOR YEAR	25,249	6,338	6,338	75	122	92.2%	56.7%	
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	1,325	195	195	2	0	2.3%	3.0%	
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	5%	3%	3%	3%	0%	3%	5%	
	Total Licensed Beds and Bassinets	122							
(A) This number may not exceed the number of available beds for each department or in total.									
Note: Total discharges do not include ICU/CCU patients.									

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	3,304	2,477	-827	-25%
2	Outpatient Scans (Excluding Emergency Department Scans)	5,706	4,583	-1,123	-20%
3	Emergency Department Scans	4,020	2,266	-1,754	-44%
4	Other Non-Hospital Providers' Scans (A)	1,642	1,538	-104	-6%
	Total CT Scans	14,672	10,864	-3,808	-26%
B. MRI Scans (A)					
1	Inpatient Scans	364	396	32	9%
2	Outpatient Scans (Excluding Emergency Department Scans)	677	699	22	3%
3	Emergency Department Scans	25	15	-10	-40%
4	Other Non-Hospital Providers' Scans (A)	5,214	4,931	-283	-5%
	Total MRI Scans	6,280	6,041	-239	-4%
C. PET Scans (A)					
1	Inpatient Scans	0	2	2	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	126	291	165	131%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	182	0	-182	-100%
	Total PET Scans	308	293	-15	-5%
D. PET/CT Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	78	75	-3	-4%
2	Outpatient Procedures	4,580	4,245	-335	-7%
	Total Linear Accelerator Procedures	4,658	4,320	-338	-7%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	60	51	-9	-15%
2	Outpatient Studies	67	39	-28	-42%
	Total Electrophysiology Studies	127	90	-37	-29%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
I. Surgical Procedures					
1	Inpatient Surgical Procedures	1,140	1,321	181	16%
2	Outpatient Surgical Procedures	2,920	2,824	-96	-3%
	Total Surgical Procedures	4,060	4,145	85	2%
J. Endoscopy Procedures					
1	Inpatient Endoscopy Procedures	290	312	22	8%
2	Outpatient Endoscopy Procedures	604	482	-122	-20%
	Total Endoscopy Procedures	894	794	-100	-11%
K. Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	5,066	5,182	116	2%
2	Emergency Room Visits: Treated and Discharged	35,812	35,790	-22	0%
	Total Emergency Room Visits	40,878	40,972	94	0%
L. Hospital Clinic Visits					
1	Substance Abuse Treatment Clinic Visits	4,783	4,685	-98	-2%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	33,611	33,320	-291	-1%
4	Medical Clinic Visits	18,703	0	-18,703	-100%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	10,951	10,951	0%
7	Medical Clinic Visits - Family Practice Clinic	0	9,037	9,037	0%
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%
9	Specialty Clinic Visits	20,464	0	-20,464	-100%
10	Specialty Clinic Visits - Cardiac Clinic	0	11,863	11,863	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	1,806	1,806	0%
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%
13	Specialty Clinic Visits - Other Speciality Clinics	0	24,048	24,048	0%
	Total Hospital Clinic Visits	77,561	95,710	18,149	23%
M. Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	6,907	7,478	571	8%
2	Cardiac Rehabilitation	4,508	4,885	377	8%
3	Chemotherapy	130	411	281	216%
4	Gastroenterology	1,000	537	-463	-46%
5	Other Outpatient Visits	123,771	100,483	-23,288	-19%
	Total Other Hospital Outpatient Visits	136,316	113,794	-22,522	-17%
N. Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	321.4	305.9	-15.5	-5%
2	Total Physician FTEs	31.1	33.9	2.8	9%
3	Total Non-Nursing and Non-Physician FTEs	415.9	449.2	33.3	8%
	Total Hospital Full Time Equivalent Employees	768.4	789.0	20.6	3%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	Charlotte Hungerford Hospital	2,920	2,824	-96	-3%
	Total Outpatient Surgical Procedures(A)	2,920	2,824	-96	-3%
B. Outpatient Endoscopy Procedures					
1	Charlotte Hungerford Hospital	604	482	-122	-20%
	Total Outpatient Endoscopy Procedures(B)	604	482	-122	-20%
C. Outpatient Hospital Emergency Room Visits					
1	Charlotte Hungerford Hospital	29,291	29,714	423	1%
2	HEMC	6,521	6,076	-445	-7%
	Total Outpatient Hospital Emergency Room Visits(C)	35,812	35,790	-22	0%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$54,857,930	\$62,018,968	\$7,161,038	13%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$32,316,300	\$34,553,159	\$2,236,859	7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	58.91%	55.71%	-3.20%	-5%
4	DISCHARGES	3,482	3,510	28	1%
5	CASE MIX INDEX (CMI)	1.35650	1.44760	0.09110	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,723.33300	5,081.07600	357.74300	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,841.84	\$6,800.36	(\$41.48)	-1%
8	PATIENT DAYS	15,393	15,882	489	3%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,099.42	\$2,175.62	\$76.20	4%
10	AVERAGE LENGTH OF STAY	4.4	4.5	0.1	2%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$54,574,434	\$60,797,693	\$6,223,259	11%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$21,046,538	\$21,867,353	\$820,815	4%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	38.56%	35.97%	-2.60%	-7%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	99.48%	98.03%	-1.45%	-1%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,464.00564	3,440.88122	(23.12442)	-1%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,075.78	\$6,355.16	\$279.38	5%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$109,432,364	\$122,816,661	\$13,384,297	12%
18	TOTAL ACCRUED PAYMENTS	\$53,362,838	\$56,420,512	\$3,057,674	6%
19	TOTAL ALLOWANCES	\$56,069,526	\$66,396,149	\$10,326,623	18%
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$22,018,745	\$24,499,963	\$2,481,218	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,596,102	\$15,060,737	\$464,635	3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	66.29%	61.47%	-4.82%	-7%
4	DISCHARGES	1,720	1,821	101	6%
5	CASE MIX INDEX (CMI)	1.16030	1.08960	(0.07070)	-6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,995.71600	1,984.16160	(11.55440)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,313.72	\$7,590.48	\$276.76	4%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$471.87)	(\$790.12)	(\$318.24)	67%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$941,728)	(\$1,567,719)	(\$625,991)	66%
10	PATIENT DAYS	5,533	5,952	419	8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,638.01	\$2,530.37	(\$107.64)	-4%
12	AVERAGE LENGTH OF STAY	3.2	3.3	0.1	2%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$62,201,161	\$63,280,634	\$1,079,473	2%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$29,606,147	\$29,610,878	\$4,731	0%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	47.60%	46.79%	-0.80%	-2%

CHARLOTTE HUNGERFORD HOSPITAL					
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FISCAL YEAR 2013					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
16	OUTPATIENT CHARGES / INPATIENT CHARGES	282.49%	258.29%	-24.20%	-9%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,858.85989	4,703.43708	(155.42281)	-3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,093.23	\$6,295.58	\$202.35	3%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$17.45)	\$59.58	\$77.03	-441%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$84,781)	\$280,220	\$365,001	-431%
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
21	TOTAL ACCRUED CHARGES	\$84,219,906	\$87,780,597	\$3,560,691	4%
22	TOTAL ACCRUED PAYMENTS	\$44,202,249	\$44,671,615	\$469,366	1%
23	TOTAL ALLOWANCES	\$40,017,657	\$43,108,982	\$3,091,325	8%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,026,508)	(\$1,287,498)	(\$260,990)	25%
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$84,219,906	\$87,780,597	\$3,560,691	4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$49,094,597	\$51,264,194	\$2,169,597	4%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,125,309	\$36,516,403	\$1,391,094	4%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	41.71%	41.60%	-0.11%	
	C. UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$1,298,459	\$1,590,204	\$291,745	22%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$330,637	\$272,165	(\$58,472)	-18%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.46%	17.12%	-8.35%	-33%
4	DISCHARGES	114	200	86	75%
5	CASE MIX INDEX (CMI)	1.09030	1.02690	(0.06340)	-6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	124.29420	205.38000	81.08580	65%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,660.12	\$1,325.18	(\$1,334.94)	-50%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$4,653.60	\$6,265.30	\$1,611.70	35%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$4,181.73	\$5,475.18	\$1,293.46	31%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$519,764	\$1,124,493	\$604,729	116%
11	PATIENT DAYS	392	696	304	78%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$843.46	\$391.04	(\$452.42)	-54%
13	AVERAGE LENGTH OF STAY	3.4	3.5	0.0	1%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$5,212,131	\$5,513,269	\$301,138	6%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,327,208	\$943,602	(\$383,606)	-29%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.46%	17.12%	-8.35%	-33%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	401.41%	346.70%	-54.71%	-14%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	457.60623	693.40399	235.79776	52%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,900.33	\$1,360.83	(\$1,539.50)	-53%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$3,192.90	\$4,934.76	\$1,741.86	55%
21	MEDICARE - UNINSURED OP PMT / OPED	\$3,175.45	\$4,994.33	\$1,818.88	57%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,453,107	\$3,463,092	\$2,009,985	138%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$6,510,590	\$7,103,473	\$592,883	9%

CHARLOTTE HUNGERFORD HOSPITAL					
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FISCAL YEAR 2013					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
24	TOTAL ACCRUED PAYMENTS	\$1,657,845	\$1,215,767	(\$442,078)	-27%
25	TOTAL ALLOWANCES	\$4,852,745	\$5,887,706	\$1,034,961	21%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,972,871	\$4,587,585	\$2,614,714	133%
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$11,890,723	\$14,536,044	\$2,645,321	22%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,127,166	\$5,045,202	(\$81,964)	-2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	43.12%	34.71%	-8.41%	-20%
4	DISCHARGES	1,103	1,167	64	6%
5	CASE MIX INDEX (CMI)	1.00740	1.04800	0.04060	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,111.16220	1,223.01600	111.85380	10%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,614.24	\$4,125.21	(\$489.02)	-11%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,699.48	\$3,465.27	\$765.79	28%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,227.61	\$2,675.15	\$447.54	20%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,475,231	\$3,271,750	\$796,520	32%
11	PATIENT DAYS	4,172	4,603	431	10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,228.95	\$1,096.07	(\$132.88)	-11%
13	AVERAGE LENGTH OF STAY	3.8	3.9	0.2	4%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$30,243,245	\$33,657,530	\$3,414,285	11%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,751,063	\$10,846,419	\$1,095,356	11%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.24%	32.23%	-0.02%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	254.34%	231.55%	-22.80%	-9%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,805.40546	2,702.13392	(103.27154)	-4%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,475.81	\$4,014.02	\$538.21	15%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$2,617.42	\$2,281.56	(\$335.85)	-13%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,599.97	\$2,341.14	(\$258.83)	-10%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,293,965	\$6,326,076	(\$967,889)	-13%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$42,133,968	\$48,193,574	\$6,059,606	14%
24	TOTAL ACCRUED PAYMENTS	\$14,878,229	\$15,891,621	\$1,013,392	7%
25	TOTAL ALLOWANCES	\$27,255,739	\$32,301,953	\$5,046,214	19%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,769,195	\$9,597,826	(\$171,369)	-2%
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$71,313	\$20,290	(\$51,023)	-72%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$30,421	\$18,644	(\$11,777)	-39%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	42.66%	91.89%	49.23%	115%
4	DISCHARGES	2	3	1	50%
5	CASE MIX INDEX (CMI)	1.51200	1.12350	(0.38850)	-26%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3.02400	3.37050	0.34650	11%

CHARLOTTE HUNGERFORD HOSPITAL					
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FISCAL YEAR 2013					
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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,059.85	\$5,531.52	(\$4,528.33)	-45%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	(\$2,746.14)	\$2,058.96	\$4,805.09	-175%
9	MEDICARE - O.M.A. IP PMT / CMAD	(\$3,218.01)	\$1,268.84	\$4,486.85	-139%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$9,731)	\$4,277	\$14,008	-144%
11	PATIENT DAYS	31	5	(26)	-84%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$981.32	\$3,728.80	\$2,747.48	280%
13	AVERAGE LENGTH OF STAY	15.5	1.7	(13.8)	-89%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$205,041	\$153,409	(\$51,632)	-25%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$37,780	\$31,406	(\$6,374)	-17%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.43%	20.47%	2.05%	11%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	287.52%	756.08%	468.56%	163%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5.75045	22.68245	16.93200	294%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,569.92	\$1,384.59	(\$5,185.32)	-79%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	(\$476.69)	\$4,910.99	\$5,387.68	-1130%
21	MEDICARE - O.M.A. OP PMT / CMAD	(\$494.14)	\$4,970.57	\$5,464.70	-1106%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,842)	\$112,745	\$115,586	-4068%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$276,354	\$173,699	(\$102,655)	-37%
24	TOTAL ACCRUED PAYMENTS	\$68,201	\$50,050	(\$18,151)	-27%
25	TOTAL ALLOWANCES	\$208,153	\$123,649	(\$84,504)	-41%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	(\$12,573)	\$117,021	\$129,594	-1031%
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$11,962,036	\$14,556,334	\$2,594,298	22%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,157,587	\$5,063,846	(\$93,741)	-2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	43.12%	34.79%	-8.33%	-19%
4	DISCHARGES	1,105	1,170	65	6%
5	CASE MIX INDEX (CMI)	1.00831	1.04819	0.03988	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,114.18620	1,226.38650	112.20030	10%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,629.02	\$4,129.08	(\$499.94)	-11%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,684.70	\$3,461.40	\$776.70	29%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,212.83	\$2,671.28	\$458.46	21%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,465,499	\$3,276,027	\$810,527	33%
11	PATIENT DAYS	4,203	4,608	405	10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,227.12	\$1,098.92	(\$128.20)	-10%
13	AVERAGE LENGTH OF STAY	3.8	3.9	0.1	4%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$30,448,286	\$33,810,939	\$3,362,653	11%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,788,843	\$10,877,825	\$1,088,982	11%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.15%	32.17%	0.02%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	254.54%	232.28%	-22.26%	-9%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,811.15591	2,724.81637	(86.33954)	-3%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,482.14	\$3,992.13	\$509.99	15%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,611.09	\$2,303.45	(\$307.64)	-12%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,593.64	\$2,363.03	(\$230.61)	-9%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,291,123	\$6,438,821	(\$852,302)	-12%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$42,410,322	\$48,367,273	\$5,956,951	14%
24	TOTAL ACCRUED PAYMENTS	\$14,946,430	\$15,941,671	\$995,241	7%
25	TOTAL ALLOWANCES	\$27,463,892	\$32,425,602	\$4,961,710	18%
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$483,092	\$353,945	(\$129,147)	-27%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$282,459	\$220,612	(\$61,847)	-22%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	58.47%	62.33%	3.86%	7%
4	DISCHARGES	31	32	1	3%
5	CASE MIX INDEX (CMI)	1.06440	1.00330	(0.06110)	-6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	32.99640	32.10560	(0.89080)	-3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,560.30	\$6,871.45	(\$1,688.85)	-20%
8	PATIENT DAYS	120	132	12	10%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,353.83	\$1,671.30	(\$682.52)	-29%
10	AVERAGE LENGTH OF STAY	3.9	4.1	0.3	7%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$523,735	\$620,095	\$96,360	18%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$189,582	\$228,839	\$39,257	21%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$1,006,827	\$974,040	(\$32,787)	-3%
14	TOTAL ACCRUED PAYMENTS	\$472,041	\$449,451	(\$22,590)	-5%
15	TOTAL ALLOWANCES	\$534,786	\$524,589	(\$10,197)	-2%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$5,735,128	\$8,250,545	\$2,515,417	44%
2	TOTAL OPERATING EXPENSES	\$121,882,681	\$124,899,985	\$3,017,304	2%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$1,766,984	\$3,214,518	\$1,447,534	82%
5	BAD DEBTS (CHARGES)	\$3,125,364	\$3,378,061	\$252,697	8%
6	UNCOMPENSATED CARE (CHARGES)	\$4,892,348	\$6,592,579	\$1,700,231	35%
7	COST OF UNCOMPENSATED CARE	\$2,331,616	\$2,979,618	\$648,002	28%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$42,410,322	\$48,367,273	\$5,956,951	14%
9	TOTAL ACCRUED PAYMENTS	\$14,946,430	\$15,941,671	\$995,241	7%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$20,212,093	\$21,860,336	\$1,648,243	8%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$5,265,663	\$5,918,665	\$653,002	12%
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$89,321,803	\$101,429,210	\$12,107,407	14%
2	TOTAL INPATIENT PAYMENTS	\$52,352,448	\$54,898,354	\$2,545,906	5%
3	TOTAL INPATIENT PAYMENTS / CHARGES	58.61%	54.12%	-4.49%	-8%
4	TOTAL DISCHARGES	6,338	6,533	195	3%
5	TOTAL CASE MIX INDEX	1.24112	1.27411	0.03298	3%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	7,866.23160	8,323.72970	457.49810	6%
7	TOTAL OUTPATIENT CHARGES	\$147,747,616	\$158,509,361	\$10,761,745	7%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	165.41%	156.28%	-9.13%	-6%
9	TOTAL OUTPATIENT PAYMENTS	\$60,631,110	\$62,584,895	\$1,953,785	3%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	41.04%	39.48%	-1.55%	-4%
11	TOTAL CHARGES	\$237,069,419	\$259,938,571	\$22,869,152	10%
12	TOTAL PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691	4%
13	TOTAL PAYMENTS / TOTAL CHARGES	47.66%	45.20%	-2.46%	-5%
14	PATIENT DAYS	25,249	26,574	1,325	5%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$67,303,058	\$76,929,247	\$9,626,189	14%
2	INPATIENT PAYMENTS	\$37,756,346	\$39,837,617	\$2,081,271	6%
3	GOVT. INPATIENT PAYMENTS / CHARGES	56.10%	51.78%	-4.31%	-8%
4	DISCHARGES	4,618	4,712	94	2%
5	CASE MIX INDEX	1.27122	1.34541	0.07418	6%
6	CASE MIX ADJUSTED DISCHARGES	5,870.51560	6,339.56810	469.05250	8%
7	OUTPATIENT CHARGES	\$85,546,455	\$95,228,727	\$9,682,272	11%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	127.11%	123.79%	-3.32%	-3%
9	OUTPATIENT PAYMENTS	\$31,024,963	\$32,974,017	\$1,949,054	6%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	36.27%	34.63%	-1.64%	-5%
11	TOTAL CHARGES	\$152,849,513	\$172,157,974	\$19,308,461	13%
12	TOTAL PAYMENTS	\$68,781,309	\$72,811,634	\$4,030,325	6%
13	TOTAL PAYMENTS / CHARGES	45.00%	42.29%	-2.71%	-6%
14	PATIENT DAYS	19,716	20,622	906	5%
15	TOTAL GOVERNMENT DEDUCTIONS	\$84,068,204	\$99,346,340	\$15,278,136	18%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	4.4	4.5	0.1	2%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.2	3.3	0.1	2%
3	UNINSURED	3.4	3.5	0.0	1%
4	MEDICAID	3.8	3.9	0.2	4%
5	OTHER MEDICAL ASSISTANCE	15.5	1.7	(13.8)	-89%
6	CHAMPUS / TRICARE	3.9	4.1	0.3	7%
7	TOTAL AVERAGE LENGTH OF STAY	4.0	4.1	0.1	2%
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$237,069,419	\$259,938,571	\$22,869,152	10%
2	TOTAL GOVERNMENT DEDUCTIONS	\$84,068,204	\$99,346,340	\$15,278,136	18%

CHARLOTTE HUNGERFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
3	UNCOMPENSATED CARE	\$4,892,348	\$6,592,579	\$1,700,231	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,125,309	\$36,516,403	\$1,391,094	4%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$124,085,861	\$142,455,322	\$18,369,461	15%
7	TOTAL ACCRUED PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691	4%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$112,983,558	\$117,483,249	\$4,499,691	4%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4765842785	0.4519654338	(0.0246188447)	-5%
11	COST OF UNCOMPENSATED CARE	\$2,331,616	\$2,979,618	\$648,002	28%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$5,265,663	\$5,918,665	\$653,002	12%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$7,597,279	\$8,898,282	\$1,301,003	17%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$7,293,965	\$6,326,076	(\$967,889)	-13%
2	OTHER MEDICAL ASSISTANCE	(\$12,573)	\$117,021	\$129,594	-1031%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,972,871	\$4,587,585	\$2,614,714	133%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$9,254,263	\$11,030,683	\$1,776,419	19%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$3,330,273	(\$805,705)	(\$4,135,978)	-124.19%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$116,313,832	\$116,677,547	\$363,715	0.31%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	(\$3,214,517)	(\$3,214,517)	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$237,069,419	\$256,724,054	\$19,654,635	8.29%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$4,892,348	\$6,592,579	\$1,700,231	34.75%

CHARLOTTE HUNGERFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$22,018,745	\$24,499,963	\$2,481,218
2	MEDICARE	\$54,857,930	62,018,968	\$7,161,038
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,962,036	14,556,334	\$2,594,298
4	MEDICAID	\$11,890,723	14,536,044	\$2,645,321
5	OTHER MEDICAL ASSISTANCE	\$71,313	20,290	(\$51,023)
6	CHAMPUS / TRICARE	\$483,092	353,945	(\$129,147)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,298,459	1,590,204	\$291,745
	TOTAL INPATIENT GOVERNMENT CHARGES	\$67,303,058	\$76,929,247	\$9,626,189
	TOTAL INPATIENT CHARGES	\$89,321,803	\$101,429,210	\$12,107,407
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$62,201,161	\$63,280,634	\$1,079,473
2	MEDICARE	\$54,574,434	60,797,693	\$6,223,259
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$30,448,286	33,810,939	\$3,362,653
4	MEDICAID	\$30,243,245	33,657,530	\$3,414,285
5	OTHER MEDICAL ASSISTANCE	\$205,041	153,409	(\$51,632)
6	CHAMPUS / TRICARE	\$523,735	620,095	\$96,360
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,212,131	5,513,269	\$301,138
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$85,546,455	\$95,228,727	\$9,682,272
	TOTAL OUTPATIENT CHARGES	\$147,747,616	\$158,509,361	\$10,761,745
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$84,219,906	\$87,780,597	\$3,560,691
2	TOTAL MEDICARE	\$109,432,364	\$122,816,661	\$13,384,297
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$42,410,322	\$48,367,273	\$5,956,951
4	TOTAL MEDICAID	\$42,133,968	\$48,193,574	\$6,059,606
5	TOTAL OTHER MEDICAL ASSISTANCE	\$276,354	\$173,699	(\$102,655)
6	TOTAL CHAMPUS / TRICARE	\$1,006,827	\$974,040	(\$32,787)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,510,590	\$7,103,473	\$592,883
	TOTAL GOVERNMENT CHARGES	\$152,849,513	\$172,157,974	\$19,308,461
	TOTAL CHARGES	\$237,069,419	\$259,938,571	\$22,869,152
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,596,102	\$15,060,737	\$464,635
2	MEDICARE	\$32,316,300	34,553,159	\$2,236,859
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,157,587	5,063,846	(\$93,741)
4	MEDICAID	\$5,127,166	5,045,202	(\$81,964)
5	OTHER MEDICAL ASSISTANCE	\$30,421	18,644	(\$11,777)
6	CHAMPUS / TRICARE	\$282,459	220,612	(\$61,847)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$330,637	272,165	(\$58,472)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$37,756,346	\$39,837,617	\$2,081,271
	TOTAL INPATIENT PAYMENTS	\$52,352,448	\$54,898,354	\$2,545,906
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$29,606,147	\$29,610,878	\$4,731
2	MEDICARE	\$21,046,538	21,867,353	\$820,815
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$9,788,843	10,877,825	\$1,088,982
4	MEDICAID	\$9,751,063	10,846,419	\$1,095,356
5	OTHER MEDICAL ASSISTANCE	\$37,780	31,406	(\$6,374)
6	CHAMPUS / TRICARE	\$189,582	228,839	\$39,257
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,327,208	943,602	(\$383,606)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$31,024,963	\$32,974,017	\$1,949,054
	TOTAL OUTPATIENT PAYMENTS	\$60,631,110	\$62,584,895	\$1,953,785
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$44,202,249	\$44,671,615	\$469,366
2	TOTAL MEDICARE	\$53,362,838	\$56,420,512	\$3,057,674
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,946,430	\$15,941,671	\$995,241
4	TOTAL MEDICAID	\$14,878,229	\$15,891,621	\$1,013,392
5	TOTAL OTHER MEDICAL ASSISTANCE	\$68,201	\$50,050	(\$18,151)
6	TOTAL CHAMPUS / TRICARE	\$472,041	\$449,451	(\$22,590)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,657,845	\$1,215,767	(\$442,078)
	TOTAL GOVERNMENT PAYMENTS	\$68,781,309	\$72,811,634	\$4,030,325
	TOTAL PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9.29%	9.43%	0.14%
2	MEDICARE	23.14%	23.86%	0.72%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.05%	5.60%	0.55%
4	MEDICAID	5.02%	5.59%	0.58%
5	OTHER MEDICAL ASSISTANCE	0.03%	0.01%	-0.02%
6	CHAMPUS / TRICARE	0.20%	0.14%	-0.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.55%	0.61%	0.06%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	28.39%	29.60%	1.21%
	TOTAL INPATIENT PAYER MIX	37.68%	39.02%	1.34%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.24%	24.34%	-1.89%
2	MEDICARE	23.02%	23.39%	0.37%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12.84%	13.01%	0.16%
4	MEDICAID	12.76%	12.95%	0.19%
5	OTHER MEDICAL ASSISTANCE	0.09%	0.06%	-0.03%
6	CHAMPUS / TRICARE	0.22%	0.24%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.20%	2.12%	-0.08%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	36.08%	36.64%	0.55%
	TOTAL OUTPATIENT PAYER MIX	62.32%	60.98%	-1.34%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	12.92%	12.82%	-0.10%
2	MEDICARE	28.60%	29.41%	0.81%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.56%	4.31%	-0.25%
4	MEDICAID	4.54%	4.29%	-0.24%
5	OTHER MEDICAL ASSISTANCE	0.03%	0.02%	-0.01%
6	CHAMPUS / TRICARE	0.25%	0.19%	-0.06%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.29%	0.23%	-0.06%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	33.42%	33.91%	0.49%
	TOTAL INPATIENT PAYER MIX	46.34%	46.73%	0.39%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.20%	25.20%	-1.00%
2	MEDICARE	18.63%	18.61%	-0.01%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.66%	9.26%	0.60%
4	MEDICAID	8.63%	9.23%	0.60%
5	OTHER MEDICAL ASSISTANCE	0.03%	0.03%	-0.01%
6	CHAMPUS / TRICARE	0.17%	0.19%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.17%	0.80%	-0.37%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	27.46%	28.07%	0.61%
	TOTAL OUTPATIENT PAYER MIX	53.66%	53.27%	-0.39%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,720	1,821	101
2	MEDICARE	3,482	3,510	28
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,105	1,170	65
4	MEDICAID	1,103	1,167	64
5	OTHER MEDICAL ASSISTANCE	2	3	1
6	CHAMPUS / TRICARE	31	32	1
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	114	200	86
	TOTAL GOVERNMENT DISCHARGES	4,618	4,712	94
	TOTAL DISCHARGES	6,338	6,533	195

CHARLOTTE HUNGERFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,533	5,952	419
2	MEDICARE	15,393	15,882	489
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,203	4,608	405
4	MEDICAID	4,172	4,603	431
5	OTHER MEDICAL ASSISTANCE	31	5	(26)
6	CHAMPUS / TRICARE	120	132	12
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	392	696	304
	TOTAL GOVERNMENT PATIENT DAYS	19,716	20,622	906
	TOTAL PATIENT DAYS	25,249	26,574	1,325
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.2	3.3	0.1
2	MEDICARE	4.4	4.5	0.1
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.8	3.9	0.1
4	MEDICAID	3.8	3.9	0.2
5	OTHER MEDICAL ASSISTANCE	15.5	1.7	(13.8)
6	CHAMPUS / TRICARE	3.9	4.1	0.3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.4	3.5	0.0
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.3	4.4	0.1
	TOTAL AVERAGE LENGTH OF STAY	4.0	4.1	0.1
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.16030	1.08960	(0.07070)
2	MEDICARE	1.35650	1.44760	0.09110
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.00831	1.04819	0.03988
4	MEDICAID	1.00740	1.04800	0.04060
5	OTHER MEDICAL ASSISTANCE	1.51200	1.12350	(0.38850)
6	CHAMPUS / TRICARE	1.06440	1.00330	(0.06110)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.09030	1.02690	(0.06340)
	TOTAL GOVERNMENT CASE MIX INDEX	1.27122	1.34541	0.07418
	TOTAL CASE MIX INDEX	1.24112	1.27411	0.03298
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$84,219,906	\$87,780,597	\$3,560,691
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$49,094,597	\$51,264,194	\$2,169,597
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,125,309	\$36,516,403	\$1,391,094
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	41.71%	41.60%	-0.11%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$1,766,984	\$3,214,518	\$1,447,534
9	BAD DEBTS	\$3,125,364	\$3,378,061	\$252,697
10	TOTAL UNCOMPENSATED CARE	\$4,892,348	\$6,592,579	\$1,700,231
11	TOTAL OTHER OPERATING REVENUE	\$5,735,128	\$8,250,545	\$2,515,417
12	TOTAL OPERATING EXPENSES	\$121,882,681	\$124,899,985	\$3,017,304
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,995.71600	1,984.16160	(11.55440)
2	MEDICARE	4,723.33300	5,081.07600	357.74300
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,114.18620	1,226.38650	112.20030
4	MEDICAID	1,111.16220	1,223.01600	111.85380
5	OTHER MEDICAL ASSISTANCE	3.02400	3.37050	0.34650
6	CHAMPUS / TRICARE	32.99640	32.10560	(0.89080)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	124.29420	205.38000	81.08580

CHARLOTTE HUNGERFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	5,870.51560	6,339.56810	469.05250
	TOTAL CASE MIX ADJUSTED DISCHARGES	7,866.23160	8,323.72970	457.49810
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,858.85989	4,703.43708	-155.42281
2	MEDICARE	3,464.00564	3,440.88122	-23.12442
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,811.15591	2,724.81637	-86.33954
4	MEDICAID	2,805.40546	2,702.13392	-103.27154
5	OTHER MEDICAL ASSISTANCE	5.75045	22.68245	16.93200
6	CHAMPUS / TRICARE	33.60806	56.06250	22.45444
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	457.60623	693.40399	235.79776
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	6,308.76962	6,221.76009	-87.00953
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	11,167.62951	10,925.19717	-242.43234
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,313.72	\$7,590.48	\$276.76
2	MEDICARE	\$6,841.84	\$6,800.36	(\$41.48)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,629.02	\$4,129.08	(\$499.94)
4	MEDICAID	\$4,614.24	\$4,125.21	(\$489.02)
5	OTHER MEDICAL ASSISTANCE	\$10,059.85	\$5,531.52	(\$4,528.33)
6	CHAMPUS / TRICARE	\$8,560.30	\$6,871.45	(\$1,688.85)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,660.12	\$1,325.18	(\$1,334.94)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,431.52	\$6,283.96	(\$147.56)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,655.34	\$6,595.40	(\$59.94)
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$6,093.23	\$6,295.58	\$202.35
2	MEDICARE	\$6,075.78	\$6,355.16	\$279.38
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,482.14	\$3,992.13	\$509.99
4	MEDICAID	\$3,475.81	\$4,014.02	\$538.21
5	OTHER MEDICAL ASSISTANCE	\$6,569.92	\$1,384.59	(\$5,185.32)
6	CHAMPUS / TRICARE	\$5,640.97	\$4,081.86	(\$1,559.11)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,900.33	\$1,360.83	(\$1,539.50)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,917.75	\$5,299.79	\$382.04
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$5,429.18	\$5,728.49	\$299.31
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
1	MEDICAID	\$7,293.965	\$6,326.076	(\$967.889)
2	OTHER MEDICAL ASSISTANCE	(\$12,573)	\$117,021	\$129,594
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,972,871	\$4,587,585	\$2,614,714
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$9,254,263	\$11,030,683	\$1,776,419
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)			
1	TOTAL CHARGES	\$237,069,419	\$259,938,571	\$22,869,152
2	TOTAL GOVERNMENT DEDUCTIONS	\$84,068,204	\$99,346,340	\$15,278,136
3	UNCOMPENSATED CARE	\$4,892,348	\$6,592,579	\$1,700,231
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,125,309	\$36,516,403	\$1,391,094
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
6	TOTAL ADJUSTMENTS	\$124,085,861	\$142,455,322	\$18,369,461
7	TOTAL ACCRUED PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4765842785	0.4519654338	(0.0246188447)
11	COST OF UNCOMPENSATED CARE	\$2,331,616	\$2,979,618	\$648,002
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$5,265,663	\$5,918,665	\$653,002
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$7,597,279	\$8,898,282	\$1,301,003
VII.	RATIOS			

**CHARLOTTE HUNGERFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	66.29%	61.47%	-4.82%
2	MEDICARE	58.91%	55.71%	-3.20%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	43.12%	34.79%	-8.33%
4	MEDICAID	43.12%	34.71%	-8.41%
5	OTHER MEDICAL ASSISTANCE	42.66%	91.89%	49.23%
6	CHAMPUS / TRICARE	58.47%	62.33%	3.86%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	25.46%	17.12%	-8.35%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	56.10%	51.78%	-4.31%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	58.61%	54.12%	-4.49%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	47.60%	46.79%	-0.80%
2	MEDICARE	38.56%	35.97%	-2.60%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	32.15%	32.17%	0.02%
4	MEDICAID	32.24%	32.23%	-0.02%
5	OTHER MEDICAL ASSISTANCE	18.43%	20.47%	2.05%
6	CHAMPUS / TRICARE	36.20%	36.90%	0.71%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	25.46%	17.12%	-8.35%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	36.27%	34.63%	-1.64%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	41.04%	39.48%	-1.55%
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$112,983,558	\$117,483,249	\$4,499,691
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$112,983,558	\$117,483,249	\$4,499,691
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,330,273	(\$805,705)	(\$4,135,978)
4	CALCULATED NET REVENUE	\$119,439,195	\$116,677,544	(\$2,761,651)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$116,313,832	\$116,677,547	\$363,715
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$3,125,363	(\$3)	(\$3,125,366)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$237,069,419	\$259,938,571	\$22,869,152
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	(\$3,214,517)	(\$3,214,517)
	CALCULATED GROSS REVENUE	\$237,069,419	\$256,724,054	\$19,654,635
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$237,069,419	\$256,724,054	\$19,654,635
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$4,892,348	\$6,592,579	\$1,700,231
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$4,892,348	\$6,592,579	\$1,700,231
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$4,892,348	\$6,592,579	\$1,700,231
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

CHARLOTTE HUNGERFORD HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2013		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$24,499,963
2	MEDICARE	62,018,968
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,556,334
4	MEDICAID	14,536,044
5	OTHER MEDICAL ASSISTANCE	20,290
6	CHAMPUS / TRICARE	353,945
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,590,204
	TOTAL INPATIENT GOVERNMENT CHARGES	\$76,929,247
	TOTAL INPATIENT CHARGES	\$101,429,210
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$63,280,634
2	MEDICARE	60,797,693
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	33,810,939
4	MEDICAID	33,657,530
5	OTHER MEDICAL ASSISTANCE	153,409
6	CHAMPUS / TRICARE	620,095
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,513,269
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$95,228,727
	TOTAL OUTPATIENT CHARGES	\$158,509,361
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$87,780,597
2	TOTAL GOVERNMENT ACCRUED CHARGES	172,157,974
	TOTAL ACCRUED CHARGES	\$259,938,571
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$15,060,737
2	MEDICARE	34,553,159
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,063,846
4	MEDICAID	5,045,202
5	OTHER MEDICAL ASSISTANCE	18,644
6	CHAMPUS / TRICARE	220,612
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	272,165
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$39,837,617
	TOTAL INPATIENT PAYMENTS	\$54,898,354
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$29,610,878
2	MEDICARE	21,867,353
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,877,825
4	MEDICAID	10,846,419
5	OTHER MEDICAL ASSISTANCE	31,406
6	CHAMPUS / TRICARE	228,839
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	943,602
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$32,974,017
	TOTAL OUTPATIENT PAYMENTS	\$62,584,895
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$44,671,615
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	72,811,634
	TOTAL ACCRUED PAYMENTS	\$117,483,249
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		

CHARLOTTE HUNGERFORD HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2013		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,821
2	MEDICARE	3,510
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,170
4	MEDICAID	1,167
5	OTHER MEDICAL ASSISTANCE	3
6	CHAMPUS / TRICARE	32
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	200
	TOTAL GOVERNMENT DISCHARGES	4,712
	TOTAL DISCHARGES	6,533
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.08960
2	MEDICARE	1.44760
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.04819
4	MEDICAID	1.04800
5	OTHER MEDICAL ASSISTANCE	1.12350
6	CHAMPUS / TRICARE	1.00330
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.02690
	TOTAL GOVERNMENT CASE MIX INDEX	1.34541
	TOTAL CASE MIX INDEX	1.27411
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$87,780,597
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$51,264,194
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$36,516,403
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	41.60%
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	\$3,214,518
9	BAD DEBTS	\$3,378,061
10	TOTAL UNCOMPENSATED CARE	\$6,592,579
11	TOTAL OTHER OPERATING REVENUE	\$8,250,545
12	TOTAL OPERATING EXPENSES	\$124,899,985
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$117,483,249
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$117,483,249
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$805,705)
	CALCULATED NET REVENUE	\$116,677,544
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$116,677,547
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$3)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$259,938,571
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	(\$3,214,517)

CHARLOTTE HUNGERFORD HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2013		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
	CALCULATED GROSS REVENUE	\$256,724,054
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$256,724,054
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,592,579
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,592,579
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$6,592,579
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

CHARLOTTE HUNGERFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 650 - HOSPITAL UNCOMPENSATED CARE

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. <u>Hospital Charity Care (from HRS Report 500)</u>					
1	Number of Applicants	1,715	3,409	1,694	99%
2	Number of Approved Applicants	1,708	3,409	1,701	100%
3	Total Charges (A)	\$1,766,984	\$3,214,518	\$1,447,534	82%
4	Average Charges	\$1,035	\$943	(\$92)	-9%
5	Ratio of Cost to Charges (RCC)	0.533202	0.501979	(0.031223)	-6%
6	Total Cost	\$942,159	\$1,613,621	\$671,461	71%
7	Average Cost	\$552	\$473	(\$78)	-14%
8	Charity Care - Inpatient Charges	\$510,564	\$748,931	\$238,367	47%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	618,186	1,278,080	659,894	107%
10	Charity Care - Emergency Department Charges	638,234	1,187,507	549,273	86%
11	Total Charges (A)	\$1,766,984	\$3,214,518	\$1,447,534	82%
12	Charity Care - Number of Patient Days	160	194	34	21%
13	Charity Care - Number of Discharges	47	64	17	36%
14	Charity Care - Number of Outpatient ED Visits	981	2,380	1,399	143%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	2,466	4,499	2,033	82%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$710,803	\$846,765	\$135,962	19%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,013,150	1,146,291	133,141	13%
3	Bad Debts - Emergency Department	1,401,411	1,385,005	(16,406)	-1%
4	Total Bad Debts (A)	\$3,125,364	\$3,378,061	\$252,697	8%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$1,766,984	\$3,214,518	\$1,447,534	82%
2	Bad Debts (A)	3,125,364	3,378,061	252,697	8%
3	Total Uncompensated Care (A)	\$4,892,348	\$6,592,579	\$1,700,231	35%
4	Uncompensated Care - Inpatient Services	\$1,221,367	\$1,595,696	\$374,329	31%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	1,631,336	2,424,371	793,035	49%
6	Uncompensated Care - Emergency Department	2,039,645	2,572,512	532,867	26%
7	Total Uncompensated Care (A)	\$4,892,348	\$6,592,579	\$1,700,231	35%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

CHARLOTTE HUNGERFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3) FY 2012	(4) FY 2013	(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>
<u>COMMERCIAL - ALL PAYERS</u>					
1	Total Gross Revenue	\$84,219,906	\$87,780,597	\$3,560,691	4%
2	Total Contractual Allowances	\$35,125,309	\$36,516,403	\$1,391,094	4%
	Total Accrued Payments (A)	\$49,094,597	\$51,264,194	\$2,169,597	4%
	Total Discount Percentage	41.71%	41.60%	-0.11%	0%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
A.	<u>Gross and Net Revenue</u>			
1	Inpatient Gross Revenue	\$87,023,589	\$89,321,803	\$101,429,210
2	Outpatient Gross Revenue	\$121,606,008	\$147,747,616	\$158,509,361
3	Total Gross Patient Revenue	\$208,629,597	\$237,069,419	\$259,938,571
4	Net Patient Revenue	\$109,579,717	\$116,313,832	\$116,677,548
B.	<u>Total Operating Expenses</u>			
1	Total Operating Expense	\$113,880,767	\$121,882,681	\$124,899,985
C.	<u>Utilization Statistics</u>			
1	Patient Days	27,425	25,249	26,574
2	Discharges	6,512	6,338	6,533
3	Average Length of Stay	4.2	4.0	4.1
4	Equivalent (Adjusted) Patient Days (EPD)	65,748	67,013	68,103
0	Equivalent (Adjusted) Discharges (ED)	15,612	16,822	16,743
D.	<u>Case Mix Statistics</u>			
1	Case Mix Index	1.25757	1.24112	1.27411
2	Case Mix Adjusted Patient Days (CMAPD)	34,489	31,337	33,858
3	Case Mix Adjusted Discharges (CMAD)	8,189	7,866	8,324
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	82,683	83,172	86,770
5	Case Mix Adjusted Equivalent Discharges (CMAED)	19,633	20,878	21,332
E.	<u>Gross Revenue Per Statistic</u>			
1	Total Gross Revenue per Patient Day	\$7,607	\$9,389	\$9,782
2	Total Gross Revenue per Discharge	\$32,038	\$37,404	\$39,789
3	Total Gross Revenue per EPD	\$3,173	\$3,538	\$3,817
4	Total Gross Revenue per ED	\$13,364	\$14,093	\$15,526
5	Total Gross Revenue per CMAEPD	\$2,523	\$2,850	\$2,996
6	Total Gross Revenue per CMAED	\$10,627	\$11,355	\$12,186
7	Inpatient Gross Revenue per EPD	\$1,324	\$1,333	\$1,489
8	Inpatient Gross Revenue per ED	\$5,574	\$5,310	\$6,058

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
F.	<u>Net Revenue Per Statistic</u>			
1	Net Patient Revenue per Patient Day	\$3,996	\$4,607	\$4,391
2	Net Patient Revenue per Discharge	\$16,827	\$18,352	\$17,860
3	Net Patient Revenue per EPD	\$1,667	\$1,736	\$1,713
4	Net Patient Revenue per ED	\$7,019	\$6,915	\$6,969
5	Net Patient Revenue per CMAEPD	\$1,325	\$1,398	\$1,345
6	Net Patient Revenue per CMAED	\$5,581	\$5,571	\$5,470
G.	<u>Operating Expense Per Statistic</u>			
1	Total Operating Expense per Patient Day	\$4,152	\$4,827	\$4,700
2	Total Operating Expense per Discharge	\$17,488	\$19,230	\$19,118
3	Total Operating Expense per EPD	\$1,732	\$1,819	\$1,834
4	Total Operating Expense per ED	\$7,295	\$7,246	\$7,460
5	Total Operating Expense per CMAEPD	\$1,377	\$1,465	\$1,439
6	Total Operating Expense per CMAED	\$5,801	\$5,838	\$5,855
H.	<u>Nursing Salary and Fringe Benefits Expense</u>			
1	Nursing Salary Expense	\$18,727,261	\$21,604,919	\$22,590,903
2	Nursing Fringe Benefits Expense	\$5,724,690	\$6,508,150	\$6,262,671
3	Total Nursing Salary and Fringe Benefits Expense	\$24,451,951	\$28,113,069	\$28,853,574
I.	<u>Physician Salary and Fringe Expense</u>			
1	Physician Salary Expense	\$5,949,173	\$7,857,318	\$8,984,103
2	Physician Fringe Benefits Expense	\$1,818,588	\$2,366,896	\$2,490,581
3	Total Physician Salary and Fringe Benefits Expense	\$7,767,761	\$10,224,214	\$11,474,684
J.	<u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u>			
1	Non-Nursing, Non-Physician Salary Expense	\$27,051,759	\$25,466,493	\$26,897,491
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$8,269,386	\$7,671,389	\$7,456,548
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$35,321,145	\$33,137,882	\$34,354,039

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
K.	Total Salary and Fringe Benefits Expense			
1	Total Salary Expense	\$51,728,193	\$54,928,730	\$58,472,497
2	Total Fringe Benefits Expense	\$15,812,664	\$16,546,435	\$16,209,800
3	Total Salary and Fringe Benefits Expense	\$67,540,857	\$71,475,165	\$74,682,297
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	295.3	321.4	305.9
2	Total Physician FTEs	26.3	31.1	33.9
3	Total Non-Nursing, Non-Physician FTEs	422.7	415.9	449.2
4	Total Full Time Equivalent Employees (FTEs)	744.3	768.4	789.0
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$63,418	\$67,221	\$73,851
2	Nursing Fringe Benefits Expense per FTE	\$19,386	\$20,249	\$20,473
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$82,804	\$87,471	\$94,324
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$226,204	\$252,647	\$265,018
2	Physician Fringe Benefits Expense per FTE	\$69,148	\$76,106	\$73,468
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$295,352	\$328,753	\$338,486
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$63,998	\$61,232	\$59,879
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$19,563	\$18,445	\$16,600
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$83,561	\$79,678	\$76,478
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$69,499	\$71,485	\$74,110
2	Total Fringe Benefits Expense per FTE	\$21,245	\$21,534	\$20,545
3	Total Salary and Fringe Benefits Expense per FTE	\$90,744	\$93,018	\$94,654
Q.	Total Salary and Fringe Ben. Expense per Statistic			

CHARLOTTE HUNGERFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,463	\$2,831	\$2,810
2	Total Salary and Fringe Benefits Expense per Discharge	\$10,372	\$11,277	\$11,432
3	Total Salary and Fringe Benefits Expense per EPD	\$1,027	\$1,067	\$1,097
4	Total Salary and Fringe Benefits Expense per ED	\$4,326	\$4,249	\$4,461
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$817	\$859	\$861
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,440	\$3,424	\$3,501