

JOHNSON MEMORIAL 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	\$787,925	\$188,181	(\$599,744)	-76%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$8,023,775	\$7,312,397	(\$711,378)	-9%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,254,591	\$1,317,470	\$62,879	5%
8	Prepaid Expenses	\$759,969	\$851,435	\$91,466	12%
9	Other Current Assets	\$193,008	\$1,688,323	\$1,495,315	775%
	Total Current Assets	\$11,019,268	\$11,357,806	\$338,538	3%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$3,616,492	\$3,729,727	\$113,235	3%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$363,097	\$268,338	(\$94,759)	-26%
4	Other Noncurrent Assets Whose Use is Limited	\$843,587	\$843,587	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$4,823,176	\$4,841,652	\$18,476	0%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$3,106,905	\$3,165,915	\$59,010	2%
7	Other Noncurrent Assets	\$4,660,539	\$5,742,650	\$1,082,111	23%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$58,629,232	\$58,937,092	\$307,860	1%
2	Less: Accumulated Depreciation	\$39,198,224	\$42,014,780	\$2,816,556	7%
	Property, Plant and Equipment, Net	\$19,431,008	\$16,922,312	(\$2,508,696)	-13%
3	Construction in Progress	\$0	\$0	\$0	0%
	Total Net Fixed Assets	\$19,431,008	\$16,922,312	(\$2,508,696)	-13%
	Total Assets	\$43,040,896	\$42,030,335	(\$1,010,561)	-2%
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$3,182,062	\$4,873,903	\$1,691,841	53%
2	Salaries, Wages and Payroll Taxes	\$2,014,282	\$1,930,115	(\$84,167)	-4%

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3	Due To Third Party Payers	\$1,272,580	\$2,564,571	\$1,291,991	102%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$11,987,500	\$11,987,500	0%
6	Current Portion of Notes Payable	\$342,500	\$471,952	\$129,452	38%
7	Other Current Liabilities	\$4,780,624	\$4,324,690	(\$455,934)	-10%
	Total Current Liabilities	\$11,592,048	\$26,152,731	\$14,560,683	126%
B.	<u>Long Term Debt:</u>				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$11,816,250	\$0	(\$11,816,250)	-100%
	Total Long Term Debt	\$11,816,250	\$0	(\$11,816,250)	-100%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$9,948,000	\$8,965,790	(\$982,210)	-10%
	Total Long Term Liabilities	\$21,764,250	\$8,965,790	(\$12,798,460)	-59%
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	\$4,961,873	\$2,069,573	(\$2,892,300)	-58%
2	Temporarily Restricted Net Assets	\$262,646	\$268,927	\$6,281	2%
3	Permanently Restricted Net Assets	\$4,460,079	\$4,573,314	\$113,235	3%
	Total Net Assets	\$9,684,598	\$6,911,814	(\$2,772,784)	-29%
	Total Liabilities and Net Assets	\$43,040,896	\$42,030,335	(\$1,010,561)	-2%

JOHNSON MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
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	\$152,679,640	\$159,131,313	\$6,451,673	4%
2	Less: Allowances	\$87,168,113	\$94,731,879	\$7,563,766	9%
3	Less: Charity Care	\$193,108	\$310,398	\$117,290	61%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$65,318,419	\$64,089,036	(\$1,229,383)	-2%
5	Provision for Bad Debts	\$0	\$4,455,452	\$4,455,452	0%
	Net Patient Service Revenue less provision for bad debts	\$65,318,419	\$59,633,584	(\$5,684,835)	-9%
6	Other Operating Revenue	\$257,382	\$275,135	\$17,753	7%
7	Net Assets Released from Restrictions	\$25,552	\$443,523	\$417,971	1636%
	Total Operating Revenue	\$65,601,353	\$60,352,242	(\$5,249,111)	-8%
B. Operating Expenses:					
1	Salaries and Wages	\$27,169,378	\$26,864,410	(\$304,968)	-1%
2	Fringe Benefits	\$6,788,404	\$6,251,065	(\$537,339)	-8%
3	Physicians Fees	\$1,583,778	\$1,855,379	\$271,601	17%
4	Supplies and Drugs	\$6,460,003	\$8,129,251	\$1,669,248	26%
5	Depreciation and Amortization	\$3,178,071	\$3,082,027	(\$96,044)	-3%
6	Bad Debts	\$3,564,251	\$0	(\$3,564,251)	-100%
7	Interest Expense	\$1,495,715	\$1,408,245	(\$87,470)	-6%
8	Malpractice Insurance Cost	\$736,725	\$649,270	(\$87,455)	-12%
9	Other Operating Expenses	\$15,004,733	\$15,338,405	\$333,672	2%
	Total Operating Expenses	\$65,981,058	\$63,578,052	(\$2,403,006)	-4%
	Income/(Loss) From Operations	(\$379,705)	(\$3,225,810)	(\$2,846,105)	750%
C. Non-Operating Revenue:					
1	Income from Investments	\$427,261	\$231,079	(\$196,182)	-46%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$3,200	\$1,200	(\$2,000)	-63%
	Total Non-Operating Revenue	\$430,461	\$232,279	(\$198,182)	-46%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$50,756	(\$2,993,531)	(\$3,044,287)	-5998%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

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TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
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	\$50,756	(\$2,993,531)	(\$3,044,287)	-5998%
	Principal Payments	\$437,603	\$231,498	(\$206,105)	-47%

JOHNSON MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
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	\$31,435,866	\$31,499,837	\$63,971	0%
2	MEDICARE MANAGED CARE	\$8,288,629	\$8,517,807	\$229,178	3%
3	MEDICAID	\$8,496,248	\$8,611,611	\$115,363	1%
4	MEDICAID MANAGED CARE	\$1,492,140	\$0	(\$1,492,140)	-100%
5	CHAMPUS/TRICARE	\$342,847	\$411,547	\$68,700	20%
6	COMMERCIAL INSURANCE	\$650,971	\$421,053	(\$229,918)	-35%
7	NON-GOVERNMENT MANAGED CARE	\$13,621,109	\$12,058,303	(\$1,562,806)	-11%
8	WORKER'S COMPENSATION	\$164,923	\$120,679	(\$44,244)	-27%
9	SELF- PAY/UNINSURED	\$1,122,051	\$647,359	(\$474,692)	-42%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$65,614,784	\$62,288,196	(\$3,326,588)	-5%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$22,226,566	\$27,713,669	\$5,487,103	25%
2	MEDICARE MANAGED CARE	\$7,013,892	\$8,312,067	\$1,298,175	19%
3	MEDICAID	\$12,129,986	\$17,040,706	\$4,910,720	40%
4	MEDICAID MANAGED CARE	\$2,122,969	\$0	(\$2,122,969)	-100%
5	CHAMPUS/TRICARE	\$542,027	\$562,072	\$20,045	4%
6	COMMERCIAL INSURANCE	\$1,612,386	\$1,317,297	(\$295,089)	-18%
7	NON-GOVERNMENT MANAGED CARE	\$36,870,444	\$37,804,949	\$934,505	3%
8	WORKER'S COMPENSATION	\$2,475,667	\$2,201,990	(\$273,677)	-11%
9	SELF- PAY/UNINSURED	\$2,070,919	\$1,890,367	(\$180,552)	-9%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$87,064,856	\$96,843,117	\$9,778,261	11%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$53,662,432	\$59,213,506	\$5,551,074	10%
2	MEDICARE MANAGED CARE	\$15,302,521	\$16,829,874	\$1,527,353	10%
3	MEDICAID	\$20,626,234	\$25,652,317	\$5,026,083	24%
4	MEDICAID MANAGED CARE	\$3,615,109	\$0	(\$3,615,109)	-100%
5	CHAMPUS/TRICARE	\$884,874	\$973,619	\$88,745	10%
6	COMMERCIAL INSURANCE	\$2,263,357	\$1,738,350	(\$525,007)	-23%
7	NON-GOVERNMENT MANAGED CARE	\$50,491,553	\$49,863,252	(\$628,301)	-1%
8	WORKER'S COMPENSATION	\$2,640,590	\$2,322,669	(\$317,921)	-12%
9	SELF- PAY/UNINSURED	\$3,192,970	\$2,537,726	(\$655,244)	-21%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$152,679,640	\$159,131,313	\$6,451,673	4%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$10,737,352	\$10,612,108	(\$125,244)	-1%
2	MEDICARE MANAGED CARE	\$4,275,568	\$2,896,952	(\$1,378,616)	-32%
3	MEDICAID	\$2,977,074	\$1,929,397	(\$1,047,677)	-35%
4	MEDICAID MANAGED CARE	\$408,364	\$0	(\$408,364)	-100%
5	CHAMPUS/TRICARE	\$152,368	\$159,823	\$7,455	5%
6	COMMERCIAL INSURANCE	\$478,514	\$342,989	(\$135,525)	-28%

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FISCAL YEAR 2013					
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	\$7,909,766	\$6,664,380	(\$1,245,386)	-16%
8	WORKER'S COMPENSATION	\$87,647	\$104,548	\$16,901	19%
9	SELF- PAY/UNINSURED	\$14,045	\$100	(\$13,945)	-99%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$27,040,698	\$22,710,297	(\$4,330,401)	-16%
B.	<u>OUTPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$6,028,770	\$6,895,988	\$867,218	14%
2	MEDICARE MANAGED CARE	\$3,628,043	\$2,047,200	(\$1,580,843)	-44%
3	MEDICAID	\$2,392,306	\$4,033,829	\$1,641,523	69%
4	MEDICAID MANAGED CARE	\$1,318,507	\$0	(\$1,318,507)	-100%
5	CHAMPUS/TRICARE	\$157,690	\$171,552	\$13,862	9%
6	COMMERCIAL INSURANCE	\$1,182,046	\$725,985	(\$456,061)	-39%
7	NON-GOVERNMENT MANAGED CARE	\$19,533,782	\$19,585,686	\$51,904	0%
8	WORKER'S COMPENSATION	\$1,449,734	\$1,361,759	(\$87,975)	-6%
9	SELF- PAY/UNINSURED	\$108,242	\$95,389	(\$12,853)	-12%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$35,799,120	\$34,917,388	(\$881,732)	-2%
C.	<u>TOTAL NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$16,766,122	\$17,508,096	\$741,974	4%
2	MEDICARE MANAGED CARE	\$7,903,611	\$4,944,152	(\$2,959,459)	-37%
3	MEDICAID	\$5,369,380	\$5,963,226	\$593,846	11%
4	MEDICAID MANAGED CARE	\$1,726,871	\$0	(\$1,726,871)	-100%
5	CHAMPUS/TRICARE	\$310,058	\$331,375	\$21,317	7%
6	COMMERCIAL INSURANCE	\$1,660,560	\$1,068,974	(\$591,586)	-36%
7	NON-GOVERNMENT MANAGED CARE	\$27,443,548	\$26,250,066	(\$1,193,482)	-4%
8	WORKER'S COMPENSATION	\$1,537,381	\$1,466,307	(\$71,074)	-5%
9	SELF- PAY/UNINSURED	\$122,287	\$95,489	(\$26,798)	-22%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$62,839,818	\$57,627,685	(\$5,212,133)	-8%
III.	<u>STATISTICS BY PAYER</u>				
A.	<u>DISCHARGES</u>				
1	MEDICARE TRADITIONAL	1,271	1,301	30	2%
2	MEDICARE MANAGED CARE	330	332	2	1%
3	MEDICAID	539	581	42	8%
4	MEDICAID MANAGED CARE	107	0	(107)	-100%
5	CHAMPUS/TRICARE	19	29	10	53%
6	COMMERCIAL INSURANCE	43	32	(11)	-26%
7	NON-GOVERNMENT MANAGED CARE	858	811	(47)	-5%
8	WORKER'S COMPENSATION	8	5	(3)	-38%
9	SELF- PAY/UNINSURED	76	48	(28)	-37%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	3,251	3,139	(112)	-3%
B.	<u>PATIENT DAYS</u>				
1	MEDICARE TRADITIONAL	7,475	7,883	408	5%
2	MEDICARE MANAGED CARE	1,767	1,862	95	5%
3	MEDICAID	2,426	2,623	197	8%

JOHNSON MEMORIAL HOSPITAL					
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FISCAL YEAR 2013					
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	478	0	(478)	-100%
5	CHAMPUS/TRICARE	92	112	20	22%
6	COMMERCIAL INSURANCE	190	189	(1)	-1%
7	NON-GOVERNMENT MANAGED CARE	3,417	3,263	(154)	-5%
8	WORKER'S COMPENSATION	26	18	(8)	-31%
9	SELF- PAY/UNINSURED	318	180	(138)	-43%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	16,189	16,130	(59)	0%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	23,135	23,806	671	3%
2	MEDICARE MANAGED CARE	7,676	9,037	1,361	18%
3	MEDICAID	8,985	11,677	2,692	30%
4	MEDICAID MANAGED CARE	2,010	0	(2,010)	-100%
5	CHAMPUS/TRICARE	524	523	(1)	0%
6	COMMERCIAL INSURANCE	1,018	896	(122)	-12%
7	NON-GOVERNMENT MANAGED CARE	35,746	33,892	(1,854)	-5%
8	WORKER'S COMPENSATION	1,506	1,351	(155)	-10%
9	SELF- PAY/UNINSURED	1,951	1,743	(208)	-11%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	82,551	82,925	374	0%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$4,900,784	\$5,535,332	\$634,548	13%
2	MEDICARE MANAGED CARE	\$1,330,444	\$1,575,757	\$245,313	18%
3	MEDICAID	\$6,584,825	\$9,018,923	\$2,434,098	37%
4	MEDICAID MANAGED CARE	\$1,130,485	\$0	(\$1,130,485)	-100%
5	CHAMPUS/TRICARE	\$278,462	\$315,008	\$36,546	13%
6	COMMERCIAL INSURANCE	\$287,663	\$700,428	\$412,765	143%
7	NON-GOVERNMENT MANAGED CARE	\$9,676,733	\$9,172,791	(\$503,942)	-5%
8	WORKER'S COMPENSATION	\$604,198	\$547,820	(\$56,378)	-9%
9	SELF- PAY/UNINSURED	\$1,750,994	\$1,493,092	(\$257,902)	-15%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$26,544,588	\$28,359,151	\$1,814,563	7%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$1,324,558	\$1,453,395	\$128,837	10%
2	MEDICARE MANAGED CARE	\$336,555	\$389,940	\$53,385	16%
3	MEDICAID	\$1,426,242	\$1,958,589	\$532,347	37%
4	MEDICAID MANAGED CARE	\$210,962	\$0	(\$210,962)	-100%
5	CHAMPUS/TRICARE	\$71,963	\$78,769	\$6,806	9%
6	COMMERCIAL INSURANCE	\$177,057	\$376,405	\$199,348	113%
7	NON-GOVERNMENT MANAGED CARE	\$5,489,314	\$4,877,324	(\$611,990)	-11%
8	WORKER'S COMPENSATION	\$445,569	\$370,378	(\$75,191)	-17%
9	SELF- PAY/UNINSURED	\$53,334	\$50,122	(\$3,212)	-6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
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LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$9,535,554	\$9,554,922	\$19,368	0%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	2,845	2,923	78	3%
2	MEDICARE MANAGED CARE	716	791	75	10%
3	MEDICAID	4,030	5,484	1,454	36%
4	MEDICAID MANAGED CARE	983	0	(983)	-100%
5	CHAMPUS/TRICARE	208	242	34	16%
6	COMMERCIAL INSURANCE	452	450	(2)	0%
7	NON-GOVERNMENT MANAGED CARE	6,927	6,146	(781)	-11%
8	WORKER'S COMPENSATION	609	568	(41)	-7%
9	SELF- PAY/UNINSURED	1,375	1,213	(162)	-12%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	18,145	17,817	(328)	-2%

JOHNSON MEMORIAL 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
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$9,394,293	\$9,201,815	(\$192,478)	-2%
2	Physician Salaries	\$0	\$0	\$0	0%
3	Non-Nursing, Non-Physician Salaries	\$17,775,085	\$17,662,595	(\$112,490)	-1%
	Total Salaries & Wages	\$27,169,378	\$26,864,410	(\$304,968)	-1%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$2,347,211	\$2,141,165	(\$206,046)	-9%
2	Physician Fringe Benefits	\$0	\$0	\$0	0%
3	Non-Nursing, Non-Physician Fringe Benefits	\$4,441,193	\$4,109,900	(\$331,293)	-7%
	Total Fringe Benefits	\$6,788,404	\$6,251,065	(\$537,339)	-8%
C. Contractual Labor Fees:					
1	Nursing Fees	\$153,963	\$111,656	(\$42,307)	-27%
2	Physician Fees	\$1,583,778	\$1,855,379	\$271,601	17%
3	Non-Nursing, Non-Physician Fees	\$525,817	\$729,427	\$203,610	39%
	Total Contractual Labor Fees	\$2,263,558	\$2,696,462	\$432,904	19%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$3,931,361	\$3,747,613	(\$183,748)	-5%
2	Pharmaceutical Costs	\$2,528,642	\$4,381,638	\$1,852,996	73%
	Total Medical Supplies and Pharmaceutical Cost	\$6,460,003	\$8,129,251	\$1,669,248	26%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$1,148,143	\$1,099,226	(\$48,917)	-4%
2	Depreciation-Equipment	\$1,845,947	\$1,798,820	(\$47,127)	-3%
3	Amortization	\$183,981	\$183,981	\$0	0%
	Total Depreciation and Amortization	\$3,178,071	\$3,082,027	(\$96,044)	-3%
F. Bad Debts:					
1	Bad Debts	\$3,564,251	\$0	(\$3,564,251)	-100%
G. Interest Expense:					
1	Interest Expense	\$1,495,715	\$1,408,245	(\$87,470)	-6%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$736,725	\$649,270	(\$87,455)	-12%
I. Utilities:					
1	Water	\$32,648	\$29,368	(\$3,280)	-10%
2	Natural Gas	\$34,135	\$31,846	(\$2,289)	-7%
3	Oil	\$714,637	\$699,727	(\$14,910)	-2%
4	Electricity	\$728,597	\$751,283	\$22,686	3%
5	Telephone	\$203,761	\$206,512	\$2,751	1%
6	Other Utilities	\$74,421	\$89,078	\$14,657	20%
	Total Utilities	\$1,788,199	\$1,807,814	\$19,615	1%
J. Business Expenses:					
1	Accounting Fees	\$82,119	\$88,995	\$6,876	8%
2	Legal Fees	\$688,282	\$557,738	(\$130,544)	-19%
3	Consulting Fees	\$470,861	\$486,831	\$15,970	3%

JOHNSON MEMORIAL 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	\$153,438	\$198,877	\$45,439	30%
5	Equipment Leases	\$1,126,720	\$855,267	(\$271,453)	-24%
6	Building Leases	\$768,096	\$813,973	\$45,877	6%
7	Repairs and Maintenance	\$461,460	\$490,553	\$29,093	6%
8	Insurance	\$157,555	\$169,173	\$11,618	7%
9	Travel	\$26,824	\$35,841	\$9,017	34%
10	Conferences	\$50,242	\$8,539	(\$41,703)	-83%
11	Property Tax	\$0	\$0	\$0	0%
12	General Supplies	\$254,675	\$190,428	(\$64,247)	-25%
13	Licenses and Subscriptions	\$29,768	\$25,522	(\$4,246)	-14%
14	Postage and Shipping	\$77,281	\$80,282	\$3,001	4%
15	Advertising	\$200,427	\$92,199	(\$108,228)	-54%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$943,167	\$911,987	(\$31,180)	-3%
18	Computer hardware & small equipment	\$110,415	\$66,101	(\$44,314)	-40%
19	Dietary / Food Services	\$279,626	\$282,223	\$2,597	1%
20	Lab Fees / Red Cross charges	\$977,414	\$836,799	(\$140,615)	-14%
21	Billing & Collection / Bank Fees	\$669,592	\$741,577	\$71,985	11%
22	Recruiting / Employee Education & Recognition	\$15,225	\$0	(\$15,225)	-100%
23	Laundry / Linen	\$264,768	\$275,445	\$10,677	4%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$142,083	\$140,866	(\$1,217)	-1%
26	Purchased Services - Medical	\$851,524	\$747,468	(\$104,056)	-12%
27	Purchased Services - Non Medical	\$666,560	\$634,655	(\$31,905)	-5%
28	Other Business Expenses	\$2,777,158	\$3,660,775	\$883,617	32%
	Total Business Expenses	\$12,245,280	\$12,392,114	\$146,834	1%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$291,474	\$297,394	\$5,920	2%
	Total Operating Expenses - All Expense Categories*	\$65,981,058	\$63,578,052	(\$2,403,006)	-4%
*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	\$5,251,402	\$6,357,098	\$1,105,696	21%
2	General Accounting	\$716,197	\$641,636	(\$74,561)	-10%
3	Patient Billing & Collection	\$1,183,232	\$1,135,091	(\$48,141)	-4%
4	Admitting / Registration Office	\$924,368	\$849,811	(\$74,557)	-8%
5	Data Processing	\$1,643,917	\$1,499,147	(\$144,770)	-9%
6	Communications	\$175,629	\$184,340	\$8,711	5%
7	Personnel	\$7,363,274	\$6,886,655	(\$476,619)	-6%
8	Public Relations	\$388,162	\$104,740	(\$283,422)	-73%
9	Purchasing	\$280,545	\$277,303	(\$3,242)	-1%
10	Dietary and Cafeteria	\$761,641	\$775,747	\$14,106	2%
11	Housekeeping	\$697,389	\$680,851	(\$16,538)	-2%
12	Laundry & Linen	\$266,969	\$277,900	\$10,931	4%
13	Operation of Plant	\$1,879,045	\$1,882,207	\$3,162	0%
14	Security	\$163,946	\$171,189	\$7,243	4%
15	Repairs and Maintenance	\$769,941	\$1,046,232	\$276,291	36%
16	Central Sterile Supply	\$227,073	\$186,753	(\$40,320)	-18%

JOHNSON MEMORIAL 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	\$3,214,901	\$5,073,363	\$1,858,462	58%
18	Other General Services	\$4,501,031	\$4,279,512	(\$221,519)	-5%
	Total General Services	\$30,408,662	\$32,309,575	\$1,900,913	6%
	B. Professional Services:				
1	Medical Care Administration	\$1,006,215	\$950,070	(\$56,145)	-6%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$855,495	\$691,682	(\$163,813)	-19%
4	Medical Records	\$879,322	\$943,165	\$63,843	7%
5	Social Service	\$0	\$0	\$0	0%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$2,741,032	\$2,584,917	(\$156,115)	-6%
	C. Special Services:				
1	Operating Room	\$1,744,436	\$1,542,168	(\$202,268)	-12%
2	Recovery Room	\$333,444	\$317,015	(\$16,429)	-5%
3	Anesthesiology	\$464,175	\$584,573	\$120,398	26%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$2,148,144	\$2,086,259	(\$61,885)	-3%
6	Diagnostic Ultrasound	\$293,571	\$297,744	\$4,173	1%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$399,764	\$372,056	(\$27,708)	-7%
9	CT Scan	\$348,562	\$372,782	\$24,220	7%
10	Laboratory	\$3,447,796	\$3,356,317	(\$91,479)	-3%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$261,495	\$271,973	\$10,478	4%
13	Electrocardiology	\$64,353	\$68,199	\$3,846	6%
14	Electroencephalography	\$24,654	\$19,810	(\$4,844)	-20%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$718,444	\$703,567	(\$14,877)	-2%
19	Pulmonary Function	\$393,647	\$315,586	(\$78,061)	-20%
20	Intravenous Therapy	\$110,547	\$129,372	\$18,825	17%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$204,338	\$197,885	(\$6,453)	-3%
23	Renal Dialysis	\$94,827	\$92,255	(\$2,572)	-3%
24	Emergency Room	\$3,633,534	\$3,094,824	(\$538,710)	-15%
25	MRI	\$698,435	\$689,520	(\$8,915)	-1%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$775,531	\$769,147	(\$6,384)	-1%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$1,483,241	\$1,873,019	\$389,778	26%
	Total Special Services	\$17,642,938	\$17,154,071	(\$488,867)	-3%
	D. Routine Services:				
1	Medical & Surgical Units	\$3,646,267	\$3,562,559	(\$83,708)	-2%
2	Intensive Care Unit	\$1,387,027	\$1,373,067	(\$13,960)	-1%
3	Coronary Care Unit	\$0	\$0	\$0	0%

JOHNSON MEMORIAL 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	\$2,169,504	\$2,183,818	\$14,314	1%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$1,125,656	\$1,116,371	(\$9,285)	-1%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$3,295,721	\$3,293,674	(\$2,047)	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
	Total Routine Services	\$11,624,175	\$11,529,489	(\$94,686)	-1%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$3,564,251	\$0	(\$3,564,251)	-100%
	Total Operating Expenses - All Departments*	\$65,981,058	\$63,578,052	(\$2,403,006)	-4%
*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.					

JOHNSON MEMORIAL 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>
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$59,499,426	\$65,318,419	\$59,633,584
2	Other Operating Revenue	623,863	282,934	718,658
3	Total Operating Revenue	\$60,123,289	\$65,601,353	\$60,352,242
4	Total Operating Expenses	61,577,163	65,981,058	63,578,052
5	Income/(Loss) From Operations	(\$1,453,874)	(\$379,705)	(\$3,225,810)
6	Total Non-Operating Revenue	1,205,826	430,461	232,279
7	Excess/(Deficiency) of Revenue Over Expenses	(\$248,048)	\$50,756	(\$2,993,531)
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	-2.37%	-0.58%	-5.32%
2	Hospital Non Operating Margin	1.97%	0.65%	0.38%
3	Hospital Total Margin	-0.40%	0.08%	-4.94%
4	Income/(Loss) From Operations	(\$1,453,874)	(\$379,705)	(\$3,225,810)
5	Total Operating Revenue	\$60,123,289	\$65,601,353	\$60,352,242
6	Total Non-Operating Revenue	\$1,205,826	\$430,461	\$232,279
7	Total Revenue	\$61,329,115	\$66,031,814	\$60,584,521
8	Excess/(Deficiency) of Revenue Over Expenses	(\$248,048)	\$50,756	(\$2,993,531)
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$4,359,087	\$4,961,873	\$2,069,573
2	Hospital Total Net Assets	\$8,690,013	\$9,684,598	\$6,911,814
3	Hospital Change in Total Net Assets	(\$43,952)	\$994,585	(\$2,772,784)
4	Hospital Change in Total Net Assets %	99.5%	11.4%	-28.6%
D. <u>Cost Data Summary</u>				
1	<u>Ratio of Cost to Charges</u>	0.41	0.43	0.40
2	Total Operating Expenses	\$61,577,163	\$65,981,058	\$63,578,052
3	Total Gross Revenue	\$148,782,545	\$152,679,640	\$159,131,313
4	Total Other Operating Revenue	\$1,209,809	\$282,934	\$275,135

JOHNSON MEMORIAL 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
5	<u>Private Payment to Cost Ratio</u>	1.35	1.28	1.34
6	Total Non-Government Payments	\$31,234,890	\$30,763,776	\$28,880,836
7	Total Uninsured Payments	\$203,253	\$122,287	\$95,489
8	Total Non-Government Charges	\$58,453,607	\$58,588,470	\$56,461,997
9	Total Uninsured Charges	\$2,591,925	\$3,192,970	\$2,537,726
10	<u>Medicare Payment to Cost Ratio</u>	0.78	0.83	0.74
11	Total Medicare Payments	\$22,030,836	\$24,669,733	\$22,452,248
12	Total Medicare Charges	\$68,723,859	\$68,964,953	\$76,043,380
13	<u>Medicaid Payment to Cost Ratio</u>	0.65	0.68	0.58
14	Total Medicaid Payments	\$5,516,654	\$7,096,251	\$5,963,226
15	Total Medicaid Charges	\$20,616,125	\$24,241,343	\$25,652,317
16	<u>Uncompensated Care Cost</u>	\$1,070,220	\$1,620,753	\$1,900,823
17	Charity Care	\$465,816	\$193,108	\$310,398
18	Bad Debts	\$2,141,072	\$3,564,251	\$4,455,452
19	Total Uncompensated Care	\$2,606,888	\$3,757,359	\$4,765,850
20	<u>Uncompensated Care % of Total Expenses</u>	1.7%	2.5%	3.0%
21	Total Operating Expenses	\$61,577,163	\$65,981,058	\$63,578,052
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1	1	0
2	Total Current Assets	\$11,631,657	\$11,019,268	\$11,357,806
3	Total Current Liabilities	\$12,248,428	\$11,592,048	\$26,152,731
4	<u>Days Cash on Hand</u>	6	5	1
5	Cash and Cash Equivalents	\$884,888	\$787,925	\$188,181
6	Short Term Investments	0	0	0

JOHNSON MEMORIAL 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	\$884,888	\$787,925	\$188,181
8	Total Operating Expenses	\$61,577,163	\$65,981,058	\$63,578,052
9	Depreciation Expense	\$3,243,262	\$3,178,071	\$3,082,027
10	Operating Expenses less Depreciation Expense	\$58,333,901	\$62,802,987	\$60,496,025
11	<u>Days Revenue in Patient Accounts Receivable</u>	37	38	29
12	Net Patient Accounts Receivable	\$7,216,452	\$8,023,775	\$7,312,397
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,266,304	\$1,272,580	\$2,564,571
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$5,950,148	\$6,751,195	\$4,747,826
16	Total Net Patient Revenue	\$59,499,426	\$65,318,419	\$59,633,584
17	<u>Average Payment Period</u>	77	67	158
18	Total Current Liabilities	\$12,248,428	\$11,592,048	\$26,152,731
19	Total Operating Expenses	\$61,577,163	\$65,981,058	\$63,578,052
20	Depreciation Expense	\$3,243,262	\$3,178,071	\$3,082,027
21	Total Operating Expenses less Depreciation Expense	\$58,333,901	\$62,802,987	\$60,496,025
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	20.1	22.5	16.4
2	Total Net Assets	\$8,690,013	\$9,684,598	\$6,911,814
3	Total Assets	\$43,313,549	\$43,040,896	\$42,030,335
4	<u>Cash Flow to Total Debt Ratio</u>	12.3	13.8	0.3
5	Excess/(Deficiency) of Revenues Over Expenses	(\$248,048)	\$50,756	(\$2,993,531)
6	Depreciation Expense	\$3,243,262	\$3,178,071	\$3,082,027
7	Excess of Revenues Over Expenses and Depreciation Expense	\$2,995,214	\$3,228,827	\$88,496
8	Total Current Liabilities	\$12,248,428	\$11,592,048	\$26,152,731
9	Total Long Term Debt	\$12,158,750	\$11,816,250	\$0
10	Total Current Liabilities and Total Long Term Debt	\$24,407,178	\$23,408,298	\$26,152,731

JOHNSON MEMORIAL 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>	58.3	55.0	-
12	Total Long Term Debt	\$12,158,750	\$11,816,250	\$0
13	Total Net Assets	\$8,690,013	\$9,684,598	\$6,911,814
14	Total Long Term Debt and Total Net Assets	\$20,848,763	\$21,500,848	\$6,911,814
15	<u>Debt Service Coverage Ratio</u>	2.4	2.4	0.9
16	Excess Revenues over Expenses	(248,048)	\$50,756	(\$2,993,531)
17	Interest Expense	1,480,694	\$1,495,715	\$1,408,245
18	Depreciation and Amortization Expense	3,243,262	\$3,178,071	\$3,082,027
19	Principal Payments	423,393	\$437,603	\$231,498
G.	<u>Other Financial Ratios</u>			
20	<u>Average Age of Plant</u>	11.5	12.3	13.6
21	Accumulated Depreciation	37,256,964	39,198,224	42,014,780
22	Depreciation and Amortization Expense	3,243,262	3,178,071	3,082,027
H.	<u>Utilization Measures Summary</u>			
1	Patient Days	15,790	16,189	16,130
2	Discharges	3,268	3,251	3,139
3	ALOS	4.8	5.0	5.1
4	Staffed Beds	72	72	70
5	Available Beds	-	95	95
6	Licensed Beds	95	101	101
7	Occupancy of Staffed Beds	60.1%	61.6%	63.1%
8	Occupancy of Available Beds	45.5%	46.7%	46.5%
9	Full Time Equivalent Employees	463.5	464.2	460.3
I.	<u>Hospital Gross Revenue Payer Mix Percentage</u>			
1	Non-Government Gross Revenue Payer Mix Percentage	37.5%	36.3%	33.9%
2	Medicare Gross Revenue Payer Mix Percentage	46.2%	45.2%	47.8%

JOHNSON MEMORIAL 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	13.9%	15.9%	16.1%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	1.7%	2.1%	1.6%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.7%	0.6%	0.6%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$55,861,682	\$55,395,500	\$53,924,271
9	Medicare Gross Revenue (Charges)	\$68,723,859	\$68,964,953	\$76,043,380
10	Medicaid Gross Revenue (Charges)	\$20,616,125	\$24,241,343	\$25,652,317
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$2,591,925	\$3,192,970	\$2,537,726
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$988,954	\$884,874	\$973,619
14	Total Gross Revenue (Charges)	\$148,782,545	\$152,679,640	\$159,131,313
J.	<u>Hospital Net Revenue Payer Mix Percentage</u>			
1	Non-Government Net Revenue Payer Mix Percentage	52.4%	48.8%	50.0%
2	Medicare Net Revenue Payer Mix Percentage	37.2%	39.3%	39.0%
3	Medicaid Net Revenue Payer Mix Percentage	9.3%	11.3%	10.3%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.3%	0.2%	0.2%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.7%	0.5%	0.6%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$31,031,637	\$30,641,489	\$28,785,347
9	Medicare Net Revenue (Payments)	\$22,030,836	\$24,669,733	\$22,452,248
10	Medicaid Net Revenue (Payments)	\$5,516,654	\$7,096,251	\$5,963,226
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$203,253	\$122,287	\$95,489
13	CHAMPUS / TRICARE Net Revenue Payments)	\$389,724	\$310,058	\$331,375
14	Total Net Revenue (Payments)	\$59,172,104	\$62,839,818	\$57,627,685
K.	<u>Discharges</u>			
1	Non-Government (Including Self Pay / Uninsured)	979	985	896
2	Medicare	1,616	1,601	1,633
3	Medical Assistance	643	646	581
4	Medicaid	643	646	581
5	Other Medical Assistance	-	-	-
6	CHAMPUS / TRICARE	30	19	29

JOHNSON MEMORIAL 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)	52	76	48
8	Total	3,268	3,251	3,139
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.02030	1.03942	0.96850
2	Medicare	1.36050	1.32250	1.31700
3	Medical Assistance	0.84913	0.97485	0.94340
4	Medicaid	0.84913	0.97485	0.94340
5	Other Medical Assistance	0.00000	0.00000	0.85000
6	CHAMPUS / TRICARE	0.91880	1.12230	1.08870
7	Uninsured (Included In Non-Government)	0.92350	0.97610	1.01490
8	Total Case Mix Index	1.15392	1.16648	1.14626
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	2,686	2,537	2,309
2	Emergency Room - Treated and Discharged	17,435	18,145	17,817
3	Total Emergency Room Visits	20,121	20,682	20,126

JOHNSON MEMORIAL 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	\$331,940	\$633,828	\$301,888	91%
2	Inpatient Payments	\$170,621	\$236,733	\$66,112	39%
3	Outpatient Charges	\$201,591	\$453,147	\$251,556	125%
4	Outpatient Payments	\$105,314	\$102,608	(\$2,706)	-3%
5	Discharges	11	19	8	73%
6	Patient Days	67	159	92	137%
7	Outpatient Visits (Excludes ED Visits)	187	398	211	113%
8	Emergency Department Outpatient Visits	24	49	25	104%
9	Emergency Department Inpatient Admissions	10	17	7	70%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$533,531	\$1,086,975	\$553,444	104%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$275,935	\$339,341	\$63,406	23%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$3,499	\$3,499	0%
4	Outpatient Payments	\$0	\$703	\$703	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	2	2	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$3,499	\$3,499	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$703	\$703	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$2,315,054	\$2,211,313	(\$103,741)	-4%
2	Inpatient Payments	\$1,145,646	\$760,389	(\$385,257)	-34%
3	Outpatient Charges	\$2,416,104	\$2,829,357	\$413,253	17%
4	Outpatient Payments	\$1,265,934	\$665,236	(\$600,698)	-47%
5	Discharges	77	98	21	27%
6	Patient Days	471	421	(50)	-11%
7	Outpatient Visits (Excludes ED Visits)	2,391	2,868	477	20%
8	Emergency Department Outpatient Visits	217	243	26	12%
9	Emergency Department Inpatient Admissions	70	84	14	20%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,731,158	\$5,040,670	\$309,512	7%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,411,580	\$1,425,625	(\$985,955)	-41%
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%

JOHNSON MEMORIAL 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	\$0	\$24,415	\$24,415	0%
2	Inpatient Payments	\$0	\$7,722	\$7,722	0%
3	Outpatient Charges	\$15,895	\$24,007	\$8,112	51%
4	Outpatient Payments	\$11,255	\$5,229	(\$6,026)	-54%
5	Discharges	0	1	1	0%
6	Patient Days	0	1	1	0%
7	Outpatient Visits (Excludes ED Visits)	3	2	(1)	-33%
8	Emergency Department Outpatient Visits	10	6	(4)	-40%
9	Emergency Department Inpatient Admissions	0	1	1	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$15,895	\$48,422	\$32,527	205%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$11,255	\$12,951	\$1,696	15%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
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 INSURANCE COMPANY					
1	Inpatient Charges	\$3,857,537	\$3,963,375	\$105,838	3%
2	Inpatient Payments	\$2,011,054	\$1,290,413	(\$720,641)	-36%
3	Outpatient Charges	\$2,970,514	\$3,202,758	\$232,244	8%
4	Outpatient Payments	\$1,536,433	\$862,374	(\$674,059)	-44%
5	Discharges	165	145	(20)	-12%
6	Patient Days	822	886	64	8%
7	Outpatient Visits (Excludes ED Visits)	3,077	3,272	195	6%
8	Emergency Department Outpatient Visits	284	318	34	12%
9	Emergency Department Inpatient Admissions	152	132	(20)	-13%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,828,051	\$7,166,133	\$338,082	5%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,547,487	\$2,152,787	(\$1,394,700)	-39%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$213,273	\$154,468	(\$58,805)	-28%
2	Inpatient Payments	\$126,723	\$51,608	(\$75,115)	-59%
3	Outpatient Charges	\$180,225	\$342,713	\$162,488	90%
4	Outpatient Payments	\$84,036	\$72,268	(\$11,768)	-14%
5	Discharges	11	8	(3)	-27%
6	Patient Days	48	31	(17)	-35%
7	Outpatient Visits (Excludes ED Visits)	126	184	58	46%
8	Emergency Department Outpatient Visits	23	48	25	109%
9	Emergency Department Inpatient Admissions	7	7	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$393,498	\$497,181	\$103,683	26%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$210,759	\$123,876	(\$86,883)	-41%
I. AETNA					

JOHNSON MEMORIAL 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	\$648,475	\$867,624	\$219,149	34%
2	Inpatient Payments	\$328,467	\$312,790	(\$15,677)	-5%
3	Outpatient Charges	\$390,846	\$802,593	\$411,747	105%
4	Outpatient Payments	\$207,206	\$186,831	(\$20,375)	-10%
5	Discharges	23	33	10	43%
6	Patient Days	154	203	49	32%
7	Outpatient Visits (Excludes ED Visits)	314	597	283	90%
8	Emergency Department Outpatient Visits	39	57	18	46%
9	Emergency Department Inpatient Admissions	21	27	6	29%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,039,321	\$1,670,217	\$630,896	61%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$535,673	\$499,621	(\$36,052)	-7%
J.	HUMANA				
1	Inpatient Charges	\$0	\$41,553	\$41,553	0%
2	Inpatient Payments	\$0	\$13,324	\$13,324	0%
3	Outpatient Charges	\$32,163	\$36,207	\$4,044	13%
4	Outpatient Payments	\$18,360	\$11,757	(\$6,603)	-36%
5	Discharges	0	2	2	0%
6	Patient Days	0	8	8	0%
7	Outpatient Visits (Excludes ED Visits)	18	33	15	83%
8	Emergency Department Outpatient Visits	9	10	1	11%
9	Emergency Department Inpatient Admissions	0	2	2	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$32,163	\$77,760	\$45,597	142%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$18,360	\$25,081	\$6,721	37%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$457,156	\$224,962	(\$232,194)	-51%
2	Inpatient Payments	\$261,587	\$73,340	(\$188,247)	-72%
3	Outpatient Charges	\$620,592	\$458,427	(\$162,165)	-26%
4	Outpatient Payments	\$302,513	\$101,440	(\$201,073)	-66%
5	Discharges	21	11	(10)	-48%
6	Patient Days	92	56	(36)	-39%
7	Outpatient Visits (Excludes ED Visits)	320	273	(47)	-15%
8	Emergency Department Outpatient Visits	58	31	(27)	-47%
9	Emergency Department Inpatient Admissions	20	10	(10)	-50%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,077,748	\$683,389	(\$394,359)	-37%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$564,100	\$174,780	(\$389,320)	-69%
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%

JOHNSON MEMORIAL 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	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$465,194	\$396,269	(\$68,925)	-15%
2	Inpatient Payments	\$231,470	\$150,633	(\$80,837)	-35%
3	Outpatient Charges	\$185,962	\$159,359	(\$26,603)	-14%
4	Outpatient Payments	\$96,992	\$38,754	(\$58,238)	-60%
5	Discharges	22	15	(7)	-32%
6	Patient Days	113	97	(16)	-14%
7	Outpatient Visits (Excludes ED Visits)	524	617	93	18%
8	Emergency Department Outpatient Visits	52	29	(23)	-44%
9	Emergency Department Inpatient Admissions	21	13	(8)	-38%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$651,156	\$555,628	(\$95,528)	-15%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$328,462	\$189,387	(\$139,075)	-42%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$8,288,629	\$8,517,807	\$229,178	3%
	TOTAL INPATIENT PAYMENTS	\$4,275,568	\$2,896,952	(\$1,378,616)	-32%
	TOTAL OUTPATIENT CHARGES	\$7,013,892	\$8,312,067	\$1,298,175	19%
	TOTAL OUTPATIENT PAYMENTS	\$3,628,043	\$2,047,200	(\$1,580,843)	-44%
	TOTAL DISCHARGES	330	332	2	1%
	TOTAL PATIENT DAYS	1,767	1,862	95	5%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	6,960	8,246	1,286	18%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	716	791	75	10%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	301	293	(8)	-3%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$15,302,521	\$16,829,874	\$1,527,353	10%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$7,903,611	\$4,944,152	(\$2,959,459)	-37%

JOHNSON MEMORIAL 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	\$550,110	\$0	(\$550,110)	-100%
2	Inpatient Payments	\$95,585	\$0	(\$95,585)	-100%
3	Outpatient Charges	\$874,356	\$0	(\$874,356)	-100%
4	Outpatient Payments	\$553,472	\$0	(\$553,472)	-100%
5	Discharges	46	0	(46)	-100%
6	Patient Days	122	0	(122)	-100%
7	Outpatient Visits (Excludes ED Visits)	633	0	(633)	-100%
8	Emergency Department Outpatient Visits	413	0	(413)	-100%
9	Emergency Department Inpatient Admissions	5	0	(5)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,424,466	\$0	(\$1,424,466)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$649,057	\$0	(\$649,057)	-100%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$22,632	\$0	(\$22,632)	-100%
4	Outpatient Payments	\$12,932	\$0	(\$12,932)	-100%
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	20	0	(20)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$22,632	\$0	(\$22,632)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$12,932	\$0	(\$12,932)	-100%
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$860,436	\$0	(\$860,436)	-100%
2	Inpatient Payments	\$300,082	\$0	(\$300,082)	-100%
3	Outpatient Charges	\$609,935	\$0	(\$609,935)	-100%
4	Outpatient Payments	\$377,236	\$0	(\$377,236)	-100%
5	Discharges	55	0	(55)	-100%
6	Patient Days	337	0	(337)	-100%
7	Outpatient Visits (Excludes ED Visits)	70	0	(70)	-100%
8	Emergency Department Outpatient Visits	276	0	(276)	-100%
9	Emergency Department Inpatient Admissions	141	0	(141)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,470,371	\$0	(\$1,470,371)	-100%

JOHNSON MEMORIAL 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	\$677,318	\$0	(\$677,318)	-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	\$29,058	\$0	(\$29,058)	-100%
2	Inpatient Payments	\$2,606	\$0	(\$2,606)	-100%
3	Outpatient Charges	\$238,198	\$0	(\$238,198)	-100%
4	Outpatient Payments	\$144,350	\$0	(\$144,350)	-100%
5	Discharges	2	0	(2)	-100%
6	Patient Days	6	0	(6)	-100%
7	Outpatient Visits (Excludes ED Visits)	123	0	(123)	-100%
8	Emergency Department Outpatient Visits	108	0	(108)	-100%
9	Emergency Department Inpatient Admissions	2	0	(2)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$267,256	\$0	(\$267,256)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$146,956	\$0	(\$146,956)	-100%
H.	AETNA				
1	Inpatient Charges	\$52,536	\$0	(\$52,536)	-100%
2	Inpatient Payments	\$10,091	\$0	(\$10,091)	-100%
3	Outpatient Charges	\$377,848	\$0	(\$377,848)	-100%
4	Outpatient Payments	\$230,517	\$0	(\$230,517)	-100%
5	Discharges	4	0	(4)	-100%
6	Patient Days	13	0	(13)	-100%
7	Outpatient Visits (Excludes ED Visits)	201	0	(201)	-100%
8	Emergency Department Outpatient Visits	166	0	(166)	-100%
9	Emergency Department Inpatient Admissions	4	0	(4)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$430,384	\$0	(\$430,384)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$240,608	\$0	(\$240,608)	-100%

JOHNSON MEMORIAL 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	\$1,492,140	\$0	(\$1,492,140)	-100%
	TOTAL INPATIENT PAYMENTS	\$408,364	\$0	(\$408,364)	-100%
	TOTAL OUTPATIENT CHARGES	\$2,122,969	\$0	(\$2,122,969)	-100%
	TOTAL OUTPATIENT PAYMENTS	\$1,318,507	\$0	(\$1,318,507)	-100%
	TOTAL DISCHARGES	107	0	(107)	-100%
	TOTAL PATIENT DAYS	478	0	(478)	-100%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	1,027	0	(1,027)	-100%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	983	0	(983)	-100%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	152	0	(152)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,615,109	\$0	(\$3,615,109)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,726,871	\$0	(\$1,726,871)	-100%

JOHNSON MEMORIAL MEDICAL CENTER, INC.

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	\$1,246,131	\$875,661	(\$370,470)	-30%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$11,049,711	\$10,135,389	(\$914,322)	-8%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,254,591	\$1,317,470	\$62,879	5%
8	Prepaid Expenses	\$1,142,229	\$1,110,135	(\$32,094)	-3%
9	Other Current Assets	\$708,207	\$2,026,862	\$1,318,655	186%
	Total Current Assets	\$15,400,869	\$15,465,517	\$64,648	0%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$4,648,810	\$4,760,328	\$111,518	2%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$363,097	\$268,338	(\$94,759)	-26%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$5,011,907	\$5,028,666	\$16,759	0%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$3,115,139	\$3,174,149	\$59,010	2%
7	Other Noncurrent Assets	\$932,644	\$775,787	(\$156,857)	-17%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$89,206,505	\$87,268,202	(\$1,938,303)	-2%
2	Less: Accumulated Depreciation	\$56,237,679	\$60,233,946	\$3,996,267	\$0
	Property, Plant and Equipment, Net	\$32,968,826	\$27,034,256	(\$5,934,570)	-18%
3	Construction in Progress	\$0	\$0	\$0	0%
	Total Net Fixed Assets	\$32,968,826	\$27,034,256	(\$5,934,570)	-18%
	Total Assets	\$57,429,385	\$51,478,375	(\$5,951,010)	-10%
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				

JOHNSON MEMORIAL MEDICAL CENTER, INC.					
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	\$4,846,437	\$7,095,451	\$2,249,014	46%
2	Salaries, Wages and Payroll Taxes	\$3,018,255	\$2,807,220	(\$211,035)	-7%
3	Due To Third Party Payers	\$1,494,268	\$2,784,065	\$1,289,797	86%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$29,202,278	\$29,202,278	0%
6	Current Portion of Notes Payable	\$1,107,768	\$471,952	(\$635,816)	-57%
7	Other Current Liabilities	\$5,471,754	\$5,001,298	(\$470,456)	-9%
	Total Current Liabilities	\$15,938,482	\$47,362,264	\$31,423,782	197%
B.	<u>Long Term Debt:</u>				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$28,704,541	\$0	(\$28,704,541)	-100%
	Total Long Term Debt	\$28,704,541	\$0	(\$28,704,541)	-100%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$9,194,576	\$7,802,859	(\$1,391,717)	-15%
	Total Long Term Liabilities	\$37,899,117	\$7,802,859	(\$30,096,258)	-79%
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	(\$1,339,902)	(\$8,766,006)	(\$7,426,104)	554%
2	Temporarily Restricted Net Assets	\$301,374	\$335,709	\$34,335	11%
3	Permanently Restricted Net Assets	\$4,630,314	\$4,743,549	\$113,235	2%
	Total Net Assets	\$3,591,786	(\$3,686,748)	(\$7,278,534)	-203%
	Total Liabilities and Net Assets	\$57,429,385	\$51,478,375	(\$5,951,010)	-10%

JOHNSON MEMORIAL MEDICAL CENTER, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$193,741,543	\$199,469,902	\$5,728,359	3%
2	Less: Allowances	\$100,767,552	\$108,128,508	\$7,360,956	7%
3	Less: Charity Care	\$103,541	\$310,398	\$206,857	200%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$92,870,450	\$91,030,996	(\$1,839,454)	-2%
5	Provision for Bad Debts	\$0	\$4,709,325	\$4,709,325	0%
	Net Patient Service Revenue less provision for bad debts	\$92,870,450	\$86,321,671	(\$6,548,779)	-7%
6	Other Operating Revenue	\$848,902	\$897,142	\$48,240	6%
7	Net Assets Released from Restrictions	\$48,084	\$459,171	\$411,087	855%
	Total Operating Revenue	\$93,767,436	\$87,677,984	(\$6,089,452)	-6%
B. Operating Expenses:					
1	Salaries and Wages	\$45,315,556	\$43,355,432	(\$1,960,124)	-4%
2	Fringe Benefits	\$11,118,403	\$10,483,743	(\$634,660)	-6%
3	Physicians Fees	\$995,970	\$1,889,779	\$893,809	90%
4	Supplies and Drugs	\$8,907,808	\$10,543,386	\$1,635,578	18%
5	Depreciation and Amortization	\$4,373,638	\$4,269,259	(\$104,379)	-2%
6	Bad Debts	\$3,903,848	\$0	(\$3,903,848)	-100%
7	Interest Expense	\$2,070,005	\$1,899,374	(\$170,631)	-8%
8	Malpractice Insurance Cost	\$736,725	\$649,270	(\$87,455)	-12%
9	Other Operating Expenses	\$19,558,486	\$19,981,554	\$423,068	2%
	Total Operating Expenses	\$96,980,439	\$93,071,797	(\$3,908,642)	-4%
	Income/(Loss) From Operations	(\$3,213,003)	(\$5,393,813)	(\$2,180,810)	68%
C. Non-Operating Revenue:					
1	Income from Investments	\$194,132	\$160,097	(\$34,035)	-18%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$253,450	\$73,479	(\$179,971)	-71%
	Total Non-Operating Revenue	\$447,582	\$233,576	(\$214,006)	-48%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$2,765,421)	(\$5,160,237)	(\$2,394,816)	87%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

JOHNSON MEMORIAL MEDICAL CENTER, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$2,355,632	\$2,355,632	0%
	Total Other Adjustments	\$0	\$2,355,632	\$2,355,632	0%
	Excess/(Deficiency) of Revenue Over Expenses	(\$2,765,421)	(\$2,804,605)	(\$39,184)	1%

JOHNSON MEMORIAL MEDICAL CENTER, INC.				
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	\$88,701,620	\$92,870,450	\$86,321,671
2	Other Operating Revenue	1,633,180	896,986	1,356,313
3	Total Operating Revenue	\$90,334,800	\$93,767,436	\$87,677,984
4	Total Operating Expenses	93,561,742	96,980,439	93,071,797
5	Income/(Loss) From Operations	(\$3,226,942)	(\$3,213,003)	(\$5,393,813)
6	Total Non-Operating Revenue	1,205,975	447,582	2,589,208
7	Excess/(Deficiency) of Revenue Over Expenses	(\$2,020,967)	(\$2,765,421)	(\$2,804,605)
B. <u>Parent Corporation Profitability Summary</u>				
1	Parent Corporation Operating Margin	-3.53%	-3.41%	-5.98%
2	Parent Corporation Non-Operating Margin	1.32%	0.48%	2.87%
3	Parent Corporation Total Margin	-2.21%	-2.94%	-3.11%
4	Income/(Loss) From Operations	(\$3,226,942)	(\$3,213,003)	(\$5,393,813)
5	Total Operating Revenue	\$90,334,800	\$93,767,436	\$87,677,984
6	Total Non-Operating Revenue	\$1,205,975	\$447,582	\$2,589,208
7	Total Revenue	\$91,540,775	\$94,215,018	\$90,267,192
8	Excess/(Deficiency) of Revenue Over Expenses	(\$2,020,967)	(\$2,765,421)	(\$2,804,605)
C. <u>Parent Corporation Net Assets Summary</u>				
1	Parent Corporation Unrestricted Net Assets	\$873,482	(\$1,339,902)	(\$8,766,006)
2	Parent Corporation Total Net Assets	\$5,405,784	\$3,591,786	(\$3,686,748)
3	Parent Corporation Change in Total Net Assets	(\$1,826,709)	(\$1,813,998)	(\$7,278,534)
4	Parent Corporation Change in Total Net Assets %	74.7%	-33.6%	-202.6%
D. <u>Liquidity Measures Summary</u>				
1	Current Ratio	0.97	0.97	0.33
2	Total Current Assets	\$15,821,158	\$15,400,869	\$15,465,517
3	Total Current Liabilities	\$16,361,367	\$15,938,482	\$47,362,264

JOHNSON MEMORIAL MEDICAL CENTER, INC.				
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>	5	5	4
5	Cash and Cash Equivalents	\$1,301,545	\$1,246,131	\$875,661
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$1,301,545	\$1,246,131	\$875,661
8	Total Operating Expenses	\$93,561,742	\$96,980,439	\$93,071,797
9	Depreciation Expense	\$4,493,989	\$4,373,638	\$4,269,259
10	Operating Expenses less Depreciation Expense	\$89,067,753	\$92,606,801	\$88,802,538
11	<u>Days Revenue in Patient Accounts Receivable</u>	36	38	31
12	Net Patient Accounts Receivable	\$ 10,229,184	\$ 11,049,711	\$ 10,135,389
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,560,762	\$1,494,268	\$2,784,065
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 8,668,422	\$ 9,555,443	\$ 7,351,324
16	Total Net Patient Revenue	\$88,701,620	\$92,870,450	\$86,321,671
17	<u>Average Payment Period</u>	67	63	195
18	Total Current Liabilities	\$16,361,367	\$15,938,482	\$47,362,264
19	Total Operating Expenses	\$93,561,742	\$96,980,439	\$93,071,797
20	Depreciation Expense	\$4,493,989	\$4,373,638	\$4,269,259
20	Total Operating Expenses less Depreciation Expense	\$89,067,753	\$92,606,801	\$88,802,538
E. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	8.9	6.3	(7.2)
2	Total Net Assets	\$5,405,784	\$3,591,786	(\$3,686,748)
3	Total Assets	\$60,486,859	\$57,429,385	\$51,478,375
4	<u>Cash Flow to Total Debt Ratio</u>	5.4	3.6	3.1
5	Excess/(Deficiency) of Revenues Over Expenses	(\$2,020,967)	(\$2,765,421)	(\$2,804,605)

JOHNSON MEMORIAL MEDICAL CENTER, INC.				
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	\$4,493,989	\$4,373,638	\$4,269,259
7	Excess of Revenues Over Expenses and Depreciation Expense	\$2,473,022	\$1,608,217	\$1,464,654
8	Total Current Liabilities	\$16,361,367	\$15,938,482	\$47,362,264
9	Total Long Term Debt	\$29,637,852	\$28,704,541	\$0
10	Total Current Liabilities and Total Long Term Debt	\$45,999,219	\$44,643,023	\$47,362,264
11	<u>Long Term Debt to Capitalization Ratio</u>	84.6	88.9	-
12	Total Long Term Debt	\$29,637,852	\$28,704,541	\$0
13	Total Net Assets	\$5,405,784	\$3,591,786	(\$3,686,748)
14	Total Long Term Debt and Total Net Assets	\$35,043,636	\$32,296,327	(\$3,686,748)

JOHNSON MEMORIAL 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	10,115	2,191	2,194	40	56	69.3%	49.5%
2	ICU/CCU (Excludes Neonatal ICU)	1,179	115	0	5	7	64.6%	46.1%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	3,818	547	531	17	20	61.5%	52.3%
	TOTAL PSYCHIATRIC	3,818	547	531	17	20	61.5%	52.3%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	559	201	205	4	6	38.3%	25.5%
7	Newborn	459	200	202	4	6	31.4%	21.0%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	15,671	2,939	2,930	66	89	65.1%	48.2%
	TOTAL INPATIENT BED UTILIZATION	16,130	3,139	3,132	70	95	63.1%	46.5%
	TOTAL INPATIENT REPORTED YEAR	16,130	3,139	3,132	70	95	63.1%	46.5%
	TOTAL INPATIENT PRIOR YEAR	16,189	3,251	3,266	72	95	61.6%	46.7%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-59	-112	-134	-2	0	1.5%	-0.2%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	0%	-3%	-4%	-3%	0%	2%	0%
	Total Licensed Beds and Bassinets	101						
(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.								

JOHNSON MEMORIAL 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	1,631	1,884	253	16%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,665	1,707	42	3%
3	Emergency Department Scans	3,538	3,547	9	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	6,834	7,138	304	4%
B. MRI Scans (A)					
1	Inpatient Scans	133	124	-9	-7%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,354	1,241	-113	-8%
3	Emergency Department Scans	24	19	-5	-21%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	1,511	1,384	-127	-8%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	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	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Linear Accelerator Procedures	0	0	0	0%
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	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%

JOHNSON MEMORIAL 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. <u>Surgical Procedures</u>					
1	Inpatient Surgical Procedures	554	492	-62	-11%
2	Outpatient Surgical Procedures	2,016	2,058	42	2%
	Total Surgical Procedures	2,570	2,550	-20	-1%
J. <u>Endoscopy Procedures</u>					
1	Inpatient Endoscopy Procedures	97	121	24	25%
2	Outpatient Endoscopy Procedures	2,201	2,068	-133	-6%
	Total Endoscopy Procedures	2,298	2,189	-109	-5%
K. <u>Hospital Emergency Room Visits</u>					
1	Emergency Room Visits: Treated and Admitted	2,537	2,309	-228	-9%
2	Emergency Room Visits: Treated and Discharged	18,145	17,817	-328	-2%
	Total Emergency Room Visits	20,682	20,126	-556	-3%
L. <u>Hospital Clinic Visits</u>					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0%
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%
9	Specialty Clinic Visits	0	0	0	0%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%
13	Specialty Clinic Visits - Other Speciality Clinics	0	0	0	0%
	Total Hospital Clinic Visits	0	0	0	0%
M. <u>Other Hospital Outpatient Visits</u>					
1	Rehabilitation (PT/OT/ST)	1,923	1,806	-117	-6%
2	Cardiac Rehabilitation	1,504	1,629	125	8%
3	Chemotherapy	1,975	2,270	295	15%
4	Gastroenterology	1,002	951	-51	-5%
5	Other Outpatient Visits	76,147	76,269	122	0%
	Total Other Hospital Outpatient Visits	82,551	82,925	374	0%
N. <u>Hospital Full Time Equivalent Employees</u>					
1	Total Nursing FTEs	118.7	114.2	-4.5	-4%
2	Total Physician FTEs	0.0	0.0	0.0	0%
3	Total Non-Nursing and Non-Physician FTEs	345.5	346.1	0.6	0%
	Total Hospital Full Time Equivalent Employees	464.2	460.3	-3.9	-1%

JOHNSON MEMORIAL 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	Johnson Memorial Hospital	845	768	-77	-9%
2	Offsite Surgery Department - Enfield, CT	1,171	1,290	119	10%
	Total Outpatient Surgical Procedures(A)	2,016	2,058	42	2%
B. Outpatient Endoscopy Procedures					
1	Johnson Memorial Hospital	1,271	1,157	-114	-9%
2	Offsite Surgical Department - Enfield, CT	930	911	-19	-2%
	Total Outpatient Endoscopy Procedures(B)	2,201	2,068	-133	-6%
C. Outpatient Hospital Emergency Room Visits					
1	Johnson Memorial Hospital	18,145	17,817	-328	-2%
	Total Outpatient Hospital Emergency Room Visits(C)	18,145	17,817	-328	-2%
(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.					

JOHNSON MEMORIAL 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	\$39,724,495	\$40,017,644	\$293,149	1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$15,012,920	\$13,509,060	(\$1,503,860)	-10%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	37.79%	33.76%	-4.03%	-11%
4	DISCHARGES	1,601	1,633	32	2%
5	CASE MIX INDEX (CMI)	1.32250	1.31700	(0.00550)	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,117.32250	2,150.66100	33.33850	2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,090.52	\$6,281.35	(\$809.17)	-11%
8	PATIENT DAYS	9,242	9,745	503	5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,624.42	\$1,386.26	(\$238.17)	-15%
10	AVERAGE LENGTH OF STAY	5.8	6.0	0.2	3%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$29,240,458	\$36,025,736	\$6,785,278	23%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,656,813	\$8,943,188	(\$713,625)	-7%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	33.03%	24.82%	-8.20%	-25%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	73.61%	90.02%	16.42%	22%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,178.46616	1,470.10221	291.63605	25%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,194.39	\$6,083.38	(\$2,111.01)	-26%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$68,964,953	\$76,043,380	\$7,078,427	10%
18	TOTAL ACCRUED PAYMENTS	\$24,669,733	\$22,452,248	(\$2,217,485)	-9%
19	TOTAL ALLOWANCES	\$44,295,220	\$53,591,132	\$9,295,912	21%
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$15,559,054	\$13,247,394	(\$2,311,660)	-15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$8,489,972	\$7,112,017	(\$1,377,955)	-16%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	54.57%	53.69%	-0.88%	-2%
4	DISCHARGES	985	896	(89)	-9%
5	CASE MIX INDEX (CMI)	1.03942	0.96850	(0.07092)	-7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,023.82870	867.77600	(156.05270)	-15%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,292.38	\$8,195.68	(\$96.69)	-1%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,201.85)	(\$1,914.33)	(\$712.48)	59%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,230,493)	(\$1,661,210)	(\$430,717)	35%
10	PATIENT DAYS	3,951	3,650	(301)	-8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,148.82	\$1,948.50	(\$200.32)	-9%
12	AVERAGE LENGTH OF STAY	4.0	4.1	0.1	2%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$43,029,416	\$43,214,603	\$185,187	0%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$22,273,804	\$21,768,819	(\$504,985)	-2%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	51.76%	50.37%	-1.39%	-3%

JOHNSON MEMORIAL 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
16	OUTPATIENT CHARGES / INPATIENT CHARGES	276.56%	326.21%	49.66%	18%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,724.07145	2,922.86047	198.78902	7%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,176.66	\$7,447.78	(\$728.88)	-9%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	\$17.73	(\$1,364.40)	(\$1,382.13)	-7795%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$48,304	(\$3,987,953)	(\$4,036,256)	-8356%
<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>					
21	TOTAL ACCRUED CHARGES	\$58,588,470	\$56,461,997	(\$2,126,473)	-4%
22	TOTAL ACCRUED PAYMENTS	\$30,763,776	\$28,880,836	(\$1,882,940)	-6%
23	TOTAL ALLOWANCES	\$27,824,694	\$27,581,161	(\$243,533)	-1%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,182,189)	(\$5,649,163)	(\$4,466,973)	378%
<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$58,588,470	\$56,461,997	(\$2,126,473)	-4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$30,763,776	\$29,684,854	(\$1,078,922)	-4%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$27,824,694	\$26,777,143	(\$1,047,551)	-4%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	47.49%	47.43%	-0.07%	
<u>C. UNINSURED</u>					
<u>UNINSURED INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$1,122,051	\$647,359	(\$474,692)	-42%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,045	\$100	(\$13,945)	-99%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	1.25%	0.02%	-1.24%	-99%
4	DISCHARGES	76	48	(28)	-37%
5	CASE MIX INDEX (CMI)	0.97610	1.01490	0.03880	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	74.18360	48.71520	(25.46840)	-34%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$189.33	\$2.05	(\$187.27)	-99%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$8,103.05	\$8,193.63	\$90.58	1%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,901.19	\$6,279.30	(\$621.89)	-9%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$511,955	\$305,897	(\$206,058)	-40%
11	PATIENT DAYS	318	180	(138)	-43%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$44.17	\$0.56	(\$43.61)	-99%
13	AVERAGE LENGTH OF STAY	4.2	3.8	(0.4)	-10%
<u>UNINSURED OUTPATIENT</u>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,070,919	\$1,890,367	(\$180,552)	-9%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$108,242	\$95,389	(\$12,853)	-12%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	5.23%	5.05%	-0.18%	-3%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	184.57%	292.01%	107.45%	58%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	140.26978	140.16584	(0.10394)	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$771.67	\$680.54	(\$91.13)	-12%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$7,404.99	\$6,767.24	(\$637.75)	-9%
21	MEDICARE - UNINSURED OP PMT / OPED	\$7,422.72	\$5,402.83	(\$2,019.89)	-27%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,041,183	\$757,293	(\$283,891)	-27%
<u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u>					
23	TOTAL ACCRUED CHARGES	\$3,192,970	\$2,537,726	(\$655,244)	-21%

JOHNSON MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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	\$122,287	\$95,489	(\$26,798)	-22%
25	TOTAL ALLOWANCES	\$3,070,683	\$2,442,237	(\$628,446)	-20%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,553,139	\$1,063,190	(\$489,949)	-32%
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$9,988,388	\$8,611,611	(\$1,376,777)	-14%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$3,385,438	\$1,929,397	(\$1,456,041)	-43%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	33.89%	22.40%	-11.49%	-34%
4	DISCHARGES	646	581	(65)	-10%
5	CASE MIX INDEX (CMI)	0.97485	0.94340	(0.03145)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	629.75310	548.11540	(81.63770)	-13%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,375.82	\$3,520.06	(\$1,855.76)	-35%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,916.56	\$4,675.63	\$1,759.07	60%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,714.70	\$2,761.30	\$1,046.59	61%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,079,840	\$1,513,509	\$433,669	40%
11	PATIENT DAYS	2,904	2,623	(281)	-10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,165.78	\$735.57	(\$430.22)	-37%
13	AVERAGE LENGTH OF STAY	4.5	4.5	0.0	0%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$14,252,955	\$17,040,706	\$2,787,751	20%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$3,710,813	\$4,033,829	\$323,016	9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.04%	23.67%	-2.36%	-9%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	142.70%	197.88%	55.19%	39%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	921.81130	1,149.68618	227.87488	25%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,025.57	\$3,508.63	(\$516.93)	-13%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$4,151.09	\$3,939.14	(\$211.95)	-5%
21	MEDICARE - MEDICAID OP PMT / OPED	\$4,168.82	\$2,574.74	(\$1,594.08)	-38%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,842,870	\$2,960,147	(\$882,723)	-23%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$24,241,343	\$25,652,317	\$1,410,974	6%
24	TOTAL ACCRUED PAYMENTS	\$7,096,251	\$5,963,226	(\$1,133,025)	-16%
25	TOTAL ALLOWANCES	\$17,145,092	\$19,689,091	\$2,543,999	15%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,922,709	\$4,473,656	(\$449,053)	-9%
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.85000	0.85000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%

JOHNSON MEMORIAL 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
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$8,292.38	\$8,195.68	(\$96.69)	-1%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$7,090.52	\$6,281.35	(\$809.17)	-11%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$8,176.66	\$7,447.78	(\$728.88)	-9%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$8,194.39	\$6,083.38	(\$2,111.01)	-26%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$9,988,388	\$8,611,611	(\$1,376,777)	-14%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$3,385,438	\$1,929,397	(\$1,456,041)	-43%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	33.89%	22.40%	-11.49%	-34%
4	DISCHARGES	646	581	(65)	-10%
5	CASE MIX INDEX (CMI)	0.97485	0.94340	(0.03145)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	629.75310	548.11540	(81.63770)	-13%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,375.82	\$3,520.06	(\$1,855.76)	-35%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,916.56	\$4,675.63	\$1,759.07	60%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,714.70	\$2,761.30	\$1,046.59	61%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,079,840	\$1,513,509	\$433,669	40%
11	PATIENT DAYS	2,904	2,623	(281)	-10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,165.78	\$735.57	(\$430.22)	-37%
13	AVERAGE LENGTH OF STAY	4.5	4.5	0.0	0%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$14,252,955	\$17,040,706	\$2,787,751	20%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$3,710,813	\$4,033,829	\$323,016	9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.04%	23.67%	-2.36%	-9%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	142.70%	197.88%	55.19%	39%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	921.81130	1,149.68618	227.87488	25%

JOHNSON MEMORIAL 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
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,025.57	\$3,508.63	(\$516.93)	-13%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,151.09	\$3,939.14	(\$211.95)	-5%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,168.82	\$2,574.74	(\$1,594.08)	-38%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,842,870	\$2,960,147	(\$882,723)	-23%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$24,241,343	\$25,652,317	\$1,410,974	6%
24	TOTAL ACCRUED PAYMENTS	\$7,096,251	\$5,963,226	(\$1,133,025)	-16%
25	TOTAL ALLOWANCES	\$17,145,092	\$19,689,091	\$2,543,999	15%
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$342,847	\$411,547	\$68,700	20%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$152,368	\$159,823	\$7,455	5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	44.44%	38.83%	-5.61%	-13%
4	DISCHARGES	19	29	10	53%
5	CASE MIX INDEX (CMI)	1.12230	1.08870	(0.03360)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	21.32370	31.57230	10.24860	48%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,145.48	\$5,062.13	(\$2,083.35)	-29%
8	PATIENT DAYS	92	112	20	22%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,656.17	\$1,426.99	(\$229.18)	-14%
10	AVERAGE LENGTH OF STAY	4.8	3.9	(1.0)	-20%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$542,027	\$562,072	\$20,045	4%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$157,690	\$171,552	\$13,862	9%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$884,874	\$973,619	\$88,745	10%
14	TOTAL ACCRUED PAYMENTS	\$310,058	\$331,375	\$21,317	7%
15	TOTAL ALLOWANCES	\$574,816	\$642,244	\$67,428	12%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$282,934	\$275,135	(\$7,799)	-3%
2	TOTAL OPERATING EXPENSES	\$65,981,058	\$63,578,052	(\$2,403,006)	-4%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$193,108	\$310,398	\$117,290	61%
5	BAD DEBTS (CHARGES)	\$3,564,251	\$4,455,452	\$891,201	25%
6	UNCOMPENSATED CARE (CHARGES)	\$3,757,359	\$4,765,850	\$1,008,491	27%
7	COST OF UNCOMPENSATED CARE	\$1,453,986	\$1,607,248	\$153,262	11%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$24,241,343	\$25,652,317	\$1,410,974	6%
9	TOTAL ACCRUED PAYMENTS	\$7,096,251	\$5,963,226	(\$1,133,025)	-16%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$9,380,675	\$8,651,053	(\$729,622)	-8%

JOHNSON MEMORIAL 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	\$2,284,424	\$2,687,827	\$403,403	18%
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$65,614,784	\$62,288,196	(\$3,326,588)	-5%
2	TOTAL INPATIENT PAYMENTS	\$27,040,698	\$22,710,297	(\$4,330,401)	-16%
3	TOTAL INPATIENT PAYMENTS / CHARGES	41.21%	36.46%	-4.75%	-12%
4	TOTAL DISCHARGES	3,251	3,139	(112)	-3%
5	TOTAL CASE MIX INDEX	1.16648	1.14626	(0.02022)	-2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	3,792.22800	3,598.12470	(194.10330)	-5%
7	TOTAL OUTPATIENT CHARGES	\$87,064,856	\$96,843,117	\$9,778,261	11%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	132.69%	155.48%	22.78%	17%
9	TOTAL OUTPATIENT PAYMENTS	\$35,799,120	\$34,917,388	(\$881,732)	-2%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	41.12%	36.06%	-5.06%	-12%
11	TOTAL CHARGES	\$152,679,640	\$159,131,313	\$6,451,673	4%
12	TOTAL PAYMENTS	\$62,839,818	\$57,627,685	(\$5,212,133)	-8%
13	TOTAL PAYMENTS / TOTAL CHARGES	41.16%	36.21%	-4.94%	-12%
14	PATIENT DAYS	16,189	16,130	(59)	0%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$50,055,730	\$49,040,802	(\$1,014,928)	-2%
2	INPATIENT PAYMENTS	\$18,550,726	\$15,598,280	(\$2,952,446)	-16%
3	GOVT. INPATIENT PAYMENTS / CHARGES	37.06%	31.81%	-5.25%	-14%
4	DISCHARGES	2,266	2,243	(23)	-1%
5	CASE MIX INDEX	1.22171	1.21728	(0.00444)	0%
6	CASE MIX ADJUSTED DISCHARGES	2,768.39930	2,730.34870	(38.05060)	-1%
7	OUTPATIENT CHARGES	\$44,035,440	\$53,628,514	\$9,593,074	22%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	87.97%	109.35%	21.38%	24%
9	OUTPATIENT PAYMENTS	\$13,525,316	\$13,148,569	(\$376,747)	-3%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.71%	24.52%	-6.20%	-20%
11	TOTAL CHARGES	\$94,091,170	\$102,669,316	\$8,578,146	9%
12	TOTAL PAYMENTS	\$32,076,042	\$28,746,849	(\$3,329,193)	-10%
13	TOTAL PAYMENTS / CHARGES	34.09%	28.00%	-6.09%	-18%
14	PATIENT DAYS	12,238	12,480	242	2%
15	TOTAL GOVERNMENT DEDUCTIONS	\$62,015,128	\$73,922,467	\$11,907,339	19%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	5.8	6.0	0.2	3%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0	4.1	0.1	2%
3	UNINSURED	4.2	3.8	(0.4)	-10%
4	MEDICAID	4.5	4.5	0.0	0%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	4.8	3.9	(1.0)	-20%
7	TOTAL AVERAGE LENGTH OF STAY	5.0	5.1	0.2	3%
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$152,679,640	\$159,131,313	\$6,451,673	4%
2	TOTAL GOVERNMENT DEDUCTIONS	\$62,015,128	\$73,922,467	\$11,907,339	19%

JOHNSON MEMORIAL 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	\$3,757,359	\$4,765,850	\$1,008,491	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$27,824,694	\$26,777,143	(\$1,047,551)	-4%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$93,597,181	\$105,465,460	\$11,868,279	13%
7	TOTAL ACCRUED PAYMENTS	\$59,082,459	\$53,665,853	(\$5,416,606)	-9%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$59,082,459	\$53,665,853	(\$5,416,606)	-9%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3869701225	0.3372425702	(0.0497275523)	-13%
11	COST OF UNCOMPENSATED CARE	\$1,453,986	\$1,607,248	\$153,262	11%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,284,424	\$2,687,827	\$403,403	18%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$3,738,410	\$4,295,075	\$556,665	15%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$3,842,870	\$2,960,147	(\$882,723)	-23%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,553,139	\$1,063,190	(\$489,949)	-32%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$5,396,008	\$4,023,337	(\$1,372,671)	-25%
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	\$2,478,602	\$2,005,899	(\$472,703)	-19.07%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$65,318,418	\$59,633,584	(\$5,684,834)	-8.70%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$152,679,640	\$159,131,313	\$6,451,673	4.23%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$3,757,359	\$4,765,850	\$1,008,491	26.84%

**JOHNSON MEMORIAL 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)	\$15,559,054	\$13,247,394	(\$2,311,660)
2	MEDICARE	\$39,724,495	40,017,644	\$293,149
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$9,988,388	8,611,611	(\$1,376,777)
4	MEDICAID	\$9,988,388	8,611,611	(\$1,376,777)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$342,847	411,547	\$68,700
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,122,051	647,359	(\$474,692)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$50,055,730	\$49,040,802	(\$1,014,928)
	TOTAL INPATIENT CHARGES	\$65,614,784	\$62,288,196	(\$3,326,588)
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$43,029,416	\$43,214,603	\$185,187
2	MEDICARE	\$29,240,458	36,025,736	\$6,785,278
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,252,955	17,040,706	\$2,787,751
4	MEDICAID	\$14,252,955	17,040,706	\$2,787,751
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$542,027	562,072	\$20,045
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,070,919	1,890,367	(\$180,552)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$44,035,440	\$53,628,514	\$9,593,074
	TOTAL OUTPATIENT CHARGES	\$87,064,856	\$96,843,117	\$9,778,261
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$58,588,470	\$56,461,997	(\$2,126,473)
2	TOTAL MEDICARE	\$68,964,953	\$76,043,380	\$7,078,427
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$24,241,343	\$25,652,317	\$1,410,974
4	TOTAL MEDICAID	\$24,241,343	\$25,652,317	\$1,410,974
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$884,874	\$973,619	\$88,745
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,192,970	\$2,537,726	(\$655,244)
	TOTAL GOVERNMENT CHARGES	\$94,091,170	\$102,669,316	\$8,578,146
	TOTAL CHARGES	\$152,679,640	\$159,131,313	\$6,451,673
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,489,972	\$7,112,017	(\$1,377,955)
2	MEDICARE	\$15,012,920	13,509,060	(\$1,503,860)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,385,438	1,929,397	(\$1,456,041)
4	MEDICAID	\$3,385,438	1,929,397	(\$1,456,041)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$152,368	159,823	\$7,455
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$14,045	100	(\$13,945)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$18,550,726	\$15,598,280	(\$2,952,446)
	TOTAL INPATIENT PAYMENTS	\$27,040,698	\$22,710,297	(\$4,330,401)
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$22,273,804	\$21,768,819	(\$504,985)
2	MEDICARE	\$9,656,813	8,943,188	(\$713,625)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,710,813	4,033,829	\$323,016
4	MEDICAID	\$3,710,813	4,033,829	\$323,016
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$157,690	171,552	\$13,862
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$108,242	95,389	(\$12,853)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$13,525,316	\$13,148,569	(\$376,747)
	TOTAL OUTPATIENT PAYMENTS	\$35,799,120	\$34,917,388	(\$881,732)
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$30,763,776	\$28,880,836	(\$1,882,940)
2	TOTAL MEDICARE	\$24,669,733	\$22,452,248	(\$2,217,485)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,096,251	\$5,963,226	(\$1,133,025)
4	TOTAL MEDICAID	\$7,096,251	\$5,963,226	(\$1,133,025)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$310,058	\$331,375	\$21,317
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$122,287	\$95,489	(\$26,798)
	TOTAL GOVERNMENT PAYMENTS	\$32,076,042	\$28,746,849	(\$3,329,193)

**JOHNSON MEMORIAL 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 PAYMENTS	\$62,839,818	\$57,627,685	(\$5,212,133)
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10.19%	8.32%	-1.87%
2	MEDICARE	26.02%	25.15%	-0.87%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.54%	5.41%	-1.13%
4	MEDICAID	6.54%	5.41%	-1.13%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.22%	0.26%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.73%	0.41%	-0.33%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	32.78%	30.82%	-1.97%
	TOTAL INPATIENT PAYER MIX	42.98%	39.14%	-3.83%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	28.18%	27.16%	-1.03%
2	MEDICARE	19.15%	22.64%	3.49%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.34%	10.71%	1.37%
4	MEDICAID	9.34%	10.71%	1.37%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.36%	0.35%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.36%	1.19%	-0.17%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	28.84%	33.70%	4.86%
	TOTAL OUTPATIENT PAYER MIX	57.02%	60.86%	3.83%
	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)	13.51%	12.34%	-1.17%
2	MEDICARE	23.89%	23.44%	-0.45%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.39%	3.35%	-2.04%
4	MEDICAID	5.39%	3.35%	-2.04%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.24%	0.28%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.02%	0.00%	-0.02%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	29.52%	27.07%	-2.45%
	TOTAL INPATIENT PAYER MIX	43.03%	39.41%	-3.62%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	35.45%	37.77%	2.33%
2	MEDICARE	15.37%	15.52%	0.15%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.91%	7.00%	1.09%
4	MEDICAID	5.91%	7.00%	1.09%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.25%	0.30%	0.05%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.17%	0.17%	-0.01%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	21.52%	22.82%	1.29%
	TOTAL OUTPATIENT PAYER MIX	56.97%	60.59%	3.62%
	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)	985	896	(89)
2	MEDICARE	1,601	1,633	32
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	646	581	(65)
4	MEDICAID	646	581	(65)
5	OTHER MEDICAL ASSISTANCE	0	0	-

JOHNSON MEMORIAL 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
6	CHAMPUS / TRICARE	19	29	10
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	76	48	(28)
	TOTAL GOVERNMENT DISCHARGES	2,266	2,243	(23)
	TOTAL DISCHARGES	3,251	3,139	(112)
B.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,951	3,650	(301)
2	MEDICARE	9,242	9,745	503
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,904	2,623	(281)
4	MEDICAID	2,904	2,623	(281)
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	92	112	20
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	318	180	(138)
	TOTAL GOVERNMENT PATIENT DAYS	12,238	12,480	242
	TOTAL PATIENT DAYS	16,189	16,130	(59)
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0	4.1	0.1
2	MEDICARE	5.8	6.0	0.2
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.5	4.5	0.0
4	MEDICAID	4.5	4.5	0.0
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	4.8	3.9	(1.0)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.2	3.8	(0.4)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.4	5.6	0.2
	TOTAL AVERAGE LENGTH OF STAY	5.0	5.1	0.2
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.03942	0.96850	(0.07092)
2	MEDICARE	1.32250	1.31700	(0.00550)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.97485	0.94340	(0.03145)
4	MEDICAID	0.97485	0.94340	(0.03145)
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.12230	1.08870	(0.03360)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.97610	1.01490	0.03880
	TOTAL GOVERNMENT CASE MIX INDEX	1.22171	1.21728	(0.00444)
	TOTAL CASE MIX INDEX	1.16648	1.14626	(0.02022)
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$58,588,470	\$56,461,997	(\$2,126,473)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$30,763,776	\$29,684,854	(\$1,078,922)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$27,824,694	\$26,777,143	(\$1,047,551)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	47.49%	47.43%	-0.07%
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	\$193,108	\$310,398	\$117,290
9	BAD DEBTS	\$3,564,251	\$4,455,452	\$891,201
10	TOTAL UNCOMPENSATED CARE	\$3,757,359	\$4,765,850	\$1,008,491
11	TOTAL OTHER OPERATING REVENUE	\$282,934	\$275,135	(\$7,799)
12	TOTAL OPERATING EXPENSES	\$65,981,058	\$63,578,052	(\$2,403,006)
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,023.82870	867.77600	(156.05270)

**JOHNSON MEMORIAL 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
2	MEDICARE	2,117.32250	2,150.66100	33.33850
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	629.75310	548.11540	(81.63770)
4	MEDICAID	629.75310	548.11540	(81.63770)
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	21.32370	31.57230	10.24860
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	74.18360	48.71520	(25.46840)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	2,768.39930	2,730.34870	(38.05060)
	TOTAL CASE MIX ADJUSTED DISCHARGES	3,792.22800	3,598.12470	(194.10330)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,724.07145	2,922.86047	198.78902
2	MEDICARE	1,178.46616	1,470.10221	291.63605
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	921.81130	1,149.68618	227.87488
4	MEDICAID	921.81130	1,149.68618	227.87488
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	30.03822	39.60687	9.56865
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	140.26978	140.16584	-0.10394
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	2,130.31568	2,659.39526	529.07958
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	4,854.38713	5,582.25574	727.86860
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,292.38	\$8,195.68	(\$96.69)
2	MEDICARE	\$7,090.52	\$6,281.35	(\$809.17)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,375.82	\$3,520.06	(\$1,855.76)
4	MEDICAID	\$5,375.82	\$3,520.06	(\$1,855.76)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$7,145.48	\$5,062.13	(\$2,083.35)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$189.33	\$2.05	(\$187.27)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,700.89	\$5,712.93	(\$987.96)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,130.56	\$6,311.70	(\$818.85)
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,176.66	\$7,447.78	(\$728.88)
2	MEDICARE	\$8,194.39	\$6,083.38	(\$2,111.01)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,025.57	\$3,508.63	(\$516.93)
4	MEDICAID	\$4,025.57	\$3,508.63	(\$516.93)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$5,249.65	\$4,331.37	(\$918.28)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$771.67	\$680.54	(\$91.13)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,348.97	\$4,944.20	(\$1,404.78)
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,374.59	\$6,255.07	(\$1,119.52)
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$3,842,870	\$2,960,147	(\$882,723)
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,553,139	\$1,063,190	(\$489,949)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$5,396,008	\$4,023,337	(\$1,372,671)
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$152,679,640	\$159,131,313	\$6,451,673
2	TOTAL GOVERNMENT DEDUCTIONS	\$62,015,128	\$73,922,467	\$11,907,339
3	UNCOMPENSATED CARE	\$3,757,359	\$4,765,850	\$1,008,491
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$27,824,694	\$26,777,143	(\$1,047,551)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
6	TOTAL ADJUSTMENTS	\$93,597,181	\$105,465,460	\$11,868,279
7	TOTAL ACCRUED PAYMENTS	\$59,082,459	\$53,665,853	(\$5,416,606)
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$59,082,459	\$53,665,853	(\$5,416,606)
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3869701225	0.3372425702	(0.0497275523)

**JOHNSON MEMORIAL 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
11	COST OF UNCOMPENSATED CARE	\$1,453,986	\$1,607,248	\$153,262
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$2,284,424	\$2,687,827	\$403,403
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$3,738,410	\$4,295,075	\$556,665
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	54.57%	53.69%	-0.88%
2	MEDICARE	37.79%	33.76%	-4.03%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	33.89%	22.40%	-11.49%
4	MEDICAID	33.89%	22.40%	-11.49%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	44.44%	38.83%	-5.61%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.25%	0.02%	-1.24%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	37.06%	31.81%	-5.25%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	41.21%	36.46%	-4.75%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	51.76%	50.37%	-1.39%
2	MEDICARE	33.03%	24.82%	-8.20%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	26.04%	23.67%	-2.36%
4	MEDICAID	26.04%	23.67%	-2.36%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	29.09%	30.52%	1.43%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5.23%	5.05%	-0.18%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	30.71%	24.52%	-6.20%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	41.12%	36.06%	-5.06%
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	\$62,839,818	\$57,627,685	(\$5,212,133)
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$62,839,818	\$57,627,685	(\$5,212,133)
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$2,478,602	\$2,005,899	(\$472,703)
4	CALCULATED NET REVENUE	\$68,882,671	\$59,633,584	(\$9,249,087)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$65,318,418	\$59,633,584	(\$5,684,834)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$3,564,253	\$0	(\$3,564,253)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$152,679,640	\$159,131,313	\$6,451,673
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$152,679,640	\$159,131,313	\$6,451,673
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$152,679,640	\$159,131,313	\$6,451,673
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)	\$3,757,359	\$4,765,850	\$1,008,491
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0

JOHNSON MEMORIAL 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
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$3,757,359	\$4,765,850	\$1,008,491
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$3,757,359	\$4,765,850	\$1,008,491
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

**JOHNSON MEMORIAL 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)	\$13,247,394
2	MEDICARE	40,017,644
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,611,611
4	MEDICAID	8,611,611
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	411,547
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	647,359
	TOTAL INPATIENT GOVERNMENT CHARGES	\$49,040,802
	TOTAL INPATIENT CHARGES	\$62,288,196
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$43,214,603
2	MEDICARE	36,025,736
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17,040,706
4	MEDICAID	17,040,706
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	562,072
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,890,367
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$53,628,514
	TOTAL OUTPATIENT CHARGES	\$96,843,117
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$56,461,997
2	TOTAL GOVERNMENT ACCRUED CHARGES	102,669,316
	TOTAL ACCRUED CHARGES	\$159,131,313
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,112,017
2	MEDICARE	13,509,060
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,929,397
4	MEDICAID	1,929,397
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	159,823
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	100
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$15,598,280
	TOTAL INPATIENT PAYMENTS	\$22,710,297
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$21,768,819
2	MEDICARE	8,943,188
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,033,829
4	MEDICAID	4,033,829
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	171,552
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	95,389
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$13,148,569
	TOTAL OUTPATIENT PAYMENTS	\$34,917,388
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$28,880,836
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	28,746,849
	TOTAL ACCRUED PAYMENTS	\$57,627,685
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		

**JOHNSON MEMORIAL 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)	896
2	MEDICARE	1,633
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	581
4	MEDICAID	581
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	29
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	48
	TOTAL GOVERNMENT DISCHARGES	2,243
	TOTAL DISCHARGES	3,139
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.96850
2	MEDICARE	1.31700
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.94340
4	MEDICAID	0.94340
5	OTHER MEDICAL ASSISTANCE	0.85000
6	CHAMPUS / TRICARE	1.08870
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.01490
	TOTAL GOVERNMENT CASE MIX INDEX	1.21728
	TOTAL CASE MIX INDEX	1.14626
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$56,461,997
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$29,684,854
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$26,777,143
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	47.43%
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	\$310,398
9	BAD DEBTS	\$4,455,452
10	TOTAL UNCOMPENSATED CARE	\$4,765,850
11	TOTAL OTHER OPERATING REVENUE	\$275,135
12	TOTAL OPERATING EXPENSES	\$63,578,052
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	\$57,627,685
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$57,627,685
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$2,005,899
	CALCULATED NET REVENUE	\$59,633,584
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$59,633,584
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$159,131,313
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0

JOHNSON MEMORIAL 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	\$159,131,313
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$159,131,313
	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)	\$4,765,850
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$4,765,850
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$4,765,850
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

JOHNSON MEMORIAL 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	322	168	(154)	-48%
2	Number of Approved Applicants	213	113	(100)	-47%
3	Total Charges (A)	\$193,108	\$310,398	\$117,290	61%
4	Average Charges	\$907	\$2,747	\$1,840	203%
5	Ratio of Cost to Charges (RCC)	0.408730	0.431354	0.022624	6%
6	Total Cost	\$78,929	\$133,891	\$54,962	70%
7	Average Cost	\$371	\$1,185	\$814	220%
8	Charity Care - Inpatient Charges	\$65,413	\$147,829	\$82,416	126%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	94,567	56,756	(37,811)	-40%
10	Charity Care - Emergency Department Charges	33,128	105,813	72,685	219%
11	Total Charges (A)	\$193,108	\$310,398	\$117,290	61%
12	Charity Care - Number of Patient Days	35	36	1	3%
13	Charity Care - Number of Discharges	25	19	(6)	-24%
14	Charity Care - Number of Outpatient ED Visits	124	129	5	4%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	119	185	66	55%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$1,531,753	\$1,261,784	(\$269,969)	-18%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,412,824	698,615	(714,209)	-51%
3	Bad Debts - Emergency Department	619,674	2,495,053	1,875,379	303%
4	Total Bad Debts (A)	\$3,564,251	\$4,455,452	\$891,201	25%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$193,108	\$310,398	\$117,290	61%
2	Bad Debts (A)	3,564,251	4,455,452	891,201	25%
3	Total Uncompensated Care (A)	\$3,757,359	\$4,765,850	\$1,008,491	27%
4	Uncompensated Care - Inpatient Services	\$1,597,166	\$1,409,613	(\$187,553)	-12%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	1,507,391	755,371	(752,020)	-50%
6	Uncompensated Care - Emergency Department	652,802	2,600,866	1,948,064	298%
7	Total Uncompensated Care (A)	\$3,757,359	\$4,765,850	\$1,008,491	27%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

JOHNSON MEMORIAL 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	\$58,588,470	\$56,461,997	(\$2,126,473)	-4%
2	Total Contractual Allowances	\$27,824,694	\$26,777,143	(\$1,047,551)	-4%
	Total Accrued Payments (A)	\$30,763,776	\$29,684,854	(\$1,078,922)	-4%
	Total Discount Percentage	47.49%	47.43%	-0.07%	0%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

JOHNSON MEMORIAL 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	\$63,263,065	\$65,614,784	\$62,288,196
2	Outpatient Gross Revenue	\$85,519,480	\$87,064,856	\$96,843,117
3	Total Gross Patient Revenue	\$148,782,545	\$152,679,640	\$159,131,313
4	Net Patient Revenue	\$59,499,426	\$65,318,419	\$59,633,584
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$61,577,163	\$65,981,058	\$63,578,052
C. <u>Utilization Statistics</u>				
1	Patient Days	15,790	16,189	16,130
2	Discharges	3,268	3,251	3,139
3	Average Length of Stay	4.8	5.0	5.1
4	Equivalent (Adjusted) Patient Days (EPD)	37,135	37,670	41,208
0	Equivalent (Adjusted) Discharges (ED)	7,686	7,565	8,019
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.15392	1.16648	1.14626
2	Case Mix Adjusted Patient Days (CMAPD)	18,220	18,884	18,489
3	Case Mix Adjusted Discharges (CMAD)	3,771	3,792	3,598
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	42,851	43,942	47,236
5	Case Mix Adjusted Equivalent Discharges (CMAED)	8,869	8,824	9,192
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$9,423	\$9,431	\$9,866
2	Total Gross Revenue per Discharge	\$45,527	\$46,964	\$50,695
3	Total Gross Revenue per EPD	\$4,007	\$4,053	\$3,862
4	Total Gross Revenue per ED	\$19,358	\$20,183	\$19,843
5	Total Gross Revenue per CMAEPD	\$3,472	\$3,475	\$3,369
6	Total Gross Revenue per CMAED	\$16,776	\$17,302	\$17,311
7	Inpatient Gross Revenue per EPD	\$1,704	\$1,742	\$1,512
8	Inpatient Gross Revenue per ED	\$8,231	\$8,674	\$7,767

JOHNSON MEMORIAL 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. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$3,768	\$4,035	\$3,697
2	Net Patient Revenue per Discharge	\$18,207	\$20,092	\$18,998
3	Net Patient Revenue per EPD	\$1,602	\$1,734	\$1,447
4	Net Patient Revenue per ED	\$7,742	\$8,635	\$7,436
5	Net Patient Revenue per CMAEPD	\$1,389	\$1,486	\$1,262
6	Net Patient Revenue per CMAED	\$6,709	\$7,402	\$6,487
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$3,900	\$4,076	\$3,942
2	Total Operating Expense per Discharge	\$18,842	\$20,296	\$20,254
3	Total Operating Expense per EPD	\$1,658	\$1,752	\$1,543
4	Total Operating Expense per ED	\$8,012	\$8,722	\$7,928
5	Total Operating Expense per CMAEPD	\$1,437	\$1,502	\$1,346
6	Total Operating Expense per CMAED	\$6,943	\$7,477	\$6,916
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$9,407,572	\$9,394,293	\$9,201,815
2	Nursing Fringe Benefits Expense	\$2,448,165	\$2,347,211	\$2,141,165
3	Total Nursing Salary and Fringe Benefits Expense	\$11,855,737	\$11,741,504	\$11,342,980
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$0	\$0	\$0
2	Physician Fringe Benefits Expense	\$0	\$0	\$0
3	Total Physician Salary and Fringe Benefits Expense	\$0	\$0	\$0
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$16,801,243	\$17,775,085	\$17,662,595
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$4,372,247	\$4,441,193	\$4,109,900
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$21,173,490	\$22,216,278	\$21,772,495

JOHNSON MEMORIAL 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	\$26,208,815	\$27,169,378	\$26,864,410
2	Total Fringe Benefits Expense	\$6,820,412	\$6,788,404	\$6,251,065
3	Total Salary and Fringe Benefits Expense	\$33,029,227	\$33,957,782	\$33,115,475
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	119.6	118.7	114.2
2	Total Physician FTEs	0.0	0.0	0.0
3	Total Non-Nursing, Non-Physician FTEs	343.9	345.5	346.1
4	Total Full Time Equivalent Employees (FTEs)	463.5	464.2	460.3
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$78,659	\$79,143	\$80,576
2	Nursing Fringe Benefits Expense per FTE	\$20,470	\$19,774	\$18,749
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$99,128	\$98,917	\$99,326
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$0	\$0	\$0
2	Physician Fringe Benefits Expense per FTE	\$0	\$0	\$0
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$0	\$0	\$0
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$48,855	\$51,447	\$51,033
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$12,714	\$12,854	\$11,875
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$61,569	\$64,302	\$62,908
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$56,545	\$58,529	\$58,363
2	Total Fringe Benefits Expense per FTE	\$14,715	\$14,624	\$13,580
3	Total Salary and Fringe Benefits Expense per FTE	\$71,260	\$73,153	\$71,943
Q.	Total Salary and Fringe Ben. Expense per Statistic			

JOHNSON MEMORIAL 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	\$2,092	\$2,098	\$2,053
2	Total Salary and Fringe Benefits Expense per Discharge	\$10,107	\$10,445	\$10,550
3	Total Salary and Fringe Benefits Expense per EPD	\$889	\$901	\$804
4	Total Salary and Fringe Benefits Expense per ED	\$4,297	\$4,489	\$4,129
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$771	\$773	\$701
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,724	\$3,848	\$3,603